

# Peer-to-peer facilitators' perceptions of gender-based violence in a higher-education institution

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## Abstract

Engagements with peer-to-peer facilitators in a higher-education institution (HEI) highlighted the fact that students have varying perceptions of gender-based violence (GBV). This article explores the pre-intervention perceptions of GBV among peer-to-peer facilitators on a university campus in South Africa. A qualitative descriptive research design was employed and the participants were selected using non-probability purposive sampling. Pre-intervention open-ended questionnaires were administered to 30 peer-to-peer facilitators, followed by three days of training. The data obtained were analysed using Tesch's eight steps. This analysis led to the development of themes and an understanding of GBV, its occurrence and its impact. The findings on understanding GBV revealed that it could affect anyone and manifest itself in physical, emotional, psychological and sexual ways. And women, men and children can be affected. GBV can be directed from women to women, men to men, men to women, women to men and can be associated with sexual orientation. Regarding its occurrence, most of the participants revealed that it occurs on campus and in intimate relationships and that some incidents are not reported. The participants perceived that the effects of GBV can include poor academic performance, students dropping out of their studies, depression, emotional trauma, suicidal behaviours and a violation of human rights. This article discusses the peer-to-peer facilitators' perceptions of GBV on campus prior to their training.

**Keywords:** peer-to-peer facilitators, peer-to-peer, perceptions, gender-based violence, higher-education institution

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## 1. Introduction

Gender-based violence (GBV) is defined as a serious worldwide health issue that targets people based on their biological sex, gender identity or social gender norms.<sup>1</sup> GBV at South African higher-education institutions (HEIs) can take many forms, including domestic violence, intimate partner violence (IPV), rape, sexual assault, sexual harassment, harassment and homophobic bullying. Sexual violence exists on a continuum and many symptoms of GBV, such as sexual harassment, expose underlying unhealthy norms, attitudes and behaviours in both people and society generally. Such norms, attitudes and behaviours are frequently accepted, normalised and even aggravated in an institutional setting. Furthermore, given South Africa's very high rates of sexual abuse against children, many students entering South African HEIs for the first time will have been exposed to or experienced sexual assault prior to their enrolment. In the case of men, previous victimisation increases their risk of perpetrating GBV, whereas for women, previous victimisation increases their risk of re-victimisation.<sup>2</sup> The purpose of this study was to explore peer-to-peer facilitators' perspectives on GBV as members of the university's campus community.

## 2. Literature review

GBV is a public health concern and a human rights violation that affects as many as one out of three women. This is due to gender inequality, which mostly affects women and girls due to their inferior social status in society. Every woman, irrespective of her age, skin colour, religion and economic or social status, is vulnerable to sexual violence and threats.<sup>3</sup> Furthermore, GBV is also defined as a form of discrimination against women that occurs in an academic setting in the form of sexual harassment. France, Italy and Ireland have a strong legal framework in place to respond to sexual harassment in academia. Although it seems to be difficult to combat sexual harassment in other countries, practices related to corporate social responsibility

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<sup>1</sup> A Makhene 'Gender-based violence in higher education: An integrative review' (2022) 10 *Open Journal of Social Sciences* 1.

<sup>2</sup> Makhene (n 1).

<sup>3</sup> ZM Zain 'The awareness on gender-based violence among students in the higher learning institutions' (2012) 38 *Procedia Social and Behavioural Sciences* 133; LB Damous & C Guillope 'Gender-based violence in higher education and research: A European perspective' (2021) 93(8) *Pure and Applied Chemistry* 899; KR van Daalen, SS Kallesøe, F Davey, S Dada, L Jung, L Singh, R Issa, CA Emilian, I Kuhn, I Keygnaert & M Nilsson 'Extreme events and gender-based violence: A mixed-methods systematic review' (2022) 6 *Lancet Planet Health* e504–23 at e505.

could be the foundation from which to initiate social responsibility at universities.<sup>4</sup>

Instead, when viewed in the context of everyday university life, violence is fuelled by hierarchical societies that resist women leaders who have opposing views and practices with regard to GBV. Such resistance exemplifies the way in which masculinist structures work, both publicly and secretly, to stifle change. Simply put, enacting change can be a difficult act for women leaders who are strong enough to speak out against gender inequality.<sup>5</sup>

Africa continues to experience the highest rate of GBV, with approximately 36 per cent of women having experienced it in one form or another. Some women face widespread gender-based violations, including genital mutilation and child marriage. In addition, in 19 African countries, one-third of women aged 20–24 are compelled to marry before the age of 18. Furthermore, the growth of GBV incidents in Africa can be ascribed to societal patriarchy, cultural gender norms, poor literacy rates, poverty, wars, regional and tribal disputes, and limited understanding.<sup>6</sup>

A systematic review study carried out in sub-Saharan Africa discovered that low education attainment, higher alcohol consumption, substance use, a history of child and family abuse, limited decision-making skills, depression, and males having multiple sexual partners at a younger age, are individual and family-related factors that increase GBV experiences. It was revealed that communities had tolerant views about violence, women's unemployment, being Muslim, women having a lower socio-economic status than men, hunger and social insecurity. Low socio-economic status was associated with community-related causes of GBV. Previously, communities in sub-Saharan Africa had tolerated alcohol consumption, low educational status, depression, being younger and having a history of child and family abuse. A dramatic combination of low socio-economic status and attitudes towards violence has been associated with GBV.<sup>7</sup>

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<sup>4</sup> Damous & Guillope (n 3).

<sup>5</sup> RA Gardiner & H Finn 'Implementing gender-based violence policies in the neoliberal university: Challenges and contradictions' (2023) 38(2) *Gender in Management: An International Journal* 215–229 (Emerald Publishing Limited), 216, available at <https://doi.org/10.1108/GM-07-2022-0228>

<sup>6</sup> African Union Development Agency–New Partners for Africa Development (AUDA-NEPAD) 'Leveraging smart technologies to tackle gender-based violence in Africa' (AUDA-NEPAD 2022) 2.

<sup>7</sup> Muluneh, MD, Francis, L Agho, K & V Stulz, 'A systematic review and meta-analysis of associated factors of gender-based violence against women in sub-Saharan Africa' (2021) 18 *International Journal of Environmental Research and Public Health* 4407, available at <https://doi.org/10.3390/ijerph18094407>

## 2.1 Gender-based violence in South Africa

GBV is a serious and widespread problem in South Africa, one that touches practically every aspect of life. In South Africa, GBV is systematic and deeply embedded in institutions, communities and traditions. Although reliable data are difficult to obtain for a variety of reasons, it is widely assumed that South Africa has a high rate of GBV, which encompasses violence against women and girls (VAWG) and violence against the lesbian, homosexual, bisexual, transgender, queer, intersex and asexual (LGBTQIA+) members of the populace. Community-based surveys indicate that intimate partner violence (IPV) and non-partner sexual violence (NSV) are particularly prevalent, with IPV being the most common type of violence perpetrated against women.<sup>8</sup>

Furthermore, 56% of women subjected to GBV were slain by an intimate male partner and a 2009 study revealed that 25–40% of women in South Africa had suffered sexual and/or physical IPV in their lifetime. The prevalence of rape in South Africa is estimated to be between 12% and 28% among women who have reported being raped in their lives. Furthermore, one in every 13 women in Gauteng reported non-partner rape, although only one in every 25 rape incidents were reported to the police. Gang rape is common in South Africa. Meanwhile, between 28% and 37% of men surveyed reported having raped a woman. These men reported that they committed these rapes for the first time as teenagers and in their mid-20s. Although research on rape against women who have sex with other women is rare, studies undertaken in four southern African countries, including South Africa, found that 31,1% of such women had undergone forced sex.

GBV also has significant economic consequences. Increased rates of GBV place a significant strain on the health and criminal justice systems, with many survivors being unable to work or move freely in society.<sup>9</sup>

According to a 2014 KPMG report, GBV cost the South African economy between R28,4 billion and R42,4 billion, or between 0,9% and 1,3% respectively of gross domestic product (GDP) in 2012/2013. GBV in South Africa is heavily driven by patriarchal societal norms and complex intersectoral power disparities involving gender, race, class and sexuality through the political, economic and social systems of society.<sup>10</sup>

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<sup>8</sup> E Dartnall & A Channon 'Gender-based violence in South Africa' (Sexual Violence Research Initiative and the Joint Gender Fund, Saferspaces nd) 2, available at <https://www.saferspaces.org.za/understand/entry/gender-based-violence-in-south-africa>

<sup>9</sup> Dartnall & Channon (n 8); SF Gordon & A Collins "'We face rape. We face all things": Understandings of gender-based violence amongst female students at a South African university' (2013) 11(2) *African Safety Promotion Journal* 94.

<sup>10</sup> Dartnall & Channon (n 8).

## 2.2 GBV in South African universities

Sexual violence on campuses is nothing new in South Africa. As early as the 1980s, students enthusiastically challenged this type of violence.<sup>11</sup> Student activists who oppose GBV and support anti-GBV cultures are gaining attention and concern in the universities' responses to GBV.<sup>12</sup>

The under-reporting of sexual violence makes it impossible to ascertain the actual prevalence of various forms of GBV at HEIs in South Africa. This issue of under-reporting may cause institutions of higher learning not to perceive sexual violence as a major issue and consequently not to institute a concerted response to GBV challenges.<sup>13</sup> Muthinta agrees with Warton and Moore that the failure to report GBV is a key factor contributing to the exacerbation of the scourge; moreover, that it is not helping the fight against this serious social disorder. These authors argue further that the effect of under-reporting is made worse by institutional barriers. GBV at our universities is on an upward trajectory, as is indicated by the research; therefore, there is a call for unity of purpose to intensify the advocacy against GBV and also to provide the care and support required to transform campuses into safe spaces for women students and all other vulnerable individuals.<sup>14</sup>

Evidence shows that South African HEIs have tended to focus on sexual harassment rather than comprehensively dealing with the many varied forms of GBV. In addition, GBV includes harassment, intimidation, property damage, stalking, entry into the victim's residence without consent where they do not share the same residence and any abusive or controlling behaviour towards the victim; and it also includes instances where such conduct harms or may cause imminent harm to the victim's safety, health or well-being.<sup>15</sup> Furthermore, global research reveals that women are more afraid than men of crime and violence at many HEIs. Similar cases are widespread in South Africa, where crime impedes the activities of women more than those of

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<sup>11</sup> G Warton & G Moore 'Gender-based violence at higher education institutions in South Africa' (Safety and Violence Initiative, Saferspaces 2023) 3, available at <https://www.saferspaces.org.za/understand/entry/gender-based-violence-at-higher-education-institutions-in-south-africa1>

<sup>12</sup> R Lewis & S Marine 'Challenges and interventions in the UK: Student feminist activism to challenge gender-based violence' in S Anitha & R Lewis (eds) *Gender Based Violence in University Communities: Policy, Prevention and Educational Initiatives* (Policy Press, Bristol University 2018) 129.

<sup>13</sup> Warton & Moore (n 11).

<sup>14</sup> G Muthinta 'Gender-based violence among female students and implications for health intervention programmes in public universities in Eastern Cape, South Africa' (2022) 8(1) *Cogent Social Sciences* 8; Warton & Moore (n 11).

<sup>15</sup> Warton & Moore (n 11) 2–3.

men.<sup>16</sup> Gender disparities in perceptions of safety and fear of crime on campuses should consequently be investigated thoroughly.

### 2.3 Problem identification

Defining the research problem and outlining the purpose of this study is important. Having observed that GBV also occurs at HEIs, it became clear that a gap exists in the knowledge of GBV among peer-to-peer facilitators on the university campus that is the subject of this study. The authors of this article therefore decided to embark on training these facilitators. The pre-intervention tool was then developed to capture the peer-to-peer facilitators' knowledge prior to the GBV training they underwent.

### 2.4 Purpose of the study

This article aims to explore peer-to-peer facilitators' perceptions of GBV at an HEI.

### 2.5 Research questions

The following research questions guided the study:

- (a) What is your interpretation of GBV?
- (b) What is your awareness of GBV on campus?
- (c) How does GBV affect the campus community?

## 3. Research methodology

### 3.1 Study design

A qualitative cross-sectional research design was employed, using a descriptive phenomenological approach. The researcher team opted for a qualitative research approach because they wanted to obtain depth and richness of data gathered from complicated multiple events in a specific social setting.<sup>17</sup> The intention was not to generalise the findings; instead, it was to understand the context. Phenomenological studies focus on human experiences through descriptions that are given by participants involved in answering questions. A group of participants at an HEI were asked about their perceptions of GBV prior to the GBV training they were put through.

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<sup>16</sup> Warton & Moore (n 11).

<sup>17</sup> F du Plooy-Cilliers, C Davis & R Bezuidenhout *Research Matters* (Juta & Co 2018) 173.

### 3.2 Study cohort

The cohort identified for this research was Walter Sisulu University undergraduate students who are based at the university's Mthatha Campus in the Eastern Cape province of South Africa.

### 3.3 Sampling technique

A representative sample of the target population was selected on the basis of non-probability purposive sampling. Purposive sampling was used with the aim of recruiting participants who were knowledgeable, articulate, reflective and willing to share their experiences about phenomena related to GBV.<sup>18</sup> The participants who were purposefully selected were those who were identified for the GBV training.

### 3.4 Sample size

The determination of sample size indicates the number of people in the sample and the procedures used to compute this number. Qualitative studies are guided by data saturation, meaning that, when gathering data, fresh data no longer spark new insights or reveal new properties.<sup>19</sup> This research was conducted with 30 participants. A total of 17 females and 13 males between the ages of 18 and 26 years participated. All of the participants were single unemployed undergraduate students at Walter Sisulu University's Mthatha campus.

### 3.5 Research instrument

The researchers developed a data-collection tool. The rationale was to understand whether the participants were aware of GBV on their campus before the training.

### 3.6 Data collection

The authors are trained in qualitative research methods and the collection of data. Data were collected using a pre-intervention data-collection tool prior to the GBV training session. Consent was sought from all the participants prior to their participation. The venue used for the study was quiet and conducive to collecting data in the chosen manner, that is, through the completion of a questionnaire. The raw data obtained were stored in a safe locked place.

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<sup>18</sup> Du Plooy-Cilliers et al (n 17) 135, 142–143.

<sup>19</sup> JW Creswell & JD Creswell *Research Designs: Qualitative, Quantitative and Mixed Approaches* (Sage Publication 2018) 186.

### 3.7 Trustworthiness of the data

The trustworthiness of the study was ensured by applying four principles of trustworthiness, as discussed by Lincoln and Guba: credibility, transferability, dependability and confirmability.<sup>20</sup>

Credibility refers to confidence in the truth of the data and in a researcher's interpretation of the data.<sup>21</sup> A study is credible when it presents faithful descriptions and when readers or other researchers confronted with the experience can recognise it.<sup>22</sup> Credibility was ensured through the continuous engagement of the participants.

Transferability is established by the researcher through providing rich information derived from participants, which may allow other researchers to make an appropriate judgment.<sup>23</sup> We provided a thorough description of the research setting and the processes of the research we pursued in order to enable the readers to establish how transferrable the results are.<sup>24</sup> The researchers ensured the transferability of the study and its findings by providing a clear description of their qualitative research methodology.

Dependability is defined as the stability of data over time and between conditions. It is based on the idea that the research findings will be secured if the enquiry is duplicated with the same participants and in a similar context.<sup>25</sup> The detailed description of the data-collection method and the documented method of data coding was provided, forming part of the audit trail.

Confirmability refers to congruence between two or more independent people regarding the accuracy, relevance and meaning of the data collected.<sup>26</sup> This process included an explanation of the research process and a discussion of the sampling method of the participants from whom the data were collected.

### 3.8 Data analysis

The data were analysed using Tesch's eight steps model of data analysis. This method was used to analyse and interpret the findings and to eliminate any biases that might have been introduced. During the analysis, both the male and the female participants were assigned

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<sup>20</sup> Du Plooy-Cilliers et al (n 17) 258–259.

<sup>21</sup> DF Polit & CT Beck *Nursing Research. Generating and Assessing Evidence for Nursing Practice* 10 ed (Wolters Kluwer Health 2017).

<sup>22</sup> P Moule & M Goodman *Nursing Research: An Introduction* 2 ed (Sage 2014).

<sup>23</sup> H Brink, C van der Walt & G van Rensburg *Fundamentals of Research Methodology for Healthcare Professionals* 4 ed (Juta & Co 2018).

<sup>24</sup> Moule & Goodman (n 22).

<sup>25</sup> Polit & Beck (n 21).

<sup>26</sup> Polit & Beck (n 21).



numbers for ease of coding and for the purposes of anonymising their inputs. This analysis led to the identification and development of emerging dominant themes and subthemes.

The Tesch's eight steps used were:<sup>27</sup> first, the participants' responses were transcribed word for word; second, the transcribed information was translated into English and, third, the transcribed responses were read and reread to obtain the meaning of each transcription. Fourth, related topics and codes that emerged were grouped together and the codes placed next to appropriate segments of the text.

Fifth, the codes were clustered into categories and dominant themes and subthemes were created. Sixth, any other topics or codes that emerged were written next to appropriate segments of the text. Seventh, the related topics and the emerging list of categories were grouped together. Finally, a preliminary analysis of the data was assembled by categories that belong to the dominant themes and subthemes that emerged.<sup>28</sup>

The data were organised, prepared, scanned and sorted. Data analyses were done immediately after the data had been gathered. Interpretations were made and the data were prearranged, structured and read through for credibility and depth. In order to achieve immersion, the data were then taken back to the participants for their validation. This enabled the authors to ensure that no information was lost. Then a final version of the transcript was obtained based on the authors' and the participants' checked versions. Three dominant themes and ten subthemes emerged from this process and interrelated themes were discussed. The themes were presented in a qualitative narrative to convey the findings of the analysis. Finally, the interpretation of the data was undertaken.

#### 4. Findings

A total of 17 females and 13 males between the ages of 18 and 26 years participated in this research. All the participants were single. They were unemployed undergraduates and students of Walter Sisulu University, Mthatha campus. Data analysis yielded the following main themes: (1) understanding or knowledge of gender-based violence; (2) the occurrence or manifestation of GBV on campus; (3) the effect of GBV on the campus community. Within each theme, there were a number of subthemes, as indicated below. The participants' responses to these themes and subthemes are set out in this section.

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<sup>27</sup> Creswell & Creswell (n 19) 248.

<sup>28</sup> Creswell & Creswell (n 19).

## Theme 4.1 Understanding or knowledge of gender-based violence

### *Subtheme (i): Defining GBV*

The participants defined GBV in different ways according to their personal knowledge and perceptions. They also indicated that GBV is mostly directed at females and girls, and that it can affect a person holistically. The male and female participants stated as follows:

GBV is the abuse that is most of the time faced by women. It is when men do wrong things to women such as physical abuse; even young girls are violated by their boyfriends and that is called GBV. (P18)

I understand that GBV is an act of ill-treatment that is based on gender, which commonly affects women and children, and which has caused an imbalance in respective communities. (P29)

I understand that GBV is oppression or rather violence which includes both genders; by this, I mean that GBV is when a person of a certain gender uses violence against someone of another gender. (P14)

Other participants mentioned that GBV affects both men and women:

Gender Based Violence is when someone is being abused, be it emotionally, physically, or mentally. And also, that GBV does not only affect females but also males and children, in fact it can affect anyone. (P22)

That GBV is an umbrella term for any unconsented actions or violence happening because of gender imbalances and inequalities. It can be women–women, men–women or men–child. (P19)

These participants view GBV as affecting different genders and that it is because of the gender imbalance and inequalities in society at large.

### *Subtheme (ii): Forms of GBV*

According to the participants below, different forms of GBV include rape and sexual harassment. The participants mentioned that

Gender Based Violence is a violence that is directed against a person because of that person's gender or violence that affects person particular gender disproportionately. There are so many types of gender-based violence that include rape, sexual harassment. (P10)

It is the physical and mental violence that occurs when a male or a female abuses her/his partner. It can be a male violating the rights of the females and the other way around. (P30)

GBV is broad to such an extent that it is effective to the parties involved in all being of oneself, eg, physical, emotional, and mentally etc. GBV affects everyone directly and indirectly so ... (P27)

The participants expressed their views above regarding the forms of GBV they know. Some of their responses were similar, therefore a limited number of responses are mentioned here.

*Subtheme (iii): Discrimination and unfair treatment*

Some of the participants expressed the view that GBV is about discrimination and unfair treatment of those victims by the perpetrators. Mostly this discrimination and unfair treatment through GBV is directed at the lesbian, gay, bisexual, transgender and intersex communities. This is illustrated in the excerpts below:

It is about discriminating against someone based on their gender; it can be a male discriminating or assaulting a female or the other way around, by insulting a person, for instance lesbians and gays, it is also Gender-Based Violence. (P23)

Another one agreed, saying:

It is an unfair treatment towards someone according to gender, more specifically, in woman. It is a growing action against our rights and the well-being of everyone who practises GBV. (P14)

I've heard of cases when students have assaulted one another because of being gay. Even in the community, it does happen, especially to women and children. (P3)

From the above excerpts it is evident that GBV is sometimes due to gender inequalities and gender discrimination. The perpetrators always look for a weaker victim to attack, which is unfair.

**Theme 4.2: Occurrence or manifestation of GBV on campus***Subtheme (a): Prevalence of GBV*

Most participants agreed that GBV does occur on campus, which is a cause for concern at the institution. This is evidenced by statements below from some of the participants:

Yes, in 2019, there was a case of a student who was abused by another gender in a relationship. (P1)

Yes, many people are affected by GBV, but some are still in denial or have faith that maybe a person will stop abusing them in any particular way. (P2)

Yes, GBV occurs on my campus, especially in residences where students live. (P6)

Yes, in campus GBV occurs, even though a lot of students do not know where to report these incidents. (P13)

Yes, it does as it happen everywhere across the entire globe/world. The only difference is based on how accurate it has been or for how frequent it is reported in numbers. (P20)

Yes, it happened in students' residences. (P26)

Yes, it occurs mostly in women and children. (P28)

Yes, it does occur in my community. There have been so many rape cases, children are suffering from being assaulted for being gay. (P30)

From the above findings it is evident that whereas GBV incidents are common on a university campus and that whereas some participants answered yes to these questions, there are a number of different responses.

*Subtheme (b): Unreported incidences*

The participants below mentioned that GBV on campuses is not reported, perhaps because students do not know where or how to report them or which office to go to. These extracts illustrate this:

It is probably happening but not reported. Some cases of GBV occur in public but due to not having enough knowledge to report it, they end up not being addressed. (P4)

Yes, on campus GBV occurs even though a lot of students do not know where to report these incidents. (P13)

GBV does occur both in my campus and in my community, but it is not taken seriously. I see girls hitting and physically abusing men every day and it is something that is not understood by the term GBV that it also includes men and not females only. (P14)

The above statements illustrate that students do not know where to report these GBV incidents on campus. Some participants gave responses that are not relevant to the question asked, therefore they were omitted.

**Theme 4.3: Effect of GBV on campus community**

*Subtheme (a): Emotionally and academically*

The participants denounced GBV on campus, saying it led to poor academic performance and the emotional instability of the victims. Some victims may develop a fear of people with the same qualities as those of their perpetrators. Their views are shown in these statements:

The poor performance in academics is because of depression on students. Conflict in the WSU environment that starts from their relationship ... (P1)

GBV can leave victims afraid of people with the same qualities as their perpetrators. People see themselves as being compelled to stay in their abusive relationships. (P12)

It has a huge impact, because in many cases, you found that people are quiet about the situations. They end up performing poorly in their academics, which is why they get stressed, depressed and fail. Some are even afraid to talk about it because the perpetrator is someone superior to them. They are afraid no one will believe them. (P19)

Other participants added their views on the emotional impact of GBV, indicating that it leads to different emotions and a loss of self-confidence:

It has a huge impact (negative) because it leads to students being depressed and losing self-confidence. (P13)

Students who are being abused always feel uncomfortable around some individuals, they have anger issues, and they cannot even think straight; that feeling of being abused haunts them. They always lose control of anything. (P16)

It has a negative impact because people who undergo GBV become jumpy, and they lose focus. (P18)

The participants confirmed that GBV occurs on campus and that it affects both the emotional and the academic performance of a student.

*Subtheme (b): Student dropouts*

The fact that victims drop out of their studies was mentioned by most of the participants as a challenge. The participants also mentioned that the perpetrators were threatening their victims. As a result, participants stated:

GBV has a lot of impact because there were cases of students that dropped out of their academics, due to stress and depression. (P3)

Students dropping out of school and having violent actions among other students. (P4)

Students drop out of the institution as a result of GBV. (P24)

The impact it has on WSU is bad in such a way that other students end up being depressed. Others end up being dropouts because an offender is threatening them, and the victim is afraid to talk. (P6)

The victim will be disturbed academically. He/she may drop out or the perpetrator may be arrested or suspended, which may lead to them losing their academics/degree. (P7)

These responses indicate that some students drop out because they cannot tolerate or cope with GBV on campus; instead, they opt to forfeit their studies.

*Subtheme (c): Safety on campus not guaranteed*

The issue of (a lack of) safety on campus and in residences is a major challenge that was mentioned by the participants.

The impact that it has on the campus community is that staff and students are no longer safe to work on campus freely because they are fearful to go around on campus because things happen. (P8)

It causes a very tense atmosphere in the university, amongst students, and deprives them of having fun or being free in the environment. (P15)

Some students may not feel safe around the residences, especially where there are males around. (P23)

The views of the participants confirm that students are always fearful while on campus and in residences because of GBV incidents that happen around them.

*Subtheme (d): Infringement of rights and suffering in silence*

Some victims decide to keep silent and suffer alone, some fear the resulting stigma and some feel that their rights are being violated, as mentioned by the participants below:

Most people are suffering from not having people to speak to and this has a bad impact because people's rights are being violated. They also experience emotional trauma. (P30)

Students who are victims of GBV are afraid of stigma and being second victims. (P25)

Individuals get hurt, discrimination, power abuse and a very bad stigma. (P5)

It is unfair treatment towards someone according to gender. More specifically, in women. It is a growing action against our rights and well-being of everyone who practises GBV. (P24)

Being abused can affect the student in many ways; it can impact the student from progressing well to a point that some will end up dropping out because they can't focus on their academic work. Some can also end up victimising other students because they are victims themselves. GBV on campus impacts the number of student dropouts, which is high. GBV can impact physically and emotionally, and one may lose focus and confidence. (P2)

The issue of the infringement of rights and suffering in silence was considered to be a problem that victims felt hopeless to deal with.

*Subtheme (e): Suicidal ideation*

The participants suggested that GBV affects the whole being of an individual, which leads to depression and, ultimately, suicide. The issue of GBV has a negative influence on the victims themselves. The excerpts below agree with this statement:

It has a negative impact as it affects those being violated mentally, killing their self-esteem, and driving them straight to depression, whereby they end up committing suicide. (P17)

So, it means that not only WSU community is affected. Also, victims of GBV are less likely to participate in self-growing activities because GBV affects all beings (faculties/aspects) of oneself. GBV has a detrimental impact on the WSU community as it is (a contributing factor to suicides and also in the case of affected people their success may be hindered due to many factors). (P20)

It has a huge impact on the WSU community because the impact is visible. Many students decide to stay silent about GBV, many decide to rather kill themselves and I have seen that happening ... (P14)

GBV is one of the factors that contribute to less activity of the victims as their minds will be congested with many thoughts, for example, suicidal thoughts. (P21)

Victims end up taking their lives. (P19)

Some victims no longer have suicidal ideation: instead, they are actually driven to kill themselves – as indicated by participants above.

## 5. Discussion

This article has highlighted and discussed the peer-to-peer facilitators' perceptions of GBV on campus prior to their training. The analysis we conducted revealed that in their understanding of GBV the participants suggested that it can affect women, men and children and that it can be directed from women to women, men to men, men to women or women to men and that it can be related to a student's sexual orientation.

The findings revealed that GBV is mostly directed at females and girls, and that it can affect a person holistically. This is consistent with AUDA-NEPAD, which discovered that Africa remained the region with the highest incidence of GBV, with approximately one-third of women experiencing it.<sup>29</sup> Furthermore, 57,8% of female university students reported having experienced some type of GBV.<sup>30</sup> Muthinta also discovered that GBV against women is a pervasive problem that affects all societies. It is further stated that, whereas GBV affects both men and women, evidence from around the world shows that violence against women is a highly systemic, frequent and persistent problem.<sup>31</sup>

In contrast, the participants in the present study defined GBV and stated that there are many variants of GBV, and also discrimination and unjust treatment. These findings are verified by Zain, who determined that the violence and threats of violence are faced by women irrespective of their age, skin colour, religion and economic or social standing; and that GBV takes place everywhere, including on the streets.<sup>32</sup> Makhene stated that the term 'GBV' refers to violence directed at persons because of their gender or gender roles, and their demotion

<sup>29</sup> African Union Development Agency–New Partners for Africa Development (AUDA-NEPAD) 'Leveraging smart technologies to tackle gender-based violence in Africa' (AUDA-NEPAD 2022).

<sup>30</sup> Muthinta (n 14) 13.

<sup>31</sup> Muthinta (n 14).

<sup>32</sup> Zain (n 3) 133.

to a lower position of social status or power.<sup>33</sup> Other studies revealed that GBV is a barrier to equity development and peace.<sup>34</sup> Furthermore, Warton and Moore revealed that various types of GBV at HEIs in South Africa include but are not limited to: domestic violence; IPV; rape; sexual assault; sexual harassment; harassment, and homophobic bullying.<sup>35</sup> Muthinta agreed with these findings and claimed that GBV against female students in South African HEIs is on the increase. Other researchers found that GBV presents itself in various forms: physically, sexually, verbally and emotionally.<sup>36</sup> This study revealed that GBV knows no boundaries and can affect anyone.

Regarding its occurrence, most of the participants revealed that GBV does occur on campus, in intimate relationships, and that some incidents are not reported. The foregoing findings accord with those of Warton and Moore, who also argue that under-reporting in HEIs makes it impossible to estimate the true prevalence of GBV on campuses.<sup>37</sup> Previous studies show that obstacles to reporting or seeking care from formal sources include shame and stigma, financial barriers, perceived impunity for perpetrators, a lack of awareness of available services or access to such services, cultural beliefs, the threat of losing children and the fear of getting the offender in trouble.<sup>38</sup> Makhene further argued that the under-reporting of GBV is a major challenge in South Africa.<sup>39</sup> Studies undertaken at four Eastern Cape universities found that resentment about GBV on university campuses stems from the few incidents publicised in the media. However, the topic of under-reporting GBV is complicated and provides insight into the incidence and 'normality' of GBV. These authors went on to emphasise that students are confused and experience despair, therefore they do not know where to report incidents of GBV perpetrated on them.<sup>40</sup> These findings show that the under-reporting of GBV may lead to its aggravation on the university campuses and to perpetrators continuing to roam around the streets freely.

This study revealed further that GBV affects students both emotionally and academically, leads to students dropping out of their studies, that their safety on campus is not guaranteed, that they are subjected to an infringement of their rights, that they tend to suffer in silence after having been subjected to GBV, and that suicidal ideation develops in victims. These findings are consistent with Muthinta's

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<sup>33</sup> Makhene (n 1) 2.

<sup>34</sup> Makhene (n 1).

<sup>35</sup> Warton & Moore (n 11) 3.

<sup>36</sup> Muthinta (n 14) 3.

<sup>37</sup> Warton & Moore (n 11).

<sup>38</sup> Muthinta (n 14) 4.

<sup>39</sup> Makhene (n 1) 2.

<sup>40</sup> Makhene (n 1) 2.



study, which found that 57,8% of students encountered GBV at their university, with 36,1% experiencing physical violence, 56,5% experiencing verbal or emotional abuse and 46,7% experiencing sexual violence. Furthermore, 61% of the students reported physical abuse performed by university friends, 21% were partners, 16% were strangers and 6% were teachers.<sup>41</sup>

Warton and Moore concur with the above findings and have stated that the survivors of sexual violence suffer academically and end up taking leave of absence; yet others opt to drop out of university.<sup>42</sup> Makhene added that the effects of GBV have led to students' grades suffering in schools.<sup>43</sup> Regarding suicidal ideation, Muthinta agrees when saying that GBV may even result in attempted and complete suicide.<sup>44</sup>

In contrast to these findings is the case of Nosiselo Mtebeni, a student from University of Fort Hare who was killed as a result of GBV: the perpetrator was sentenced to 25 years' imprisonment.<sup>45</sup>

It is evident that GBV affects the social, psychological, emotional, academic and physical attributes and situation of each victim. Therefore, the survivors of GBV need to be supported in order to help them cope. An integrated university response to GBV is required.

Other research supports the current study finding that GBV has substantial repercussions, including trauma, fear, increased anxiety, low self-esteem, somatic symptoms, and impaired concentration and productivity.<sup>46</sup> In addition, survivors experience melancholy, suicidal ideation and substance abuse. GBV has a detrimental effect on students' ability to learn, but also on their academic and career potential in the institution and society.<sup>47</sup> Another study conducted in Johannesburg indicated that the psychological and health implications of GBV can be converted into monetary costs for the individuals affected as well as societies.<sup>48</sup> According to Makhene, the impact of GBV includes anxiety, depression, low self-esteem, feelings of hopelessness and post-traumatic stress.<sup>49</sup> Muthinta revealed that verbal and emotional abuse are prevalent in Botswana, with frequencies of 76% and 98%,

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<sup>41</sup> Muthinta (n 14) 4.

<sup>42</sup> Warton & Moore (n 11) 7.

<sup>43</sup> Makhene (n 1) 4.

<sup>44</sup> Muthinta (n 14) 4.

<sup>45</sup> South African Government News Agency '25-year sentence for Fort Hare student murderer' (3 December 2021), available at <https://www.sanews.gov.za/south-africa/25-year-sentence-fort-hare-student-murderer>

<sup>46</sup> Muthinta (n 14); Makhene (n 1).

<sup>47</sup> Warton & Moore (n 11) 7.

<sup>48</sup> Makhene (n 1) 6.

<sup>49</sup> Makhene (n 1) 4.

respectively.<sup>50</sup> This is what the victims experienced when they were exposed to GBV. The monetary cost included the costs of healthcare services for the GBV survivors. GBV has affected students in all spheres of their lives and their lives have been changed as a result of GBV outcomes.

Another outcome derived from this study is the importance of campus safety. Muthinta's study supports these findings, revealing that 57,5% of survivors do not attend lectures, 15,8% are afraid to walk alone, 2,0% are hesitant to go to the library at night and 79,2% are concerned about rape every time they go alone at night.<sup>51</sup> Warton and Moore revealed that the international literature indicates that in many tertiary institutions women are more afraid of crime and violence than men; and Statistics South Africa (STATS SA) noted that crime impedes the activities of women more than it does those of men.<sup>52</sup> There were complaints about safety and terror on campus, and in this regard Warton and Moore found that 12–13% of students believed that it is unsafe to walk on campus at night.<sup>53</sup> Safety on campus is vital because it is where students and staff spend most of their time.

The infringement of rights and suffering in silence was seen as a problem that victims feel hopeless to respond to. This was a new finding, where some victims indicated that they are afraid to reveal the identity of their perpetrators and resolve to suffer in silence instead. University management needs to make a concerted effort to respond to and stamp out this scourge. These findings indicate that students in HEIs experience this unfair treatment and the infringement of their rights but choose to keep quiet as if nothing had happened. No studies supporting this finding were found in the literature.

## 6. Limitations of the study

This study was conducted at the Mthatha campus of Walter Sisulu University in the Eastern Cape province, South Africa, and therefore cannot be generalised to other universities. Students from other universities might have different views. Furthermore, the sample size recruited was small.

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<sup>50</sup> Muthinta (n 1) 18.

<sup>51</sup> Muthinta (n 14) 14.

<sup>52</sup> Warton & Moore (n 11) 7.

<sup>53</sup> Warton & Moore (n 11).

## 7. Conclusion

GBV is a universal scourge that affects institutions of higher learning; it requires intervention and an integrated response by university communities. The under-reporting of GBV is a challenge that also needs to be dealt with so that the true extent of GBV on campuses can be gauged. The safety of staff and students on campuses should be a priority at all universities.

## 8. Recommendations

We recommend that collaboration between all university departments be encouraged in order to reduce the impact of GBV on campuses. Awareness campaigns should be launched and information sessions held in order to overcome the under-reporting of GBV and to encourage more students to report incidents of GBV through the correct channels. University authorities must begin to monitor poor academic performance, students dropping out, suicidal behaviours and fear about safety on campus and view these as red flags of the prevalence of GBV. Education and prevention are the key(s) to curtailing GBV in the university community. The creation of a conducive environment for establishing male and female forums that will enable students to enjoy a social life and campus life and to deal with those issues affecting them is an imperative. Platforms should also be created for students to debate about GBV and support groups should be set up for those victimised by GBV. These measures should help to ease at least some of the challenges that students face on campus.

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