Key findings of the Gender Based Violence Indicators Study by the Women's Affairs Department and Gender Links

Over two thirds of women in Botswana (67%) have experienced some form of gender violence in their lifetime, including partner and non-partner violence. A smaller, but still high, proportion of men (44%) admit to perpetrating violence against women.

Nearly one third of women (29%) experienced violence perpetrated by an intimate partner in the 12 months to the prevalence survey that formed the flagship research tool in this study. In contrast, only 1.2% of women reported cases of GBV to the police in the same period. Thus the prevalence of GBV reported in the survey is 24 times higher than that reported to the police. This suggests that levels of GBV are far higher than those recorded in official statistics.

Most of the violence reported occurs within intimate relationships. About three in every five women (62%) experienced violence in an intimate relationship while about half of the men (48%) admitted to perpetrating intimate partner violence (IPV). Emotional violence is the most common form of IPV experienced by women (45%) and perpetrated by men (37%) in the sample in their lifetime. Similar proportions of women (11.4%) and men (10.7%) reported experiencing or perpetrating non-partner rape respectively. Of all the women interviewed, 16% experienced attempted rape, while 8% of the men in the sample disclosed attempted rape of a non-partner. Almost a quarter (23%) of all the women interviewed said they had experienced sexual harassment at school, work, in public transport or at a traditional healer. Almost a quarter of women who were ever pregnant (24%) experienced abuse during their pregnancy. Despite the high levels of rape, only one in nine women report rape to the police and only one in seven women seek medical attention.

Patriarchal attitudes are a significant underlying factor driving the incidence of GBV in Botswana. While women and men affirm gender equality in the public domain this has not translated in their private lives particularly in their intimate relationships. These are among the key findings of the GBV Indicators Research project in Botswana undertaken by the Women's Affairs Department (WAD) and Gender Links (GL). These findings show that GBV has reached pandemic proportions in Botswana and needs to be
treated with the same urgency as HIV and AIDS. As a key building block in the achievement of Vision 2016, GBV needs to be placed high on the political agenda.

Inspired by the Commonwealth Plan of Action on Gender and Development (2005-2015) and the Southern African Development Community (SADC) Protocol on Gender and Development target of halving GBV by 2015, the research project provides the first comprehensive and comparative baseline assessment of the extent, effects and response to GBV in Botswana.

The GBV Indicators Study Report was launched on the 29th of March 2012, by the Minister of Labour and Home Affairs, Honorable Edwin J. Batshu at the Phakalane Golf Estate in Gaborone, and revealed the high prevalence of GBV in the country. Responding to the research report, Honorable Batshu said the findings are “shocking” and that “there is a crisis of confidence” in which “women were not enjoying the full benefit of the very systems that offer them redress.” In his foreword in the research report, the Minister notes that as the research found that 30% of women had experienced violence over the last year, we can extrapolate that more than 200 000 women had their rights violated at the very moment that Botswana is working towards attaining human rights for all.

Comparing what women say they experience to what men say they do adds credibility to the findings. The study explored both intimate partner and non-partner violence. Forms of IPV include physical, emotional, economic, and sexual. Forms of non-partner violence include sexual harassment and rape.

In addition to the prevalence survey, tools used include the interrogation of administrative data from police, courts and shelters; collection of first-hand accounts of women’s and men’s experiences of GBV, media monitoring and political discourse analysis.

**Rate of Intimate Partner Violence**

The term Intimate Partner Violence or “IPV” in this study describes physical, sexual, economic or emotional harm by a current or former partner or spouse. Figure 1 shows the prevalence of IPV experienced by women and perpetration by men. Emotional violence ranked highest, followed by physical, economic, abuse in pregnancy and sexual IPV. In all instances, women reported a higher level of experiencing these forms of violence than men admitted to perpetrating these forms of violence.
Individual factors

The research findings showed that women aged 45 and over experienced lower levels (54%) of intimate partner violence in their lifetime compared to younger women. The findings also showed that women who were educated beyond high school, experienced higher levels (66%) of intimate partner violence than women with lower levels (61%) of education. Similarly, men with higher levels of education perpetrated higher levels (55%) of violence against their intimate partner than men with lower levels (42%) of education.

Childhood experiences of violence

88% of women and 66% of men reported being abused as children; most of this being physical abuse. Being sexually abused as a child was associated with the experience and perpetration of IPV and non-partner rape later in life. High proportions of women (56%) and men (26%) shared that they had witnessed their mothers being abused. About a quarter (24%) of men who perpetrated IPV in the 12 months prior to the survey also consumed alcohol in the same period. Over a fifth of the men (22.4%) who admitted to perpetrating IPV during the 12 months prior to the survey also admitted to using drugs. These findings are in line with the ecological model of IPV, which posits that individual childhood and interpersonal experiences affect attitudes and behaviour in adulthood.

Relationship factors

More than half of the women (53.3%) who experienced IPV in the last 12 months suspected that their partners were having sex with someone else.
Community factors
The research also inquired about people’s attitudes towards gender issues and found that almost similar proportions of women (83.1%) and men (81.9%) agree that men and women should be treated equally. But at the same time, 78.5% of women and almost nine out of ten (88.9%) men agreed that a woman should obey her husband. 21% of women and 38% of men agreed that if a man has paid lobola (bride price) for his wife, she must have sex when he wants it. Seven percent of women and 18.3% of men agreed that if a woman is raped she is usually to blame for putting herself in that situation. These findings show that although gender equality in the public domain is widely accepted this is not the case in the private sphere.

Societal Factors
Political environment
As the views and attitudes articulated by political leaders and communities have a strong influence on public opinion, the researchers investigated 188 speeches held by politicians and government officials during 2009-2011. Of the 188 speeches analysed, 15% referred to GBV but only 6% had GBV as the main topic. Most of the GBV speeches (11.9%) referred to sexual abuse and 8% of speeches addressed the issue of femicide, commonly referred to as ‘passion killings’. A tenth of the GBV speeches referred to the link between GBV and HIV.

GBV in sensational ways that trivialise the experiences of women for example the reference to femicide as “passion killings”.

Effects of GBV
The research findings disclosed that:
- Almost one in every five women (18%) physically abused sustained injuries. Over half of the injured women had to stay in bed for an average number of nine days.
- A quarter of all the women interviewed had been diagnosed with a sexually transmitted infection (STI) in their lifetime.
- A greater proportion of women who experienced IPV or rape were diagnosed with STIs compared to the proportion of women who had not experienced IPV or rape.
- A tenth of women and above a fifth of men interviewed in this study had never tested for HIV.
- About a quarter (26.1%) of the women who experienced physical IPV in their lifetime were HIV positive.
- A fifth (20.3%) of the women who experienced sexual IPV in their lifetime were HIV positive.
- Fifteen percent of the women who were raped in their lifetime were HIV positive.
- Of the women who experienced IPV in their lifetime, 8.7% attempted suicide.
- Of the women who were raped in their lifetime, 20.3% attempted suicide.
- Of the women who experienced IPV in the last 12 months, 11.6% attempted suicide.
- Of the women who were raped in the last 12 months, 30.8% attempted suicide.

Response and Support

Vision 2016 is Botswana’s strategy to propel its socioeconomic and political development into a competitive, winning and prosperous nation. Botswana laws that relate to GBV include the Domestic Violence Act, the Penal Code, the Criminal Procedure and Evidence
Act, the Employment Act and the Deeds Registry Act. Of all the people interviewed, 46.2% of women and 42.5% of men said they had heard about the Domestic Violence Act. Relatively low proportions of those interviewed in the sample, 19.6% of women and 24.4% of men, heard about the Penal code sections 141-143, which address rape. Approximately a third of women and men in sample, 33.9% of women and 31.4% of men, were aware of protection orders.

Botswana Police Services (BPS)
- The BPS Public Relations Unit recorded 45 cases of female murder by an intimate (ex-) partner from January to June 2011.
- BPS Gender Focal Points recorded 8165 GBV registered cases with female victims above the age of 18 in 2011.
- The most commonly reported form of GBV was physical followed by verbal, sexual, emotional and lastly economic.
- BPS Gender Focal Points recorded 4499 IPV registered cases with female victims above the age of 18 in 2011.
- The most commonly reported form of IPV to BPS was physical, followed by emotional, verbal, economic and lastly sexual.
- BPS is currently collecting data for the different GBV forms in more comprehensive ways compared to other Police Services in other countries in the region. This is an example of international good practice.
- The prevalence of GBV reported in the survey is 24 times higher than that reported to the police.
- The prevalence of IPV in the survey is 44 times higher than that reported to police in 2011.
- The prevalence of non-partner sexual violence in the survey is 17 times more than that reported to police.
- GBV victims withdrew 777 cases from BPS in 2011.

Courts
- The magistrate courts dealt with 5584 GBV cases in 2011.
- The magistrate courts prosecuted thirty six percent of GBV cases received in 2011.
- Thirty one percent of GBV cases before the magistrate courts resulted in convictions.
- The magistrate courts acquitted six percent of GBV cases.
- Broadhurst customary courts dealt with 316 GBV cases in 2011.

Prevention
The study found that the current level of awareness of prevention campaigns is low as less than half of the sample, 47.9% of women and 48.6% of men, knew of events or prevention campaigns to end GBV. Less than a fifth of the sample (16.1% of women, and 18.3% men) had heard about the Sixteen Days of No Violence Against Women campaign. But 62.8% of women and 51.3% of men who were aware of GBV campaigns found them empowering.

Efforts undertaken by the Women’s Affairs Department
Since this study and the 16 Days of Activism campaign of 2011, the Women’s Affairs Department (WAD) has been undertaking the following activities and programmes to address GBV:
- Discussion of the GBV Indicators Study on radio to share the findings and get community feedback on GBV issues. The media, particularly electronic media, has been active in airing discussions on GBV and domestic violence issues and calling on different stakeholder to engage in these discussions.
- The Women’s Affairs Department in consultation with stakeholders and with support from the UN system has been engaged in the process of developing the draft regulations for the Domestic Violence Act of 2008. The regulations will support effective implementation of the Act by the different
players. The draft Regulations will be submitted to Attorney General's Chambers in October 2012 for review and drafting into a legal document.

- The process of developing a Gender Based Violence Referral System is ongoing through a pilot exercise in Maun and Mochudi. Capacity building workshops on GBV have been conducted in the pilot sites to facilitate effective participation of the stakeholders in the development of the referral system.
- The Botswana Police Service, through their Gender Focal Persons, continues to document disaggregated information on GBV and domestic violence cases on a monthly basis. This information facilitates the Police to further engage with communities in their policing areas to address GBV.
- The Department has been supporting a project (‘I AM’) on empowerment of and life skills building for young people.

- The Women’s Affairs Department, through the NAC Women Sector, has developed the Sector’s Strategic Plan to map the response to issues of women, girls and HIV and AIDS, and this strategic plan addresses the vulnerabilities of women and girls to HIV and AIDS and gender based violence.
- In 2012 the 16 Days of Activism on Violence against Women campaign under the theme “From Peace in the Home to Peace in the World: Let’s End Violence Against Women and Children” will be launched in Goodhope in November 2012.

Conclusions and recommendations
The research findings disclose high levels of gender based violence in Botswana, with over two thirds of women (67%) having experienced some form of gender violence in their lifetime. The prevalence of GBV reported in this survey is 24 times higher than that reported to the police. A complex set of factors drive the perpetration of GBV; alcohol and drug use, child abuse, multiple sexual relationships, conservative community beliefs and values and patriarchal gender attitudes are the major drivers of the GBV pandemic in Botswana. Even though the Botswana Police Service has made headway in putting in place systems to respond to GBV, most cases of GBV still go unreported and reported cases hardly make it to court. The Women’s Affairs Department and Gender Links aim to disseminate the findings of this study widely with the urge to place GBV as a key priority on the political agenda and strengthen campaigns nationwide to combat GBV.

For a more detailed account of the findings of the GBV Indicators Botswana Study by WAD and Gender Links go to http://www.genderlinks.org.za/article/the-gender-based-violence-indicators-study-botswana-2012-03-28

Referral information:
If you need help or advice and you don’t know where to go, call any of the following numbers or visit any of the institutions below:

- Police Station near you 999
- Childline Botswana 3900900
- Lifeline Botswana 3911270/74478737/74790709
- The Kagisano Society Women’s Shelter Project 3907659
- Women Against Rape 6860865
- Women’s Affairs Department office near you 3912290
- Emang Basadi 3912290
- Social and Community Development Office near you 3911421/3909335
- Customary Court (Kgotla) near you
- Church Leaders

Women's Affairs Department
Plot 1268, Thusanyo House, Old Lobatse Road
Private Bag 00107, Gaborone Botswana
Tel.: +267 3912290 Fax: 3911944
Toll-Free line: 0800 600 777
Email: mlha-pro@gov.bw
Website: www.gov.bw

Gender Links Botswana
Plot 1277, Old Lobatse Road, Gaborone, Botswana
Tel.: 3188250
Email: coordbotswana@genderlinks.org.za
progbotswana@genderlinks.org.za
Website: www.genderlinks.org.za

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