BRIDGING THE DIVIDE

| UNPACKING THE INTERSECTIONS
OF VIOLENCE AGAINST WOMEN AND
VIOLENCE AGAINST CHILDREN IN TWO
COMMUNITIES IN THE WESTERN CAPE,
SOUTH AFRICA |

Research Report

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CONTENTS

1 INTRODUCTION

Violence against women (VAW) and violence against children (VAC) are conceptualised as global public health burdens and human rights violations (Guedes et al., 2016; World Health Organization [WHO], 2014). Globally, it is estimated that one in three women (35%) experience physical and/or sexual intimate partner violence (IPV) at some point in their lifetime (WHO, 2014). VAC estimates suggest that over half of all children aged 2 to 17 years globally (equivalent to 1 billion children) have experienced violence at some point in their lifetime (Hillis et al, 2016).

Similarly, VAW and VAC are considered endemic in South Africa (Norman et al., 2010). The South African Demographic Health Survey showed that 26% of women aged 18 years and older had experienced physical, sexual, or emotional violence by an intimate partner in their lifetime (National Department of Health et al., 2016). Furthermore, the Birth to Twenty Plus study revealed that over 90% of the cohort were exposed to several forms of violence, including physical and sexual abuse, at some point in their lives (Naicker et al., 2017; Richter et al., 2018).

The WHO categorises violence as self-directed, collective, or interpersonal (Krug et al., 2002). Violence in the home forms part of interpersonal violence and includes IPV and child abuse (Waters et al., 2004). IPV includes acts such as physical abuse by a partner that involves being kicked, hit, or forms of sexual coercion. It also involves emotional and psychological abuse used to intimidate, humiliate, control, and isolate one's partner from any relationships with others, including restricting or stopping possible access to help (Rutherford et al., 2007). Similarly, child abuse involves the physical, sexual, and psychological violation of children younger than 18 years of age (Srivastava et al., 2017). This includes emotional ill-treatment, negligent treatment, or exploitation (WHO, 1996).

A common form of violence experienced during childhood is physical punishment (Jamieson et al., 2018; Meinck et al., 2016). The impact of any form of physical punishment, including spanking, has been found to lead to negative cognitive and behavioural outcomes in children (Bacchus et al., 2017). IPV has also been linked to women's

childhood experiences of abuse as well as the likelihood of increased male perpetration of violence towards women and children, and community violence. Research shows that males who experienced violent discipline or other maltreatment during childhood are more likely to be violent towards their own children and spouse in adulthood (Mathews et al., 2011). Similarly, witnessing IPV during childhood increases boys' risk of developing violent masculinities and abusing their partners in adulthood (Abrahams & Jewkes, 2005). For women, experiences of IPV increase the risk of using corporal punishment. Inequitable gender attitudes also play a role in women's use of corporal punishment, and mothers who believe that men are justified in beating their female partners are more likely to endorse and use corporal punishment with their children (Fulu et al., 2017). The intergenerational transmission of abuse amongst women experiencing violence as adults has further been linked to negative psychological outcomes for women such as depression, symptoms of posttraumatic stress disorder and binge drinking (Machisa et al., 2017), and to intimate partner femicide more specifically in South Africa (Abrahams et al., 2013).

Globally, VAC and VAW are often bound together in the household setting, sharing similar risk factors, and commonly occurring in the same family (Know Violence, 2017). The overlapping associations between VAW and VAC – such as gender inequality, male dominance in households and marital conflict – highlight the presence of key intersections between VAW and VAC. Both problems are prevalent in communities with overarching social norms that condone and promote both types of violence. A South African study showed an association between child sexual assault and an increased risk of physical or sexual IPV during adulthood (Dunkle et al., 2004). This highlights VAC as a risk factor for revictimization in adulthood. Therefore, a life-course perspective is critical in understanding the intersections between VAW and VAC. It focuses attention on the prevalence of different forms of violence at different stages of development, and how different types of violence intersect and reinforce one another across the lifespan. This life-course perspective enables better understanding of the pathways to victimisation and perpetration of violence, and how violence can be prevented.

Whilst growing evidence on VAW and VAC exist, these forms of violence have rarely been studied in parallel. There is therefore a paucity of literature on understanding the intersections of male perpetrated violence against women and caregiver (male and female) perpetrated violence against children, particularly in South Africa and other low and middle-income countries (LMICs). Developing an understanding of these intersections is particularly important in South Africa due to the high prevalence of VAW and VAC. Programmes, research, and policies on VAW and VAC have historically been developed separately, without consideration of the relationship between the two

problems. There is an inextricable link between the two, and interventions that focus on these problems in isolation from one other may overlook the common drivers and consequences of VAC and VAW within families and across the lifespan (Mathews, Makola et al., 2021). However, joint VAW and VAC programming requires careful consideration, with shared learning across VAW and VAC as an important first step towards allowing for further engagement and discussion between the sectors.

2 CONCEPTUAL FRAMEWORK

2.1 FEMINIST THEORY

This study is grounded in feminist theory. Feminist theory acknowledges the multiple sites of power and oppression that differentially affect the lives of women by attending to the broader context in which violence occurs (Boonzaier & De le Ray, 2004). In this context we understand the household or family to be a locus of patriarchal power whereby hegemonic masculinities are not only constructed but also maintained (Namy et al., 2017). Reflected further in childhood gender norms, this patriarchal structure works to devalue not only the position of women and children but also their expected social roles and behaviours, in comparison to the privileging of male hegemonic masculinities. In turn, male power is maintained through demonstration and reinforcement over subordinate family members through violence, which is legitimised as a mechanism of social control. In contexts characterised by patriarchal power, maternal violence within the family or household setting can, therefore, be understood as an incident embedded in this inequitable hierarchy that serves to disempower women. Dekel, Abrahams and Andipatin (2018) expand on this understanding of maternal violence by locating it in the expression of their victimization and oppressive experiences as both women and mothers. An intersectional feminist perspective, therefore, brings forward a complex understanding of child abuse, mothering, and violence against women, one which recognizes the power relations between women, women as mothers, children, and the various social identities these hold among systems of oppression within society.

2.2 SOCIO-ECOLOGICAL MODEL

Violence results from a complex interaction of interrelated factors (WHO, 2012). The ecological model has been used as a framework for understanding the complex nature of violence. Based on the work of Bronfenbrenner (1979), the model describes risk and protective factors and behaviours at four levels: individual, relationship, community, and societal levels. The goal of this model is to stop violence before it occurs. It, therefore,

requires an understanding of the various risk and protective factors that lead to a child's vulnerability or protection from violence, and consideration of the complex inter-play between the various levels in the model (Jamieson et al., 2018). Michau et al. (2015) have adapted the ecological model and applied it to programme design (Figure 1 below) to suggest the main mechanisms that sustain violence against women and girls. The framework provides examples of how these mechanisms manifest through the imbalance of gender-power relations. It also identifies the intended positive outcomes of efforts to prevent violence against women and girls across the ecological model, noting strategies to achieve these outcomes at different levels (Michau et al., 2015). This study is informed by the socio-ecological model, with a particular focus on how these broader levels drive and underpin violence in the home.

Figure 1

Figure 1: Michau L, Horn J, Bank A, Dutt M, Zimmerman C. Prevention of violence against women and girls: lessons from practice. Lancet. 2015 Apr 25;385(9978):1672-84. doi: 10.1016/S0140-6736(14)61797-9. Epub 2014 Nov 21. PMID: 25467577.

2.3 INTERSECTIONS OF VAC AND VAW

A global narrative review of the intersections of VAC and VAW was conducted by mapping these intersections based on international reviews and multi-country studies conducted between January 2004 and January 2015 (Guedes et al., 2016). Based on this review, Guedes and colleagues developed a framework (Figure 2) outlining six pathways through which VAW and VAC intersect. This report uses this framework to structure the interconnections identified through this study.

Figure 2
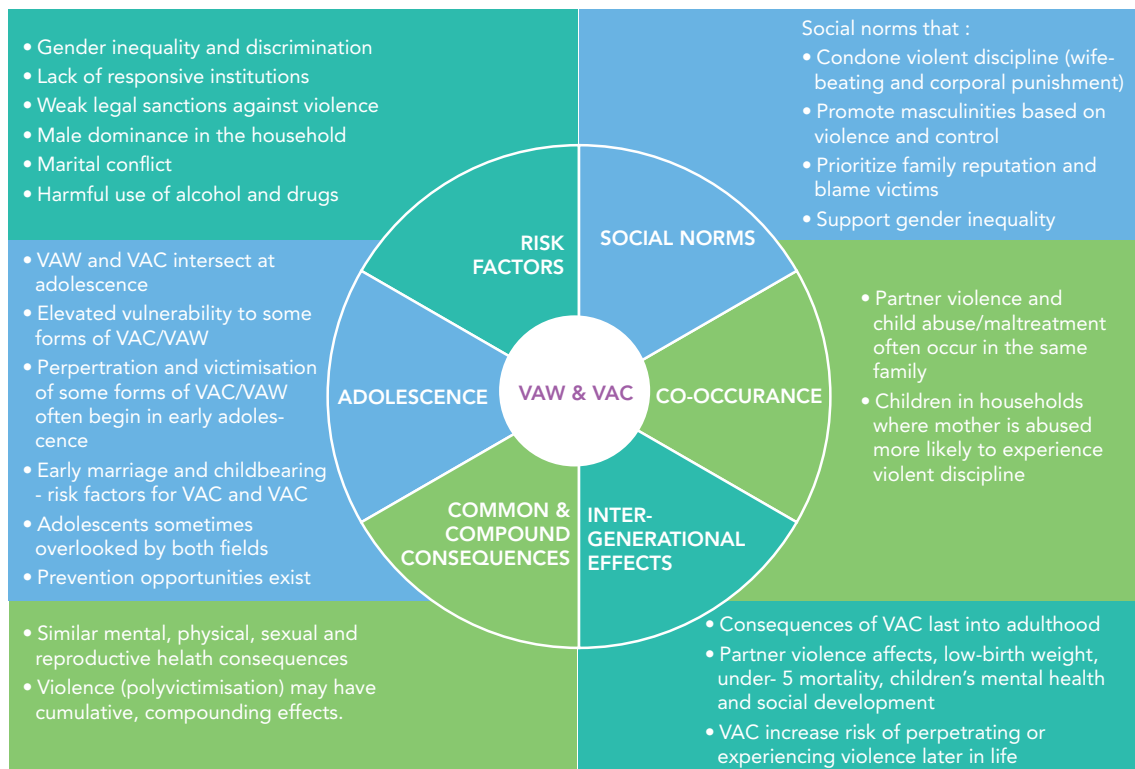
Figure 2: Guedes A, Bott S, Garcia-Moreno C, Colombini M. Bridging the gaps: a global review of intersections of violence against women and violence against children. Global health action. 2016;9(1):31516.

Adolescence is a time of heightened vulnerability to some forms of VAC and VAW. Shared risk factors contributing to the occurrence of VAW and VAC have also been highlighted (Guedes et al., 2016). The most common risk factors include gender inequality, male dominance, relationship conflicts, and harmful consumption of alcohol (Atteraya et al. 2015, Jansen et al., 2016). Social norms condoning violent behaviour towards women and children were associated with violent masculinities and gender inequalities (Wood et al., 2008) which are used to control their partner, punish, and to gain the respect of female partners (Jewkes & Morrell, 2010). Children in the households of mothers who experience IPV and who witness conflict between their parents, including aggressive and coercive behaviour, were found to have a negative relationship with their parents and to be victims of violence perpetrated by parents (Devries et al., 2017; Pereira et al. 2015). In these families, violence against women and children co-occurs and can drive intergenerational patterns of violence, beginning in childhood and extending into adulthood (Guedes & Mikton, 2013). The intergenerational transmission of these behaviours and practices further normalises and tolerates acts of violence as they remain victims or perpetrators, further transmitting these practices to their children as adults (Fry et al., 2012; Jewkes, 2002; Mathews et al., 2011; Seedat et al., 2009). Furthermore, VAC and VAW have similar health consequences which may have cumulative and compounding effects (Guedes et al., 2016).

2.4   INTERSECTIONS IN THE GLOBAL SOUTH – CONNECTING THE DOTS

Drawing from this body of knowledge, a scoping review was conducted focusing on the intersections of VAW and VAC in the home within the Global South and over the life course of individuals (Mathews, Makola et al., 2021). It also highlighted strategic factors which may aid in the future implementation of programmes that seek to eliminate life course and intergenerational violence in LMICs. The scoping review showed that adolescence is a potentially important period to target the complex and intersecting risks associated with both VAC and VAW (Mathews et al., 2021). This highlights the need for interventions to consider addressing multiple incidents of violence and victimisation across the life course (Chan et al., 2017). The scoping review pointed to the need to bridge the divide between the VAW and VAC fields to better understand, address and eradicate the multiple forms of violence occurring within households and across a person's life course. The review also emphasised early intervention to interrupt the maintenance of intergenerational cycles of violence. This study used the scoping review as a baseline to conduct field research on understanding these intersections in two communities in the Western Cape, South Africa.

3 STUDY METHODOLOGY

3.1 RATIONALE FOR THE STUDY

As noted, there is scant literature in the Global South on the intersections of male perpetrated violence against women and caregiver perpetrated violence against children, including in South Africa, which has a high prevalence of VAW and VAC. This study aims to explore the perceptions of women, men and children regarding VAW and VAC in two communities in South Africa.

Developing an understanding of the perceptions requires the engagement of all sectors of the community. The participation of children (adolescents aged 16 and 17 years) was important to ensure that their views are represented in interventions that affect them, and because research has shown that they are equally affected by violence in the home and similarly suffer long-term effects. The study aimed to add to the literature on the intersections of VAC and VAW, providing an understanding of community perceptions of these forms of violence in the home. The findings will inform the development of a prevention intervention that will be tested for feasibility and integrated into existing services within the targeted communities.

3.2 AIM AND OBJECTIVES

This study seeks to explore how community members conceptualise men's violence against women, and caregivers' use of violence against children in families and communities. The objectives are to:

a. Explore community members' understanding of male perpetrated violence against women, and caregiver perpetrated violence against children.

b. Gain an understanding of the community's perception of factors contributing to the vulnerability of women and children to violence at home.

c. Examine how the behaviour and practices of men perpetuate the occurrence of interpersonal violence against women and children.

d. Examine community perceptions of how social norms could be allowing acts of violence by caregivers against their children.

e. Gain insight into women, men, and children's perceptions of how violence and interpersonal violence could be addressed in communities.

The research also aimed to gain an understanding of how the COVID-19 pandemic impacted the experiences of violence in the home, but these findings are not discussed in this report.

3.3 COMMUNITY PARTNERSHIP AND STUDY SETTING

Since the study aimed to inform the development of a programmatic intervention, the research was conducted in collaboration with a community-based programme partner, MOSAIC: Training Services and Healing Centre. MOSAIC is a non-profit established in the Western Cape in 1993 to respond to VAW but has recently expanded its scope to provide support to children and men. MOSAIC was approached to collaborate as an expert in community-based prevention and counselling for families (women, men and children) who are survivors of interpersonal violence. The centre provided counselling for survivors of violence identified during the research as well as technical and community-based support for the data collection and collaborated in the analysis of the data.

The study was undertaken in Mitchell's Plain and Paarl in the Western Cape. MOSAIC has centres in both communities and provides services and conducts outreach in these areas. Paarl is a peri-urban area about 60km from Cape Town with a heterogeneous population and high levels of crime (South African Police Service [SAPS], 2021). Mitchell's Plain is a densely populated urban township with approximately 500, 000 inhabitants. It is located on the Cape Flats and is one of the largest townships in the City of Cape Town. The township is plagued by high rates of violence (including IPV and VAC) and unemployment (Daniels, 2018) and related problems, including gangsterism and substance abuse. Mitchell's Plain was established during apartheid as a coloured community but has become more integrated since democracy and is now considered a heterogeneous community.

A Community Advisory Board (CAB) was established as an important first step in the community engagement process. The CAB was established through a snowballing process involving MOSAIC as well as the Cape Flats Women's Movement and The Parent Centre, both of which also work in these communities. The role of the CAB was to ensure that the research was relevant and acceptable to the community; assist the research team

to engage with the community on aspects of the research including design and later dissemination of findings; advise on aspects of implementation (e.g. how to conduct the research during the COVID-19 pandemic and how to minimise potential risk to participants when conducting research on VAC and VAW); and ensure that the research protocol and methods were ethically sound (in addition to the formal ethics submission).

3.4 STUDY DESIGN

A qualitative research design was used to explore community members' perceptions and understandings of the social norms that underpin violence against women and children and their relationships. The views of women, men, and children were elicited using various qualitative tools. A series of semi-structured stakeholder interviews were held with community leaders, while focus group discussions (FGDs) were held with female and male adolescents and adults in these two communities, as detailed in Table 1. Participants were enrolled in the study using purposive sampling, with the support of MOSAIC. A combined total of 69 community participants across the two communities were recruited for participation in the study.

Table 1: Study participants and data collection methods, per community

Focus group discussions	Mitchells Plain	Paarl	Total participants
Women (18 years +)	1 FGD x 6	1 FGD x 7	13
Men (18 years +)	1 FGD x 8	1 FGD x 6	14
Adolescent girls (15 – 17 years)	1 FGD x 5	1 FGD x 7	12
Adolescent boys (15 – 17 years)	1 FGD x 7	1 FGD x 5	12
Community stakeholders	**Mitchells Plain**	**Paarl**	**Total participants**
Social worker	1	1	2
Child or family care worker	1	1	2
Early childhood development practitioner	1	1	2
Primary school educator	1	1	2
Religious leader (Imam)	1	-	1
Religious leader (pastor)	1	1	2
Prosecutor	1	1	2
Member of South African Police Service	1	1	2
Nurse	1	-	1
Youth leader	1	1	2
Total participants	**36**	**33**	**69**

Recruitment for the adult focus group discussions was conducted by community mobilizers affiliated to MOSAIC. They approached prospective adult participants, gave them a flyer with information on the research and asked for permission for a researcher to contact them. The adolescents were recruited by approaching a network of youth programmes in the two communities to distribute flyers about the study. Where adolescents indicated an interest, the community mobilisers delivered information sheets and flyers to their homes for their parents or legal guardians to review, after which interested adolescents and parents were asked for permission for a researcher to contact them to explain further. They were contacted telephonically, given an opportunity to ask questions, and screened against the inclusion and exclusion criteria before being recruited. Informed consent was obtained from the adult participants and the parents or legal guardians of the adolescents, and assent was obtained from the adolescents.

The questions guiding the individual interviews and focus group discussions were reviewed by MOSAIC and the CAB to obtain a community perspective, after which amendments were made. The focus group guides made use of short vignettes (approximately 150 words) and illustrations to facilitate discussion and to minimise participants' feelings of personal exposure. The vignettes and illustrations covered various forms of violence within the home and were also reviewed by the CAB. A debriefing script was also developed to remind participants of the importance of non-disclosure of information shared in the focus group and the availability of counselling services should they need them. Additional information was gathered through notes taken from observations of field processes.

Image 1: Examples of the illustrations used alongside the vignettes in the focus group discussions

The study took place during the COVID-19 pandemic. The data collection protocol was informed by the restrictions imposed by the government (the lockdown levels and associated prevention measures) and the recommendations to mitigate the impact of COVID-19 issued in March 2020 by the Faculty of Health Sciences' Human Research Ethics Committee (HREC) at the University of Cape Town. Ethics approval was obtained from the HREC in November 2020 (HREC REF: 466/2020).

The COVID-19 protocol for the study included reducing the number of participants in the focus groups (while increasing the number of groups); conducting stakeholder interviews telephonically, where possible; conducting COVID-19 screening of participants in face-to-face meetings via a checklist sent the day before; and implementing social distancing and wearing of masks in all in-person meetings.

3.5 ANALYSIS OF THE DATA

The interviews and focus group discussions were recorded (with permission) and transcribed. An initial coding framework was developed based on the research questions and in line with the study objectives. NVIVO was used for the coding process. A first round of coding was conducted by three researchers, with two transcripts being coded by all three to check for consistency of coding. Weekly meetings were held with the team involved in the data analysis to discuss challenges as well as emerging codes and findings. The team included a representative from MOSAIC to provide the community-based partner with exposure to the research process and to ensure that the analysis was informed by an 'on-the-ground' perspective.

After an initial round of coding by individuals, a series of group sessions were held to discuss the pre-existing and emerging codes. The team agreed to adopt the framework developed by Guedes et al. (2016) on the pathways through which VAW and VAC intersect as a way of clustering the emerging themes, with some adaptions. In the adapted framework, the themes on co-occurrence and intergenerational effects were combined due to their inter-related nature, and an additional intersectional pathway, namely responses to VAW and VAC, was added. A further round of coding was conducted using this framework and the emergent themes identified in the group discussions. The adapted framework was used to inform the structure of this report.

4 STUDY FINDINGS

4.1 A NOTE ON THE HISTORICAL AND SOCIO-POLITICAL CONTEXT OF THE STUDY

Researchers cannot study violence in South Africa without recognising the country's colonial and apartheid history of racial oppression and grossly unequal power relations and economic opportunities that promoted the formation of gendered identities along racial lines (Morrell, 2001). The Apartheid State policy enforced racial segregation through oppressive laws that were brutally enforced (Coovadia et al., 2009). Apartheid strengthened the economic and political power of the ruling white minority, creating vast inequalities.

In the Western Cape, where this study was based, half the population is Coloured[1]. This group has its origins in the country's colonial past among slaves, indigenous people and anyone of mixed race (Goldin, 1987). From the early years of colonial settlement in the Cape colony, many worked on farms where workers were partly paid in addictive crude wine—a practice known as the 'dop' system, which gave rise to highly prevalent alcoholism in contemporary Coloured township life in the region (Mager, 2004). This pattern of alcohol abuse contributes to the social destruction of communities and families (Mager, 2004). South African townships are fraught with poverty and plagued by social disorganisation due to apartheid policies such as forced removals, which contributed to family break-down and the rapid formation of street gangs (Pinnock, 1984). Governmental policy to control alcohol and drugs in townships produced a flourishing 'criminal' economy, enhancing the power of gangs in the Western Cape (Standing, 2006). Dysfunctional families and limited opportunities for youth in townships draw young men into gangs to provide them with a sense of success, power, and respect that they are otherwise denied (Bourgois, 1996; Luyt & Foster, 2001).

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1 The terms are capitalised to signify racial categories that were used under Apartheid. These terms are used here to describe the historical context of these communities.

For black people in South Africa, which includes Coloureds and those of Indian descent, Apartheid had a devastating impact on family life. Studies on fatherhood have shown that the migrant labour system particularly impacted on black men's availability to their families, resulting in fathers' abandoning and neglecting their children (Richter & Morrell, 2006). With child-rearing practices being gendered and largely considered a woman's domain (Richter & Morrell, 2006), considerable space has been created for fathers to be absent and uninvolved in the care of their children. Over 40% of households in South Africa are female-headed (Statistics South Africa, 2020); however, many children are raised not only without a father, but also without a biological mother, with grandmothers or aunts taking on the parenting role (Coovadia et al., 2009). Such alternate care arrangements and the absence of fathers can be the context for traumatic experiences for these children (Nduna & Jewkes, 2012). Given this context, children often turn to others in their social environment for affirmation (Mathews et al., 2011). Socialization outside the home, including exposure to violence and gang culture, is of particular importance in normative behaviour during adolescence. The findings presented in the subsequent sections should be read with this context in mind.

This report draws on an adaptation of the framework developed by Guedes and colleagues (2016) to structure the findings. The first section considers the shared risk factors identified in this study, followed by a strong focus on the social norms that underpin violence in the home in these communities. The report then considers participants' perceptions of the common (shared) effects of these forms of violence, as well as the co-occurrence and intergenerational effects. While we solicited the views of adolescents, we did not note striking differences between their views and those of older participants. We therefore integrated the views of young people but took care to identify young peoples' voices in each section. Lastly, the study included a focus on community responses to VAC and VAW. The discussion of these responses has been limited to perceptions of VAC and VAW in the home and a brief overview of community views on the response of services and the gaps that currently exist. The report ends with concluding reflections and a set of recommendations to inform the development of interventions that can shift the pattern of these forms of violence in Global South contexts.

4.2   SHARED RISK FACTORS FOR VAC AND VAW

Shared risk factors for perpetrating VAW and VAC have been identified across international reviews and multi-country studies (Guedes et al., 2016). In the Global South, four prominent shared risk factors for VAW and VAC have been noted, namely: gender inequality, male dominance in households, partner conflict and harmful consumption of alcohol (Mathews, Makola et al., 2021). As outlined in Table 2, study participants identified

similar drivers of violence in the home as those noted in previous reviews (see Guedes et al., 2016), with some community-specific additions such as the risks associated with widespread overcrowding, drug abuse, gangsterism, and high levels of unprocessed trauma. Participants' accounts of the risk factors for violence recognised these various factors as inter-related and shared risks for VAW and VAC.

Table 2: Shared risk factors for perpetration of VAC and VAW as identified by members of the two study communities, 2021

Individual (perpetration)	• Alcohol and drug abuse • Witnessed or experienced violence in childhood • Unprocessed trauma, anger
Family/household	• Poverty, hunger, unemployment • Overcrowding • New/non-biological father figures in the home • Tensions around (changing) gender roles • Family silence in the face of violence
Community	• Institutions that fail to respond • Community norms that normalise violence, gender inequalities • High levels of violence in the community (gangsterism) • Community silence in the face of violence
Societal	• Social norms that support violence, gender inequalities

4.2.1   Poverty exacerbated by the COVID-19 pandemic and restrictions

Many study participants spoke of persistently high levels of unemployment in these communities, and how the economic strain faced by families contributes to stress and tensions that may lead to violence. This study took place during the COVID-19 pandemic, which further exacerbated these stresses. Several participants noted the additional strain that the COVID-19 pandemic and associated lockdowns placed on families' finances, with one young man explaining how these stresses may be expressed through violence:

> *"Since the COVID found them and he don't have money, now he is stressing. Now he is taking his stress out on his wife and his children. He also takes [it] out when his children are crying. And when he can't sleep. The children are crying because they are hungry because they did not eat yet. There is no food in the house and all those things…"* [Male youth FGD]

Participants also spoke of VAW and VAC as being driven by an interplay of factors, recognising that high levels of poverty and unemployment are often accompanied by a range of other challenges and disadvantages and that households are impacted by individual, family, community and structural factors. As two stakeholders explained:

"Within households, it is mostly problems with no work, where people do not have any job, so it is mostly about money. Also, it is about jealousy, no food in the house, and fights results from all that, where people are angry at each other. Also, when people are abusing drugs and always drinking, so when the money is going out of the house, then the arguments about it start to happen, that is the way the fights come along." [Adult stakeholder]

"Most of the time we get problems like that because when the children are hungry and then the mother will shout at the children because of no money and food. Sometimes the children look for food by us [a soup kitchen] because there is nothing at home. And that's why the parent beat the children like that. And also, most of them are on drugs, the parents…" [Adult stakeholder]

4.2.2 Alcohol and drug abuse in the context of poverty and high unemployment

As shown above, the harmful consumption of alcohol and the abuse of drugs featured prominently in discussions of risk factors for VAW and VAC in these two communities. While the use of alcohol was largely seen as 'normal' and socially acceptable (unless the drinking was excessive), drug abuse was more likely to be viewed as dangerous and undesirable but prevalent in these communities. As noted, this challenge of substance abuse has its roots in the socio-political history of these communities and is exacerbated by the poverty and economic stressors that families face.

When asked when violence in the home is most likely to take place, an adult stakeholder responded:

"Mostly when the boyfriend is drugged. Mostly when mummy is drunk. Because you know what, when I get to some of their houses when they are sober, they are so, so, I can't even explain to you, soft people. But when they are drunk and maybe they are drugged, they are like a lion, they just want to roar. Everybody must listen. Everybody must be scared." [Adult stakeholder]

Some participants spoke about the role of alcohol in increasing disinhibition, with a young male participant noting, *"alcohol makes you crazy…when you are drunk then you look for trouble anywhere"*. An adult female participant spoke of men using alcohol as an 'excuse' for abusive behaviour:

"…It starts also when [there is] the abuse of the alcohol; fathers, uncles came there and they sleep there in the house [and] they can feel they can use, under the influence of the alcohol, they can use that children." [Adult female, FGD]

The literature supports the notion that alcohol disinhibits behaviour rather than being a causal factor itself. For example, while research shows that violence often occurs in intimate relationships where men are heavy drinkers (Kyriacou et al., 1999; Lipsky et al., 2005), some studies of women's drinking and experience of violence have shown that male heavy drinking is not predictive of violence or of sustaining injury in an intimate relationship (Testa et al., 2003; Thompson & Kingree, 2006). A study of intimate partner physical violence against women in the Western Cape found that use of alcohol was used as a justification by men for being violent toward an intimate partner (Abrahams et al., 2006).

In addition, participants regularly referred to drug abuse, including of highly addictive substances such as methamphetamine (known locally as "*tik*"), as a shared risk factor for violence, both in the community and in the home. Some young participants viewed substance abuse as being linked (in part) to the stress of financial problems, with a young participant noting, *"he don't get income in [or] have money and so he is started doing drugs again"*.

Participants also described how widespread substance abuse in these communities leads to some using the limited money available in financially constrained households to buy alcohol or drugs at the expense of caring for their partners and/or children. As a community stakeholder explained:

> *"[Alcohol abuse is] a very common experience. Like for instance, I am not working so my boyfriend is working and then I depend on him. So when – they don't even wait for the weekend. So, whatever he wants to go and [whatever] drug he [wants to] do, whatever he wants to drink, he do. Then maybe I ask him for money for bread and then the fight starts because, you know what, the people here they sell the drugs as if it is sweets."* [Adult stakeholder]

Substance abuse was seen as a frequent contributor to the neglect of children, with anecdotes of children being left at home or on the streets without adult supervision, making them vulnerable to violence.

4.2.3   Overcrowding as a risk factor

Participants also spoke of the physical context of living in poverty in which many people live together in small spaces that lack privacy as a common risk factor for VAW and VAC. Having multiple households on a single plot adds to this overcrowding.

According to analysis of the General Household Survey, one in five children (20%) in the Western Cape lived in overcrowded dwellings in 2018 (Hall, 2019). Nationally, overcrowding is associated with housing type, with 57% of children who stay in informal

dwellings living in overcrowded conditions, compared to 27% of children in traditional dwellings and 13% of children in formal housing. Young children are also significantly more likely than older children to live in overcrowded conditions.

Research shows that overcrowding has negative effects on physical and mental health outcomes for both adults and children (Krieger & Higgins, 2002; Nkosi et al., 2019). Overcrowding also results in a lack of privacy and places children at greater risk of sexual abuse, especially when boys and girls or children and adults have to share beds, or where children are exposed to sexual activity which may lead to them engaging in inappropriate sexual activity themselves.

4.2.4   The challenge of unaddressed traumas

Another shared risk factor for perpetration identified in this study was the inability of some men to manage their emotions in the face of stressful situations or conflict. Several participants felt that this was due to high levels of unaddressed trauma in these communities – whether due to childhood exposure to abuse or neglect, the experience of violence in the community (including gangsterism) or economic stressors – and that this "inner damage" contributes to the potential for violence in the home.

> *"[The] frustrations in terms of [having no] work, bringing that stress and that frustrations home and then not having a proper outlet, for instance…counselling available in the area, not being able to speak…taking that home and then it gets transferred into somebody gets beaten or somebody is abused."* [Adult stakeholder]

Some young participants suggested that male identity that are shaped by gendered norms around what it means to be 'a man' prevent men from reaching out for help - and can lead to them abusing substances as a coping mechanism. Others, as noted above, argued that the necessary help was often not available or accessible. The potential for substance abuse to 'trigger' this unprocessed trauma was also recognised:

> *"…Definitely, hurt people […] drug and alcohol abuse definitely bring that out. Because I may be suppressing past issues the entire time and all I need is that glass of wine to act out of character…Now I know a lot of people disagree with blaming it on liquor […] but if you do have past trauma, that might just be the trigger to bring that violence out within you."* [Adult female, FGD]

Participants also recognised that, similarly, unresolved trauma may manifest as aggression or bullying behaviour in children, particularly among boys. In an account of how her son

was bullied at school, an adult stakeholder explained that she had requested counselling from the school for both boys because she was aware of "*where [the bully] is coming from*" and was concerned about the impacts of trauma on both boys in the longer term.

4.2.5   Gendered roles and social norms

Participants also spoke of gendered roles and social norms (as discussed in more detail in the following section) as contributing to the risk of violence in the home. For example, situations in which women and children are financially dependent on men as the breadwinner were seen as placing them at risk. This was often spoken about as a means of locking women into violent relationships as women felt they had limited options and were unable to leave.

Participants also spoke about the normalisation of violence and how IPV is tolerated to an extent within households, referring to what is acceptable *"behind close[d] doors"*. The silence of families and communities is a shared driver of VAC and VAW that allows violence in the home to continue with impunity.

Others referred to traditional gender roles and the perceived pressure on men to provide for their partners and families, and how, if a man is unable to do so or is not respected by his wife "*as a man*" and as *"the head of the home"*, the resulting tensions and conflict can lead to violence. Some adult male participants argued that women have unreasonable expectations of men as providers and may "*undermine*" men if they are unable to play this role, to the point of "*provoking*" them into violence.

Participants also spoke about a lack of knowledge or understanding of what constitutes violence – and an "*ignorance that things should be different*". Some referred to the lack of education among parents, individuals being unaware of their rights, and not knowing not to do "*sulke goed nie*" [such things]. These perceptions underscore the normalisation of violence in these communities, as discussed below.

4.2.6   Other risk factors

Socio-cultural factors were also identified as shared risk factors for VAW and VAC. This included the ways in which culture and religion can be used to reinforce risk factors for VAC and VAW. For example, references to "*our culture*" or "*being old school*" are used to justify the use of corporal punishment, while arguments around tradition, culture and religion are sometimes used to reinforce gender inequalities or to argue against change.

Some spoke of how a lack of communication and care or affection in the home (often manifested as verbal abuse or neglect) can contribute to the risk of VAW and VAC.

Participants also recognised that, for children, exposure to violence could be a risk factor for intergenerational effects leading to perpetration (Fry et al., 2012; Fulu et al., 2017). Some accounts included examples of instances of VAC in the home that support the increased risk for VAC by non-biological father figures, as noted in the literature (Guedes et al., 2016).

4.3 SOCIAL NORMS AND UNDERSTANDINGS OF VAC AND VAW

4.3.1 Normalisation of violence in communities

As noted, South Africa's colonial past combined with the structural violence of apartheid and, in contemporary South Africa, the widening inequality and growing unemployment and gender inequality all contribute to the high levels of violence experienced across society (Altbeker, 2008; Seedat et al., 2009). Nevertheless, these drivers of violence do not adequately articulate the insidious nature of violence, which has become invisible and normalised across communities (Lamb & Snodgrass, 2013). This normalisation is articulated by forms of violence that are no longer seen as "violence", and that masquerade as socially acceptable or even socially encouraged behaviour (Galtung, 1990). It is under these conditions that violence can become dangerously entrenched in everyday life.

This normalisation of violence in the daily lived experiences of communities was described by all participants in a variety of ways. Violence is seen as being perpetuated in numerous ways: from the apathy shown in the face of the various manifestations of violence they are exposed to, through to participants observing that it has become a part of "life" and expected to happen.

Both adults and young people spoke about the experience of and exposure to violence as being ubiquitous. Most expressed that violence is part of the social fabric of their communities, with one young man saying:

> *"That whole culture now and it is normal. I see it every day now. So now I see it as normal because nobody is rising up. Nobody is breaking the cycle. Nobody is saying something…[that] it [violence] is not normal."* [Young male, FGD]

Many young people spoke about experiencing or witnessing acts of violence in their communities, sometimes as active participants or bystanders, with a level of desensitisation in their accounts. Young people reported a heightened awareness of violence in their surroundings, stating that *"there is violence, everywhere you are walking there is violence"*. Young men in their accounts mentioned that *"you can't go out alone"*

or *"walk alone"* because *"there are a lot of gangsters"* who can *"come in and they stab you"*. The focus of this study is on violence in the home, but it takes place in communities that have been plagued by crime and violence associated with gangsterism, further contributing to the pervasiveness and normalisation of violence.

Young women tended to focus on the normalisation of men's violence against women and children, with one participant saying:

> *"Men hitting their wives and their children is normal in the communities. Because the community don't stand together to fight against the abuse, and they rather argue with each other instead of standing together and trying to stop it."* [Young female, FGD]

Despite this, young participants were clear that violence is not to be tolerated, with some stating, *"No. Men mustn't hit a woman"* and *"I can't explain why rape happen[s] but men are sick, because why would you rape someone?"*

4.3.2   What drives the normalisation of violence in the home?

Through the narratives of these men, women, and young people we come to see that socio-economic conditions, gender inequality and harmful social norms all contribute to driving this normalisation of violence. Violence for most is not experienced as isolated from the socio-economic context in which they live. For example, the lack of privacy in overcrowded homes was construed by participants as an important factor that facilitates the normalisation of violence – particularly sexual violence – in the home. While there is limited evidence that speaks to the impact of the normalisation of the exposure to sex and varying levels of bodily maturity accompanying overcrowding household conditions, many participants felt that these tight living arrangements in many township homes result in children being exposed to sex and sexual violence from an early age and through continued exposure, these acts or 'ways' of behaving are considered 'normal'.

A participant expressed how she considered sexual violence to be normalised in the context of overcrowded homes, saying:

> *"And especially in [this community], where we [have] got one household but it has got three different families. You get, it is very, very common and because it's so common people are not being shocked by it. So, when they hear this person was raped by that uncle, it is like, 'ja, ons het geweet daar is te veel mense in die huis in' [yes, we knew there were too many people in the house]. Like it is nothing new to people anymore."* [Adult women, FGD]

The normalisation of violence in relationships also means that women often did not get the support from family or friends when they reported their experiences of violence because many spoke about how IPV is tolerated within boundaries, particularly when the man supports the family financially. Some participants spoke about the cycle of domestic violence, in which they would provide a friend or sister with a safe place to stay but *"tomorrow she is back with the man again"* and so they felt frustrated, while others spoke about not "interfering" as it is matter between the husband and wife and must be resolved within the family. Some also argued that there may be a reluctance to intervene when family or community members suspect that no results will emerge from the intervention and instead the families will defend their circumstances.

> *"The problem is only now, what is the reaction going to be if I now go and intervene there? The next day they are hunky dory with each other, and then they want to say, 'ja, jy kom interfere hierso' [you want to come interfere here]. That's why you're also scared, as community leaders/members, to intervene where there are domestic relationships."* [Adult male, FGD] [Translated from Afrikaans]

The silence of families and communities therefore allows violence in the home to continue with impunity. In addition, the emotional effects of IPV lock women in unhealthy violent relationships due to the erosion of self-esteem and self-worth, and for many women this makes it difficult to break free from a toxic violent relationship (Woollett & Hatcher, 2016).

This silence within families was also observed when children disclose their experiences of abuse in the home. An adult participant, speaking about her own experiences as a child, said:

> *"Nothing is done from that point onwards; the family just sweeps it under the carpet because that is exactly what happened [to me]."* [Adult female, FGD]

In addition to silencing disclosure, participants also spoke of families placing blame on the victim as a common family response to VAC and VAW:

> *"You get blamed as well, because I was blamed as a seven-year-old for being a promiscuous four-year-old. Which four-year-old is promiscuous? Which seven-year-old is promiscuous?"* [Adult female, FGD]

Both blaming and silencing of victims allows such behaviour to continue unchecked, as described powerfully by an adult participant who said:

> *"When they feel like I [the perpetrator] can do anything to you and then that is when the sexual abuse then also start[s]. You know, out of the violence, because they can see that they can get away with anything."* [Adult female, FGD]

Young participants also spoke about parents "hiding" conflict and violence in the home, noting that this often spills over into the community, where neighbours or family are aware of the violence in the home but do not feel it is their place to intervene.

These silences and impunity are further exacerbated by the lack of power and agency children and sometimes women have in the home, which is echoed in the community. Some individuals spoke about how people in positions of power and authority, such as community leaders, are not held accountable for their actions because of their positions. An adult participant spoke about how her trust was broken and her 'vulnerabilities' exploited by a person in authority at her church, who was meant to be a support to her. She explained:

> *"Because he was supposed to be helping me with anger management, but he made things so much worse because now, all of a sudden, I am being touched by this person. He has given me the type of attention that I lacked, so what do I do? He knows my deepest darkest secrets. He is touching me. Do I say something? Do I report him? Do I keep it quiet? And because I did not [report him], he had the upper hand and he made me the bad guy."* [Adult female, FGD]

The psychological effect of this violation for her, like many other victims, resulted in her being conflicted about reporting the abuse. This is exacerbated by the power dynamics in the relationship, and the fear of not being believed. This is particularly the case when a perpetrator is "respected" in the community, as described below by an adult participant:

> *"I go to church with that pastor, I go to church with that deacon...people will have full protests to protect the perpetrator because they think they know them. And that is also a challenge. Like speaking out of your household: everybody knows your dad is in the police, everybody knows your mom is the front singer in the choir. Nobody is going to believe you. People are going to blame you and people are going to call you a liar."* [Adult female, FGD]

While the examples given above refer to perpetrators in the community, similar dynamics play out regarding violence in the home. Families and neighbours often keep silent for fear of ruining individual (or family) reputations. Reputations may be prioritised over the need of victims and disclosure can be denied, especially if the perpetrator is an 'upstanding' member of the community/family or part of certain social structures.

In their discussions, young participants in the study spoke of their expectation for the community to intervene in violence in the home, but that instead they experienced a lack of response.

"…Many people in the community doesn't help each other because they would, like, tell you, or ask you, whether you need help but still don't help you. They leave you, [here's] my arm, reach out to people, but then they still don't stand with you." [Young female, FGD]

Young participants also view community members as being wary of accusations of meddling and fearing the consequences thereof, noting *"that's why they keep quiet"*. Some argued that families are giving couples the space to work out their challenges: "*The family did not assist her when she needed help because they thought they will work their problems out. So, they are not going to help them with their problems and stuff*".

4.3.3 Norms in intimate relationships

The prevailing socio-cultural context in South Africa provides space in which men's violence towards women is considerably tolerated (Boonzaier, 2005). Women's romantic aspirations and economic dependence provide considerable space for men to use violence and women to excuse his behaviour, either through expediency or a narrative of the man not being "bad all the time" (Boonzaier, 2008).

Violence in the home is also considered legitimate when a woman transgresses societal expectations of how a woman should behave (Mathews et al., 2014). Some participants spoke about how men would become violent when women did not behave in an appropriate way such as using money to buy alcohol, going out to "party", and coming home late. As an adult stakeholder explained:

"My mother, before she passed, was a heavy drinker, which my father was not. She would go and drink and entertain friends with the money that she had…she would come home late at night drunk, there is no food and what is the result? He is going to beat her. So, I don't put the blame completely on men, but there is blame for both sides." [Adult female stakeholder]

Women's use of alcohol as a justification by men for being violent toward an intimate partner has been noted in other studies in the Western Cape (Abrahams et al., 2006). However, there are multiple accounts of men's use of alcohol and the need to accept this behaviour even though it has a negative effect on the family.

Participants described various other circumstances in which men cannot be blamed for their use of violence. A few participants described that, in certain circumstances, women provoke men's use of violence through behaviour such as persistent criticism, using household money for her own pleasure (like buying alcohol) and suspected extra marital affairs – these are considered behaviours that can push men to the edge. As one young female participant explained:

"He is being aggressive to her because he is thinking that she is cheating on him with this new colleague." [Young female, FGD]

Some young participants stated that some men are deliberate in their use of violence and aggression, and they associated this with the male partner not being invested in the relationship any longer.

"To me it looks like he does not want to be in a relationship with her anymore… She told him about it, there is no food in the house. He gets angry and throws tantrums." [Young male, FGD]

Similarly, young women felt that gender norms that allow men to be dominant in households also contribute to violence in the home, but some noted that *"she [a woman] have the right to do what she want. He don't control her. She controls herself. A marriage does not mean he has control over her"*.

4.3.4   Role of men and internal contestations

Poverty and economic insecurity are a feature of many households in South Africa, but it should not be an excuse for men's use of violence in the home. Many participants described how men would become "frustrated" when they do not have the resources to support their families. The experiences of many highlight how families are locked in poverty with restricted access to stable employment, particularly at the time of data collection (during the COVID-19 pandemic), with the provider role described as central for men's attainment and embodiment of being a "successful" man (Morrell & Jewkes, 2011). A young man reflected on a man's role in the family, noting:

"If there's a broken family, there's a broken community. There will be a broken church, and a broken church will become a broken society out there. And that family starts with the head in the family, which is us [men]. And the males are really there to give direction. But if you don't know, if that [guidance] wasn't given to us, how to lead your family, you won't be able to give that." [Adult male stakeholder]

For him, like many others, the patriarchal structure of the family is core to maintaining order in the community, and if this is missing, it will result in the lack of social cohesion so evident across many townships. This notion of fragile communities and dysfunctional families was highlighted by many as further exacerbating the violence in the home. In a focus group one of the participants said:

"So, he doesn't have work, he is unemployed. He has needs, his wife has needs, his child has needs. They need stuff in the household also, but he can't provide.

So, they [are] putting tension between him and his wife, and he beats her up so badly..." [Adult male, FGD]

Some spoke about men also controlling the child support grant, particularly when he is unemployed. *"Die vrou moet die geld gee"* [the wife must give the money] highlights the control over finances by men and speaks to the position of men vis-à-vis women, where intimate relationships are predicated on power men have over women. The coercion and control of women in relationships appears to underscore this dependence.

> *"Most of them control the money, especially if the woman is…is uneducated, or sometimes the woman is scared, as is the case with most relationships in this place. Women are prone to taking a man who…that man controls her just like that. She is even scared, she can't do anything, 'of ek gaan jou steek, of ek gaan jou skiet, jy kan my ook nie los nie'* [or I will stab you, or I will shoot you, you also can't leave me]." [Adult male, FGD] [Translated from Afrikaans]

> *"When the mother is working, he is waiting for the mother down there at Shoprite and take all the money and then he is going to please his friends and then she was working the whole day. She gets her pay, but the boyfriend took the pay."* [Adult stakeholder]

Violence and control conceptually are viewed as a means to achieve characteristics that are associated with being "the man of the house". Success in maintaining control over women underlies the gendered order in society that most aspire to uphold (Wood et al., 2008). This need to maintain power and control in their intimate relationship appears to be related to their relatively powerless position in other domains of their lives.

4.3.5   Cultural and religious expectations and the role of women

References to cultural and religious norms are also sometimes used to reinforce or justify gender inequalities. A religious leader argued that religious leaders have an important role in shifting and challenging how violence in the home is perceived. He noted that *"many people [in these communities] were brought up customarily or traditionally, that when it comes to women, they can do this or can't do this or that"*. He further argued that there is a misconception that these norms are based in religious teachings *"and that needs to be changed"*.

Another participant noted that religion is used by men to keep women subservient – where women are viewed as having less value than men – and that this is said to be specified in religious texts. Similarly, a few participants noted the role of socialisation

and how girls are "taught" to be non-violent while boys' use of violence is promoted. In reflecting on social norms around gender roles, one participant explained that:

> *"They [men] can't express their feelings because they have been raised to believe men don't cry. Just like laughing and crying is a normal emotion, which softens us inside… they believe that they are supposed to hid[e] it away because they are supposed to be always strong because they are the men. So, they feel they can't cry in front of their wives nor even say sorry."* [Adult female stakeholder]

A number of participants spoke of the role parents play in perpetuating gender norms in how they raise their children. One felt that this can lead to an internalisation of emotion that in turn can lead to anger and aggressive behaviour in men, as they have been raised to believe that not showing emotion is a sign of strength and that crying is a sign of weakness.

Another religious leader noted that in the community he serves, there is still a belief among women that *"the husband must hit her"*, and that children should be similarly disciplined. Another religious leader spoke about how men feel superior to women, saying:

> *"The cultural thing is when men feel they have more power, the women need to submit, the woman need to do whatever men ask them to do and they have been robbed of their identity."* [Adult stakeholder]

He noted, however, that this was not his belief, and stated that *"men need to respect women"*.

4.3.6   Norms regarding families

The widespread underreporting of domestic violence and abuse in the home is well described as the submerged part of an iceberg (Gracia, 2004). This suggests that the high prevalence of reported domestic violence and abuse in the home is only the tip of the iceberg and what should be the focus is the high proportion of cases that are not being reported. It further illustrates that it is these cases that remain unseen, submerged within the collectively understood privacy of the home.

As noted above, the private nature of domestic violence and sexual abuse perpetrated by family members or persons known to the family provides the perfect environment for hiding the violence from the outside world. In considering the nature of domestic violence, one young participant explained:

"Sometimes we don't know, and it happens in the house." [Young female, FGD]

The nature of domestic violence is that it most often takes place in the confines of the home and is unseen by those outside. This can extend to the different ways a person asserts themselves within the home and how they engage with others outside of the home. One participant shared the difficulty in speaking out or having others believe that she is being abused because the perpetrator displayed different characteristics outside of the home.

"The way he speaks he is eloquent, he is conservative. But in that [those] four walls that we had, he was the most abusive man ever. And he would go on a total rampage and people would think she is the problem. But they did not actually know he did it." [Adult female, FGD]

4.3.7   Hidden nature of sexual violence in the home

Sexual abuse in the home environment, especially abuse perpetrated against children or by children against other children, often remains hidden. There are many reasons for this, including that the abuse is not recognised, the individual experiencing the abuse does not disclose it, or the family reputation is prioritised over the needs of the survivor.

A participant shared their own experience of sexual abuse being perpetrated against them in the family home, and how they were only able to speak out about the abuse once it had stopped. They further acknowledged their own feelings of needing to protect the family from having to choose between protecting the child or keeping the family's reputation intact.

"I think at the age of 19 was when it actually stopped; but it completely stopped, and I had a serious conversation with my dad ... You can't really trust that your family is going to protect you because what can they do? They have to protect you from their own so that is one form of abuse that people don't really necessarily think about." [Adult female, FGD]

The shared social norm of protecting family honour sustains the use of violence and abuse in the home. It prioritises the honour of the family over the safety and wellbeing of the women and children in the family environment (Perrin, et al. 2019). It further legitimises the silencing of victims of abuse to protect the family's reputation to those outside of the family (Perrin, et al. 2019).

4.3.8 Parent-child communication styles about sex and sexuality driving violence

Furthermore, sex and sexual abuse are not topics of conversation that are encouraged in the home or community. The avoidance of this topic within the home, especially with children, contributes to a narrative that sex is shameful and dangerous. It leaves children unprepared and encourages them to seek information elsewhere, from their peer groups or through media. Yet, a dichotomy exists as the accounts by many in this study talk to children being exposed to sex in the home and community, yet it is taboo topic.

This makes it difficult to disclose sexual violence to families who prioritise propriety over the voices of children, as explained below.

> *"Back then, in those years, our parents never spoke about periods, 'oor vroumense tipe goed nie, nè' [about womanly things, you know?] You were left to find out for yourself [...] But it's things that we speak about with our children from childhood already, openly, and you sit with them, but the communication in our homes is taboo."* [Adult female, FGD] [Translated from Afrikaans]

The accounts of many suggest that in homes, there is limited communication about sex and reproductive health, especially with children, and that these topics are considered off limits or 'taboo'. Where conversation does occur in the home it is focused on shutting down conversations rather than encouraging a learning dialogue. One participant shared an experience of a discussion with a peer being stopped by a parent, saying:

> *"I remember speaking to my best friend, her mother overhearing and her mother is like, 'nee maar jy kan nie van sulke goed praat nie. Hoekom praat jy van daai goeters?' [No, but you can't speak about such things. Why are you talking about that stuff?] It is taboo, you can't speak about it."* [Adult female, FGD]

Participants described how, when these topics do come up, discussions take place in a child-like manner that omits the actual names of reproductive genitalia, rather opting to use alternate terms to penis and vagina. The suggested taboo around discussing sex and reproductive health in an accurate way poses a challenge when there are cases of sexual abuse, and a child is unable to verbalise what occurred using the correct terminology. (Burrows & Powell, 2014)

> *"My daughter had a nappy rash when she was still on the nappies and she came to me like, one-and-a-half years old, and she said, "Mommy, vagina is sore". And my sister-in-law was like, why is she saying that? I was like, why can't she say that?*

It is her vagina, it is not a penis…[inaudible] She said, no, but give it a cute name, why must she be so explicit?" [Adult female, FGD]

This intersects with the social norm of not speaking out about the abuse and or violence experienced. The avoidance of conversations about these topics in the home discourages children and adults from seeking help if they do experience sexual abuse or IPV.

4.3.9 Positioning of children in families

Power, control, and oppression not only shape the relationships between men and women, but also between parents, caregivers, and children, giving rise to a hierarchy where men are superior to women and children (Namy et al., 2017). To understand the gendered nature of childhood, it is necessary to appreciate that families reinforce a patriarchal structure that devalues not only the position of women and children but operates on their expected social roles and behaviours determined within a society predicated on male privilege (Maternowska et al., 2021). Namy and colleagues (2017) also show that: "the patriarchal family structure creates an environment that normalizes many forms of violence, simultaneously infantilizing women and reinforcing their subordination (alongside children)." In turn, male power is maintained through the demonstration and reinforcement of violent practices to subordinate family members and is legitimised as a mechanism of social control. Intersectional feminism helps to understand that mothering also reflects existing power relations maintained within societies, with mothers having power over children and this can also lead to violent practices.

A few participants discussed how this power and control spill over into the parent-child relationship. This gendered socialisation of children also drives the gendered pattern of behaviour that is expected of children, as a religious leader described:

"And so many times, women believe the husband must hit her. So many times, the woman believes the child must be like that, must be treated like that…Or a boy child must not cry. And that is what the people will tell them, 'jy is a moffie' [you are a faggot]." [Adult stakeholder]

Social norms also drive expectations of young people, such as pushing them into committed relationships and marriage when they are not yet ready for those responsibilities, with an adult participant saying:

"You are just dating the guy and all of a sudden, "when are you guys – you are doing this for too long". And that is also how women get trapped into a situation that they don't want to be in, because they are conditioned to think that they must be someone's personal [inaudible] or whatever." [Adult female, FGD]

4.3.10 Discipline of children

Many participants discussed the notion of a shift in who is allowed to reprimand and "discipline" children. This change in social norm appears to be related to the way in which traditional values such as ubuntu have been eroded, particularly in townships, where lack of social cohesion is prevalent in many communities across South Africa. The concept of ubuntu has, for many, become synonymous with social cohesion, nation-building, and is seen as the act of being human, caring, sympathy, empathy, forgiveness or any values of humanness towards others (Baken, 2015). The idea that social cohesion is important to rebuild a fragile society is important, as one adult participant explained:

> *"If I am going to try and discipline your child, I am going to be the one that is going to be in trouble by that child's parent, and then there is a fight. Whereas the child was in a certain kind of danger in that moment and because you're seeing the child as maybe your kid's friend and that you also care about and you are trying to protect this child and say, hey no, stop throwing stones. You get the backlash from their parents. Like, why are you telling my child what to do? You are not its mother…but they are not disciplining their kids."* [Adult female, FGD]

Nevertheless, the use of physical punishment as a means of discipline both in the home and school is still widespread across South Africa (Burton et al., 2016). IPV and violence against children often co-occur as the social and cultural context that permits the use of physical punishment similarly fosters the use of IPV and tolerates men's violence towards women. In the same way, men's use of violence and controlling behaviour towards an intimate partner often extends to the use of physical punishment to discipline children.

> *"I am a parent and I don't believe in corporal punishment but it can be effective, you know. When you do it the right way, of course. So, that's the thing. There isn't a right way but, I mean, you hit a child on the bum and that should be, you know…not beating you up and you ending up with broken ribs or broken bones or hand marks or whatever the case may be. That is not right."* [Adult stakeholder]

The notion that physical punishment can be administered in the "right way" and is therefore justified under certain conditions is not unusual. Yet, there appears to be a disconnect with how parents respond to discipline by others.

> *"I know what parents are like when it comes to their children, 'die is my kind, los my kind'. I understand all of those dynamics, but aren't we adding to the problem by disciplining them with violence? They are already exposed to that at*

home and is that not going to agitate the parent even further if we do hit their child? They want to hit their child at home but now I touch their child and now there is all of this dynamics involved in that." [Adult female, FGD]

In the accounts of young people, they report that both parents take out their frustration on their children, saying:

"Sometimes it might be that the parent or guardian or someone has stress and then they take the stress out on the child. Maybe the child did nothing wrong and then they just lash out on the child. It might be stress or problems that they have." [Young female, FGD]

However, some young people also viewed corporal punishment as acceptable in some instances and different from violence, noting: "*Because sometimes they hit them and not in the right way, I think*".

4.3.11 Parenting and children

This lack of respect for children is also reflected in the parent-child relationship and prevalent parenting styles in South African townships. While South Africa has moved to protect children's rights in policy, for instance through the Children's Act 2005 (Act No. 38 of 2005) and other policy frameworks, many South Africans appear to hold patriarchal views that objectify children rather than prioritise their nurturance and development (Richter & Dawes, 2008). Harsh, cold and inconsistent parenting is evident across the accounts. Harsh parenting increases the risk of children developing both externalising disorders (behavioural problems such as aggression) and internalising disorders (anxiety and depression), with serious lifelong consequences such as on the ability to succeed at education, as well as the ability to maintain intimate partner relationships and their own parenting capacity (Ward et al., 2015).

A few participants spoke about how harsh and punitive forms of parenting affect children's ability to disclose what is happening in their life, such as experiences of bullying and sexual abuse. Children fear that they would be blamed or punished by the caregiver or not believed (Mathews, Hendricks et al., 2016). Parental responses following disclosure range from being supportive to blaming and punishing the child, exacerbating children's feelings of powerlessness (Mathews, Hendricks et al., 2016). One adult female participant said:

"From four, this is how it started, and it is from the day that I turned four. So, because you are not speaking about it, you don't know how to process it. You know if you say something then they are not going to believe [you] and say you are always a liar. You know that whatever people do to you they are entitled to

do it, because that's just the way it is. But you are not entitled to speak out. You are not entitled to look for help or get support." [Adult female, FGD]

These feelings of powerlessness among children are exacerbated as large numbers of children in South Africa do not live with their parents. Importantly, mothers play a critical role in protecting children from harm (Plummer, 2006). Yet, the accounts by participants describe some mothers who are not co-resident with their children, and many children are raised without a biological father and are left in the care of grandmothers or aunts who take on the parenting role. Some participants spoke about this practice being very common and described it as emotionally abusive, as explained by one adult participant:

"The fact, how do you encourage a household with that kind of emotional abuse? Where the grandma sits with the daughter's children. It is totally, completely unfair. Even like the shooting that happened the other day, that grandma had to do a funeral. Not even the daughter or father had a say because the grandma would say, I took care of them." [Adult female, FGD]

A study exploring the pathways to violence against children in South Africa found that not having a parent in the household increases the risk for experiences of violence during childhood (Mathews, Govender et al 2016). Since one in five children live without a parent in the home nationally (Hall, 2019), family formations and children's risk for experiencing violence require further exploration in South Africa.

4.4   COMMON AND COMPOUNDING EFFECTS OF VAC AND VAW

When discussing the effects of VAW and VAC, participants recognised the similar emotional, psychological, and physical effects of violence in the home on women and children, and the negative impacts on their ability to function in different spheres of life. An adult stakeholder described the negative effects of violence on everyday functioning, noting:

"It affects the women and children because the children must go to school, and they can't focus on their schoolwork. That is why their grades go down and down. Even if the woman has to go work, she can't because she was stressed in the night before. It is a big problem." [Adult stakeholder]

Participants spoke of both women and children becoming withdrawn and isolated, with negative impacts on their self-esteem and confidence and increased anxiety. Some spoke of younger children being "*clingy*" or "*naughty for attention because they need*

attention". They also spoke of women and children feeling powerless and living in fear or walking on eggshells because of violence in the home, with many mentioning children not wanting to return home from school or preferring to stay on the street as a result. As one adult stakeholder explained, "*Sometimes you think your house is safe but now you have violence in that house also*", while another adult stakeholder described her own experience as a child as follows:

> "*How do you go as a kid to your classroom, and you go and focus, knowing in your mind tonight if I get out of school, [something] is going to happen…There is going to be a fight, there is going to be something. I need to go and sleep by the neighbour's house. I need to go to my grandparents' house. It affects you negatively.*" [Adult stakeholder]

As shown above, participants recognised that witnessing violence in the home (even when they are not necessarily the target) also has negative impacts on children, and that this may manifest in different ways.

> "*The child now becomes very quiet, that is the kind of eyes that tell you something is not right…or sometimes when they come the child is crying and screaming and you can see on the mommy that her eyes is blue [bruised] and pale. So, when the parent is finally gone, I can see that something has been going on from what the child will tell me. And sometimes the child is scared to come to us, because they fear about their mummy's safety at home. So that is why they would be crying, and they would say "maybe my daddy will kill my mummy*". [Adult female stakeholder, FGD]

As noted by this stakeholder, many participants recognised that children may respond to harsh parenting and violence in the home by internalising – become withdrawn and isolating themselves – or by externalising and becoming aggressive. There was also recognition of the gendered effects on children, with talk of boys becoming aggressive and bullying other children or potentially joining gangs as they grow older. As one adult stakeholder put it: "*If he goes through abuse somehow, he's going to find a way to also get this anger out.*"

Another participant described his own experience at the hands of a bully at school but explained that the bully's behaviour was "*because at home he does not get love*". Several spoke about a lack of care and affection at home and noted the negative effects of verbal and emotional abuse, which are seen as commonplace.

> "*'Ek wil net praat oor' [I just want to speak about] emotional and verbal abuse and that…like your people break you inside. The more you're being verbally*

abused, the more you break inside. Later on, you're so broken that you lose a sense of life. It's just like…it's like worse, worse, worse than, it's even 'harder dan vuiste' [harder than fists]." [Adult male, FGD]

In some accounts, participants referred to ways in which women and children may see themselves as having some responsibility for the violence they experience or witness:

"…Through this programme we had to attend counselling and only in that first counselling session did I realise that what I was carrying, it was something small. It like, it was a drop in the bucket, but I needed, someone needed to tell me that it's okay. It wasn't your fault. You did nothing wrong." [Adult female stakeholder]

Another effect of violence in the home that participants noted for both women and children was becoming *"hard"* or developing *"a protective barrier"* around themselves, and in some cases a lack of care for themselves and others. Referring to women who experience IPV, one participant noted:

"They don't care about the children anymore. They just go on living, that's all. Most of the time it's also why women also starts drinking or starts abusing drugs because by me being drugged I won't feel what he's doing. By me being drugged as well, I don't care what's happening." [Adult female, FGD]

An adult stakeholder spoke of her experience with older children and explained how *"because they don't know how to handle the abuse, so they try to distract themselves by cutting their body"* – suggesting internationalisation of the experiences with long-term mental health effects. Others spoke of the negative impacts of violence on multiple relationships in the home, with children blaming male perpetrators for the violence, and/or females who they perceive *"wil niks daaran doen nie"* [don't want to do anything about it]. There were also some gendered expectations of boys "standing up" to their fathers (or father-figures) to protect their mothers, but also a recognition of the negative effects on a child's self-esteem when he is unable to stop the violence.

Participants also clearly recognised the longer-term effects of exposure to violence in childhood on mental health, particularly when there are limited opportunities to process or resolve the impacts. Several highlighted the need for counselling, as one adult stakeholder explained:

"I can guarantee you they cannot go through life easily or in a better way without counselling. Many a times you will see that that person that was raped or that person that was abused or in a violent abusive relationship, they tend to use drugs and alcohol to survive or to numb the pain. The children grow up in loveless

homes because the mother cannot be a mother. She cannot give that love and affection. The father is out there being a complete jerk, hurting obviously the relationship obviously between father, mother and child…that child is growing up in a household that has no love and will look for love somewhere else…So there is quite a ripple effect to this whole system." [Adult stakeholder]

Young participants spoke of the long-term negative effects of violence in the home on relationships in adulthood:

"Some kids would be depressed, and they would end up being alone. Like [they/he] wouldn't want to be in a relationship because they [are] scared they might beat their girlfriend or their wife, like he saw in his childhood with his step-father." [Young female, FGD]

Participants were also aware that violence and the trauma it inflicts is often not a once-off experience in these communities – as one said, "*een staan nie weg van die ander nie*" [one can't be separated from the other]. Participants referred to poly-victimisation in which women and children are exposed to multiple forms of abuse within the home, or abuse or neglect in multiple settings, such as at home and at school. This has compounding effects which many in these communities do not have an opportunity to process or address, leading to negative coping strategies to survive. One adult stakeholder described this in the case of children as follows:

"They give up because they feel there is no love, no love at home nor school… now the children, they show the signals but nobody's picking them up, now they feel there is nobody for them. And then they start to go to drugs, start smoking, they feel they are now on cruise, that they are free to do anything they want because nobody is looking out for them." [Adult stakeholder]

4.5 CO-OCCURRENCE AND INTERGENERATIONAL EFFECTS OF VAC AND VAW

Participants also recognised the co-occurrence of VAW and VAC in households. The literature highlights how this co-occurrence is shaped by the presence of common risk factors and underlying social norms in homes and in the community (Mathews, Makola et al., 2021).

Studies, including those in the Global South, show that a history of partner conflict in families is associated with a greater risk of child abuse (Dalal et al, 2010; Fulu et al., 2017). One adult participant spoke of her own experience of IPV and how she decided to leave

the marriage despite family pressure because she felt that staying "would have opened a door for his children to be abused and I didn't want that". Examples participants gave of the co-occurrence of violence against women and against children included both fathers as perpetrators of violence against both, and mothers who in turn were aggressive or used corporal punishment with their children, as illustrated in the quotes below:

"…the women are being abused and then the children also experience that, they are living in that fear of being in that home…So ja [yes], there is a link between that, because they see very similar things and they carry it over to others. Also… when the father is abusing the mother, children know that if they stand up for their mother [he] will also hit the[m], and this is happening with the women as well, where the father will hit the woman if she stands up for the children also." [Adult female stakeholder]

"How could I give them a hiding just because they are crying? Because he is giving me a hiding. So, they are big now and they say, mommy, [he] used to hit you a lot but why did you hit us?" [Adult female, FGD]

In addition, some referred to potential gender differences in the experience of violence against children. For example, a young participant argued that physical abuse is a more likely outcome for boys, saying:

"I can say it's not just boys that try and stop fights [in the case of domestic violence], it's girls also sometimes that try and stop fights. But instead of, in some circumstances, instead of the father hitting the child, he will push her away and tell her go to your room or something like that. But he won't, in some circumstances, he won't beat her because she is a female, she is small, and it makes me sick." [Young woman, FGD]

Participants also spoke of the co-occurrence of different forms of violence – such as physical, sexual, verbal abuse or neglect – within a household.

Participants also demonstrated an understanding of the intergenerational effects of violence against women and children. Participants reflected on a child's exposure to violence in the home and how it shapes their use of violence in their adult relationships. One adult participant shared how exposure to a father's use of violence models the use of violence as a 'normal' response in the home:

"Maybe the father's father used to beat his father and now the father in the house is also beating and now the generation[al] curse that is just passing on…" [Adult female, FGD]

Violence experienced in the home therefore provides a potential mechanism for the transmission of violence between generations (Mercy et al., 2017). Experiencing child maltreatment and witnessing partner abuse in the home as a child increases the risk for becoming both a perpetrator and victim of sexual and intimate partner violence as an adult. The evidence shows that boys learn to use violence and girls learn to tolerate it (Fulu et al., 2017; Mercy et al., 2017). The means whereby children who witness violence between parents learn to perceive such violence as a normal part of family life is underpinned by learnt behaviour and the gender socialisation processes. This is confirmed by research from South Africa that found boys who witnessed domestic violence are more likely to perpetrate violence within the community and intimate relationships (Abrahams & Jewkes, 2005). In addition, a multi-country study found that both boys and girls who experience or witness violence are more likely to become neglectful or abusive parents, and to use harsh parenting with their own children, creating a vicious intergenerational cycle (Fulu et al., 2017).

Study participants emphasised the role of learnt behaviours, namely that children learn that anger and aggressive behaviour are part of resolving conflict and this can lead to the child not being able to manage their own anger, both in childhood and as an adult. As one young participant explained:

> *"Seeing violence in the home and parents fighting…it might have a negative impact on the child because he will think it's okay to fight with somebody and it will also have an effect on his behaviour also. So, if he might go to school and he will think it's okay to fight with the girls and maybe with the boys. So, it all starts at home."* [Young female, FGD]

As noted previously, participants also noted how exposure to violence in the home contributes to a normalisation of violence in which women expect violence to be part of intimate relationships, with young female participants noting: *"It will become a pattern because they will think my father hit my mother, so, it's fine that if my husband hit me, it's fine."* The role of parenting norms in supporting the use of violence was also noted, with one participant referring to the ongoing intergenerational effects as a *"chain reaction actually, because why, we grow up with this and now you're a grown up, you think that which happen in your house, that becomes the norm"*.

Another referred to the intergenerational effects of a lack of care and affection in the home and the impacts of verbal and emotional abuse, saying, *"So now, you can't give to your child what you didn't receive."* As a social worker explained:

> *"If you look at the cycle that goes on when you come from this community… there is lack of education, especially with the parents, and they don't know how*

to talk to their child, so to them it is a norm to swear in the way they talk. So, that cycle goes into your household…some of them don't get that type of affection and they have not been taught how to be loved or showing love as children. So now, they grow up in that type of atmosphere and then they will start doing the same thing to their children. So, the cycle goes on and on…" [Adult female stakeholder]

Another stakeholder summed up the potential intergenerational effects of violence in the home as follows: *"It can go two ways…she can get out of it, or she can just get lost into the cycle of mommy."* This recognition that the pathways through which intergenerational effects occur are complex (Mathews, Govender et al., 2016) and that this cycle can be broken was also expressed by young participants:

"They can also grow up thinking I can behave better than my father was. So, it is not every time all children that is going to be like that." [Young female, FGD]

4.6   COMMON FAMILY AND COMMUNITY RESPONSES TO VIOLENCE IN THE HOME

This section focuses on the intersections of responses to violence against women and children in the home, as well as strategies that can address or prevent both in the home.

4.6.1   Family and community responses and changing community dynamics

The frequent silence of families and communities regarding violence in the home and how this allows violence to continue unchecked has been noted in the discussion of social norms above. In this context, some participants viewed community leaders and neighbours as vital for responding to violence, explaining how survivors often look outside of the home for assistance (Lamb & Snodgrass, 2013). As one adult stakeholder put it: *"Don't stay there in the house, maybe somebody can help you outside, but in the house, they can't help you."*

Participants described how victims disclose abuse and seek assistance and advice from external family, teachers, and religious leaders, among others, as a first step to accessing support. However, as noted, domestic violence is seen by many as a private matter and these appeals are not always met with action, for various reasons.

This persistence in believing the best in upstanding community members and trusting them with disclosure coincides with what some described as changing community and family dynamics, which they felt have resulted in a more apathetic response from

community members to abuse. Several participants noted how these communities have changed from caring, involved environments to more aloof and distanced ones. Communities are considered not as responsive as before, with individual community members often becoming bystanders or ignoring abuse amidst a fear of backlash (Lambrechts, 2012). As a youth leader explained:

"I would say what I remember from being a child, when somebody's being abused, the whole family comes and flocks that house…we're going to sort this out and you're going to go to the police. Now, if someone comes, if my uncle comes…wow, you're here." [Adult stakeholder]

The same stakeholder went on to explain how, where violence against women and children used to be met with drastic responses and harsh attitudes, it is now shrugged off:

"It used to be much worse. Where a guy who rape[s] a girl, for example, would not be able to enter the community ever again. Now, I know people who would stay next to a rapist and it's like okay, we just don't talk to him, it's fine. You know?" [Adult stakeholder]

In the case of domestic violence in the home, when there are repeated incidents, there may be a sense of compassion fatigue which decreases the likelihood of future intervention, as women are then seen as "choosing" their circumstances. As another adult stakeholder noted:

"I think it's because today they fight, tomorrow they're back together again. I think that's why the neighbours doesn't [sic] get involved. Because they are fighting now, tomorrow you see them, you understand, she forgives him." [Adult stakeholder]

Participants noted that frustration arises when the pattern of abuse continues despite intervention, which is then seen as ineffective. However, some participants gave examples of how communal parenting continues, with community members intervening on behalf of children:

"Some community people would take the child and give the child up without the parent's consent, because the parent is like beating the child and then they would take them to foster care for people would look after them better than their own parents would do." [Young female, FGD]

4.6.2   Differing perceptions of the agency of women and children

While participants viewed violence in the home as unacceptable but "normal" or widespread (as discussed in the section on social norms), some contended that there are differences in how violence against women and violence against children is perceived. While there is a perception of women having agency and "choosing" their circumstances as indicated above, when it comes to violence against children, *"there is a little bit [of a] difference because children are more vulnerable"*.

According to another adult stakeholder:

> *"I do believe it is a bit different because obviously children, they are innocent, whereas people feel okay, it is just a woman […] I don't believe it gets that much support. Unless it is now someone that has a good reputation or that is well known or whatever the case may be. But the average woman she does not get that sort of attention or support from the community."* [Adult stakeholder]

These differences in the perception of violence against women and children were seen to affect the level of response and support received from the community. The concept of Ubuntu or communal identity (Baken, 2015) was described by some as more prevalent in response to children than women, with communities being more responsive to children in danger, as in the example above of informal fostering of children from unsafe homes. Furthermore, examples were given of how the patriarchal and misogynistic social norms prevalent within communities often lead women to blame each other for their own abuse, in the form of patriarchal femininities (Steenkamp, 2019).

However, despite these perceived differences, participants also described experiences in which children too were blamed for violence and abuse against them in the home, as related by an adult participant who had experienced abuse as a child and was described as 'promiscuous' at age four.

4.6.3   Response of services

In discussions with participants about how their communities responded to violence against women and violence against children, participants often referred to the role of services such as the police services, courts, social workers, and schools. A discussion of the effectiveness of these role players in addressing violence in these communities – which is complex and includes criminal activities, gangsterism and vigilantism – is beyond the scope of this study.

However, it was clear that there was dissatisfaction with the response to both violence against women and children in these communities, with accounts of perpetrators not being held accountable even when violence was reported, limited coordination between services, victim-blaming and a lack of sensitivity, and with some individual service providers sometimes being responsible for harassment or perpetrating violence themselves, despite occupying positions of authority and trust. One young woman spoke about being "catcalled" by police officers in her area and recalled her fear of being sexually molested and not being believed.

Participants spoke of the role of social services (both state and civil society organisations) as key responders to violence but noted that these services are not always accessible. Several also related anecdotes of some service providers assisting survivors in their personal capacity and opening their homes.

Schools were also viewed as playing an important role in identifying and responding to cases of violence against children, and as an important arena for implementing prevention strategies (Mathews, Achyut et al., 2021). However, both adult stakeholders and young participants noted that intervention by teachers is not always welcomed by parents, who may try to stifle children's disclosure to teachers because family life is seen as private.

4.6.4 Perceptions of protective factors and violence prevention strategies

This section provides insight into community perceptions of how violence in the home could be addressed in these communities. In the context of the socio-ecological model (Bronfenbrenner, 1979) used as a framework for understanding the complex nature of violence, the participants' responses spanned individual, relationship and community level strategies for violence prevention.
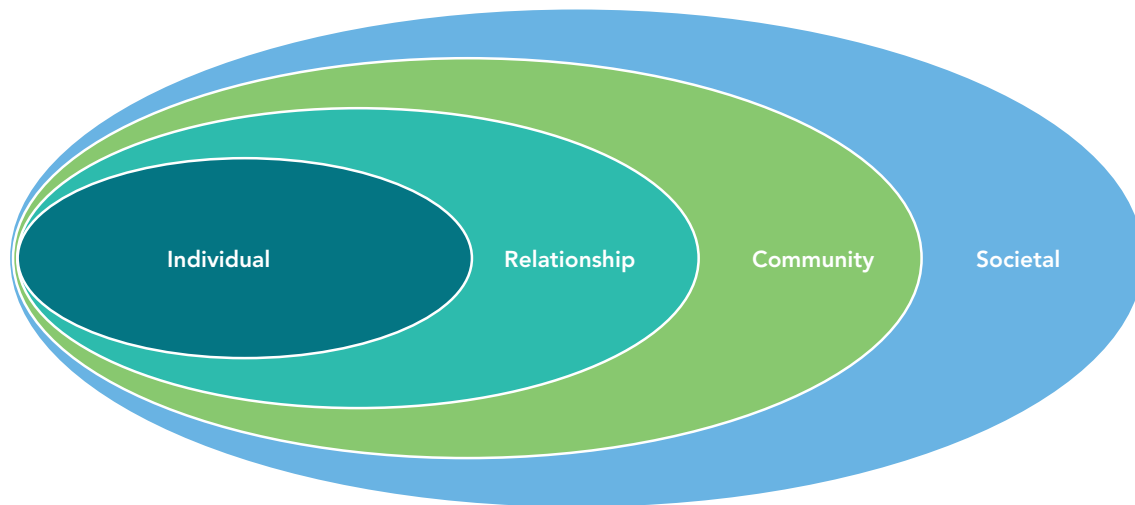
Figure 3

Figure 3:Centres for Disease Control and Prevention (undated). The Social-Ecological Model: A Framework for Violence Prevention. Atlanta, GA: CDC.

Participants identified several protective factors for violence against women and children at the individual and relationship levels. Protective elements included support to address low self-esteem and isolation, and, as an adult stakeholder noted in relation to perpetrators as well, "*having a platform where they could address their issues, get help and obviously the necessary follow up*". The role of support systems – whether faith-based or community-based groups, or family and friends – was frequently noted as a protective factor. As another adult stakeholder observed:

> "…*Once the cycle is broke[n], then the woman can get her support system back, then she becomes whole again, then she can see through that man…*" [Adult female stakeholder]

Identified sources of support included social workers or teachers at school, or religious leaders who may be able to bring their moral authority (and 'independence') to bear in certain situations. For example, one adult stakeholder argued that, in the context of gangsterism, religious leaders sometimes have a moral influence in areas where other authority figures may not be at liberty to operate.

Other individual or relationship level protective factors identified for both women and children included working with families to create opportunities for improved communication and processing of emotions and challenges within the home and strengthening of parenting skills. This is because, as a religious leader argued, "*if we can fix the family, we can fix the community, because what happens in the house spreads out to a community.*" Young participants emphasised the importance of improved

communication between partners, observing that men can handle "the situation differently" and should rather say to their partner, "my wife, can you just step into the bedroom and sort the problem out.'"

Counselling and having an opportunity to work through trauma was recognised as protective and healing, although there was concern that a focus on reconciliation with perpetrators may not be in the best interests of women and children.

Other steps mentioned at an individual level to prevent (further) violence in the home included confiding in neighbours, looking outside of the family for assistance, taking out protection orders, and becoming formal or informal foster parents to vulnerable children.

At a broader community level, participants spoke of the need for education and raising awareness about violence against women and children, and what can be done to address it. This included the need to involve children in prevention programmes from a young age. Other community level strategies included using social media to raise awareness, communal parenting in the case of children, and community efforts to raise awareness around cases of abuse. However, there was a clear sense that raising awareness or coming together around high profile cases is not enough, and that violence can only be reduced through consistent education, support, and action.

> *"...If we keep a consistency of standing up for women, because the only time when we see that, people is standing on the roads and have the placards against violence and all that […] Something happened! It is only that time."* [Adult female, FGD]

The role of community leaders in preventing and responding to violence was again emphasised, with community leaders seen as being well placed to act as role models for acceptable behaviour, provide sanctuary in their personal capacities, and in some cases, expedite access to assistance through links to SAPS, social services and non-governmental organisations (NGOs) (Lamb et al., 2019).

To illustrate this potential protective role, one participant related her experience of a case in which two girls were abused and their mother did not believe them when they disclosed, so they approached a religious leader. She felt the response from the police was faster and more effective in this case because of the mediating role played by the respected community leader who provided a safe space for the girls to come forward. As an adult female participant working with a community-based organisation explained:

"…You have to be friends with some of the police so that they can come. Now we have got them on speed dial, and we know that now they are going to come, but what if someone else had phoned? [Adult female, FGD]

Not all participants viewed community leaders as playing a protective role, however, with an adult female participant noting that it is often people who are supposed to be role models and who are respected who get away with violence and abuse:

"… [Perpetrators are often] people who are supposed to be role models. Who are supposed to have this high accountability for their actions: teachers, fathers, even mothers, grandparents, priests. You know, all these people that we hold in high regard, that we have all this respect for […] because their negatives [do] not get accounted for, it is deemed as okay so they can get away with it […] No one holds anyone to a higher standard." [Adult female, FGD]

Some participants also cautioned that where community leaders are not informed or educated on the issues, there is a risk of them spreading misinformation that could lead to further endangerment. An example was a community leader who incorrectly thought that a child cannot open a case against a family member until he or she is 18 years old.

Some participants argued that at a societal level, having access to the internet can have protective effects to the extent that it can provide exposure to other points of view which can be beneficial and educational for the younger generation. An adult female participant noted:

"…I may be living in [this area] and it is a confined area and I maybe see this abuse happening here but because of the internet, because we [are] having that exposure, because I know about these laws, because I was there and I went to that workshop and because of all of this, I know that this is wrong and that I can fight back." [Adult female, FGD]

There was also recognition of the need to normalise discussions about the experience of violence against women and children so that people, including children, internalise the message that violence is not acceptable. As one participant described:

"…It's almost like a song when you play it on repeat. Like, the song, they play on repeat until you know the melody in your head, and you start to sing with the song. That's how it must be." [Adult male, FGD]

Similarly, another spoke of the protective effects of survivors speaking out because other survivors *"need to see that hope, because there is a lack of hope"*.

4.6.5 Programmatic interventions in place at community level

Participants were also asked to identify more formalised interventions by government actors, NGOs and community members in these two communities. Some structured, outcomes-based programmes that were mentioned included:

- Education campaigns
- Family support programmes
- Gender-based violence awareness campaigns
- Rights awareness campaigns
- Workshops with men
- Anger management programmes
- Youth mentoring/coaching programmes
- Support groups (separated by gender)
- Ex-offender programmes
- Counselling and school social workers
- Life skills programmes
- Sexual health awareness programmes
- Empowerment programmes
- Fatherhood and parenting programmes
- First 1000 days, prenatal approaches
- Alcoholics anonymous

Participants also mentioned some other less formal interventions such as actors in the justice system using fear tactics to ensure statements are not withdrawn by appealing to a sense of parenthood, women's shelters, feeding schemes, informal fostering, and home visits.

Professionals and community leaders interviewed for the study argued that an integrated community response and whole family approach is needed to address violence holistically. Furthermore, service providers need to work collaboratively and coordinate with different stakeholders to ensure holistic services and open referral pathways.

4.6.6 Gaps in prevention strategies

However, participants also identified several gaps in the services and interventions currently available that could inform potential future programmatic interventions. These included:

- The need for procedural improvements to be made (to cut red tape and increase sensitivity), and for service providers to work collaboratively.
- While members of SAPS bemoaned their dependence on victims to open a case, participants indicated that there is still a gap in responding to abuse. There is a perception of the lack of resources and willpower within SAPS to address violence, both in the home and in the community. Instead of laying charges, survivors prefer

to use protection orders as a preventative measure to get a faster response from SAPS and to help with a conviction after the abuse takes place rather than as a belief that it will offer them actual protection.

◆ Where services for women and children are in place, they may not be accessible to all areas of the community, with some areas also experiencing a lack of referral partners. Money for transportation may be required to access services, which may be unrealistic in homes where male perpetrators often control the household finances.

"They can only go to the clinic and to the police station, the nearest police station. There is no facilitator or NGO that is near to us that can help them. They have to phone somewhere. And by that time, they could be dead. So, I think the government should put more places like that on a specific area or maybe just somewhere closer there where women and children, even men could go to for help." [Adult male, FGD]

◆ As noted above, some participants raised concerns about the need to train religious and community leaders to ensure that they are aware of and educated about the various services available as well as the referral process. As a religious leader highlighted:

"There are a lot of leaders that don't know how to handle this when somebody comes to them and says, I've been abused by my husband [...] Because sometimes people don't want to go to the police, or they don't want to speak to a community leader. And if the leader does not know how to give proper guidance to that family and that person was [thinking], "That was my only hope so, I didn't get help so I will not go and seek other advice". Leaders needs to be trained, needs to be counselled, needs to be informed of how to handle gender-based violence." [Adult stakeholder]

There was also a concern that community leaders who take on such roles should also be properly vetted and held accountable for their actions to avoid potential abuses of power.

◆ Participants also identified a need for more child-friendly institutions where children can access help and support from violence. These include neighbourhood leaders, street committees and other individuals who serve on community organisations who can serve as an access point for children to receive help:

"So there needs to be like people that the children trust and know that they can come to if anything happens in their house and so on [...] it should actually be in

the community, in every road there should be an organisation that you can go to if you need guidance. If you need help. If it sexual, if it is rape, domestic violence. It should be a trusted organisation in every street and that is how we will alleviate a lot of things that is going on in our communities." [Adult female, FGD]

5 CONCLUSION AND RECOMMENDATIONS

The interviews with men, women, and children in these two communities provide insights into what drives violence for many in their homes and communities, and how the social norms underpinning the use of violence provide the context in which violence against women and violence against children co-occurs with impunity, driving an intergenerational cycle of violence. The key findings emanating from the research are outlined in this section.

5.1 DRIVERS OF VIOLENCE AND THEIR INTERSECTION WITH THE NORMALISATION OF VIOLENCE

This study highlights that no single factor drives violence against women and children in these two communities. Through the accounts of men, women, and children we come to see how a web of interrelated factors coalesce to provide the context for these forms of violence to co-occur in the home. Individual factors such as alcohol and drug abuse and unprocessed trauma were all described as common drivers, and these intertwine with household factors such as economic stresses caused by job insecurity or joblessness to provide the environment in which violence in the home can occur. These inter-relationships all contribute to an escalation of tensions in the home and increases the risk for violence by men against their partner and parents towards children.

Of note, in this research we identified drug abuse and unprocessed trauma at an individual level as important drivers that are not well documented in previous research. This is not a surprise as the high levels of substance abuse (both alcohol and drugs) in communities across the Western Cape is widely recognised (Pengpid et al., 2021). Overcrowding in homes with multiple families and generations living in the same households or on the same stands emerged as an important factor driving the intersections of VAC and VAW, and child sexual abuse in particular. Importantly, this risk was not previously described as a driver of the intersections of VAC and VAW. Nevertheless, overcrowding is a consequence of poverty and the socio-economic living conditions many families are subjected to in townships across South Africa (Hall, 2019).

High levels of gangsterism plague both communities and contributed to the overwhelming finding that violence is a part of the daily experiences of men, women, and children. Although many participants described the negative effects of violence in the community, their accounts were also juxtaposed with a tacit acceptance of violence both in the community and in the home. This was highlighted by actions of not intervening when violence is witnessed and acting as bystanders. In addition, our findings also suggest that violence in the home is still construed by many as a private matter for the family unit to resolve. These factors all contribute to the silencing of victims of violence and contribute to the normalisation of violence both in the home and community.

5.2   INTERGENERATIONAL EFFECTS OF VAC AND VAW

Most men, women and young people recognised that violence against women and children co-occur in the same households and that exposure to violence for children starts early. Forms of violence children are exposed to included witnessing intimate partner violence against their mother, exposure to conflict in the home and experiencing direct violence in the form of corporal punishment, while sexual abuse was commonly spoken about as a hidden form of violence that often goes unreported. The silencing of reporting of child sexual abuse also drives unresolved trauma for many young people, which emerged as a significant issue that impacts psycho-social functioning into adulthood (Maniglio, 2009).

The co-occurrence of VAC and VAW was represented by many to drive the intergenerational cycle of violence in the home. The accounts by many were characterised by both a normalisation of violence and the social norms that drive both forms of violence in the home and community and that allow both forms to coexist and reinforce violence practised by men against women and children, and parents against children. Family life was marked by increasing tensions and a heightened awareness of violence. Yet a contradiction existed as many reported silences around violence in the home, allowing for violence in the home to remain undetected.

Growing up in violent households affects children's sense of security and the way they relate to others. When a parent or caregiver inflicts pain and suffering, whether psychological, emotional, or physical, then children begin to distrust all people and have difficulty in forming attachments (Ainsworth, 1969). Furthermore, witnessing violence against mothers also impact on a child's own sense of safety and how they relate to the father figures in the home (Mathews et al., 2011). These feelings of powerlessness are intensified by a sense that they should, but cannot, protect their mothers. In the long-term this affects their ability to form caring relationships. Experience of violence

within households therefore profoundly shapes identities, both masculine and feminine, and lays the foundation for interpersonal relationships in adulthood. Children model the behaviours they see. Therefore, witnessing violence in the home also increases the risk of perpetration (Abrahams & Jewkes, 2005). Boys who witnessed domestic violence are more likely to perpetrate violence within the community and in intimate relationships (Abrahams & Jewkes, 2005). A multi-country study found that both boys and girls who experience or witness violence are more likely to become neglectful or abusive parents, and to use harsh parenting with their own children, creating a vicious intergenerational cycle (Fulu et al., 2017).

5.3 SOCIAL NORMS THAT DRIVE VAC AND VAW

5.3.1 Socially defined role of women and men in communities

The prevailing social environment and cultural context in South Africa provides a space in which men's violence towards women is considerably tolerated (Boonzaier, 2005). Most participants spoke about a remarkable leniency towards forms of violence experienced in the home that appeared in some ways to be socially acceptable (Jewkes, 2002). Many described how socialisation within the communities defined socially acceptable roles early on for both men and women. Women in South Africa are socialised to see men as objects of love, respect, and a source of resources, while "dangerous" men are valorised and given respect (Hunter, 2010; Jewkes & Morrell, 2012). South Africa is a strongly heterosexist society and women viewed as rightfully placed in relationships with men, and many expressed the notion that men are still the "head "of the house and have the power and control in the relationship (Jewkes & Morrell, 2012). Most women are socialized to expect men to control them, and justify men's acts of control and punishment as demonstrations of love (Jewkes, 2002; Wood et al., 2007, 2008). Masculine ideals are therefore actively constructed by both men and women, and women are often drawn to men who display ideal characteristics of the strength and toughness (Talbot & Quayle, 2010). In the context of these poverty-stricken communities, the provider role is emphasized as part of successful masculinity as many women see relationships with men as a means of economic survival (Hunter, 2010). Therefore, economically dependent women are much more vulnerable to violence within relationships and have fewer options for leaving as highlighted by many in these accounts.

5.3.2 Struggles for men to attain the ideals of a "successful man"

The frustration for men to maintain employment and financially support their families was highlighted by many as a key driver for conflict experienced in the home. Poverty and economic insecurity are common experiences by many in townships across South Africa, yet it cannot be used as an explanation for violence in the home or community. The patriarchal nature of families underpins how 'order' was maintained in families and in the community. The attainment of the provider role was considered critical for self-perceptions of masculine 'success' in South Africa, but the lack of opportunities and job losses during the COVID-19 pandemic (when the interviews were conducted) made achieving this difficult (Morrell, 2001). Men therefore controlled family resources even when they were unemployed, causing tensions and conflict.

5.3.3 Parenting and the positioning of children in South African townships

Harsh and punitive parenting patterns are highly prevalent in South Africa and influence the way children are disciplined, with parents less likely to be affectionate to the child and more likely to use corporal punishment as a form of discipline (Ward et al., 2015). These inconsistent forms of parenting practices influence the child's risk for externalising disorders (behavioural problems) and internalising disorders (anxiety, depression), influencing the child's ability to succeed at school and later employability (Ward et al., 2015). The parent-child relationship and communication styles appear to drive a pattern of avoidance of topics such as sex and sexuality, despite many children being exposed to sexual activity in their home from an early age. This silencing regarding sex also drives children's lack of disclosure when sexual abuse occurs in the home or outside due to fear of being blamed or punished (Mathews, Hendricks et al., 2016).

This fear appears to be grounded in the position of children in families and communities. Feminist understanding of childhoods posit that power, control and oppression not only shape the gendered relationships of men and women but also the relationships between parents and children (Namy et al., 2017). This gives rise to a hierarchy of power within households that allows men to dominate and be in control of both women and children – and children remain voiceless in the gendered social order that is driven by patriarchy within families. This patriarchal structure therefore normalises the use of violence against children and silences children – making invisible their experiences such as sexual abuse in the home.

5.4 RECOMMENDATIONS

Understanding the dynamic interplay between VAC and VAW is important to inform the development of interventions that can shift the pattern of these forms of violence in Global South contexts. A number of lessons can be learnt from the insights that emerge from this study, which form the basis of the following recommendations:

1. There is an urgent need to address the normalisation of VAW and VAC in communities through participatory engagement processes that tackle the patriarchal social norms that drive violence.

2. Unresolved trauma as a driver of violence is highlighted and requires services to recognise the need to address both the trauma of victims of violence as well as the broader need to tackle trauma at a wider scale to reduce the effects.

3. Structural factors such as poverty and unemployment increase the risk for conflict in the home. There is a need for universal economic empowerment and poverty alleviation programmes that integrate a gender transformative element to reduce violence in the home.

4. Parenting programmes that integrate a gender transformative element and focus on positive parenting are crucial to reduce harmful forms of parenting and promote responsive parenting practices.

5. Gender transformative programmes with men and boys – but that also include women and girls – need to be prioritised to shift gendered practices to reduce violence in the home.

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