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DECLARATION

I, Ellen Farisayi Zvobgo, author of this thesis, do hereby declare that the work presented in this document entitled, “**An Exploration of the meaning of social justice for survivors of domestic violence in Zimbabwe**”, is a result of my research and independent work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references. I hereby certify that the work embodied in this thesis has not already been submitted, either in whole or in part, for any other degree in this University, or other institution of higher learning.

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APPROVAL

This Thesis has been submitted with my approval as University Supervisor

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DEDICATION

I dedicate this work to my husband, Professor Rungano Jonas Zvobgo who has been a source of inspiration throughout the years we have lived together. He always says, “Never stop dreaming, if you stopped dreaming, then you are dead”.

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ACRONYMS AND ABBREVIATIONS

“A” level	Advanced Level
AFDC	Aid to Families with Dependent Children
CEDAW	Convention on the Elimination of All forms of Discrimination Against Women
DEVAW	Declaration on the Elimination of Violence Against Women
DV	Domestic Violence
DVA	Domestic Violence Act
FFS	Forced First Sex
GBV	Gender-Based Violence
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
ICCPR	The International Covenant on Civil and Political Rights
IPV	Intimate Partner Violence
MWACSMED	Ministry of Women’s Affairs, Community, Small and Medium Enterprises Development
NGOs	Non-Governmental Organisations
“O” level	Ordinary Level
PVO	Private Voluntary Organisation
SADC	Southern African Development Community
SAPS	South African Police Services
STDs	Sexually Transmitted Diseases
UDHR	The Universal Declaration of Human Rights
UN	United Nations
UNICEF	United Nations International Children’s Emergency Fund
UNIFEM	United Nations Development Fund for Women

UCT	University of Cape Town
VAW	Violence Against Women
VFU	Victim Friendly Unit
WHO	World Health Organisation
WLSA	Women and Law in Southern Africa
ZDHS	Zimbabwe Demographic and Health Survey
ZOU	Zimbabwe Open University
ZRP	Zimbabwe Republic Police
ZimStat	Zimbabwe National Statistics Agency

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ABSTRACT

Globally, the WHO (2014: 10) estimates that one in three women experiences sexual and physical violence at the hands of their intimate partner over their lifetime. According to a Violence Against Women (VAW) Baseline study (2013: 11) in Zimbabwe- two in every three (68%) women who were interviewed reported having experienced some type of gendered violence during their lifetime. Although legislation on the prevention of domestic violence has become, globally, part of many countries' legal frameworks, Zimbabwe instantiated its Domestic Violence Act only in 2007. This came as a result of decades of feminist advocacy at state, legal, and NGO levels which theorized the rights of survivors of domestic violence, usually women as essential to Zimbabwean citizenship. These rights included criminalization of domestic violence and full access to legal processes. As in many other contexts, the weak implementation of this legislation has been widely researched, suggesting that Zimbabwean domestic abuse survivors remain vulnerable (Burton, 2008). Alongside the need for more research lies the question at the heart of this dissertation. Feminist theory has established that the vulnerability of domestic abuse survivors comprises both the legal and the social. Theorists of social justice focus on questions of recognition and redistribution (Fraser, 2008), empowerment (Kabeer, 2016) and the notion of capabilities as intrinsic to fair and equitable social systems and processes (Nussbaum, 2011). This study asks whether and how the provision of shelter space to the survivors (for which provision is made in the Domestic Violence Act) can be theorized as a form of social justice, despite the weakness of the system of courts. In carrying out the study, I worked with one particular shelter, Musasa, in Gweru, Zimbabwe, and explored the experiences of those who had worked with the shelter in multiple ways. This built what I called an "exploded view" of the representations of living and working at a specific place. The concept of "exploded view" comes from architecture and connotes a perspective able to understand different parts of a system or process separately to revise the whole. Data gathering was through in-depth interviews and involved listening to the voices of those who imagined and created the shelter and also those running it. At the centre of the study were twenty women who experienced the shelter as a space in which they lived and their voices were critical in theorising sheltering. Data were analysed using both thematic and content analysis and aimed to tease out the multiple threads of meaning through which people associated with the shelter in different ways made sense of its location and importance for tackling domestic violence in Zimbabwe. While the study is aware of its limitations as a case study, the dissertation's theorization of shelter work as social justice contributes to a feminist theorization of redress for survivors of domestic abuse in Zimbabwe.

CHAPTER 1

INTRODUCTION

1.0 Background

According to Wright, Kiguwa and Potter (2003: 616), domestic violence is recognised as a pervasive problem in many countries the world over. Studies have concluded that indeed VAW is a social problem and public health concern. WHO (2005: 12) adds that domestic violence has negative impacts on women and traumatising effects especially on children. According to UNICEF (2000: 3), domestic violence is perpetrated by people in an intimate relationship or other family members and manifests through various forms including; economic, sexual, physical and psychological.

Several key international, regional and national instruments have been put in place to address this problem and they include the Universal Declaration of Human Rights (UDHR) (1948); the International Covenant on Civil and Political Rights (ICCPR) (1976); the Convention on the Elimination of All forms of Discrimination Against Women (CEDAW) (1979); the Declaration on the Elimination of Violence Against Women (DEVAW) (1993) and the Beijing Declaration and Platform for Action (1995). Similarly, several regional human rights instruments that prohibit violence against women include; the Protocol to the African Charter on Human and People's rights, the Southern African Development Community's Declaration (SADC) on Gender and Development (1997) and the Addendum on the Eradication of All forms of Violence against Women and Children (1998). The Protocol to the African Charter on Human and People's rights (1986) has provisions against violence against women within its scope of women's rights to life, integrity and security of the person and dignity.

As a state, Zimbabwe came late to the international trajectory of work, deeply rooted in a wide array of feminist movements, which has led to the design and implementation of national legislation against domestic violence. Zimbabwe ratified several regional and international conventions and treaties put forward by the United Nations and the Southern African Development Community (SADC) and at the national level, developed a new Constitution Amendment (no.20) Act (2013) which recognizes the rights of women in both public and private sphere that have specific provisions on the phenomenon of domestic violence. It is crucial to understand that Section 52 of the Zimbabwean Constitution (2013) provides every person with the psychological and bodily integrity. These rights imply the right to freedom

from all forms of violence from both private and public sectors. In October 2007, the Government of Zimbabwe enacted the Domestic Violence Act (Chapter 5: 16).

It follows that the Domestic Violence Act (2007) criminalises domestic violence and protects women from acts that range from degrading and discriminating behaviour and practice; customary rites and practices. The same instrument, the domestic violence legislation (2007) also has a provision to protect abused women by establishing safe shelters. The theoretical questions raised by the enactment of the Domestic Violence Act are broad ranging and include the meaning of the term “domestic”, the responsibility of different levels of state actors (courts, police and social workers) for addressing domestic violence, the agency and psychological health of battered women, and the meaning of justice itself for survivors of domestic violence (Artz, 1998). There are strong theoretical debates about the relationship between the forms of justice which can be mediated through the law and those which entail centring the survivor and their social, economic and contextual needs. These are often debates in which feminist research has featured prominently as a driver of both critical analysis of the implementation of Domestic Violence (Burton, 2008) and as an invitation to think more deeply about what we mean when we talk about “justice” for survivors of domestic violence (Svoboda, 2015). As Burton (2008: 123) points out,

when criminal justice agencies conceptualize an improved legal response to domestic violence, this often means to them more arrests, more prosecutions, more convictions...viewed from the victim's perspective, the criminal justice response to domestic violence is sometimes completely at odds with their expectations, and on occasions can be counter-productive in the victim's search for a solution to make them feel safer.

There is very rich literature which details the failures of criminal justice systems to take survivors' complaints seriously and to ensure that different offices of a state cooperate well to ensure that survivors are offered timeous, respectful and ultimately restorative support.

In South Africa, the Domestic Violence Act was passed in 1998, and to date, the dominant research literature in the field concerns exactly the terms of these failures. There is less material on the actual experiences of those surviving domestic violence in the country than exists on the question of the failure to implement different aspects of the Domestic Violence Act (such as the difficulty of obtaining protective interdicts, the failure to arrest alleged perpetrators, and the failure to protect complainants from further attack) (Artz, 2004). I would argue that this feminist research focuses on the limitations of the criminal justice system and is linked to the

Act itself, in a context in which a country has been undergoing rapid and volatile change (since 1994) around the meaning of the law.

In Zimbabwe, where the Domestic Violence Act was ratified in 2007, research focusing on the new law and its implications for survivors is similarly slanted towards how the criminal justice system is working to implement the provisions of the Act (Musasa Project, 2012; Chireshe, 2010; Makahamadze, 2011; Lipeleke, 2013). To date, the research rehearses themes familiar to feminist writers and activists globally: the incompetence of police officers, the lack of follow-through between different state organs, and the disappointment and fear of survivors who bring complaints to the system.

Like many other Domestic Violence Acts, the Zimbabwe legislation mandates not only a survivor's right to state protection but simultaneously supports their right to levels of "justice" which go beyond the determination that criminal acts of violence have occurred. In the case of the Zimbabwe DVA (2007), there are explicit provisions for the survivor to be offered places of safety: in part 2, section 5 of the Act it is stated that:

A police officer to whom a complaint of domestic violence is made or who investigates any such complaint shall (a) obtain for the complainant, or advise the complainant how to obtain, shelter or medical treatment, or assist the complainant in any other suitable way.

This suggests a State- based recognition of the fact that, as research overwhelmingly argues, survivors of domestic violence face extreme violence within the space of their homes and nearby spaces. The implication of offering a survivor what the law terms "relief" thus includes the reality that survivors may need secure shelter, subsistence, and active physical protection from alleged abusers. The complexity of offering justice to survivors of domestic violence thus comes to entail thinking about the social and economic context in which a survivor has been abused, and about how to offer not only the recognition of the abuse as a crime but to redress the socio-economic damage they have endured (O'Sullivan and Murray, 2005).

The theorization for which I am going to argue involves a discussion of what constitutes social justice for survivors, beyond the debates which arise from the limitations of a criminal justice process, which formed the heartbeat of my research. As someone with the direct and complex experience of activist engagement with the provision of shelters for survivors of domestic violence in Zimbabwe, and as a researcher committed to the development of practicable concepts of justice for survivors, outside the framework of the law court, this research explored the strategies, processes, relationships, and narratives through which a shelter may seek to both

imagine and realize a form of justice that does not concern itself simply with notions of innocence and guilt, victim and criminal punishment. The goal of the research is to strengthen Southern African theory on what it means to imagine justice for survivors of domestic violence, and on how to theorize, at a micro-political level, the work that needs to go into the creation of opportunities for survivors' genuine healing and for their re-integration into environments from which their experiences of abuse have violently expelled them.

1.1 Statement of the Research Question

While research on domestic violence overwhelmingly theorizes the holistic damage done to survivors, there is a very strong trend within national approaches to the problem which advocates for the power of legislation as a key resource of redress. Domestic Violence legislation has been enacted widely, but the review suggests, feminist research on the power of such legislation to effect justice for survivors suggests the weakness of legal instruments in this terrain. Much legislation does recognize the limits of a juridical framework of criminalization and punishment, and some include reference to the need for civil society to support the provision of what one theorist on the meaning of justice, Martha Nussbaum, might term "capabilities", (Nussbaum, 2011: 31). As will be unpacked in depth in the literature review, there are several theories on what social justice might entail, and Martha Nussbaum comes to play a powerful role in this research as the key theorist with whom my research in a Zimbabwean context will work. In brief, she argues that social justice is not possible without access to a range of capabilities which sustain the possibility of change for those suffering under diverse systemic forms of inequality.

Shelter- space has been widely accepted as a zone in which some of these capabilities (such as access to dignity) might be addressed and many studies on shelters have been conducted in the United States of America, Canada, Australia, Britain and many other European countries by various scholars including, (Sullivan, 2010; Lyon, Lane and Menard, 2008; Tutty, 2006, Haj-Yahia and Cohen, 2009; Tutty, Weave and Rothery, 1999). A number of these studies conducted in the Western world, (Geirman, et al., 2013; Bergstrom- Lynch, 2018; Sullivan, 2012; Glenn and Goodman, 2015; Few, 2005; Davis, Hagen and Early, 1994), have examined the role of shelters in assisting survivors of Domestic Violence, focussing on perspectives of shelter managers and survivors or experiences of survivors in shelters. In South Africa studies on shelters have been conducted by (Wright, Kiguwa and Potter, 2003; Lempert, 2003) among others. Not much literature exists on shelters in Southern African contexts, particularly Zimbabwe. Several studies in Zimbabwe have focussed on the legal justice aspect of the

Domestic Violence Act, (Mashiri and Mawire, 2013; MWAGCD and Gender Links, 2013; Chazovachii and Chuma, 2012; Magorokosho, 2010; Fourie, 2014) and not much has been researched on shelters as spaces for social justice for survivors of DV. One study on shelters which was conducted by Bote (2008) examined counselling services for survivors of Domestic violence at Musasa in Harare. None of these thinks about “social justice”

As stated before, I argue that the Domestic Violence Act (Chapter 5:16) (2007) in Zimbabwe, has provisions for both legal and social justice, in relation to its naming of the need to provide shelter space to survivors.

Little attention within Zimbabwe, however, has been given to understanding the complexities and intricacies of a shelter as a space for social justice. This research, therefore, was interested in understanding how to theorize the work of sheltering as social justice through a complex exploration of one shelter from the experiences of people very differently positioned in terms of bringing that shelter into dynamic life.

1.2 Main Research Question

The main research question for the study was:

How does social justice become realized for survivors of domestic violence within Zimbabwe?

1.3 Sub-questions

- Do shelter spaces allow us to theorize the meaning of social justice?
- How does a shelter become imagined as a space of social justice?
- How does a shelter seek to operationalize processes of protection and healing for survivors of domestic violence?
- What are survivors’ experiences of life within shelter space?
- How do we use the theory of social justice to understand the salience of shelter space in Zimbabwe?

1.4 Scope of the Study

This study draws on a range of experiences associated with the life of one shelter for women survivors of DV, named Musasa, located in the City of Gweru, Midlands Province of Zimbabwe. A Non-Governmental Organisation runs Musasa shelter and focuses on assisting survivors of DV in several ways that included but are not limited to the provision of access to legal justice; counselling and shelter among other forms of assistance. To the survivors of DV, the meaning of social justice was explored by tracing this shelter’s history and developments,

the debates between key players involved and their roles in the shelter establishment, the life of the services and programmes offered, and the political complexity of linkages with various stakeholders among other things. The research included intensive engagement with those who had lived within the shelter, at different points, and those who imagined and created the shelter.

1.5 Significance of the Study

This study was significant in that although the Zimbabwean Government legislated the Domestic Violence Act (Chapter 5:16) (2007), which has provisions for both legal and social justice, several studies (Mashiri and Mawire, 2013; MWAGCD and Gender Links, 2013; Chazovachii and Chuma, 2012; Magorokosho, 2010; Fourie, 2014) have focussed on legal justice and not much has been researched on shelters as spaces for social justice for survivors of DV. Legal justice is concerned with the criminalization and punishment of offenders or perpetrators and issues of innocence and guilt and little attention is given to the victims or survivors of DV. The Zimbabwean law does argue for the provision of sheltering, but most research concentrates only on questions of legal “justice” and fails to take into account the needs and interests of survivors of DV. This study is significant in that it focuses on a shelter as a space for promoting the human rights of survivors of DV, something which is not addressed by the legal justice system.

1.6 Chapter Layout

This thesis has eight chapters. **Chapter 1** is the introductory chapter and includes the background of the study, the main research question; the statement of the research problem, significance and scope of the study. In **Chapter 2**, I present Literature Review. I reviewed literature related to the topic under study and identified the research gaps. In designing my literature review, I concentrated on highlighting critical debates of direct relevance to my research focus. I also chose to review literature which did not simply map a terrain of definition or discussion but offered insight into the theorization of issues central to my thinking: the meaning of social justice, the interaction between legal approaches to justice and domestic violence survivors’ experiences, and the notion of shelters as core resources in civil society engagement with gender-based violence (especially with survivors of domestic violence). In **Chapter 3**, I present the research methodology that is nested in a feminist approach that privileges the subjective and situated nature of knowledge and emphasises ethics of care theorization for which I am going to argue involves discussion of what.

Furthermore, in **Chapter 4**, I present findings on both imagining and running a shelter to support survivors of DV using both thematic and content analysis of the material in interviews from those in the political power, often feminists, who saw clearly what such a shelter could mean. The chapter also explores material from those currently running the Musasa shelter. This chapter, therefore, synergizes the views of those who imagined the shelter and those who currently work in it and these views are critical in exploring the meaning of social justice for survivors of DV in a Zimbabwean context. In **Chapter 5**, I work with material from interviews with twenty women, who stayed as residents in the shelter, at some point between 2018 and 2021. The interviews with these women were very rich indeed, often lasting several hours, and traversing much ground concerning their lives, their experience of domestic violence and critically, their narratives of becoming shelter residents. In this chapter, I used mostly thematic analysis to synthesize their representation of themselves, as diverse individuals, and the way they found themselves at the door of a shelter: an “alien space”. **Chapter 6**, presents findings on the participants’ shelter stay and it explores the meaning of a shelter as a symbol of ‘home’, one capable of redressing their experiences of violation and humiliation within their own ‘homes’. An analysis of participants’ experiences within this initially alien space which they come to represent as ‘home’ is offered. The analysis highlights the importance of factors such as staff expertise, rules, routines and services offered as a set of relationships to security, and hence boundaries which can reconfigure access to dignity, predictable behaviour, and the option of self-recovery outside the framework of battery. **Chapter 7**, aims to showcase the theoretical achievement of my research. The main objective of the study was to investigate what social justice meant for survivors of domestic violence in shelter space. What constitutes ‘social justice’ for survivors of DV is at the centre of this study. In this chapter, I theorize shelter experiences as offering access to a transformation in power rooted in what social justice looks like, where social justice is conceptualized through Martha Nussbaum’s theory of capabilities essential to the creation of an equitable society. **Chapter 8**, synthesises the entire thesis in which conclusions and recommendations are articulated. This chapter is followed by a list of references which were used in coming up with this study. The thesis ends with annexures which include all pertinent documents and information used during data collection and in the body of this thesis.

CHAPTER 2

LITERATURE REVIEW

2.0 Introduction

My research study interests lie in the meaning of social justice for survivors of domestic violence in Zimbabwe, a country facing profound economic challenges and where the passage of legislation on domestic violence is recent. The relevant literature is vast, crossing both time and context, given that questions of gender-based violence have engaged the work of feminist researchers globally for many decades. In designing my literature review, I concentrated on highlighting critical debates of direct relevance to my research focus. I also chose to review literature which did not simply map a terrain of definition or discussion but offered insight into the theorization of issues central to my thinking: the meaning of social justice, the interaction between legal approaches to justice and domestic violence survivors' experiences, and the notion of shelters as core resources in civil society engagement with gender-based violence (especially with survivors of domestic violence).

The review is thus divided into the following three broad sections, each of which carries several subsections to map the terrain of debate: Meaning of domestic violence, its forms, prevalence, causes, effects and consequences; Theories of Justice for Survivors of domestic violence; and the meaning of Shelter spaces for survivors of domestic violence. Related literature has been drawn from developed and developing countries, but I have also concentrated on material knowledgeable about the Southern African context and much of this is South African.

2.1 Meaning of Domestic Violence, Its Forms, Prevalence, Causes, Effects and Consequences.

2.1.1 Understanding domestic violence

The Declaration on the Elimination of Violence Against Women (DEVAW) (1993) defines DV as:

The use of force or threats by a husband or boyfriend for the purposes of coercing and intimidating a woman into submission. The violence can take the form of pushing, hitting, choking, slapping, kicking, burning or stabbing.

Similarly, the American Psychological Association Task Force on Violence and the Family (APA, 1996) defined DV as a range of abusive behaviours that include but are not limited to the following: psychological torment and maltreatment, physical, sexual that is used by an individual in an intimate relationship against another to gain power. DV is a type of GBV that

is perpetrated by people in an intimate relationship in a family set-up. Research evidence has shown that this type of violence includes economic abuse, sexual, physical, verbal, and psychological (Sen and Bolsoy, 2017: 1). Literature reveals that when one type of violence is present in the family, other kinds of DV were to be expected to emerge and intersect with other forms of violence. Examples of such violence, include violence from the family that has a connection with violence in the community as well as to other types of GVB and aggression. There are other terms which are used when referring to domestic violence such as battered women, partner abuse, women abuse and male violence against female partners. Literature also reveals that some scholars continue to use DV synonymously with family violence.

Research evidence by UNICEF (2000: 3) indicates that men are usually the perpetrators of DV and use their social status of patriarchal power, intimacy as husbands and trust as sons, brothers, fathers, fathers in law and stepfathers. In Zimbabwe, a study by Maripfonde, Mavondo and Chamisa (2020: 92) observed that males were seen as the most perpetrators of GBV cases as reported by Victim Friendly Unit statistics from the Zimbabwe Republic Police (ZRP). However, literature has also documented that some women are guilty of perpetrating domestic violence. Heise et al. (2002: s6) state that:

although women can also be violent and abuse exists in some same-sex relationships, the vast majority of partner abuse is perpetrated by men against their female partners.

The quotation above means that men are the majority of perpetrators of violence however, a study by Augustine and Monday (2020: 97) revealed that men are victims of violence in silence due to the social stigma of “names calling” while women spouses constitute a majority of the abused. This situation takes us to a place where men can also be victims of domestic violence but because of this stigmatisation, and unsustainable social constructions and practices of masculinity- they are forced to suffer in silence. It is pertinent to understand that violence can be committed for varied purposes including the control of another person’s identity and behaviour, intimidation, and punishment.

2.1.2 Forms of domestic violence

For UNICEF (2000: 3) domestic violence is carried out by family member or intimate partners and usually manifests itself through various forms that encompass; economic, psychological, sexual and physical aspects. Forms of domestic violence range from mild to fatal. Literature also describes how that physical abuse is relational- indicating that it is closely associated with varied customary and traditional practices that include but are not limited to harmful traditions

such as female genital mutilation (FGM) and wife inheritance. Jewkes et al. (2002: 1604) postulate that:

physical violence is often complemented by a range of other emotional abuse by men, including - in particularly deliberate belittling, attempts to control a girlfriend or wife's social interactions and movement, bringing other girlfriends to the shared home, evicting the woman and her children, and not providing money for essential items at home when money is available.

For Garcia-Moreno (2000: 330), intimate partner violence (IPV) including the type of sexual abuse such as rape are universal. It is crucial to realise that women and girls are abused sexually and often in most cases fail to report it due to the fear of being blamed and shamed. Jewkes et al. (2002: 1605) mention that sexual violence is common in South Africa. The same scholars argue that the rate of reported rape to the police in South Africa is the highest among all Interpol members. Linked to this, in several countries, there are other types of Violence Against Women (VAW) that are linked to cultural and traditional practices that include the violence that is related to honour killings (honour killings are based on the idea that once a daughter has been raped- she has to be killed by a man from her family to protect the honour of the family) in the eastern Mediterranean and parts of Asia (Garcia – Moreno, 2000: 330). In South Asia, violence is also reported to be associated with dowry payment (Garcia – Moreno, 2000: 330). In Zimbabwe,, a study by Magezi and Manzanga (2020: 8) revealed that (IPV) is a “ key form of GBV, and the national lockdown due to COVID-19 pandemic saw a sharp increase in IPV in 2020”. On the same issue, Bengesai and Khan (2019: 1) comment that in Zimbabwe, IPV has been persistently identified as a social problem which has been linked to attitudes that promote patriarchal relations of power with an emphasis on denying women agency and the superiority of men in marital relationships. Literature has shown that women are affected by various forms of abuse but IPV is the most common type of GBV affecting women in most countries including Zimbabwe.

2.1.3 Prevalence of domestic violence

Literature has documented the prevalence of DV in both developing and developed nations. Large amounts of literature exist which explore the prevalence of domestic violence universally, regionally and countrywide. (Ortiz- Barreda, Vives–Cases and Gil -Gonzalez, 2010; UNICEF, 2000; Vetten, 2014; Artz and Smythe, 2005), among others have researched this area.

To give context to the prevalence of physical, intimate partner violence- studies indicate that among countries around 20% and 50% of women have encountered violence to a family member (World Health Organisation, 1996; cited by UNICEF, 2000: 2). There is a need to appreciate that reliable statistics are hard to come (UNICEF, 2000: 2). Globally, the WHO (2014: 10) estimates that one in three women experiences sexual and physical violence at the hands of their intimate partner over their lifetime. In addition to this, the WHO (2005: 5) mentions that women never report these cases.

Literature reveals that in some cases women fear being blamed for violence so they decide to keep it to themselves. A study that reviewed a population based on 50 studies undertaken in 36 nations observed that around 10% and 60% of women married or partnered experienced physical abuse at least once from a current or former intimate partner (Heise et al., 2002: s6). In Kenya, 42% of 612 women surveyed in one district by UNICEF (2000: 5) reported that they were beaten by their partner. For the ones who reported, 58% indicated that they were sometimes beaten. In the case of Uganda, about 41% of women were reported by UNICEF (2000: 5) to having been physically harmed including being beaten up by a partner and 41% of the perpetrators were reported to be men who beat their partners.

According to a Violence Against Women (VAW) Baseline study (2013: 11) in Zimbabwe- two in every three (68%) women who were interviewed reported having experienced some type of gendered violence during their lifetime. For instance, 26%- slightly over a quarter of the population sample reported that over the last 12 months, they had experienced violence while around 46% of the men who were interviewed admitted to having perpetrated some type of violence. This study revealed that the most common type of Intimate Partner Violence (IPV) is sexual, economic and physical violence. There is evidence from the Zimbabwe Demographic Health Survey (ZDHS) (2011) shows that about 30% of women that are aged between 15 - 49 years had encountered physical abuse from 15 years of age. The same study also indicated that about 27% of women who were in the same age group encountered sexual abuse. In that study, most of the women reported that their current boyfriend or partner/ husband committed these acts of sexual abuse. The ZDHS established that about 22% of the women who were interviewed had their first sexual encounters against their will. Similarly, a study by Shamu et al. (2018: 1) revealed that “Forced First Sex (FFS) and IPV are associated with adverse maternal and newborn health outcomes”.

The trend that emerged from several studies is that in most cases women are victims of domestic violence whilst men are perpetrators. Literature has revealed that domestic violence is prevalent in many countries and Zimbabwe is no exception. Women in various contexts are vulnerable to all forms of DV including; verbal abuse, and economic, sexual, emotional or psychological forms of abuse.

2.1.4 Causes of domestic violence

Large volumes of literature exist on the causes of domestic violence. Several scholars (Heise et al., 2002; Garcia-Moreno, 2000; UNICEF, 2000, among others) have explored this area and concluded that several factors contribute to domestic violence and these include, the patriarchal system, cultural and gender norms, religious beliefs, unemployment, lack of economic resources and status difference between partners among other causes.

Research indicates that the justifications for violence often stem and evolve from essentialized gender norms, about responsibilities and proper roles of women and men prescribed by culture. Garcia-Moreno (2000: 331) states that the dynamics of abuse are similar across cultures, especially concerning gender norms about control and power over women. Heise et al. (2002: s8) explain that varied cultures grant control of their wives' behaviour and especially of women who challenge these perceived rights –such as requesting money for the household or expressing the essentials of the children, may be castigated. Research studies show that in different countries such as Nicaragua, New Papua Guinea, India, Pakistan, Zimbabwe, Tanzania, and Nigeria, the act of meting out violence on a woman is viewed as the husband's right- akin to correcting a deviant wife (Heise et al., 2002: s8).

Thus, violence comes as a result of imbalanced power relations between women and men. Factors contributing to these power imbalances include: socio-economic forces, socialisation of boys and girls where power relations are enforced, control over women's sexuality, legislative systems that discriminate against women and cultural beliefs that subordinate women (UNICEF, 2000: 7). Literature has revealed that lack of economic resources, makes women vulnerable to violence and they experience difficulty in extricating themselves from a violent relationship (UNICEF, 2000: 7). This means that without economic empowerment women remain in abusive relationships.

In addition to the foregoing in South Africa studies by Jewkes et al. (2002: 1612) alert us to the reality that abuse against women is a result of the normalisation of men lashing out at women whom they do not control through the system of patriarchy or provide for economically.

Thus, research in many different settings has established that DV is associated with poverty (Jewkes et al., 2002: 1612) and intersects with high levels of unemployment among male perpetrators and the status differences between intimate partners. Mazibuko and Umejesi (2015: 6586) invoke the work of Jewkes et al. (2003) to argue that South Africa has women who are less likely to leave as they are economically vulnerable and dependent on men's financial contributions. Studies have confirmed the relationship between DV and poverty noting that it tends to lead to heightened tensions over access and control of resources in many poor families.

Society blames women victims for causing violence. It is equally important to realise that women who experience intimate partner violence are accused of provoking the violence through infidelity, failure as a wife and disobedience (Watts and Zimmerman, 2000: 1233). Consequently, in Zimbabwe, the 2010-2011 ZDHS indicated a positive correlation between gender-based violence, HIV infections, early marriages, spousal abuse, and low levels of education.

Furthermore, another study by Lasong et al. (2020: 1) in Zimbabwe revealed that domestic violence was strongly correlated with women who have husbands that drink alcohol, are themselves products of vicious cycles of men as abusive fathers/ parents who beat up their mothers and/or are in polygamous marriages (marriage arrangements with more than one wife as normative). Numerous factors have been identified as responsible for exacerbating DV. Dziva, Dewa and Khumalo (2020: 2) identified economic and patriarchal forces as fuelling DV. Literature from different contexts suggests that domestic violence is a result of many factors including, patriarchal forces and power dynamics in marriages, unemployment, poverty and financial dependency of women and their lack of education. Domestic violence exists within entrenched cultural tolerances.

2.1.5 Domestic violence -effects and consequences

Several studies (Heise et al., 2002; UNICEF, 2000; Neroien and Schei, 2008) have documented literature on the effects and consequences of domestic violence. For Jewkes et al. (2002: 1603) IPV or DV is increasingly recognised as a public health challenge and correlated with among other things physical health problems and injuries including a wide spectrum of mental problems. Studies have indicated that domestic violence has severe and fatal consequences as it can lead to death and suicide. It is also suggested that those affected can have stress-related conditions that include low self-esteem, post-traumatic stress syndrome, and panic attacks

among others (UNICEF, 2000: 10). Tellingly, a corpus body of literature shows that some women who suffer at the hands of abusers are demeaned and fatally depressed and where individuals are severely affected they commit suicide (UNICEF, 2000: 10).

According to UNICEF (2000: 9), DV has fatal outcomes such as suicide and maternal mortality. DV also leads to physical health challenges including fractures and internal organs injury (UNICEF, 2000: 9). It has been established that physical injury is the more visible form of violence UNICEF (2000: 9). Heise et al. (2002: s11) go further to explain that violence may also have a grave impact on pregnancy outcomes as it leads to miscarriages, premature labour and abortions.

Literature has revealed that DV is a problem in many societies. The trends that emerged are that women and girls are the most affected groups in many societies. It has been documented that DV cuts across all classes in society, that is, the poor and the rich people all experience this problem. Studies exploring violence and health report adverse health effects which include injuries due to sexually transmitted diseases, unwanted pregnancy, depression and suicide, low birth weight, gynaecological disorder, and trauma. It is vital to understand that DV has devastating consequences for women and young girls who experience it and is indeed a social problem to society and needs to be addressed.

2.2 Theories of Justice for Survivors of DV

There is a distinct body of research which describes how many countries (including Zimbabwe) have promulgated state laws that in principle criminalise and deter perpetrators of DV. However, such laws fail to adequately attend to the interests and needs of survivors of domestic violence. Research worldwide notes that legal remedies rarely address survivors' needs. Several scholars including leading feminist researchers internationally have theorized the relationship between the needs of DV survivors and "justice" as extremely complex and in need of in-depth feminist debate and discussion (Ortega, 2005; Franceschet, 2010; Macaulay, 2005; Eze-Anaba, 2007). In this section, I review critical perspectives on how critique of the domestic violence legislation has been articulated, (Dissel and Ngubeni, 2003; Machisa et al., 2010; Prinsloo, 2007; Parenzee et al., 2001; Taranto et al., 2013; Magorokosho, 2010; Fourie, 2014).

It is also clear that the damage caused by DV includes more than an assault against human dignity and life. Research studies by many scholars including (Heise et al., 2002: UNICEF,

2000; Neroien and Schei, 2008) have documented literature on the effects and consequences of domestic violence. Studies show overwhelmingly that survivors suffer loss of security, psychological and physical ill-health, damage to their status as women and wives, loss of security for their children and economic hardship. I, therefore, also review some of the material which makes the argument that legal frameworks alone cannot address domestic survivor's needs for justice and that such needs demand a feminist understanding of the causes, impact, and socio-economic roots of domestic violence to imagine any "restorative" version of justice. These theorists argue that affording survivors access to justice means exploring approaches that would include strategies for reconstituting their access to social and economic justice.

2.2.1 The Legal Justice Framework for Domestic Violence

This section highlights the key international, regional and national instruments that are concerned with eradicating violence against women in all societies at various levels. These include; conventions, protocols, laws, acts, constitutions and policies that are concerned with eradicating domestic violence. It is vital to understand that the DEVAW, (1993) was the first human rights international instrument that specifically dealt with the scourge of violence against women, (UNICEF, 2000: 3). Thus, the (DEVAW, 1993 cited in de Alwis and Klugman, 2015: 5) provides and concretises our definitions and grammars of abuse against women as it defined it as:

any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of coercion or arbitrary deprivation of liberty, whether occurring in public or in private life

In addition to the quotation above, the DEVAW (1993) cited by de Alwis and Klugman (2015: 5) introduces us to the definitions and imaginings of marital rape as VAW. The DEVAW (1993) cited by de Alwis and Klugman, (2015: 5) also calls on member States to:

exercise due diligence to prevent, investigate and in accordance with national legislation, punish acts of violence against women, whether those acts are perpetrated by the State or by private persons

The WHO (2005: vii) argues that emerging from the World Conference that was held on Human Rights in Vienna (1993) and the subsequent the DEVAW, Governments and NGOs have recognised that abuse that is perpetrated against women is a matter that public policymakers cannot ignore as it is a human rights concern. The other international instruments that are worth mentioning and relevant to the thesis include the Universal Declaration of Human Rights (UDHR) (1948) and the International Covenant on Civil and Political Rights

(ICCPR) (1976). Both of these international policy positions include provisions that relate to the prohibition and discrimination of people based on biologically determined sex. Thus, the ICCPR has tellingly been useful in the processes that have resulted in the prohibition against “inhuman or degrading treatment”. Consequently, this situation has led to varied interpretations that interpret violence against women (de Alwis and Klugman, 2015: 6). Furthermore, the CEDAW (1979) signalled a major step in the right direction in terms of establishing key rights for women as human rights and has since been adopted by 188 states to date.

This was to be followed up later on in the form of other international instruments such as the Beijing Declaration and Platform for Action that was signed at the Fourth, World Conference on Women (1995). Thus, the Beijing Declaration and Platform for Action included the radical (at the time) position which focused mainly on the elimination of all forms of violence against women. This was recognised as one of the main, strategic objectives (there were twelve) of the Conference which listed several concrete actions that were to be taken by the United Nations, governments and NGOs (UNICEF, 2000: 2)

At the regional level, there are several instruments that address violence against women. There are many such instruments but the following are of major importance to this thesis. The policy instruments include the addendum on the Eradication of All forms of Violence against Women and Children (1998); the Southern African Development Community’s Declaration (SADC) on Gender and Development (1997); the Protocol to the African Charter on Human and People’s rights (1986). The Protocol to the African Charter on Human and People’s rights (1986) includes provisions that problematize violence against women within what they describe as an individual woman’s rights to her integrity and security of the person and respect and the possibility of women’s rights to life. In terms of the gender policy, article one already defines for us the broad spectrum of VAW.

The Addendum of the Protocol to the African Charter on Human and People’s rights (1986) importantly recognizes the deeply - rooted socio-cultural values that require some addressing. There is a broad category of violence against women that the addendum that is introduced at the start of the section includes: practices that may be deemed as harmful to women and these include traditional practices such as female genital mutilation and femicide; psychological and emotional abuse; economic, physical and sexual violence. Consequently, the African Charter on Human and People’s rights (1986) calls for the urgent need for the provision of services that include but are not limited to access information for survivors of abuse including women with

disabilities and other women who are on the margins of society. The African Charter on Human and People's rights (1986) recommends the allocation of the necessary resources to support the implementation of these ideas as practical interventions or praxis to fully implement the recommendations within signatory/member States.

According to Ortiz-Barreda et al. (2010: 125), the increase in the recognition of VAW as a growing public concern and social problem has led various governments to propagate wide-ranging legislative tools to address this gendered violence. Thus, the existing body of research reveals that globally, governments/member States have revised their legislation on VAW (including the alignment of statutes with national Constitutions) as well as on simply enacting different instruments that include legal reforms on laws and legal codes. For Fundar (2015: 3), several countries have different types of legislation that articulate DV and the legal ramifications that are associated with it. To Giridhar (2012) who is cited by Fundar (2015: 3), a total of 19 countries in the Sub-Saharan African region have made strides and have developed domestic violence legislation. Furthermore, Fundar (2015: 3) mentions that:

in response to the pervasiveness of the domestic violence, numerous mechanisms and institutions have been created around the world to address domestic violence, such as special units of the police force in Ghana, justice centres for women in Mexico.

However, literature has revealed that not all countries have legislative acts.

2.2.2 Legal Justice framework for Domestic violence in Zimbabwe

It is pertinent to understand that Zimbabwe has ratified several international treaties and conventions that include the (CEDAW) which demands the absolute protection of women's rights. In Articles 3 and 5 of CEDAW, a clear stipulation is made that the parties should take decisive action to guarantee the complete advancement and development of women's rights for purposes of securing them the enjoyment of fundamental freedoms and human rights to remove stereotyping, discrimination and prejudices and all other socially invented practices that are based on the idea of the 'natural' superiority and inferiority of labelled roles for men and women (The United Nations, 1988). In addition to this Zimbabwe has also ratified various regional instruments that include the SADC Protocol on Gender and Development (SADC Protocol, 1997), and the Protocol to the African Charter on Human and People's rights (1998). The Constitution of Zimbabwe, Amendment (no.20) Act (2013) recognizes the rights of women in public and private spheres and has specific provisions on DV. In October 2007, the Government of Zimbabwe ratified the DVA (Chapter 5: 16). Section 3 of the DVA has a broad

definition of domestic violence which includes a wide range of behaviours within its ambit.

The DVA (2007) establishes that DV includes the following abuses:

physical, sexual, emotional, verbal and psychological, economic, intimidation, harassment, stalking, damage to property, forcible entry into the complainant's residence without consent, where the parties do not share the same residence, unreasonable disposal of household effects or other property in which the complainant has interest.

More so domestic violence includes other abuses derived from customary rites and practises that socio-cultural and customary practices that discriminate against women including child marriage; forced virginity testing, pledging of women or girls and female genital mutilation (Section 3, Domestic Violence Act, Chapter 5.16) The DVA (2007) in Section 3 criminalises the act of DV and also focuses on the provision and establishment of safe houses or shelters for the determination of giving a safe sanctuary for accommodating/or sheltering victims of DV which also includes their children and other dependants.

2.2.3 The Legal Justice System and Implementation in Southern African research

The implementation of the legal justice system in the form of the DVA / Law has been explored by several scholars, internationally, regionally and nationally including: (Guerrero Caviedes, 2002; Provoste and Guerrero, 2004; Kislinger and Cedano, 2005; Fundar, 2015; Vetten, 2014; Furusa and Limberg, 2015; Magorokosho, 2010; Fourie, 2014) among others. The studies have generally highlighted that the implementation of the DVA (2007) is currently being hampered by several impediments that include: the lack of resources at implementing, institutional levels, negative perceptions and attitudes of vital personnel who include the police, judges, and magistrates.

One challenge documented in research on issues that hinder the effective implementation of domestic violence legislation is inadequate training of the police and judicial officers to handle cases related to DV. Fundar (2015: 7) argues that some of the factors that impede the successful implementation of the DVA (2007) include but are not limited to state institutional mechanisms for responding to calls for an end to gender-based violence including judicial officers' limited power and ineffectiveness in responding to DV and the inadequacy of training that police officers receive to deal with this scourge. In one sense, it can be postulated reflecting on policing practice that domestic violence in some instances is still viewed as a matter that should be viewed outside the bounds of state interventions that is, as a private/ domestic matter. The main reason is because of operating within a patriarchal context. Literature has revealed that the notion that battering is more a private affair than a crime has been a main obstruction to the

passage of domestic violence legislation and its implementation (Fundar, 2015: 7). Domestic violence has been perceived as a domestic issue which should be resolved in a private, domestic environment, not in the courts. However, legal reforms have indicated that the state has a key mandate of ensuring that domestic violence legislation are effectively enforced.

Similarly, challenges with the police were also noted in South Africa. According to Furusa and Limberg (2015: 6), when it comes to the vice of DV, the role of the South African Police Services (SAPS) has come under sharp scrutiny. A mass body of literature reveals that the perceptions of police officers around DV have obstructed the effective implementation of domestic violence legislation.

Various studies focus on the weaknesses of the police (Mathews, 2012; Vetten, 2014; Taranto et al., 2013). The major weakness which was raised was that of non-compliance and reluctance to issue protection orders or make arrests by the police (Taranto et al. 2013 cited in Furusa and Limberg, 2015: 6). For Prinsloo (2007), police officers tend to exhibit attitudes viewed as deterring the reporting of cases of domestic violence.

The same observations were noted by Magorokosho (2010: 55) in her study of Protection Orders in Zimbabwe. In the study, the findings reveal that police officers were not assisting the victims of DV adequately. Literature has revealed other factors that may hinder people from the procedures of reporting cases of domestic violence including the lack of knowledge about the rights of victims; poor information about cases; poor follow-up on survivors who are referred to other services; inadequate services including counselling, shelter, medical services and legal advice (Adomako Ampoko, 2008; Mitchell, 2012 in Fundar, 2015:9). In addition, there have been several instances where numerous reports of police officers who used their discretion to determine whether a DV case requires prosecution or not thus personalising the whole process thereby rendering it ineffective (Cantalupo et al., 2006 in Fundar, 2015: 9).

A study by Artz and Smythe (2005) explored the connection between economic oppression and DV in South Africa. The study observed that the DV Act did not fully recognise the financial repercussions that survivors of DV suffer at the hands of perpetrators. Although the DVA emphasizes that survivors of domestic violence should receive emergency monetary relief from the respondents, a study by Artz and Smythe (2005: 214) revealed that some respondents were being arrested for non-payment, as that constituted a breach of the Protection Order. The study by Artz and Smythe (2005: 219) revealed that police officers continue to struggle with two important aspects of the process: the withdrawal of cases and call-outs for breaches of

Protection Orders. The study gathered from the police officers that applicants, particularly women, repeatedly withdraw domestic violence-related complaints. Literature has documented that women withdraw cases mainly because they depend on husbands for sustainability and in most cases, the husband is the breadwinner so if he is convicted the wife and children will become destitute. Literature has also indicated that women normally get pressure from their relatives to withdraw cases. This was observed by Magorokosho's (2010: 55) study in Zimbabwe. The study revealed that some victims withdraw charges because of family pressure and a lack of resources for family support. They end up with no option but to withdraw the cases. To be fair, the DVA (2007) however, provides an option for survivors to apply for emergency financial relief to enable them to settle after the issuance of a Protection Order. It also emerged from Magorokosho's (2010: 56) study that:

when faced with domestic violence cases, the police try to mediate or play the role of a family counsellor rather than treat it as a criminal or civil domestic violence and advise the parties accordingly or take action as expected of them in the Act.

Magorokosho (2010: 64) invites us to realise that there are trends around the question of withdrawing DV cases that have been reported indicating that the binary explanation for this situation is that those who insist on making withdrawals of their cases are still interested in continuing or maintaining the relationship. On the other hand this dichotomous scenario shows us that those who pursue their cases would have made up their minds to discontinue the relationship. Armstrong (2000: 48) continues to problematize this notion by alerting us to the socially constructed reality that in most cases women who are abused are often exerted a lot of pressure from their own families to take two options: that is, either to leave the relationship (which is not usually the first option that they have) and to accept the violence by not raising any complaints. Women are forced to withdraw cases because of family pressures they experience. Another impediment identified in the literature is police attitudes and stereotypes.

The Commissioner of police commented that the law 'was made for a country like Sweden, rather than South Africa' (Artz and Smythe, 2005: 220). Such negative attitudes adversely affect the implementation of the DVA. Similar findings were witnessed in Zimbabwe by Magorokosho (2010: 62) who drew from interview data that was conducted with survivors to argue that the interpersonal relations of some police officers made it challenging for the survivors of DV to get the full extent of the protection that they need from the police services and the State. Another challenge that emerged from Magorokosho's (2010: 73) study concerns sentencing patterns. Her study identified how some survivors felt that their concerns were not

being taken seriously into consideration since the sentences that were handed down to the offenders for breaking Protection Orders were understood as not being restrictive enough. This aspect was also reiterated by Fourie (2014: xiii) who lamented that sentencing for domestic violence offenders was lenient and not deterrent enough. The study analysed sentencing patterns for domestic violence offenders in Harare, Zimbabwe. Consequently, Fourie's (2014) research findings discovered that magistrates generally tend to be tolerant in sentencing convicted DV offenders. In this sense, Fourie (2014: xiii) argues that if:

the ultimate purpose of the law on domestic violence is to assist in curbing violence in the private sphere, this could only be possible if sentences imposed on offenders are deterrent enough to achieve the desired purpose. This scholar argued that the prevailing sentencing patterns tend to show a generalized and trivialistic tendency by judiciary officers towards domestic violence crimes especially where women are victims.

Therefore, Fourie (2014) acknowledges that although the principles behind the DVA (2007) are such that families are encouraged to live together as one- in harmony thus keeping the institution of the family glued together and functional, there also was a need to deter would-be/ potential offenders by ensuring that the sentencing procedures were adequately severe. Thus, Fourie (2014) demonstrates that carceral sentences are not deterrent enough.

Furthermore, most research done indicate that levying /or imposition of heavy fines for perpetrators of DV offences is done within a context where given another opportunity- perpetrators would repeat the offences as the punishment is not deterrent enough. It is also reported that some victims face pressures not to report due to negative perceptions about real or imagined lack of satisfaction and confidence with the justice system. Various scholars believe that longer sentences could resultantly give the victims time to heal and find closure from the traumatising events by finding safety while at the same time, they are assured a degree of determent of potential offenders to commit the same offence. Fourie (2014: 7) adds that custodial sentences for DV ought to cause "fear in would-be offenders if something is to be achieved". This was reiterated by a High Court Judge, Justice Mwayera who said:

in passing sentence courts should complement the legislature to curb cases of domestic violence which are on the increase by imposing stiffer penalties to those who break the law", (An extract from a newspaper article on the 2nd of December, 2013 cited in Fourie, 2014: 44).

The Judge went on to argue that by imposing deterrent sentences- a strong signal would have been sent to potential perpetrators of DV. He delivered these remarks while handing down a

lengthy- 18-year jail sentence on a man who murdered his expecting wife in the heat of a domestic dispute that took place in December 2012.

The legal system focuses more on the criminalisation of aggressors, offenders or perpetrators and not much attention is paid to the survivors of domestic violence. Literature has revealed several weaknesses of the legal system which include untrained police and other law enforcement officers, weak prosecutorial systems and leniency in sentencing, and prevailing hostility towards the survivors. Literature has also revealed that the damage caused by DV includes more than an assault against human dignity and life. Studies show overwhelmingly that survivors suffer loss of security, psychological and physical ill-health, damage to their status as women and wives, loss of security for their children and economic hardship among other things. It is, therefore, important for this study to explore the meaning of 'justice' for survivors of domestic violence beyond the systems of the law.

2.3 Feminist Theories on the Need for justice BEYOND Law

For the past three to four decades feminist researchers have said the law is not sufficient for survivors of domestic violence, (Grauwiler and Mills, 2004; Peterson, 2008; Daly and Stubbs, 2006; Van Wormer, 2009). The inadequacies in the justice system have continued to lead feminist activists to rethink the idea of justice itself by engaging in more informal forms of establishing justice for offenders and victims of DV as well as the communities that they live in (Belknap, 2007; Bui, 2007; Chesney – Lind, 2002; van Wormer and Roberts, 2009 cited in van Wormer, 2009: 107). Feminist theories pay attention to the voices of women and their lived experiences (Bui, 2007; Collins, 1990 in van Wormer, 2009: 107).

Feminists initiated empowering survivors of violence through various ways including employment services; job training; housing referrals, welfare and the creation of shelters (Peterson, 2008: 541). These initiatives have been adopted by various countries worldwide. Van Wormer (2009: 108) postulates that globally, and most notably in South Africa; Australia; Northern Ireland; Canada; Britain and the United States of America are increasingly using other forms of settling disputes. These alternatives are recognised as utilising much more informal methods of dispute resolution that emphasise dialogue and allow women to speak out on their needs. Some of these strategies are collectively known as restorative justice and involve workshopping processes that are guided by a trained facilitator, (van Wormer, 2009: 107). Thus, restorative justice for van Wormer (2009: 109) is a survivor-centred approach focusing on marginalised groups including women.

In addition, Peterson (2008: 541) buttresses theorisations about how Intimate Partner Violence (IPV) is being addressed through informal social control. For instance, organisations that include “Men Stopping violence” in Atlanta and “Connect” in New York City (Douglas, Bathrick and Perry, 2008 cited in Peterson, 2008: 541) work through social networks, neighbourhood outreach, and community programs to enforce and establish norms and practises that shun IPV. Consequently, this means centring the importance of developing and refining collaborative research activities and projects that involve women in the research process and at different stages thus increasing the chances of drawing interpretations and interventions that correspond with women’s lived-realities have been emphasized (Sokoloff and Dupant, 2005 cited in Damant et al., 2008: 129). Intersectional and Postmodern feminists emphasize recognition of diversity among women and observing various groups based on gender, ethnicity, race, sexual orientation and social class. Projects have to cater for women’s needs in various contexts.

In Zimbabwe, the Women and Law in Southern Africa (WLSA), a Private Voluntary Organisation (PVO), is blazing the trail in social justice work by showing how action-oriented research in the socio-legal disciplines contributes to the continued well-being of the girl child and women through advocating for their rights. Therefore, WLSA’s work integrates action into research by challenging us to think beyond the bounds of legal thinking and question law. This kind of action-oriented research is renowned for instigating campaigns that make changes in many aspects of socio-legal life that include policies, laws, plans of action, providing leadership, and legal advice and educating women and girls about their rights and sensitizing communities on gender. Similarly, several of non- Governmental organisations, such as Musasa, Women’s Coalition, Christian Care, UNIFEM’s Gender and Women’s Empowerment and others run programs to assist women, including survivors of Domestic Violence. Survivors receive psychosocial support through counselling programs, get temporary accommodation, get legal assistance, safety and security. Although most of this work does not name itself as “social justice,” it is important to make links between practices located in national and international feminisms and the meaning of social justice to deepen understanding of what it might mean to address domestic violence beyond the criminalization of those who cause it.

2.4 Theorisations of Social Justice

The question of what constitutes justice for survivors of domestic violence is related to other questions within the broad range of social thinking about justice in the past few decades. Several strongly influential scholars, including Martha Nussbaum, Amartya Sen and Nancy Fraser, chart a discussion on what 'justice' would mean for citizens in society. These theorists argue that justice is concerned with restoring human dignity and the well-being of citizens in society.

2.4.1 Nancy Fraser's theory of Social Justice

Cazden (2012: 178) argues that Nancy Fraser developed a theory of social justice that was anchored on three dimensions that are recognition (cultural); representational (political) and redistribution (economic). Fraser also postulates that these three dimensions are essential in achieving social justice.

Fraser's theory criticises distributive justice theories which she accuses of concentrating on economic inequalities and overlooking the recognition of difference (Robeyns, 2003: 5). Fraser argues that distributive justice theories are unable to adequately address challenges of recognition. Holst (2010: 1) explains that distributive theory is about how something is distributed from the perspective of justice. Distributive justice theories are concerned with a just distribution of rights and material resources to promote fairness and equity (Reisch, 2002: 345). Rawls, the theorist of distributive justice, articulated the 'principle of redress' to promote a more just distribution of social goods (Reisch, 2002: 345). Distributive justice, therefore, is primarily concerned with equal rights and equal and fair distribution of resources as crucial for promoting social justice.

The main argument in Fraser's theorisations is vital in that it helps us understand that beyond the theories of distributive justice which focus only on economic inequalities are cultural dimensions of injustice. On the same note, Fraser critiques theorisations of recognition that disregard the claims for redistribution and economic inequalities (Robeyns, 2003: 2). She consequently advances an integrative framework which brings together cultural and economic inequalities and injustices for varied categories of people under the same rubric of analysis (Robeyns, 2003: 9). Fraser argues for a theory of social justice that combines both recognition and redistribution. Redistribution is a form of socioeconomic justice that looks at economic inequalities and injustices and how they can be addressed by redistributing material resources, wealth, opportunity, and income to all members of society, including those who were excluded

(Wilson – Strydom, 2015: 149). Fraser proposes redistribution as a remedy to socio-economic prejudices rooted in the political-economic order of society.

Fraser (1997: 71) in Wilson – Strydom (2015: 149) recognises that the symbolic and cultural issues have roots in the discursive patterns of communication, representation and interpretation. Recognition looks at historical inequalities and the formation of constituencies that have been disadvantaged or marginalised in society. It is pertinent to recognise that injustices in this social spectrum include cultural hegemony, looking at some cultures as 'invisible', and not respecting differences (Wilson- Strydom, 2015: 149). Some dominant cultures may undermine minority groups and fail to recognise their existence. Recognition takes note of cultural diversity and recognises the importance of each social group, including its language, dress, and communication, among others. According to Lister (2007: 4), recognition is about claims of decency and dignity for individuals and groups. An individual is entitled to a dignified life. Furthermore, Fraser's theory emphasises participation parity, promoting social orders that allow people in society to interact with each other as equals, ensuring that no one is left behind (Wilson – Strydom, 2015: 149). Everyone including minority groups is supposed to participate freely in society without being discriminated against.

Fraser's theory explains that the various forms of injustices that people suffer and how these injustices are interrelated are vital to grapple with. Fraser contends that most social injustices are a combination of cultural and economic inequalities. Fraser opines on the idea of bivalent collectivity to illustrate why social justice has an intersecting cultural and economic dimensions that cannot be easily separated (Robeyns, 2003: 2). According to Fraser, "a bivalent collectivity is a group of people who suffer both socioeconomic maldistributions, and cultural misrecognition" and includes class, gender, race, and sexuality (Robeyns, 2003: 2). Fraser claims that the injustices that each category experiences simultaneously arise from economic and cultural dimensions.

Thus, Fraser illuminates a Marxian standpoint that global, capitalists control the economy by exploiting the lower classes who provide services but remain excluded from benefitting from the economy. The economic ruling class owns and controls the means of production whilst exploiting the workers by extracting their labour, time and value (Block, 2018: 242). Those who occupy low classes are disadvantaged and experience economic injustice through the maldistribution of resources, and the remedy comes through changing the way the economy is organised (Block, 2018: 242). According to Fraser, class as a category is affected by both

economic and cultural injustices. Those in the low class are exploited and manipulated by those who own the means of production. Social justice for this category can only be realised by addressing economic and cultural injustices and utilising both redistribution and recognition in redressing the issues.

Furthermore, another example given by Fraser concerns sexuality which stands as a cultural rather than political economy (Block, 2018: 242). Fraser posits that “any injustice which targets individual and collective sexualities is a recognition issue” (Block, 2018: 242). Lesbians may suffer social injustices as they experience discrimination, shaming and harassment (Block, 2018: 242). However, this category is also affected economically; for example, lesbians may be despised and evaluated negatively in society and fail to enter some job markets because of their sexuality (Block, 2018: 242). In some contexts, lesbians are not supported legally and remain largely excluded. One's sexuality leads to economic and cultural injustices, particularly non-heterosexuality, which some societies may not recognise. These injustices can be addressed by both redistribution and recognition.

Similarly, Fraser highlights that race and gender as categories are also affected by economic and cultural inequalities and injustices and need recognition and redistribution as routes to remedy the injustices (Block, 2018: 243). Gender inequalities and racial discrimination are some of the challenges that need redress. Women as a category are discriminated against in society, and in workplaces, they are subjected to low-paying jobs.

As a feminist scholar, Fraser proposes several measures to be taken to redress economic and cultural injustices. Redistribution of material resources, wealth and income is important in addressing economic inequalities and promoting social justice. Recognition aims to embrace diversities and cultural differences and promote transformative remedies to correct inequitable outcomes. All groups in society need to be recognised and treated as human beings. Fraser's theory is relevant to my study as it looks at forms of injustices people experience and how these can be redressed through redistribution and recognition. Survivors of domestic violence are a disadvantaged category who should not be excluded from accessing social justice. This group experiences various economic and cultural injustices within the home environment. The injustices include various types of violence such as sexual violations, physical abuse and economic abuse. These abuses can be redressed through redistribution and recognition. Equitable distribution of resources and recognising survivors of DV as human beings who deserve respect and dignity are emphasised by this theory.

2.4.2 Amartya Sen's Capability approach

According to the Capability approach, the relationship of interpreting economic problems need to be understood within the social justice perspective that was introduced by Amartya Sen- an economist and further refined by the scholar Martha Nussbaum. To be sure, this approach argues that:

the welfare of individuals is concerned with the extent to which people can be and do what they have reason to do promoting their quality of life (Nussbaum 2000, 2011; Sen 1985, 1999 in Wilson-Strydom, 2015:150).

According to Holst (2010: 1), this is a distributive theory of justice. Holst explains that distributive theory is about how justice forms a vital node to understanding the distribution of social phenomenon. Beyond wealth, income and primary goods Sen in Holst (2010: 1) argues that justice requires the distribution of capabilities. The Capability approach insists on the importance of capabilities, which refer to what people can do and be. These are considered important indicators for developing and assessing “the quality of life of people” (Holst, 2010: 1). The capability approach is an analysis of issues of social justice or injustice, taking into account individual differences, context, and institutional arrangements.

Nussbaum (2003: 1) states that Sen has been concerned with inequalities between women and men and achieving gender justice in society. According to Sen, if people are asked what they can do and be, some understanding of the obstacles societies have established against full justice for women is established (Nussbaum, 2003: 1). This theory emphasises freedom and agency as crucial objectives for women who have been treated as inactive subjects of development. Women have to make decisions about their own lives. Sen, in this theory, notes that women have been excluded from fundamental entitlements, and hence the theory emphasises the inclusion of women in development and their participation. According to Nussbaum (2011: 18), capabilities emphasise that the most important elements promoting quality of life for people include bodily integrity, health and education among others. Therefore, as Nussbaum (2003: 16) mentions, Sen agrees that human capabilities should be centred by states globally as entitlements of each citizen, and these should include (education, the free choice of occupation, health, political and civil liberties). Sen's main argument in this theory comes from what he refers to as the:

'pervasive fact of interpersonal heterogeneity' (Sen 1980: 215 in Holst, 2010: 1)

This means that the hierarchy of difference stipulates that people are positioned differently, and equipped differently concerning how they function. Holst (2010: 2) explains that this

theory is about how people can function, what they can do, and be with a given set of resources. Capabilities are closely related to functionings and opportunities or the enjoyment of individual freedom, which are vital for their stability as human beings (Nussbaum 2000, Sen 1999 in Wilson-Strydom, 2015: 151). Functionings have been explained as the embodiment of personhood that includes being part of a community, being sheltered, working, “being respected, and being psychologically and physiologically healthy” (Robeyns, 2003: 10).

In this theorisation, people should come up with their life plans and decisions about what they want to do. What is important in “Sen’s framework is that people have effective opportunities for development” (Robeyns, 2003: 10). When issues of justice and injustices are considered in this theory, it is whether people have had similar opportunities in life (Wilson-Strydom, 2015: 151). As Sen argues, social differentiation does not necessarily mean inequality, however, differences morph into inequalities if and when they impact capabilities (Wilson-Strydom, 2015: 151). Holst (2010: 1) alerts us to the fact that Sen (1980:215) gives an illustrative example of a wheel-chair bound person who needs more resources to achieve functionality compared to an able-bodied individual. Therefore, this theory is concerned with diversity and how people have very different needs according to various factors such as health, longevity, and climate conditions, among others. Development should take into consideration individual differences and cater for various needs.

In this theory agency is a vital component of notions about opportunities and choice (Wilson-Strydom, 2015: 151). The capabilities approach thus buttresses the importance of choice and individual agency and describes how these can be constrained or qualified by opportunities that include economic, social and political factors. For Sen, three types of conversion factors influence the connection between primary goods or resources and one’s real chances to achieve certain things. Firstly, there are what are referred to as personal conversion factors which include intelligence, reading skills, sex, and physical condition that influence how a person can change the features of the commodity into a function (Robeyns, 2003: 11). Furthermore, Robeyns (2003: 11) continues to demonstrate how Sen gives the example of a person who is living with a disability, physically challenged and is unable to cycle a bicycle. The second factor that we need to take into account when analysing capabilities is the social conversion factors which may include social relations of power and hierarchies, religious norms, gender roles, and discriminatory practices. The last factor to consider is the environmental conversion factors which include climate and infrastructure (Robeyns, 2003: 11). According to Sen, cultural injustices including androcentrism and religious biases can sometimes limit a person's

capability (Robeyns, 2003: 12). Resources contribute to the attainment of capabilities to some extent. The theory highlights that conversion factors similar to personal factors influence the extent to which a given individual can make use of available resources to achieve functionings and capabilities (Wilson-Strydom, 2015: 151). For instance, a student who is blind is dissimilar from a student who can see. Taken at face value this dissimilarity might seem not to be innately a form of social inequality. However, on close analysis- let us suppose that braille textbooks and other learning support for students living with disabilities are not provided in this case the educational capabilities of the students who are visually impaired are curtailed when compared to students who are not visually impaired and this amounts to injustice (Wilson-Strydom, 2015: 151). According to Sen, there is evidence that the conversion of goods to capabilities is different in persons and they do not necessarily have access to the same forms of equality (Sen 1979: 219 in Wilson-Strydom, 2015: 151). This theory is relevant to my study, which looks at the meaning of social justice for survivors of DV. This is a disadvantaged category that faces several injustices within the confines of the home. The study seeks to determine how the shelter space addresses how survivors of DV interpret social justice within the shelter space. The capability approach focuses on human diversity and is concerned with every person's well-being. The capability approach has elements of both redistribution and recognition.

2.4.3 Martha Nussbaum's Capability approach

Martha Nussbaum, guided by the thinking of Amartya Sen, has developed a perspective on social justice, through what is named the "capability approach" for understanding the needs of those severely disadvantaged by social, economic, and political violence. I find this theory valuable as a framework for imagining what an approach to social justice for survivors of domestic violence might look like, and I review the theory in depth.

Nussbaum (2011: 18) states that the Capability approach is defined as an approach that comparatively describes the "quality of life and theorises about social justice". This approach is primarily concerned with promoting equality between males and females in society and takes cognisance of individual needs. Nussbaum (2011: 18) further explains that the approach affirms that the important question to ask when comparing people and examining them for their affability or fairness is, "What is each individual able to do and to be?". This fundamental principle of this theory aims to cater for all people, with their differences or diversities. The approach is focused on the choice and freedom of citizens. It holds that good societies should promote:

for their people a set of opportunities or substantial freedoms which people may or may not exercise in action: the choice is theirs (Nussbaum 2011: 18).

According to Nussbaum (2000: 220), women are not treated as individuals with dignity- as ends in their own right and deserve respect from institutions and laws. From the foregoing, it is clear that Nussbaum perceives women to be treated as mere instruments or the ends of others and that they are viewed as reproducers, caregivers, and sexual outlets, among others. Nussbaum spotlights “a list of central human capabilities that every person should pursue, treating each as an end and none as mere tools for the ends of others” (Nussbaum, 2000: 223). Nussbaum presents a list of ten capabilities that should be considered central to human capabilities that include:

life; imagination and thought; bodily integrity; senses; bodily health; practical reason; emotions; affiliation; play; control over one's environment (Nussbaum, 2011: 31).

According to Nussbaum, this list is significant for the attainment of a completely good life for human beings. Citizens should have the right to political participation and free speech, and association protections. On the same note, they should have freedom from unwarranted search and seizure; have the right to seek employment in an equal manner with others; have property rights on an equal basis with others; they should be able to hold their property (both movable goods and land) (Nussbaum, 2011: 31). As Nussbaum (2000: 223) espouses, the theory uses:

a threshold level of each capability; beneath that, it is held that truly human functioning is not available to individual citizens. Justice requires that every person be sustained at a threshold adequate level of capability to function in all ways that are important to human well-being.

Thus, citizens are expected to operate above the capability threshold. Nussbaum (2011: 40) reiterates that promoting these ten capabilities to all societal citizens is a crucial element of social justice. Nussbaum (2011) also postulates that the central capabilities or fundamental entitlements have to be catered for through each nation's system of Constitutional law. It is paramount for a just society to ensure that all citizens are entitled to bodily integrity, employment, participation in politics, a sense of emotional well-being, valuable affiliations, and enhanced self-respect. Nussbaum reiterates that no society can lay claim to justice without these basic entitlements. Education plays a critical role in this process as it empowers and enhances the status of people. If individuals are subjected to domestic violence, their rights are violated, and their bodily integrity, health, human dignity, emotional well-being, affiliations, and practical reasoning are affected. Nussbaum (2011: 21) asserts that:

one job of a society that wants to promote the most important human capabilities is to support the development of internal capabilities through education, resources to enhance physical and emotional health, support for family care and love, a system of education and much more.

She concludes by observing that a life which has no capabilities framed along her list is a life without any human dignity. The Capability Approach is based on the intuitive argument. In her intuitive argument, Nussbaum asks people to imagine 'a life without' the listed items (Holst, 2010: 5). She claims that “this would not be a life worthy of human dignity” (Holst, 2010: 5). The intuitive idea behind Nussbaum's version of the capabilities approach is based upon two factors and the first one is that there:

are especially central in human life, in the sense that their presence or absence is usually understood to be a mark of the presence or absence of human life" (Nussbaum, 2000: 230).

The second factor according to Nussbaum has something to do with these functions in a human way, not a mere animal way. Nussbaum emphasises that human beings must be treated humanely and not like animals. The senses of a human being have to be cultivated by appropriate education, leisure for play and self-expression and valuable associations with others. Nussbaum (2000: 231) opines that the core guiding idea is that human beings are dignified and free to shape his/ her own life rather than being pushed around or shaped by the world as though they were animals.

Nussbaum (2003: 36) argues that capabilities are very close to the human rights movement. Both the Capabilities approach and the human rights movement emphasised various economic and social rights; the free choice of occupation; the freedom of association and political liberties. For Nussbaum (2003: 36), the capabilities should be envisioned as covering the terrain of first-generation rights that include civil liberties and political and second-generation rights that cover social and economic rights. However, the Human Rights approach has frequently been criticised by feminists for its cis-heterosexist male bias therefore for not including some fundamental entitlements, opportunities and abilities that are crucial to women in solidarity against struggles for sex equality (Nussbaum, 2003: 36). As a result of this exclusion, feminists have also made radical proposals such as adding to the discursive dialogue around international rights that are etched in documents about rights that include the following: “sexual harassment in the workplace and bodily integrity and the right to be free from violence in the home” (Nussbaum, 2003: 37). The approach is concerned with gender justice and empowerment of the marginalised groups. The Capabilities Approach focuses on that which people can do and

be and addresses issues of inequalities which women suffer inside the family, inequalities in educational deprivations, and the resources and opportunities failure of work to be recognised as work insults to bodily integrity. She argues that the traditional rights theories neglected these issues. The Capabilities approach emphasises equality between citizens and reiterates that no one should be marginalised or discriminated against. Nussbaum, in her theory, reiterates that equality is an essential objective for women who are in pursuit of social justice.

This chapter argues that the capability approach, as articulated by Nussbaum, correlates very well with the research of feminists who have critiqued legal frameworks for their failure to recognise the rights and needs of survivors of DV; the theory simultaneously brings nuance to the longstanding demands of feminists in Zimbabwe for the recognition of the meaning of all forms of GBV as holistically destructive to survivors' lives, families, economic opportunities, and spiritual and psychological health (Tsonga, 2020). Bringing this theory into conversation with the research focus on the meaning of justice for survivors of domestic violence in Zimbabwe provided a strong theoretical tool to interrogate possibilities of "justice provision" beyond the law.

My review of selected theorists on social justice here led me to work with Nussbaum as the most useful theorist when it came to exploring how the provision of shelter space in Zimbabwe might be understood. The social justice perspective advanced by Nussbaum (2011: 18) invites us to grasp the fundamental question for this theory which is: 'What is each person able to do and to be'. The approach takes each individual as an end and is concerned with the opportunities available for each person. The theory takes survivors of DV utilising the shelter space as human beings who are entitled to dignified and respectable lives. This theory is concerned with how justice operates in individual lives and takes cognisance of individual needs. The theory addresses inequalities that women suffer owing to inequalities in resources and opportunities available for every person as well as inside the family. Nussbaum suggests a list of central human capabilities to which every human being is entitled and this research was invested in exploring how those embedded, in different ways, in running a shelter in Zimbabwe make meaning of social justice within a shelter space.

2.5 Research on Shelters for Survivors of Domestic Violence

This section reviews the literature on shelters as spaces that are designed to assist survivors of domestic violence and are often claimed to offer an alternative form of justice different from legal justice. Several studies on shelters have been conducted in the United States of America,

Canada, Australia, Britain and many other European countries by scholars (Sullivan, 2010; Lyon, Lane and Menard, 2008; Tutty, 2006, Haj- Yahia and Cohen, 2009; Tutty, Weave and Rothery, 1999). However, not much literature exists on this area in Southern African contexts. This section covers definition or explanation of shelters; the history and origin of women's shelters; the role of shelters; women's experiences in shelters; challenges to effective sheltering.

2.5.1 Definition of sheltering

According to (Lempert, 2003: 89), a shelter is the residential rescue of women and their children from the consequences of men's violence, men who are usually the intimate partners of the women. Sallan (2013: 115) corroborates this conceptualisation by emphasizing that:

women's shelters are temporary residents with limited service capacity and give hope to women who do not have any place to go to after encountering violence.

Shelters, also referred to as short-term safety nets, or safe havens are a temporary intervention strategy for survivors of domestic violence. Shelters provide temporary accommodation and offer other services to women survivors of DV and their children. Several scholars including (Sallan, 2013; Geirman et al., 2013; Davies, Hagen and Early, 1994; Bergstrom-Lynch, 2018; and Glenn and Goodman, 2015) have explored the history and origin of shelters. Several studies concur that historically, shelters have generally tended to be initiated by women's movements and organisations in the 1970s to fight GBV (Geirman, et al., 2013; Glenn and Goodman, 2015). Davies, Hagen and Early (1994: 695) state that:

it was not until the 1970s that specific services were developed to meet the needs of abused women and their children.

The scholars go further to explain that before the advent of this system enunciated in the quotation above, many women survivors of DV in the Global North used to receive medication, clinical treatment for depression from psychiatric clinics or financial aid through Aid to Families with Dependent Children (AFDC) counselling family services agencies without necessarily either client or workers thus speaking openly about gender-based violence and beatings (Davies, Hagen and Early, 1994: 695). A relatively large body of literature reveals that it was only when the abuse of women was recognized as a significant social problem that shelters were opened to empower, provide relief and protect. Sallan (2013: 109) historicises the shelter and teaches us that the first shelter was established in Norway in 1968; in England in 1972 and in the United States of America in 1974. Some research from the Global North shows us that since the 1970s crime and justice organisations, several social interventions such

as healthcare centres and psychiatric care centres, shelters for battered women, and rape crisis centres, were opened in the United States of America (UN 2005 in Sallan, 2013: 109). It is also pertinent to grasp the historical facts that in the 1970s women's rights activists began to open spaces to shelter women who were fleeing abusive intimate partners as well as to organize services to support battered women (Mantel, 2013 in Bergstrom- Lynch, 2018: 113).

On the same note, Geirman et al. (2013: 7) explain that as far as violence against women is concerned- shelters symbolise a praxis, a feminist intervention that forms a critical component of the multi-dimensional reaction by survivors. This standpoint is already established by different international agreements that encompass the 1995 Beijing Declaration and Platform for Action. This international policy instrument stipulates that member States provide relief support and well-funded shelters for women who face violence. It is stated that States are also obliged to provide medical, psychological, and counselling services, low-cost legal aid as well as suitable help to equip survivors with a better life. Sallan (2013: 109) reiterates that:

the recognition of domestic violence by the United Nations as a human rights abuse in the 1990s (Beijing Declaration and Platform for Action, 1995; CEDAW, 1992) meant that domestic violence became an internationally recognized problem, obligating the States to develop necessary legal base and policies.

International legal instruments that observe VAW as an infringement of one's rights obligate States to come up with mechanisms to assist survivors of domestic violence. Sallan (2013: 109) goes further to say that because of these universal instruments, VAW was accepted for the first time, not as a private family problem but as a public problem requiring public action for it to stop. It is because of these developments that shelters for women and girls were established in many countries. However, in most countries, shelters are run by civil society than governments.

2.5.2 The role of shelters

Several scholars concur that shelters have been established to protect, empower and offer respite to abused women (Geirman, et al., 2013; Bergstrom-Lynch, 2018; Glenn and Goodman, 2015). Sallan (2013: 115) argues that:

Benefitting from women's shelters has also become a right for battered women, enabling them to go out of their house and search for solutions against domestic violence

Strategija (2013) cited by Muftic, Deljkic and Fansher (2016: 2) argues that shelters are helpful in that they provide treatment and protection for DV survivors through "various services, including individual and group therapy, social counselling, various therapies, educational support, medical support, crisis intervention, and social reintegration". Survivors will be

engaged in several activities including finding employment, seeking healthcare and ensuring that their children's educational needs are catered for (Sullivan, 2012: 3). Furthermore, shelter residents receive information on their legal rights and how to get legal assistance and obtain protection orders (Sullivan, 2012: 3). Several scholars including (Sullivan, 2012; Muftic, Deljkic and Fansher, 2016; Gul, 2013; Toktas and Diner, 2015) concur that the core services offered by the majority of shelters include crisis services including accommodation, medical and legal advocacy, counselling, and education about the community. Safety is another core service for women and children within a shelter space (Sullivan, 2012: 4). On the same issue, Geirman et al. (2013:19) reiterate that safety should be a central goal of any shelter space.

Geirman et al. (2013:11), go further to add financial and economic assistance as other services offered by shelters. Consequently, Lempert (2003: 94) argues that without tangible help such as housing, employment, food, childcare, and healthcare, and all arenas beyond the scope of shelter provision, economic challenges will force women back into relationships with their dangerous partners. Shelters must offer assistance which helps survivors to move on with their lives. Shelters also provide survivors with opportunities to share stories with others in the same situation (Sullivan, 2012: 3) and survivors have a chance to interact with others which aid mental stability.

Furthermore, shelters offer services to children. According to Watson and Lopes (2017: 6) most shelters offer psycho-social support to children which includes play and art therapy. Mariponde, Mavondo and Chamisa (2020: 92) add that safe shelters provide a conducive environment for GBV survivors to rebuild lost self-esteem and a sense of being and confidence to re-enter society. While there is considerable overlap in the research on shelters around their importance in giving abused women temporary shelter, access to services and resources, and access to legal and other support services, such work is not usually described concerning questions of justice. The work is seen as feminist-inspired, and as a form of service provision essential for women's recovery from domestic violence, and there are debates about the value of short-term accommodation and the fact that it is women rather than their abusive partners who get forced to seek shelter. There is, however, little which theorizes shelter work beyond its power as a form of rescue service in the face of calamitous home violence.

2.5.3 Women's experiences in shelters

Several studies (Geirman et al., 2013; Bergstrom- Lynch, 2018; Sullivan, 2012; Glenn and Goodman, 2015; Few, 2005; Davis, Hagen and Early, 1994) have explored women's

experiences with shelters. The studies touched on many aspects including whether women benefitted from shelters and services offered, interactions and relationships with staff and shelter rules and policies. The findings from the studies show both positive and negative outcomes. The earliest clinical examination of the role that shelters play in the lives of survivors of DV was a qualitative study conducted in Western Canada (Tutty, Weaver and Rothery, 1999 cited in Sullivan, 2012: 5). As Sullivan (2012: 5) observed, women, revealed that shelter staff were knowledgeable:

caring and supportive. Almost half of the women commented on how safe they felt in the shelter, with some noting that it was the first time in years that they could truly sleep.

Similarly, scholars such as Davis, Hagen and Early (1994); Tutty, Weaver, and Rothery (1999) cited in Few (2005: 489) observe that shelter staff play an important role in “training other professionals who work with battered women providing a safe environment; effectively manning crisis telephone lines and maintaining emotional ties”. Furthermore, the other positive comments relate to having survivors interact, share experiences and learn to connect with community resources and programs which benefit their children. As Gordon, 1996 cited in Few (2005: 489) noted:

Battered women have also credited shelters for helping them secure employment, further their education and lead healthier lives.

Another later study concerning women using shelters was carried out by Tutty (2006) in Canada. The study indicated that women were satisfied with shelter services including safety, emotional support/ counselling and housing assistance (Sullivan, 2013: 5). Similarly, a study conducted by (Lyon, Lane and Menard, 2008) in the United States revealed that women’s shelter stay was helpful to them. Other positive outcomes for a stay in shelters were found in a study done in Israeli shelters (Itzhaky and Ben Porat, 2005 cited in Sullivan, 2013: 6). The study reported that after women had lived in shelters for three months, they experienced high life satisfaction and also improved self-esteem and personal empowerment. Furthermore, another study in Canadian shelters (Orava, McLeod and Sharpe, 1996 in Sullivan, 2013: 7) reported that the longer women remained at the shelter, the lower their level of depression and the higher their self-esteem. Similarly, a United States study on Domestic Violence by Few (2005: 498) involving black and white battered women demonstrated that these women were satisfied with the help they got from shelters. In this study, women reported that shelter staff were caring and created a conducive environment for their recovery and they provided legal and social services. In addition, two studies reported positive shelter outcomes for youth and

children who utilized shelters (Chanmugam, 2011; Lyon et al., 2008 in Sullivan, 2013: 7). One of the studies showed that children and youth also talked positively about shelter benefits including safety and financial support their mothers received.

In the other study, mothers indicated that their children appreciated sheltering as they were supported and received counselling to enable them to express their feelings without resorting to violence. However, the overall profile of how shelters may offer spaces beyond the law to survivors to access resources includes many research studies where negative outcomes with shelter experiences, particularly with shelter rules and the issue of privacy have been reported. As Glenn and Goodman (2015: 1482) argue one of the main aspects of shelter life is the establishment of rules to govern the everyday lives of residents. Lyon et al. (2008) study in the United States found that participants expressed negative feelings in the shelters due to shelter rules including chores, parenting and curfews (Glenn and Goodman, 2015: 1484). Studies revealed that women struggle with shelter rules mainly because the rules may not align with their cultural, ethnic and racial backgrounds.

The second way of thinking about this phenomenon is through “the rules creating an unsettling sense of powerlessness or being controlled” (Haj-Yahia and Cohen, 2009 cited in Glenn and Goodman, 2015: 1484). Research has also established survivors’ concerns about shelter rules as they limit individual parenting choices (Cosgrove and Flynn, 2005; Glenn and Goodman, 2015: 1498). Results from Glenn and Goodman’s study suggest that survivors might be sensitive to rules that separate them from their children (for example, when attending meetings or doing chores), as this might worsen depression due to DV (Glenn and Goodman, 2015: 1498). Furthermore, participants in the study by Glenn and Goodman (2015: 1493) experienced depression during their shelter stay due to shelter rules as they felt isolated from their social supports.

Research has highlighted the importance of informal social support for example, friends, family, and loved ones as a key contributor to survivor’s mental health (Coker, Watkins, Smith and Brandt, 2003; Goodkind et al., 2003 cited in Glenn and Goodman, 2015: 1498). Lempert (2003: 89) reinforces the point that shelters deprive women of their homes, their family and friendship networks, and their daily support interactions. Survivors will be in a new environment where they need to adjust for them to adapt to the new environment. The other negative outcome has been reported by Bergstrom- Lynch (2018: 116) who observed that women mentioned a lack of privacy in the house and how shelter staff sometimes come into

bedrooms unannounced, despite the door being locked. In the same study, women reported practices which in some instances were disempowering. Another study attributed to the research by Glenn and Goodman (2015: 1489) noted that participants observed that staff members isolated themselves from shelter residents and this made residents feel disrespected and less important.

Studies have witnessed a lack of physical and emotional availability of staff as a challenge for survivors (Tutty et al, 1993; Glenn and Goodman, 2015: 1496). Research has also highlighted challenges with counselling in shelters in an African setting. Some scholars argue that counselling is a Western-based –practice built on the model of individual improvement (Moll, 1983; Whittaker, 1991; Seedat, 1997 in Lempert, 2003: 94). In a South African study by (Groenewald, 2001) several study respondents maintained that counselling is ‘not an African thing’ and is inappropriate to the circumstances of African women’s lives. The respondents argued that African women in particular are embedded in collective communities of family and friends, (Lempert, 2003: 94). This argument proposes that the context is important when designing interventions for survivors of domestic violence. The African setting has to be conceptualised from an African perspective which has its own culture, value system, beliefs and tradition. Much research indicates that shelters encounter funding challenges, fewer paid staff members and other resources (Bergstrom- Lynch, 2018; Toktas and Diner, 2015). According to Toktas and Diner (2015: 629), in Turkey, the state provides financial support for shelters under its jurisdiction and not for shelters run by civil society organisations or municipalities, these have to mobilise their resources.

Toktas and Diner (2015: 629) go further to mention that Municipalities generate funding through tax revenues, unlike civil society organisations that face serious funding challenges to run shelters. The same study revealed that the lack of infrastructure for women facing different types of violence was another challenge. Additional challenges highlighted in the literature include security, politics, the role played by the police, and lack of space, Toktas and Diner (2015: 623).

2.6 Conclusion

The recognition of DV as a social problem has led Governments to formulate legislative tools to address this scourge. Literature has revealed that legal frameworks alone cannot address domestic survivors’ needs for justice, hence the need for the restorative version of justice. The legal system focuses on the criminalisation of offenders and not much attention is given to the

survivors of DV. On the other hand, restorative justice is a victim-centred approach which pays attention to the needs of the marginalised populations. This study explores whether the provision of shelters, clearly researched in multiple contexts, as usually supportive can be theorized not simply as a useful service, but as wrapped within the meaning of social justice for survivors of DV. The theorists who have looked at the question of what constitutes justice include influential scholars, Amartya Sen, Martha Nussbaum and Nancy Fraser. They chart a discussion on what 'justice' would mean for citizens in society. These theorists argue that justice is concerned with restoring human dignity and the well-being of citizens in society. The theoretical framework for the study is the Capability approach for social justice put forward by Martha Nussbaum. The main arguments of this theory are that women are marginalised and not treated as human beings who deserve respect and dignity from the laws and institutions. Nussbaum presents a list of central human capabilities that every person is entitled to and no one should be used as the mere tool for the ends of others. Nussbaum suggests that “ a society that does not guarantee these capabilities to all its citizens falls short of being a fully just society” Nussbaum (2011: 40). Bringing this theory into conversation with the research focus on the meaning of justice for survivors of domestic violence in Zimbabwe provided a strong theoretical tool through which to interrogate possibilities of justice provision beyond the law.

CHAPTER 3

RESEARCH METHODOLOGY

3.0 Introduction

This chapter outlines the research methodology, approach and design, including a discussion of epistemology, positionality and reflexivity, data gathering techniques, data analysis and the ethical considerations associated with my research. The overall purpose of the study was to explore the meaning of social justice as a component of what is offered to survivors of domestic violence in Zimbabwe and this entailed multi-focal engagement with the experiences of those engaged in shelter provision, something mandated by the Zimbabwean Domestic Violence Act.

In feminist research, questions of research methodology are key to the integrity of the research design and in the past few decades, a very rich literature has been developed on the methodologies as politically engaged journeys which take questions of context, positionalities and research intention very seriously. Feminist research assumes that an overarching goal of research work is to work iteratively, and explicitly, with zones of activism designed to transform conditions of socio-economic, political, and cultural violence and oppression. Such an assumption is ambitious, given the difficulty of bridging institutional and civil-society divides (Patai, 1991). Contemporary African-based feminist researchers insist that it is possible for research to transform the impact of colonial and androcentric epistemologies through research (Imam, Mama and Sow, 1997), and to create research methodologies accountable to both complex continental dynamics and the work of diverse threads within African feminist movements (Bennett and Pereira, 2013).

The design of research methodologies faces many challenges, Bennett (2013) suggests that a primary one “is to draw a line between theory (a way of approaching realities and experiences) and research methodologies (the ‘how’ of engagement with those realities which is directed towards both understanding them differently and, where injustices emerge, making alternatives possible)” (Bennett and Pereira, 2013: 9). My theoretical interests lie in the intersection of theories of social justice, the experiences of domestic violence for survivors, and meaning of contemporary Zimbabwe for offering justice beyond the legal for these survivors. Such an interest meant that I needed to develop a methodology that was attuned to the complexity of this intersection and prioritized **processes** and **relationships** as ‘researchable’ phenomena. In this section, I define and discuss the choices I made in planning this approach to methodology. This includes a discussion on my choice to address my research interests through a case study,

and how this choice entails thinking through questions of ethics and questions of my positionality. The chapter also presents my choice of how I “organized” the particular site with which I worked to reveal what could be termed an “exploded view” of a located opportunity (a shelter) to offer social justice to Zimbabwean survivors of domestic violence. This entailed breaking down the “groupings” of people associated with the visioning, running and living within a shelter-space, and finding methods used to make visible histories, processes, narratives and relationships which created “a shelter’s life” over the past three years. It simultaneously entailed discussing the specifics of the kinds of materials which were collated through different methods, the approach to analysing such materials to reveal connections and disjunctures, and the challenges of working with those who have very different relationships with the shelter.

3.1. Understanding Questions of Epistemology in Feminist Research

The study is situated within the Social Constructionist and Postmodern paradigms which posit that all knowledge is contextually, culturally, situationally and socially constituted (Amineh and Davatgari, 2015: 13). These scholars explain that Social Constructivism is a social theory based on assumptions about knowledge, learning and reality. The first assumption, according to this theory, is that social reality is constructed through human activity and does not exist in advance. “Social Constructivism represents knowledge as a human product that is socially and culturally constructed” (Amineh and Davatgari, 2015: 13). It is stated that, “individuals create meaning when they interact with each other and with the environment they live in” (Amineh and Davatgari, 2015: 13). This theory also views learning as a social process which occurs when “individuals are engaged in social activities such as interaction” and working together (Amineh and Davatgari, 2015: 14). This perspective is relevant to this study as it emphasises social interaction, conversations or dialogue in the natural environment.

The experiences of survivors of domestic violence are centrally linked to their ontological experience of many forms of violence that are subjective in their manifestation and lived-reality. In this sense, the investigation of such effects requires a qualitative, methodological underpinning that excavates the feelings, emotions and traumas as constituting valid social reality. Scholars such as Collin (2000) argue that epistemological underpinnings of gender research have been along a system of power that excludes others in an intersectional ‘matrix of domination’. Those who are on the margins of society such as the survivors of GBV in my study have tended to be dismissed as liars and sources of information that were not objective. This thesis adopts an oppositional gaze (hooks, 1992) by centring the women as legitimate

sources of knowledge. This chapter recognises that participants from the global south have a voice that needs to be conceptualised through their stand-point, an idea that was formulated by Harding (1987) in Sarantakos (2012: 63). This chapter engages the politics of epistemology in methodology, framing it within an ethics of care (that I unpack in greater detail- in Section 3.8: Ethical Considerations).

Furthermore, this articulation finds resonance in the theoretical approach that I adopted and presented in chapter two advanced by Nussbaum (2000) who stated that people should have basic rights and other protections. Research in the global south has historically been cited as being defined along logic that excludes those who are on the margins of society. In putting the survivors at the centre of this thesis – as a knowledge generation process, I am engaging in archaeological and social justice work that includes unlearning to relearn. The process of acquiring knowledge from participants has been a subject of intense debate with reflections on how colonial, and racial differences arose in the creation of intellectual and policy data in the social sciences and humanities of the South (Connell, 2016). In practising the ethics of care, I was cognisant of the co-creation of knowledge that I did with the study participants and this was essentially a practise of social justice. In meditating on this issue of knowledge, the section on my positionality shows how I situated myself concerning, not only the problem of the study but as an individual being as well. These questions are unpacked further in the chapter.

3.2 Research Approach - Qualitative Methodology

This study is located within qualitative methodological approaches to researching experience. By their nature, qualitative studies aim to describe and theorize disadvantaged groups' experiential life “as it is lived, felt, undergone, made sense of and accomplished...” (Schwandt, 2001: 84). One advantage of a qualitative approach remains that it allows the voices of participants to represent their opinions, feelings, experiences and above all to interpret meanings of their actions. Qualitative studies further allow researchers to investigate the social phenomena in their natural contexts, “attempting to make sense of, or interpret phenomena in terms of the meanings people give them” (Denzin and Lincoln, 2011: 3). The researcher and participants work together to create texts which become “data’. The thesis realised that much qualitative work remains based on positivist epistemology which is foundational to western philosophy and often also regarded as framing ontology in the global south. Positivism shows a bias towards the rationality of knowledge and privileges of thinking through the meaning of

experience via 'objective' binaries, and the critical separation of "researcher" and "researched." This thinking reproduces the marginality that I sought to deconstruct. This research is premised on the idea that knowledge is contextual, situational and ever-shifting and that while categorization of people (such as 'survivors') may be needed, such categorization is merely a temporary heuristic. The research simultaneously was alert to the flows of powers operating between the researcher and every participant, appreciating the need not for distance but for difficult and carefully thought-through closenesses between them. Such 'intimacies,' forged during interview processes are in themselves valuable to the integrity of the argument the research aims to create.

Qualitative research is widely used by feminists who view the researcher as a person who works collaboratively with the respondent in data gathering. Feminist methodology views the respondent as a significant partner in the data gathering process. Sarantakos (2012: 51) reiterates that qualitative research is deeply embedded in a process of "co-construction between the researcher and the participant". The participants are 'subjects' who define, explain, construct and interpret reality and as such, they are as crucial as the researcher (Sarantakos, 2012: 51).

Feminists emphasise the importance of creating non-hierarchical relationships between the researcher and the researched. Furthermore, qualitative research perceives the researcher and the respondent as two vital partners in the research procedure (Sarantakos, 2012: 46). In line with the social constructivist and postmodern epistemology, I did not enter into this study as the knower or expert, but as knowledge, seeker to gain insights on the role of shelters in theorizing what social justice might look like. I took into cognisance issues of positionality and reflexivity in qualitative research so that reflexivity was a consistent thread within my research, and qualitative research offers the generous opportunity to do this. As such, I remained on the periphery while making meaning out of responses from participants to enable knowledge production to be successful. I engaged in dialogue and meaningful conversations with the respondents to gain insights and knowledge on the subject matter. For me to gain maximum understanding, I needed to de-school myself to be schooled by the research participants.

However, qualitative studies have been criticised for taking a smaller sample size, thus creating room for researchers not to generalize results (Thompson, 2011: 78). Qualitative data has also been found difficult to analyse. In support of this view, Berg and Lune (2012: 4) noted that

“qualitative research is a long hard road, with elusive data on one side and stringent requirements for analysis on the other”

This study, therefore, followed Denzin and Lincoln’s (2000) prescription that the process of collecting qualitative data and interpreting is subjective. In other words, as the researcher, I made sense of and understood what had been learnt when I sat down and wrote the interpretive text, telling the story first to myself, then to the significant others, within the academic community and I hope that I may be able to share my research with constituencies within feminist activism and research work on social justice and gender-based violence.

3.3. Research Design: The Choice of Methodology

In this study, there are aspects of case study design in my method and I worked with one site to deepen theorization of the real-life possibilities of a survivor’s finding social justice in the face of domestic abuse. The study was situated within the Social Constructionist and Postmodern paradigms which posit that all knowledge is contextually, culturally, situationally and socially constituted (Amineh and Davatgari, 2015: 13). This perspective was relevant to this study as it emphasises social interaction, conversations or dialogue in the natural environment. It articulates well with feminist discussion on a qualitative methodology which allows for the recognition of critical meaning, especially through engagement with “subaltern” or marginalized people, as key to new knowledge. According to Reinharz (1992: 164), a “case study refers to research that focuses on a single case or single issue, in contrast with studies that seek generalizations through comparative analysis or compilation of a large number of instances”. On the same note, Sarantakos (2012: 191) adds that a case study involves studying individual cases for a long period and employs valid methods of analysis and data collection. Although I found that there is a great deal of debate about how to define a “case study,” there is an overwhelming consensus that research into the operation of organizations and institutions can be very valuable as a way of understanding intertwined and process-based experiences, especially experiences specifically orchestrated with a collective aim, such as educating a constituency, creating advocacy, and offering “services” (such as rape-crisis centres or HIV-counselling organizations) (Baxter and Jack, 2005; Fonow and Cook, 2001).

Furthermore, in designing a case study, I was encouraged to think both holistically and contextually about my “subject” of exploration, to ensure that the data collected could be coherently analysed in relation to a core theoretical question. In more simple terms, this meant I designed a way of “researching” what had happened in the life of one particular shelter, over

some time, to theorize social justice for survivors of domestic violence in Zimbabwe. This was holistic in the sense that I understood “one shelter” as sufficiently complex and rich for the study and it was contextual in that I was alert to the shifting political and economic realities of the context at every point.

The case study was most suitable for this study since it was an exploration of many of the operations of a safe shelter in its engagement with survivors’ very various experiences. However, data collection for the study was a complex and difficult process given the number of people, in different capacities and roles, associated with the shelter’s life. I have called this approach an “exploded view”, following architecturally-grounded concepts of how to “see” in complex ways. I decided to disaggregate my “view” of the shelter’s life through three main lenses: (a) I researched the history of the shelter, especially concentrating on the visions for the shelter held by its founders and political advocates, (b) I explored the (changing) operation of the shelter in all its aspects, and (c) I listened to the experiences of diverse women survivors who had lived in the shelter.

Each of these lenses was brought into play through several methods.

To understand **the history of the shelter**, I used interviews with various categories of people who knew how this particular shelter was set up and its core mandate. These included the policymakers who drew up policies, rules and regulations, activities and services for survivors of DV and these included the Musasa National Director, Musasa Shelter Manager and also various stakeholders who supported the establishment of the shelter such as the Ministry of Women’s Affairs, Community, Small and Medium Enterprise Development, Ministry of Health and Child Care, the Zimbabwe Republic Police, Social Welfare and Childline. I had a meeting with the Musasa Shelter manager who upon request, availed me a list of influential stakeholders they work closely with. I was able to go through the list and identified eight stakeholders to conduct interviews with. Since the stakeholders all occupied influential positions, I selected those whom I could conduct interviews with freely with less busy schedules.

In researching **the operation of the shelter**, I used three main methods: participant observation of the functioning of the shelter, mapping of the physical space and its use, interviews with shelter staff at all levels, and got information on shelter statistics on the numbers of women

who had drawn on the shelter services and lived at the shelter). I also conducted interviews with the Ministry of Health and Child Care and Police officers, as these figures are often central to survivors' experience of reaching the shelter space.

The third lens explored **the experiences of women survivors themselves**. This entailed the use of individual interviews, both with current residents of the shelter and with survivors who had lived in the shelter in the past. In-depth interviews with twenty survivors of DV who utilized the shelter space were conducted. I got help from the Shelter Manager to identify and select the survivors. She had to phone each one of them and introduced me and asked them if they were willing to participate in the study; ethical considerations were taken into account (which I address in more detail below).

The use of three lenses, each with its suite of micro-methods in terms of how I created conversations, approached gate-keepers, and managed my positionality about which I write below; allowed for a very rich collation of representations of “the shelter” which I analysed through a focus on the meaning of social justice as it emerged through the material. I kept meticulous systems of data, specific to each lens, to analyse what each “lens” revealed before moving to questions of how the “exploded view” (the three lenses) speaks to the possibilities of survivors' accessing social justice in a shelter.

3.4. Case selection

This study was conducted at Musasa, a shelter for women survivors of domestic violence (DV) situated in Gweru, the Midlands Province of Zimbabwe (*See Appendices 9 and 10, for Musasa Map and Photograph*). Musasa shelter is run by Musasa a Non-Governmental organisation which focuses on assisting survivors of DV in several ways including, providing safe shelters, counselling, and accessing legal justice among other things. According to Bote (2008:11), Musasa is a registered welfare organisation and is donor funded. Musasa has about nine shelters across Zimbabwe in different towns and locations. The shelter in Gweru was established in 2015 and is the only shelter in the province assisting survivors of domestic violence. Midlands Province is the third largest province of the 10 provinces of Zimbabwe in terms of population size. The province has about 11.9% of the country's nearly 15 million people (ZimStats, 2022). The 2022 census also revealed that of a total population of 1 811 908, nearly 52% of the population in the province are women. The Zimbabwe Demography and Health Survey

(ZDHS) (2015) identified Midlands Province as one of the regions with the highest rates of DV in Zimbabwe.

This shelter was selected mainly because it was a relatively new development in Gweru town and the Midlands Province as a whole. As a former board member for Musasa at the national level, I did not encounter any challenges in getting permission to do the research and contacting past residents of the shelter for interviews.

3.5 Sample Size

The sample was made up of the Musasa National Director, Musasa Shelter manager in Gweru and Musasa staff, Musasa stakeholders who were eight (8) key informants including two former Area Managers for Musasa, one former Provincial Officer in the Ministry of Women's Affairs, one current Provincial Head in the Ministry of Women's Affairs, Community, Small and Medium Enterprises Development, two stakeholders from Non- Governmental Organisations and two from Government institutions. The staff members were six (6) and comprising of the Shelter manager, administrator, matron, programme officer and two counsellors. Twenty (20) survivors of DV had utilized the shelter space. Altogether, thirty- five participants were involved in the study.

The issue of ethics with vulnerable groups was taken into consideration and strict adherence to the ethical protocols as laid out in the University of Cape Town Ethics Committee was observed in the sample selection process. I was aware I could not approach the survivors on my own, and therefore, I got assistance from the Musasa Shelter manager to get the sample for the study. She went through a database with records of the Shelter survivors and was able to identify, contact and introduce me to them as a researcher and asked them if they were interested in participating in the study. The issues of ethical considerations at play included voluntary participation and consent. More in-depth details about ethics are discussed in the section on ethics of research below.

3.6. Sampling

This study made use of purposive and snowball sampling techniques to recruit participants for the study. Purposive sampling deliberately targets respondents who are well-versed in the phenomenon under scrutiny (Creswell, 2013). The use of the purposive technique ensured that this research directly targeted the people who participated in setting up this shelter, those working at the shelter and survivors of DV who lived in the shelter. These people brought in

rich background information about the shelter and the services they offered to the survivors of DV. These include the Country Director for Musasa, the various stakeholders, and staff members at the shelter who included the shelter manager, the administrator, the counsellor, the Programme Officer and the security guard. The other informants included the stakeholders who work closely with Musasa and these include; the Ministry of Health and Child Care, Ministry of Women's Affairs, Community, Small and Medium Enterprise Development, Zimbabwe Republic Police, Social Welfare and Childline. These stakeholders worked with Musasa for a long time, and they had valuable information about shelters.

The researcher working with the Musasa Shelter manager used the snowball technique to identify some survivors of DV released from the safe shelter for interviews. Snowball sampling was defined by Naderifar, Goli and Ghaljaie (2017: 1) as a technique used to locate the population of interest that is not easily accessible. I needed people with knowledge of some survivors to help me identify them. Thus, records from Musasa were of importance in identifying survivors and accessing their phone numbers. The Shelter Manager phoned survivors and had to ask them who was available in Gweru during that period. That process took some days but was important for me as the researcher. I observed the ethical considerations for each category of participants considering the complexity of the study and ensured that participants voluntarily participated and no one was persuaded or coerced to take part in the study.

The Musasa Shelter Manager remained a symbol of trust and hope for the survivors throughout the selection process. She is the one who initiated the first communication with the survivors through communication on their mobile phones that she got from the database. The Shelter Manager embodied the trust that survivors require of any such encounter given that she had lived with them for some time as an insider. It is also vital to mention that the ways she communicated with the survivors were premised on an ethics of care as she was very friendly to the women she spoke to on the phone and did not want to traumatise them in any way. She was even asking whether they wanted to contribute towards knowledge-making by sharing their experiences in the shelter. The Shelter Manager would ask if the survivors wanted to participate in the study and were free to respond on whether they wanted to participate or not. Effectively, this allowed for a democratic space in which participants were free to state whether they were available to participate or not.

3.7. Detailed Discussion of Methods Used Within Each Lens

Data collection for this study was conducted in three phases. The first phase involved interviewing the Musasa National Director and eight Musasa stakeholders and this was covered during the period from January to June 2019. The second phase involved participant observation which involved spending long hours at the shelter getting to understand shelter life and that covered the period from June to December 2019. The use of participant observation accorded me the opportunity to have lived experiences of participants. I became an insider and got the opportunity to interact closely with participants. The third phase involved in-depth interviews with survivors of DV. This was scheduled to start in March 2020 but could not take off due to the COVID-19 pandemic which affected all nations the world over and face-to-face interactions were discouraged. The process was delayed for several months and only took off in August 2020 after taking a lot of precautions against the COVID-19 virus and getting the go-ahead from the supervisor. Everyone in Zimbabwe was encouraged to adhere to COVID-19 Protocols such as getting vaccinated, wearing face masks, sanitizing and maintaining social distancing. After ensuring safety, interviews were conducted with twenty survivors of DV and six Musasa staff. After taking all necessary precautions as described above, data was collected, within each lens, using a range of methods in each. I have argued that such a range of methods created a platform for me, as the researcher to get close both physically and psychologically to a wide array of differently located participants (Merriam, 1988: 34). I was able to go through some documents about the shelter. Unstructured in-depth interviews were used since they enabled me, as the researcher to get data on information which was not easily observable, (Minichello et al., 1991: 57). Unstructured in-depth interviews helped gain an understanding of thoughts, intentions, feelings and past experiences by participants (Patton, 1990: 141). These three methods, participant observation, unstructured in-depth interviews and document analysis ensured that the information obtained was complex. I argue that the use of more than one data collection method was necessary since it gave me, greater access to more comprehensive meanings held by the different participants, allowing for the emergence of knowledge about the processes, relationships, and histories within the life of the shelter.

3.8 Ethical Considerations

3.8.1 Feminist Ethics of Care

While this is a broad-based theoretical approach to doing feminist research, Gilligan (1982) and Noddings (1984) are regarded as the proponents of feminist ethics of care. Burgess-Proctor (2015) argues for democratising research processes by ensuring that it is non-hierarchical,

emphasising collaboration and compassion between the researcher and the survivors. The ethics of care involves avoiding harming human subjects especially those from vulnerable and marginalised groups. One strategy for practising ethics of care is through, “reflexivity or the act of interrogating or examining how one’s social characteristics intercede in and inform the process” (Hesse - Biber, 2014) cited by Burgess-Proctor (2015: 126). Feminist ethics of care is concerned with the support and respect for the participants recruited for the study. In thinking about the ethics of care one must not be persuaded to see only through the lens of frailty but to recognise that caring in feminist research creates egalitarian relations between the researchers and the participants. Practised diligently, the ethics of care can produce knowledge that is not based on an exploitative extraction model.

Furthermore, according to Burgess-Proctor (2015: 127) the goal of the feminist methodology is to advance social change that leads to social justice and the improvement of women’s lives. It is, therefore, pertinent to understand that the relationship between the participants and the researcher is characterised by praxis- that is, engaging in research to improve justice for women and girls (Burgess - Proctor, 2006) in Burgess - Proctor (2015: 127). It is crucial to understand how feminist praxis is central to the agenda of social justice through the words of Hesse - Biber and Piatelli (2007: 16) that:

Feminist praxis builds on the understanding of difference and translates these insights by emphasizing the importance of taking issues of power, authority, ethics and reflexivity into the practise of social research.

This research was conducted against a backdrop of ethical considerations specific to survivors of GBV that include the need to recognise that survivors of violent victimisation are often considered at high risk because of concerns that remembering traumatic experiences like sexual abuse or other abuses will be upsetting which may trigger secondary trauma or “re-victimisation” (Campbell et al., 2010 cited in Burgess – Proctor, 2015: 127). In respect, the researcher avoided exploitation and harm to participants. I managed to observe ethical considerations when I conducted this study. Social scientists emphasise, the moral obligation to strictly consider the rights of participants when conducting research (Creswell, 2013; Aspers, 2009). A case-study research design raised questions about ethical approaches to qualitative research that required the researcher to think carefully about the ethical implications of using EACH method, within each “lens” of the “exploded view” of the shelter at the heart of the research focus.

Some of the considerations I mainstreamed include issues of consent, confidentiality, privacy, empathy and trustworthiness. Considering the sensitivity and potential danger of repeated violence for survivors of DV after participating in the study, participants were assured of their anonymity before participation. Much has been written about ethical approaches to interviewing those who have survived gender-based violence, and I prioritized the safety and confidentiality of all who I interviewed. In thinking about the ethical dilemma that could potentially arise out of compensating participants for sharing their stories I was guided by the principle that they should never be paid. However, in the Zimbabwean culture, one is expected to bring food when they meet and interact with others. This social practice cements relations between people hence the saying “*hukama igasva, hunozadziswa nekudya*’ (social relations are important, augmented by food). This should not be equated to bribing participants for information, giving a token in this study is grounded on observing the norms and values of the participants which were integral to the success of the research. Much less, however, has been written about the ethics of access to organizational policy and governance documents and reports, or about the ethics involved in interviewing people who constitute a small staff where issues of confidentiality became hard (e.g. all staff being aware of one another’s work and roles and on that, I discussed with the interviewee; this raised ethical challenges and where staff members were reluctant to work with me, due to questions of line-management, I respected their choices fully).

While there were some core aspects concerning ethics to which I committed fully (such as the fact that the study was conducted in line with the policy framework for the assurance and promotion of accountable research, that is ethical at UCT (*see Appendix 2*). I was aware that questions of ethical access to interviewees and information could arise during the process of the fieldwork the nature of the study involved people narrating their sensitive life stories which overwhelmed me to the point of tears. For example, one participant narrated how she was raped by her aunt’s son and ended up with an unwanted pregnancy that brought her to Musasa. But now she was being discharged and the aunt was not yet informed that her son was the rapist. And the son was not yet arrested. At this moment, I was faced with the dilemma of what to do with this situation, as a researcher, I did not have arresting powers nor was I compelled to report this case to the police. Thus, I reverted to the ethos of research by sharing this haunting ordeal with my supervisor, but as I discuss later, such dilemmas were haunting.

Since the study involved gathering data from human subjects, I was strictly guided by important ethical principles for accountable research as argued by Spradley (1980: 20). These principles include; safeguarding informants' rights, which meant putting their interests and sensitivities at the centre of the research process; consider informants first: inform them of the objectives of the research, protect their privacy, not to exploit them; as well as to make reports available to informants (Spradley, 1980: 20 - 25). I communicated the research goals to all the respondents so that they knew the research. The recording of interviews was navigated and negotiated with the participants before the interviews took place. In addition to this, audio records were developed into written transcripts. All the recorded interviews were kept in confidence and were only accessible to the researcher only. I also promoted their privacy and confidentiality throughout the research. Participation of individuals was voluntary meaning that it was based on informed consent (*see Appendix 3*). To protect the rights of participants to their privacy consent was both verbal and written and affirmed through signed consent forms. This was situational and negotiated throughout the research and participants were informed that they should not expect financial compensation as this was academic research. I also ensured the anonymity of participants during the period of research and also used pseudonyms when I presented the findings.

Furthermore, I also ensured the confidentiality and privacy of the data as it was stored in a password-protected computer that could be accessed only by myself. During the fieldwork, I ensured that I kept my research notes out of the field site to prevent the risk of people fumbling with them and using them for purposes of violating the privacy of respondents.

3.9 Researcher Positionality

Feminist researchers frequently link questions of ethical study to debate on researcher positionality. In this sub-section, therefore, I reflect on positionality and reflexivity in the research process and I discuss my position and role as a researcher, my motivations and personal experience in conducting this study, and the goal of this is to explore how my different power relationships impacted the process of the research and especially my relationships with participants, who were very diverse in class and background. Such reflexivity also includes thinking about the need to adjust methods as contexts shift.

Positionality is concerned with acknowledging the different relationships to power researchers carry as individuals and also as members of the various constituencies they may be a part of.

According to Kezar (2002: 96) within the theory of positionality it is acknowledged that people have multiple, relational and imbricated identities, and thus differentiated power relationships. According to Watanabe (2017: 107), numerous scholars have pointed out the importance of unpacking the researcher's positionality, what Pin-Chun (2008:212) calls "baggage" and which may include, "personal characteristics, such as gender, race, affiliation, age, sexual orientation, immigration status, personal experiences, linguistic tradition, beliefs, biases, preferences, theoretical, political and ideological stances, and emotional responses to participant" (Berger, 2015: 220).

The act of examining the dynamic research processes within the milieu of one's positionality is referred to as reflexivity. According to Pillow (2003 cited in Bourke, 2014: 2) reflexivity involves self-scrutiny on the part of the researcher; a self-conscious awareness of the relationship between the researcher and an 'other'. Both positionality and reflexivity contribute to the research process and outcome. Both participants' and researchers' experiences are framed in social-cultural contexts which impact the research outcome. According to Jootun et al. (2009: 42), meditating on one's research and understanding how one's views and values may influence findings provides credibility to the whole research endeavour.

The notion of positionality is influenced by socio-cultural attributes which serve as rules for inclusion or exclusion into the class of either an insider or outsider or both. I had to employ different research techniques in negotiating access to research informants as well as the research data. My status as an insider or outsider in this research encounter was validated through interactions, dialogue and discourse with my participants. The position and identity of the researcher can never be considered final since it is constantly situated within multiple but flexible relations of power (Crossa, 2012). Therefore, as the researcher, I engaged in continuous negotiations which led to a rigorous research undertaking. This enhanced the possibility of producing validated and well-situated knowledge which is generated between the researcher and research.

Who, then, was "I" in the context of social justice research in the shelter space? I had to be mindful of the impact of my positionality on the research process and I had to communicate my positionality with my participants.

As the Director and lecturer at Nehanda Centre for Gender and Cultural Studies, Great Zimbabwe University, Zimbabwe and once a board member for Musasa, the Non - Governmental Organisation (NGO) which is the focus of my study, and also as a woman of

social standing respected in society as an educated person and a person with power and authority, I was aware that all these identities could influence the research process and outcome and I had to continuously reflect on them. They all confer on me a level of social and political power in the context, and I was mindful that I could be seen, especially by the women who had lived in the shelter, as someone with authority, maybe even someone prurient, patronizing or exploitative. I took great care to establish a clear and respectful space with these interviewees, and this led to very long interviews indeed and the need to negotiate how to maintain good relationships with interviewees who wanted to keep in contact with me after the interview process.

Despite my class, and levels of social authority, I was also aware that under normal circumstances it would be very difficult to get permission to study a Non- Governmental Organisation because of the political and economic instability that prevails in Zimbabwe at the moment. An outsider would be regarded as an intruder who wanted to tarnish the image of the shelter by making an adverse report leading to the closure of the shelter. An outsider would be looked at with suspicion. The shelter gatekeepers who included, including the Musasa National Director, Musasa Board Chairperson and board members, Musasa Shelter Manager and staff would not entertain an outsider at all. I entered the field as an outsider and aimed to become someone respected as enough of an insider so that I would be able to be someone with whom a deep conversation about the workings of a shelter could be had. I drew carefully from my previous experience as a Board member for Musasa for me to gain entry into the Shelter as someone with a clear vested interest in the support of the Shelter. I once served at Musasa as a trusted Board member and that previous experience was my entry point. After careful discussions, the gatekeepers supported the purpose of the study and I gained access to the shelter.

Once I gained entry into Musasa Shelter, I was even more of an outsider, as I was not entering as a survivor of domestic violence nor seeking assistance from the shelter. This raised issues of trustworthiness and Greene (2014: 2) says that to deepen trust, one must get support from the gatekeepers, and then build trust slowly with participants. It was critical for me as a researcher to establish rapport with participants as emphasized by Welman et al. (2005: 199) who argue that establishing rapport with the participants creates openings for the researcher and leads to the collection of valuable data. However, Welman et al. (2005: 200) warn that it can also create problems because the researcher can become too involved in the problems of the respondents. There were ways in which it was already possible to predict challenges here

as many of the women survivors were experiencing severe problems and the need to offer support was real. In addition, the diversity, courage and generosity of the residents drew me in powerfully, and I needed to reflect daily on how to maintain my relationship to my humanity and womanhood (I am not a survivor of domestic violence but I am a feminist who takes such issues deeply to the heart) and the importance of my work as a researcher. I negotiated ethical issues around particular support needs which I heard very carefully with the shelter Director and sought guidance on an interview-by-interview basis when I found myself severely challenged in terms of the most ethical way in which to engage a survivor in crisis. In the debriefing stage of the interviewing process, I made it clear to the participants that the material that they gave me was only going to be used for my research purposes and that I could not help them with the substantive challenges that they faced. It was difficult for me to do this, but essential. At one level participants fully accepted my position; at another, I often found my mobile phone ringing with distress calls from participants who were asking me to reprimand their husbands who were abusing them or those who needed financial assistance. In these cases, I listened, made a suggestion about who might be available to help, and I also communicated with my supervisor on daily basis to get guidance when I faced challenges. Each of these interactions created a micro-zone of ethical and positional challenges, and while I drew on my life experience as someone often called upon to give guidance, my heart was frequently sore and although I did my best to maintain a completely ethical stance guided by the principles of feminist care, I went through moments of great worry. I do not think this damaged the research process; it made me attuned deeply to the material I was given and this can only strengthen the work.

As mentioned before, for me to remain within the shelter as a participant observer, I was open about my reasons for being there. Since I shared the same culture and language with participants, it was easy to converse in the local language, Shona, especially when greeting each other to promote the close relationships. I avoided any engagement with hierarchical power to the best of my ability but of course, they knew I was not a survivor; this carried both strengths and challenges. In some instances, it led my participants to feel comfortable “teaching me” about what survivorship could entail and in other instances, participants expressed uncertainty that I would understand but were willing to continue to talk with me. I did my utmost to interact with my participants as fellow human beings in a search for meaning around difficult experiences and although I cannot be one hundred per cent sure, the fact that so many

of them wanted to spend a great deal of time talking with me suggests that their interview experiences were respectful and engaged. This is my hope.

3.10 Language, Positionality and Research Ethics

I worked with two languages throughout the research process, English and Shona. Much of the material gathered from survivors of DV was in Shona, and much of the documentation concerning the history and operation of the shelter used English. I was able to work across these different languages with ease, but the same was not likely to be true of all my participants, especially survivors of DV, who were comfortable with Shona. I adjusted my language use to prioritize the participants' comfort level or choice of language, and sought very actively to articulate my questions and probes in the language participants were familiar with.

All interviews were recorded using an audio-recording gadget and a mobile phone with the express permission of research participants and transcribed in the same language in which the conversation was conducted. I then translated the Shona transcriptions to English for this PhD study and was alert to questions of 'untranslatability' throughout. Some of the challenges I encountered with translations I have explained below.

3.10.1 Some challenges in the translation of the interviews

In translation, a script that is in a certain language is changed to another language. Ideally, a translation should produce an identical script in a different language but this is not always the case. This is largely because languages are inherently different in terms of structure and rules of grammar. This makes translation difficult. Phillips (1960: 291) sees this as a problem that is difficult to eradicate because "almost any utterance in any language carries with it a set of assumptions, feelings, and values that the speaker may or may not be aware of but that the field worker, as an outsider, usually is not". This meant that in a single utterance, there were aspects that could be implied and yet the source script only had the words to translate.

In terms of structure, languages rarely have similar structures. For instance, in Shona, there are ideophones (words which imitate the action or sound produced by something) and yet English does not have these. In cases where an ideophone was used, as the translator, I had to look for the conceptual equivalence in the translations, for example, where the participant says "...*ndakanzwa futi kuti paaa pa joint yeruoko...*" and the translation is "I felt a cracking sound at the joint of my hand..." It should be realised that ideophones are more effective in

expressing a sound or action, among others than the mere description in English. Finding the conceptual equivalence was difficult because of the influence of various factors such as the experience of the translator with the issues or topic under discussion. Where I was not sure I asked subject specialists for clarity.

There are two basic strategies for translation. According to Honig (1997: 11), one strategy of translation is literal word-by-word translation. The literal approach is viewed as a more accurate approach to translation and might make the reader get a clear picture of the source material (Honig, 1997: 11). However, at the same time, literal translation can reduce the conciseness and readability of interviews by muddling the meaning. The translation of text from Shona to English was a big challenge because Shona's ways of conversing are largely repetitive. A single statement might contain the same phrase or idea twice or three times. If such statements are translated the resultant statement would not make much sense in English. This was one of the challenges encountered and as the translator, I had to resort to the second approach which is the free or sense translation of the text. Free translation has its pitfalls which researchers acknowledge might not be dealt with entirely in the translation process (Honig, 1997: 11). There is always the risk of saying what the source document does not say. This challenge was minimised in these translations because the translator was the one who interviewed and was very much aware of the context of each story. In addition, the sense of an utterance was easier to get because it is a product of the context and not a single word.

Another source of difficulty was when one was supposed to translate words which seem to have no equivalent in English. The cultural difference was a major source of translation difficulty as reflected in language. In Shona, for instance, when one addresses an elder they use the honorific plural *va*. This is not found in English and translating such situations is rather difficult. In addition, the differences in the way relationships are perceived in English and Shona brought some challenges to the translation. For a word such as *tete* (father's sister), *maiguru* (mother's elder sister) and *mainini* (mother's younger sister), English seems to call all of them, aunts. This is also the case with words such as *mwana wepamaoko* (baby) which are quite common in the translations. The translations ended up using descriptions to refer to such relationships, for example, my mother's younger sister, (*mainini*), and my mother's elder sister (*maiguru*). Women and men are also addressed by the names of their firstborn children in Shona, for example, in one translation there was, *Mai Zvikomborero* (*Zvikomborero's* mother)

and yet *Zvikomborero*'s mother does not exactly come out as a name one can be addressed with in English.

The other equally important area of concern pertains to the use of non-verbal cues. In the interviewing process, the interviewer had an opportunity to interpret various non-verbal communication cues. Aspects such as nodding of the head, blinking several times and tone of voice were all important aspects that reinforced or complimented the words spoken. In the absence of non-verbal communication, the script is deficient somehow. As I interviewed the respondents, I was able to capture the non-verbal cues and added them to translations.

Against the challenges identified above I addressed each situation as it arose. I was not limited to one form of translation but was guided by the most efficient approach at the time, that is, in terms of doing word-by-word or 'free' (conceptual) translation. In cases where I had difficulties finding the equivalent words, I asked other people without divulging that it was from an interview. This guaranteed protection of the research participants in terms of confidentiality and privacy.

I found myself consulting others and getting assistance in making decisions on words that existed in one language but could not be extrapolated and translated into another language. Furthermore, there were several concepts such as idiomatic expressions, and metaphors which were not equivalent in different cultures, among languages in syntactical and grammatical morphology and structures. These issues called for specific, situatedness of interpretations of decisions after I had consulted with colleagues.

3.11 More Detailed Ideas about Methods

This section offers more detailed thinking on the range of methods I used to lay out the complexity of the work covered. At every point, I was aware that I was interested in the meaning of shelter life as a zone of social justice for survivors of domestic violence, and this interest required me to understand why shelters were created, who had worked and still works within them and what their experiences were, what ideas circulate about bringing support to survivors, and what survivors themselves experience within the shelter. My methods prioritized story-telling about experiences connected to the shelter and sought to uncover the meanings of the shelter in participants' engagements with it over time. The section offers notes on some areas in which I was already clear about how to think of implementing different methods, and I developed more clarity as I engaged more deeply with the case study "in the field".

3.11.1 Unstructured In-depth interviews with survivors in safe shelters

This study utilized unstructured in-depth interviews as the main data collection tool. Unstructured in-depth interviews are indeed an effective data collection means of their lived and experienced life (Denzin & Lincoln, 2000; Aspers, 2009). According to (Fontana and Frey, 1994 cited in Welman et al., 2005: 197) because of their qualitative nature, unstructured interviews were observed as providing a richer data set than other forms of data collecting methods. In this method, participants had the opportunity to bring out rich information about the topic under study. Unstructured in-depth interviews were conducted with those people involved with creating and setting up the shelter including the Musasa National Director, Musasa stakeholders, Musasa staff and survivors of DV who stayed at the shelter. Survivors of DV included those still in the shelter and those who were released from the shelter after a certain period. They were expected to reveal the impact of safe homes on their lives. I interviewed twenty survivors who had spent more than a week in the shelter. One week was believed to be a good time enough for one to have gained an experience in a safe shelter. The planned interviews took the form of personal, face-to-face conversations meant to help survivors reach beyond the superficial layers of their experiences in safe shelters.

This data collection method does not require an interview guide with a list of questions as in structured interviews but the researcher suggested some themes for discussion (*See Appendices 4 and 5*). Participants were encouraged to talk about their experiences with shelter space and talked without much interruption by the researcher. Welman et al. (2005: 198) explain how in unstructured interviews the interviewer sets the tone for the general theme of discussion. S/he poses probing questions as they emerge in spontaneous, interaction processes that ensue from the discussions between the research participant and the interviewer. One key fact stated by Welman et al. (2005: 198) is attempts are made in unstructured interviews to understand how individuals experience their social reality and how they make sense of the world around them through micro and macro processes. These scholars reiterate that the interviewer's question should be anchored on understanding the feelings, beliefs and convictions of the participant in line with the theme in question. I was careful not to ask any leading questions. The focus of the interview was on the participants' first-hand experience of their life world rather than on their interpretation or speculative explanations of it.

According to Welman et al. (2005: 198), the most pertinent strength of unstructured interviews lies in how questions about emotional and sensitive issues are addressed with depth and care.

This method enabled my participants including survivors of DV to narrate their experiences in shelters without being guided. A tape recorder was used to capture the discussions. As a researcher, I also took note of non-verbal expressions during the interviews and noted them down. For survivors to narrate their stories confidently, I invested extensively in building trust and confidence. I started by building rapport in a relaxed atmosphere and then asked them to narrate their stories in confidence. Welman et al. (2005: 199) add this method allows participants to feel at ease to express their opinions and valid feelings without fear of harm, or disapproval (or rebuke) from the interviewer. I was non-judgmental but paid attention to their narrations. I was also careful not to be too involved in the problems of respondents but always expressed concern and respect for the ways participants had negotiated their lives.

The interviews with survivors of DV took place at Musasa Shelter. I was offered a conducive place within the shelter to conduct the interviews in the absence of those manning the shelter to provide a relaxed, comfortable, safe and confidential environment for survivors to open up and narrate their situation in safe shelters. The interviews were conducted in Shona since every one of them indicated that they were more comfortable conversing in Shona than in English. The interviews covered various themes related to the area of study. The researcher's interpretation of responses was recorded and confirmed by the interviewee by reading it back to ensure that it had been correctly captured. The interview guide for stakeholders was crafted and administered in the English language as this group of respondents comprised learned colleagues, who were conversant with English.

3.11.2 Participant observation

This was another data collection method which was used to gain more insights about shelter life and its provisions. This method required me to go to Musasa Shelter for some time to understand what goes on in a shelter space. According to Welman et al. (2005: 194), the participant observation method dictates that researchers should spend an extensive period understanding the daily experiences of the members of a group. This also involves taking part in daily activities and reporting on them. These scholars add that with the participant observation method, researchers do observe the experiences of participants first-hand (inside) not as though they were detached (outside). After seeking permission from the National Director for Musasa to visit the shelter (*See Appendix 1, Authorization letter from Musasa*), I visited the shelter for a long period, from June to December 2019, about six months, gaining

insights into what happens in the shelter with survivors of DV. This method provided rich data about the group under study. However, I did not analyse this material formally but used it to contextualize my understanding of the shelter experience for survivor participants.

Welman et al. (2005: 194-196) explain that the process to be followed in participant observation includes; disclosing the objectives of the research to the group, ethical considerations emphasising anonymity and building trust. When I visited Musasa, I explained my research objectives and ethical considerations. However, Welman et al. (2005: 196) point out that the challenge with participant observation is that the observer may become so involved with participants and fail to notice some developments that could have been detected immediately by outsiders. I tried to balance the activities of being a participant and also an observer. I ensured that I did not get engrossed in the participant's activities and abandoned my role as an observer but this was tricky in many situations. I did not want anyone feeling "watched" or objectified so I did my best to balance the need for me to recognize my "outsiderness" and my interest in creating rapport with shelter staff and residents. The process of capturing data within the shelter space required me to be alert and record all activities taking place and describe in detail who had done what to whom, and how, where and when this was done, in respect of each event (Welman et al., 2005: 196). As the researcher, I recorded, both verbal and nonverbal (face expressions, gestures and tone of voice) expressions of participants. I was on the lookout for themes or repeated patterns of behaviour that appeared in the group activities as pointed out by Welman et al. (2005: 196). Participant observation brought out rich data about shelter life and experiences. Sarantokos (2012: 220) highlights that the researcher should make a serious effort to prevent errors when utilizing this approach. I avoided errors, which include, observer bias, deviation, deception, and observer distortion among others, by remaining focused on the research goals and objectives and being careful not to dilute my observer role.

3.12 Data Analysis

Data analysis for the study utilized two main approaches, Content Analysis (CA) and Thematic Analysis (TA) with the aid of NVIVO software for qualitative data analysis. Hsieh and Shannon (2005: 1278) mention that content analysis in qualitative methodology is one of the varied research methods used to analyse textual data. The process of data analysis started with reading all data collected from National Director Musasa and stakeholders repeatedly to achieve immersion and obtain a sense of the whole. Codes were derived from an arduous

process of reading transcriptions word for word- firstly by highlighting the precise words from the text that appear to capture key thoughts about how the shelter was created and imagined. I then came up with codes or categorisations of data directly from the text. The sorting of codes was based on a process of analysing whether they fitted into related and interlinked categories. The process led to the identification of relevant themes and patterns guided by identified categories and codes. Findings were presented under identified themes. One of the advantages identified by Hsieh and Shannon (2005: 1279) is that of gaining information directly from the participants of the study in value-free ways that do not impose preconceived and predefined categories. It is understood that knowledge generated from the study is based on the unique perspectives of participants grounded in primary data. Direct quotations were taken from the texts with explanations of how sheltering was initiated.

On the other hand, the analyses of the twenty in-depth interviews with survivors of DV were done using a thematic approach and aided by the use of NVIVO software version 12. Clarke and Braun (2013: 3) view the thematic approach as a method for identifying and analysing patterns in qualitative data. I started by immersing myself in the data, and by reading and re-reading numerous times the transcripts to get a strong understanding of each transcript. This allowed me to come up with preliminary codes or categories of the data, with guidance from the objectives of my study. After uploading the transcripts onto NVIVO, I began to re-read and add quotations within the relevant codes. At the same time, I also edited the codes to suit the data and also to ensure that each code can be clearly defined as proposed by Bless, Higson-Smith and Sithole (2013: 348). After the codes were clearly defined, I then began to re-code the entire data set to ensure that all quotations were in the correct codes, and also to bring out the relationships between codes. All codes that were interlinked, were also linked at this stage by placing them under a broader code, while those that were found to constitute sub-sets of other bigger codes were put within the broader codes.

After the coding was completed, the codes were then analysed to find response patterns under each theme. The most common patterns and correlations were extracted from this analysis and used in the write-up. NVIVO enabled me to see where the dominant points of consensus were and I managed to see the collective representations of each theme and was able to write a commentary on it. NVIVO allowed me to pick out the material that was relevant to my research question, that is focussing on the meaning of shelters as forms of social justice for survivors. I managed to write two chapters from analysed data under various categorisations. I also ensured

that I bring out those stand-out quotations that showed the changes caused by sheltering the survivor. I also brought out the stages that the survivors go through from the pressures that push them to a shelter, to their experiences during their stay, the relations with fellow residents and the shelter staff and then the benefits that survivors derive from the shelters before they leave.

3.13 Conclusion

In conclusion, feminist methodologies are concerned with the experiences of girls and women. This approach is anchored on feminist ethics of care, non-hierarchical relationships, and equitable power dynamics between participants and researchers. In the particular case of the experience of survivors of GBV- a strict observance of these principles of research ensured that the recalling of past traumatic experiences did not prompt secondary victimization. This chapter presented an account of how the research was conducted. This methodology chapter has covered; the research approach, research design, data collection methods and issues of positionality and reflexivity, among other things. The study aimed to create an ‘exploded view’ of a complex and living organization – a shelter. The study presented the “view” of the shelter’s life through three main lenses: the history of the shelter; the (changing) operation of the shelter in all its aspects, and the experiences of the women survivors who have lived in the shelter. Each of these lenses was brought into play through several methods including, unstructured interviews, participant observation, and document analysis. This entailed at least two levels of triangulation of analysis, one within lenses, and one across the three. This created different perspectives on what constitutes “social justice” within the life of a shelter. I drew on Nussbaum’s capability theory to discuss how “social justice” could be revealed within the shelter’s life articulated with her notion of what socially just approaches to the redress of violence would look like.

CHAPTER 4

IMAGINING AND CREATING A SHELTER

4.0 Introduction

This Chapter presents findings on both imagining and running a shelter to support survivors of DV using both thematic and content analysis of the material in interviews from those in the political power, often feminists, who saw clearly what such a shelter could mean. The chapter also explores material from those currently running the Musasa Shelter. This chapter, therefore, synergizes the views of those who imagined the shelter and those who currently work in it and these views were critical in exploring the meaning of social justice for survivors of DV in a Zimbabwean context.

The chapter put together ideas, perceptions and experiences of stakeholders who were on the outside of the shelter and staff members who were inside the shelter. This presented two separate rings, that is, the outside ring for stakeholders and the inside the ring for staff who were working at the shelter and had direct contact with survivors. However, the people who were really at the centre of this study were shelter residents who were discussed in the next two chapters. The section on stakeholders focuses on who they were; what they thought DV was and what it meant for Zimbabwean women; why the Gweru shelter was created and theorisation of the meaning of a shelter in the delivery of social justice. Section two was about staff and it covered what it meant to run a shelter. I structured this research in a way that I would get multiple voices that have connections to this one shelter.

The stakeholders who participated in the study were eight (8) key informants including two Former Area Managers for Musasa, one Former Provincial Officer in the Ministry of Women's Affairs, one current Provincial Head in the Ministry of Women's Affairs, Community, Small and Medium Enterprises Development, two Stakeholders from Non - Governmental Organisations and two from Government institutions. The staff members were four (4) and comprised of the administrator, matron and two counsellors.

The key informants were purposively selected as they came from diverse backgrounds, that is, different jobs, differently placed now in relation to responsibilities for GBV, different relationships to understanding sheltering and also different ages. That diversity was their biggest strength as they range across a wide spectrum of distances from the story of creating a

shelter; they didn't have the same proximity to the story. I decided that these participants constitute a group that I trusted for the study mainly because of their diversity and also the public positions they hold, and their willingness to be visible in a context in which there was still enormous hostility around women's authority and a real struggle to prioritize GBV as a socio-political issue. These participants were people who had dedicated their lives to working in a publicly visible position in which they were vulnerable to stigmatisation, attack and to marginalisation. The participants could be recognised as activists in their own right as they had worked extremely hard for women's emancipation and had contributed their voice to attempting to prioritize DV as an issue of the State not in terms of some kind of victimhood of women but in terms of political citizenship and their rights. These women knew what it meant to be publicly accountable for a problem that most people think was the fault of the survivor.

The shelter staff included the administrator, matron and two counsellors, and constituted a different kind of cohort for the study. They worked together closely, on a day-to-day basis, and had intimate experience of the details involved in maintaining an environment in which a very diverse set of women – 'survivors' – were to be offered shelter, safety, and the opportunity to explore new options for their lives and (often) the lives of their children. There were no predictabilities here, and the material from my interviews with them gave me another lens onto the meaning of supporting shelter space, not as a political vision, but as a place of difficult and highly skilled work. This perspective, as I argued in my final discussion chapter, offers a unique lens on the texture of "social justice", one which when enmeshed with other perspectives would allow for a rethinking of the power of sheltering in hostile contexts.

The chapter works predominantly with content analysis to create a picture of participants' sense of their own experience, and while this method does not ever suggest that participants' language constitutes a factual relationship to the past/present, it can reveal through the aggregation of material consistent patterns in participants' experiences and their approach to the representation of this. I would argue that content analysis is, therefore, a respectful way of maintaining as close as possible an analytic relationship to the participant's own words, and the chapter uses a lot of quotations as a result.

4.1 Section 1: Who they are: public visionaries

4.1.1 Theme 1: Socialisation

This section presents material on how key informants spoke of growing up as girls, that is, how they were socialised and the roles and duties they performed, their dreams and aspirations. The aspect of educational opportunities and career choices also came to light.

Generally, the females were expected to cook, they were expected to sweep, they were expected to do the house chores. Then boys were expected to do other duties like maintaining the garden, going to the field, looking after livestock. (Former Provincial Youth and Women Development Officer)

The narratives from stakeholders indicated that the majority grew up in rural areas and had almost similar backgrounds and experiences as they were growing up since they were socialised within patriarchal families where boys and girls are socialised differently and accorded different opportunities. Participants reiterated that girls were expected to do household chores like cooking and sweeping whilst boys were expected to work outside the home, herding cattle and doing gardening. The key informants were quick to mention that the girl child was overburdened as she was expected to do everything at home. One key informant narrated how she complained to her mother about too much work as she was expected even to polish her brother's school shoes and wash his school uniform whilst he played;

I remember at one time I used to say to my mum, I think my brother should also learn to polish his shoes and wash his school uniform. She would say, no, you are a woman you are supposed to do that and they would go playing and I would wash but with tears in my eyes. It wasn't really easy but I ended up accepting it. (Childline Officer)

These findings revealed that even if girls faced difficulties as they were growing up no one was there to transform their lives. The mothers who are the primary socialisation agents in a patriarchal society like Zimbabwe expect girls to work hard so that one day when they get married, they become better wives to their husbands. Although girls are overburdened by household chores, they end up accepting their disadvantaged position and do all the work with "tears in their eyes", a sign of bitterness. The mothers who are responsible for socialising boys and girls differently perpetuate these gender differences. It is not surprising that in some instances participants believed that boys become irresponsible because of the way they were socialised as commented by one key informant,

But now when I look at my brothers, I feel they are not responsible enough. They are not able to really care for themselves. I have seen quite a lot you know, they get this

woman, she goes, he is having issues in his life somehow from another way of thinking is that, is it not the way as a society we view the male child? (Childline officer)

The boy child is left to do as they please during growing up and the key informant observed that this had adverse effects when boys become adults as they fail to look after themselves and fail to behave responsibly. The key informant made reference to her brothers who were failing to settle with one partner and had issues with relationships and she attributed these challenges to the way they were socialised. Another key informant also raised the same point of boys not succeeding in life because of being spoiled by parents,

My brother was kind of spoiled because he was called, “baba, baba”, (father, father) of the family and yet he was just a boy and he got everything he wanted on a silver plate. So, he didn’t finish his “A” level, his “O” levels, he went up to Form two, started drinking, went to South Africa, you know Wenera time when they went to the mines and so on, lived there for years, got deported, came back home with nothing and he was a playboy as well. At the end of the day he got sick and he passed on. (Provincial Head: Ministry of Women’s Affairs, Community, Small and Medium Enterprise Development)

In Zimbabwean culture, the boy child can be given the father title and that can confuse the boy and for this participant, he ends up abusing this prescribed status. The issue of son preference was raised as the main cause of differentiation in terms of treatment, opportunities and benefits between boys and girls. In the Zimbabwean culture, boys are preferred more than girls because they carry the family name. One key informant explained,

We have what we call in our culture, what do we call it? I will just put it the way they call it, “Unyana” (my son). That concept that means when you have a son your lineage is assured. My father’s name will not die the day he passes on but for me, I am going to get married. (Provincial Head: Ministry of Women’s Affairs, Community, Small and Medium Enterprise Development)

This key informant was referring to Ndebele culture but the same applies to Shona culture, as other Shona participants affirmed that boys are preferred more than girls.

The other point raised by key informants was that during their time girls were not encouraged much by their parents to succeed in formal education. Key informants concurred that no one was encouraging them to work hard in school. One key informant explained how her sisters failed to get encouragement in school and ended up being married; for her, marriage here was a failure of education, something worth noting.

They didn’t really excel as well. Nobody was really pushing for girls, to say, “go to school”, you go to Form two and whether you go to Form Four nobody really cared.

So, most of them got married. (Provincial Head: Ministry of Women's Affairs, Community, Small and Medium Enterprise Development)

I don't want to say that it was equal like I said earlier on that it was by grace that I passed. My mother and grandmother were surprised when I passed 'O' levels. They said "watopasawo?" (You have also passed?). (Childline Officer).

The Childline officer added that instead of getting encouragement on education, she could get sexualised comments about her body parts, for example, hips and legs. She explains how her grandmother and mother commented on her appearance,

They could comment on my body for example, the way I am built, they could comment on my legs, comment on my hips, you know, so, I was wondering about this as I was growing up. (Childline Officer).

The key informant explained that her exposure to knowledge of GBV later in life made her realize that those people who comment too much about body parts want to disrupt the girl child's education and want her to engage in relationships leading to early marriages. She gave her analysis,

They want you to think that, I am marketable, so that you start behaving according to their comments and men start seeing you. And in a way you are prone to abuse, you are prone to early marriage as a young person who is a child. This is why maybe we have child marriages.

The findings revealed that the key informants all believed they were socialized differently from boys when they were growing up. Their representations of becoming gendered as women were frequently juxtaposed to their theorization of the privilege of masculinity, and all of them connected this, in later material, to the decisions they made in later life to imagine "shelters" for abused women. This suggests that the notion of space, safe from masculine privilege, within home environments, has deep roots within these participants' experiences.

4.1.2 Understanding DV

"...she was beaten again, this time for reporting him to the Police." (Social Welfare Officer)

In advancing the knowledge of DV, I was concerned with how this phenomenon is conceptualized and interpreted from the perspective of the key informants, women who were central to imagining the importance of a shelter. My approach to understanding the history of decisions to create a shelter for the support of survivors of domestic violence includes the recognition that activism is rooted in theory, and that decisions to advocate (in many ways) for justice are based on deep knowledge about injustice. This understanding led me to prioritize

how my participants, all long-term advocates against gender-based violence, theorize violence as a form of knowledge. Without this knowledge, often based on a mix of the personal, professional, and political experiences, it would be impossible to imagine sheltering, or indeed any other concrete interventions to protect women surviving domestic violence.

‘Knowledge,’ however entail complex networks of memory, learning, language and the creation of communities who share hard-won articulations of experience. I understand knowledge-making to be political, and as fundamental to feminist practice. In order to begin to understand participants’ engagement with the creation of the Gweru shelter, in 2000, I analysed their representations of their own knowledge about domestic violence, as a resource, and prioritize the roots by which they came to this knowledge, and why it has become a source of deep meaning for them.

4.1.3 Knowledge of DV

“We have been violated all our lives and we thought it was normal”. (Provincial Head: Ministry of Women’s Affairs, Community, Small and Medium Enterprise Development)

As the quotation above suggests, many participants – embedded in family contexts in which the superiority of boy-children was axiomatic – spoke of coming to knowledge of DV as a process of de-familiarization. “We thought it was normal” resonated throughout narratives as a starting point. One participant opined that as she grew up, she thought that DV was normal and she made the following remarks,

What I thought was also normal was because I grew up seeing men beating up their wives. Sometimes very badly, they get hurt, they go to the hospital, and they pretend, I hit against the wall, I fell, I did what. They get treated and come back to the same cycle of Gender Based Violence. And I thought that was normal. Until somebody said, “Do you know there is Gender Based Violence” and I am saying, what does that mean? And when they explained to me then I realized, “we have been violated all our lives and we thought it was normal”. I thought if you get beaten by your husband, its ok, he is disciplining you. I never stopped to think to say and who disciplines him and how and is it really disciplining to beat up another human being, why can’t we talk. (Provincial Head: Ministry of Women’s Affairs, Community, Small and Medium Enterprise Development)

The analysed responses go on to suggest that the majority of the participants had different knowledge of DV, emanating from their work experiences and in some cases personal experiences. Some participants spoke of beating or physical violence as core to DV which they saw as part of the pervasive nature of abuse among couples. One participant referred to beating and torture experienced by one survivor as she narrated,

...she was beaten again, this time for reporting him to the Police. And then how we got to know of the issue, how we got to be linked with the case was, the husband then took the child of the woman, she was a girl. He then took the girl, went outside and held her upside down, her head down and her legs up, he held her by her legs and struck her on the tarred road. (Social Welfare Officer)

In addition to this quotation above, another participant's knowledge of DV took a more detailed and comprehensive understanding as she expanded upon the meaning of the home environment:

Domestic Violence involves beating up your spouse, your children and your other relatives in the domestic sphere and indeed even in the public sphere where we are talking of GBV but this time we are just saying Domestic Violence those who live together. And it is also criminalized that you fail, you don't want to maintain those that you are supposed to maintain, your family, your children, your wife. They can go out and get maintenance from you for that. (Provincial Head: Ministry of Women's Affairs, Community, Small and Medium Enterprise Development)

In addition to physical abuse, some participants included sexual abuse as well as rape in their descriptions of DV and saw DV as a term in intersecting violence against women occurred:

But, the issue of DV, GBV, was one of the issues that was raised as a concern by the Zimbabwean women, that they are being battered, they are being raped, they are not getting the opportunities that they want to get even in terms of their education, some parents they prefer the boy child as opposed to the girl child. So, it was an issue which was part of the Ministry's tasks. Issues which they wanted to redress. What do we do with those people who are violated? (Former Provincial Youth and Women Development Officer)

Through conducting interviews, I discovered a third layer of knowledge from key informants, one which spoke to the psychological nature of DV. This was not initially apparent to many participants and one admitted to having limited knowledge of DV in the initial stages of her career as a Psychiatric nurse when she said,

Most of my time was spent doing Psychiatry. In Psychiatry we used to look after mental patients, patients who were depressed, patients who were psychotic and those who were sent from wards and those who were victims of DV and I didn't know the term Victims of DV. (Former Area Manager for Musasa 2000- 2013)

It emerged that this participant who was a psychiatric nurse working in a psychiatric hospital, attending to patients who were suicidal, who were psychotic, were cutting themselves, who were depressed, and were survivors of DV where the participant didn't know that these patients were victims of DV had diagnosed them as psychologically ill patients:

All I knew was that this person was beaten by her husband, this person burnt by her husband, this person wanted to commit suicide because she had a fight with her

husband... That was my first experience of DV, looking after DV victims and not knowing that they were victims. To me they were just people who just had dispute with their husbands and then they needed to be counselled because some of them got depressed, some of them wanted to commit suicide. (Former Area Manager for Musasa 2000- 2013)

Furthermore, one participant added economic abuse to physical abuse as she says,

I discovered that GBV commonly is physical, to couples its physical abuse, economic abuse. Physical abuse is due to economic hardships. There is no equal use or distribution of resources between the father and mother. (Victim Friendly Police Officer)

This participant was quick to highlight the root cause of DV, particularly in the Zimbabwean context which is faced with lots of economic challenges. The issue of inequality in the distribution of resources was pointed out as the main reason for physical violence.

My participants were also unanimously clear they see men as perpetrators of violence in most cases. However, women in some cases are also abusers as highlighted by one participant,

I am not saying it's one sided. Even a woman can also violate the man but the bigger percentage is men violating women. (Former Provincial Youth and Women Development Officer)

It is clear from the findings presented that participants exhibited some knowledge of DV and its various manifestations. Participants' normalization of domestic violence changed as they came to grasp its nature as a violation of rights, and as something which encompassed a range of abuse.

In this theme, the focus has been on participants and whether they possess knowledge of DV or not since this is instrumental in imagining a shelter for survivors of DV. Not only does their awareness of DV issues from multiple cultural stands assist them at a professional level with the execution of their duties, but it also helps them at a personal level. Participants indicated that the knowledge is important in that it informs them of the violations females are exposed to because of their gender. This is the starting point for finding interventions for assisting survivors of DV. It is in their action-oriented professional work that the key informants begin to take on DV activist work. Being activists by default of their 'calling' to help survivors of DV with knowledge of socio-legal remedies entails that the participants have an appreciation of the importance of the knowledge they possess. If participants are knowledgeable about DV issues then they are the right people qualified to imagine redress, and they characterized themselves in this way.

4.1.4 Why the Gweru shelter was created

“...remember these women are running away from the perpetrator, they need safety”.
(Former Musasa Area Manager 2000 to 2013)

This section explores why the Gweru shelter was set up, that is, why this idea was initiated. The section highlights the kinds of partnerships, negotiations and processes which came into play as the shelter was imagined and the imagination moved into reality. This background information puts the discussion of sheltering into perspective as it lays the foundation for what was to be achieved. The participants concurred that the Gweru shelter was created to provide a safe space for survivors of DV who became homeless after experiencing DV. Findings showed that survivors needed safety and protection from violence. Overwhelmingly, they saw the provision of shelter space as critical to supporting survivors of DV. (*See Appendices 9 and 10 for Shelter Map and Shelter Photograph*)

My interview material indicated that the idea of sheltering was initiated by the Ministry of Women Affairs in the year 2000.

Sheltering was an idea or a concept which came from our Head office, the Ministry of Women’s Affairs, Head Office at National level. At a national conference of all heads of Provinces and the Directorate of the Ministry where people were discussing on how best we can assist victims of DV, sheltering came as a valuable strategy. (Former Provincial Youth and Women Development Officer)

One of the key informants, the Former Provincial Youth and Women Development Officer explained that the idea or concept of sheltering was a government initiative through the Ministry of Women’s Affairs, Youth and Employment Creation. She went further to explain that the idea came as a directive from Head Office that all Provinces were expected to establish a shelter for survivors of DV. It emerged that the main reason for setting up shelters was the recognition that increasing numbers of survivors of GBV were becoming homeless after a domestic altercation:

Take an example of a case of DV where a husband can be violent and chases away the wife and children. When the wife and children have been chased away, they will have nowhere to stay. Maybe they sleep outside and may not have a relative nearby for them to go and get shelter, they may fail to have social support system nearby and they end up being stranded. These cases are on the increase even today. (Former Musasa Area Manager 2000- 2013)

Evidence gathered indicated that due to the increase of DV cases and the effects and consequences of DV, the idea of sheltering was born. The notion of a shelter was not, therefore, according to my participants embedded in specific ideology around international feminist GBV

activism, or engagement with the Domestic Violence Act's provisions, but in practical concerns about homelessness. The imagination of sheltering as a strategy was thus described as a state response to having "nowhere to stay," and the simple accountability of the state was clear to participants.

The actual process of movement from conviction to reality was, however, described by participants as very complex, a process which brought together various stakeholders including Government Ministries and NGOs dealing with survivors of GBV to deliberate on how to set up a shelter and how each stakeholder could take up an active role. It emerged that each Ministry and NGO was expected to play a fundamental role in assisting the DV survivors utilizing the shelter. The Former Provincial Youth and Women Development Officer gave this comprehensive explanation:

Social Welfare was going to help us link up with the families. Ministry of Health to look into the Health issues of victims. Then Education, if it is a young girl, we do not want the person to stop going to school. And then the NGOs, of course to do counselling and provide for other needs, social needs. The ZRP to offer protection whilst at the Centre or even in transit from the Centre to court or hospital. (Former Provincial Youth and Women Development Officer)

It is evident that various stakeholders were expected to participate in assisting survivors of DV within a shelter space, and participants spoke of how stakeholders held meetings and discussions on how a shelter was to be established and how it would operate. Since Musasa was the organisation dealing with violence against women it took this initiative as an opportunity for expansion and growth and conducted a small survey to determine whether there was a need to open a shelter in Gweru or not, the key informant narrated:

So, when Musasa wanted to open the Gweru office, they first did a small survey to see whether there was need to open an office in Gweru or not. I remember when I was in the Ministry of Health hearing about this survey. So, anywhere, in that survey they identified that an office for Musasa was needed to deal with issues of DV at that time we just called them DV, so, that led to opening of the Gweru office. (Former Area Manager for Musasa 2000- 2013)

This is evident that the research which was conducted complemented decision makers' conviction of the need to open a shelter in Gweru, but I was not able to get access to this survey research myself, and participants did not recall its process clearly, simply that those surveyed included social workers, hospital and clinic workers, and the police. As they remembered, it did not seek to look for the voices of abused women themselves, but this would have been a very challenging task, and it was the support of institutions already dealing with survivors

which was sought. It was interesting that no participants spoke to me of tensions or disagreements around the formal deliberations on establishing a shelter, although they were directly asked about this. Given that any process of establishing new initiatives amongst state-linked partners is bound to involve debate, this silence was interesting to me.

The majority of the key informants considered a shelter as a halfway home or a temporary home for the survivor. Interestingly, key informants do not describe a shelter as a service or a place but as a home. This struck me as rooted in their fear of homelessness for survivors, and simultaneously, in their long experiences of homes as a dangerous place for people gendered as women. The desire to create a different version of a home was clear:

It's just a half way home. To give you time to think and find a way... (Provincial Head: Ministry of Women's Affairs, Community, Small and Medium Enterprise Development)

Another key informant added;

The shelter is a half- way house. You are opening up opportunity; you are making this person see that there is life beyond her situation. (The Former Provincial Youth and Women Development Officer)

A home is a place where one lives as part of a family. Survivors can be imagined as growing a sense of belonging as they become part of the shelter family. They have to embrace the value system and culture of a shelter, but participants included the concept of freedom “to think” in this version of a home. This is interesting given that the majority of participants primarily articulated DV as physical abuse; here, however, indirectly, they are clear that physical violence torments both a body and a mind, and new versions of a home might make it possible for a survivor to “find a way.”

Homes were not the only metaphor used to describe the hope embedded in a shelter, for these stakeholders, another key informant compares the shelter to a bus stop:

It's a bus stop for someone, either to go back to their normal life but there will be improvements of some sort in terms of empowerment, or to move on. (Former Area Manager for Musasa 2013 to 2016)

The bus-stop point shows that a shelter is a temporary place where one has an opportunity to think and move forward with their life. It was highlighted that the survivors' thoughts and minds are hurting, and in need of sustained attention; a shelter then provides the space for someone to think about their future, – there's a connection between ‘space’ and ‘thinking’. There are also ideas about ‘newness’, what it takes to move from the bus stop into new terrain.

A shelter might, according to my interviewees, empower the survivor and give her confidence to move on with life. One key informant explained,

They make informed decisions about their lives: Do they want to go back to old relationship? Do they want to move on? (Provincial Head: Ministry of Women's Affairs, Community, Small and Medium Enterprise Development)

The key informants indicated that a shelter provides an enabling environment for one to think seriously about their lives and what they want to do. Key informants placed the shelter sometimes in direct comparison with other options for survivors who were there before sheltering. Some reminded me about the fact that survivors of DV used to be accommodated at the police station if they ran away from their homes. The majority of the participants stressed that the police station was not an appropriate environment for the survivors as it had no privacy and also exposed the survivor to secondary trauma where the survivor is further abused by the police officers at the police station. One participant explains:

After being abused by the man in your house, you are seeking refuge at the Police station and this Policeman says, I will take you to my house because they have nowhere to put you, then at his house he rapes you. So, that's secondary trauma. (Provincial Head: Ministry of Women's Affairs, Community, Small and Medium Enterprise Development)

Some participants reminded me that in rural areas the survivors would be accommodated at the chief's home but still challenges of further victimization were observed:

And we also have the traditional leadership and most of our people live in the rural areas where our justice system comes through the traditional leadership. But what has also been of worry was they were not really protecting the women. They would further traumatise them. You go to a Chief's homestead, you go to a (Sabhuku) (kraal head) home stead or a kraal head, they put you in a room, you are supposed to sleep her, and while you are sleeping here thinking you are very safe, he comes into your room at night? What do you do? Even if you are to scream who is going to listen to you. (Provincial Head: Ministry of Women's Affairs, Community, Small and Medium Enterprise Development)

The challenges faced by survivors at police stations and the chief's homestead contributed to the shelter establishment as a neutral place for survivors. Even though such neutrality involves the state, and organizations working with the state, participants were clear that a state-established shelter offered better protection from abuse than institutions that might know the survivors and the families better; the need for protection was unpacked by the majority of the participants, as a complex relational issue:

Protection from the perpetrators, let's say following sexual abuse, let's say sexual abuse has occurred within the family, so when a survivor comes here and reports and she is

not safe to go back to that family because the perpetrator is within the family. (Victim Friendly Nurse)

Similarly, the survivor might need protection from relatives:

From relatives, let's say the abuse was also within the family, some of the perpetrators are the relatives of the survivor. So, for the case to be reported, they will be covering up for that perpetrator because he is a relative, for example, an uncle. (Victim Friendly Nurse)

Another participant added that a shelter becomes a neutral place, unconnected to the meanings of family homes, for a survivor:

The victims, where do you go after being violated, after being raped by your own brother for example? Where do you go? Or your father, hence the concept of the shelter being provided by Government which is a neutral organisation as opposed to someone going (kwatete) (to an aunt's place). It becomes a very complicated issue. People being accused of taking sides. So, it's better you go to a government place or a place which is established for that purpose. (The Former Provincial Youth and Women Development Officer)

The point that the survivor seeks refuge at the shelter because of fear was marked across all the participants' discussions of the importance of a shelter. Such fear may arise from the survivor's analysis of different micro-political dynamics in her home, and family, but it is sufficiently deep for her to turn to strangers, within a state-based organization, to save her life.

From their diverse backgrounds and experiences, participants pointed to shelter provision as crucial for the protection and safety of survivors of DV. One key informant referred to a shelter she once operated and said,

When survivors got to our place, they felt that they had come to a place of safety where they could be protected without anybody talking about theirs murders, about them. (Former Area Manager for Musasa 2000- 2013)

Unanimously, participants agreed to shelter is important in that it ensures that survivors are protected from perpetrators who might want to harm them or even murder them. The perpetrators were generally viewed as the major threat to the survivors by putting their lives in danger hence the need for protection. The Former Provincial Youth and Women Development Officer gave an elaboration:

You need to think about the security of that person. Because the perpetrator can organise follow-up operations so you need to put them in a very secure place. (The Former Provincial Youth and Women Development Officer)

The power of a shelter was also identified by some participants as essential to the hope of legal assistance for a survivor:

Because we realize that if a child for example is raped by her father and it is a Police case, meanwhile, the father can be released on bail. Where will the child stay? And the relatives are afraid and the relatives will try to say (iwe, hazvina nebase rose, ungasungisa baba vako?) (it doesn't matter; do you want your father to be arrested?) They try and persuade the child to withdraw. So, the establishment of a safe shelter is very critical. Because then, the Government or the NGO will take responsibility over this person, the victim until such time that the problem is sorted out depending on the gravity of the problem. So, to me you cannot sort out rape issue, you can't, it's for ever. (The Former Provincial Youth and Women Development Officer)

The point that the shelter protects the survivor from the perpetrators was continuously emphasised by key informants. One key informant commented that a survivor and a perpetrator who is released on bail for example cannot stay in one house, and critically allows for testimony:

Because sometimes when they go back to their homes, the perpetrator is the husband, so for them to live in the same roof with the perpetrator going to the court, truly speaking it's not practical. So, when they are at Musasa, the perpetrator stays on their own, with the survivors on their own. They can narrate their story without being threatened or without being harassed. (Childline officer)

These women, all active in different wings of state-based offices and of very different ages, were remarkably consistent across many hours of interviewing in both their recognition of shelters as critical to surviving DV, and in their hopes for what such shelters might offer, both in practical and political ways.

4.1.5 Theorisation of the meaning of a shelter in the delivery of social justice

“So, the essence of the shelter is to assist the woman and restore back to her the dignity and worthy. (Childline Officer)

This theme theorises the meaning of shelter in the delivery of social justice for survivors of DV, something I argued at much greater length in Chapter 7 (Discussion chapter). None of them ever used the term “social justice,” and yet in their thinking, shelter provision for survivors is an organic and critical facet of what survivors deserve. All citizens within any given country have fundamental rights and entitlements which need to be recognised by the State. All human beings have a right to dignity and self-respect as enunciated by the Constitution and other related laws. Every person including survivors of DV is supposed to experience self-worth as a human being. What emerged from the representations of participants is that DV is dehumanising as survivors are stripped of their self-worth, and simultaneously of safe access to a home, family members and/or their health. They are often put to shame and humiliation as they go through this agonising experience. Being a victim of DV is often a

leading cause of homelessness. Without a reliable and safe place to stay, survivors often move around begging friends and family to accommodate them and provide safety and other necessities. As survivors become helpless in face of violence, they run for safety, sometimes half naked, and their respect is often lost in society. One participant told me graphically what she believed survivors go through:

You know when you have been beaten in the neighbourhood and you were seen running naked, people around you don't respect you anymore. They saw you naked, nobody wants to be seen naked by the Public. And they saw you running, its undignified, its unlady like, and they saw you screaming and they saw you with blood streaming all over. Personally, even if they don't laugh at you, even if they don't point fingers at you, you feel you have lost something as a human being. (Provincial Head: Ministry of Women's Affairs, Community, Small and Medium Enterprise Development)

Being in the shelter means, for participants, that the survivor is far away from shame, victimisation and bodily harm that all affect her dignity. Participants who were the government actors who made the establishment of Musasa possible described a practical profile of “social justice” they named as a home – one for survivors. As noted before, I return to this point in my discussion chapter but note here that concepts of social justice entail breaking down into what may seem “sensible,” “obvious,” “compassionate,” and “accountable” once theorization of what causes injustice is core to thinking and planning. In this case, participants locate injustice within commonplace conceptions which relegate women and girls to positions in which abuse from men in their lives is likely – positions of inferiority, rigid labour roles, and vulnerability to gender-based discrimination. The fact that all participants had themselves achieved high levels of public authority and state-level positions suggests that these positions may be, and are, challenged and overcome – this did not, however, translate into amnesia for these key informants about the continued vulnerability of women in their own homes.

4.2 Section 2 Musasa staff

The interviewees who stayed within the staff offices took responsibility for establishing the shelter in Gweru and spoke with me from positions outside the actual maintenance of any shelter – what they brought to my research was a perspective on the meaning of a shelter for their professional public work. The shelter was opened in 2013 and had been running for 3 years when I initiated my research. By this time, two thousand and twenty- one (2021) women had stayed in the shelter as survivors, (*see Appendix 8*) but the core cohort of staff who has been responsible for key aspects of running the shelter from 2013 on were still in place and

highly proactive in the translation of shelter-concept to the day-to-day provision of programmes, services, accommodation, and care.

This section analyses data from these Musasa staff. This cohort had inside stories of how a shelter operates and these highlight their perspectives on what constitutes a benefit for survivors. The ideas, perceptions and experiences of staff on how they made meaning of their work in a shelter were critical for the study because salaried engagement with creating a “home” (as the state stakeholders envisaged) was complex, demanding intimate engagement with the lives of shelter residents and their vast range of experiences and needs due to their abuse. What “social justice” might look like from the perspective of people employed to deliver it was interesting to me, and vital to a multi-layered grasp of what happens in a shelter and why.

4.2.1 Conceptualizing a shelter

A shelter is a place of recovery where survivors are accommodated temporarily as they reflect more on their lives and think of the way to move on. (Shelter matron)

All staff conceptualized a shelter as a place of recovery where survivors of DV are accommodated temporarily to solve their problems and making decisions about moving on with life. On the same note, another member of staff added the element of healing to the explanation of a shelter:

A shelter is a safe space that enables women to heal from experiences of violence and be able to move on with their lives. (Shelter administrator)

A shelter is a place of safety for the survivor where the survivor is free from harm from the perpetrator. (Shelter matron)

The staff mentioned that the purpose of a shelter is for survivors to access justice within that space, directly using the vocabulary of justice:

Women should be able to access justice within the shelter space. We want women to be protected and be free from harm. (Shelter Administrator)

Unlike the stakeholders, those working in the shelter, taking different responsibilities, located their job as one of justice-provision, seeing the shelter both as a place from which legal help may be reached, and simultaneously as a place which incarnates “justice” given its objectives of protecting abused women and prioritizing the possibility of a future beyond abuse: “healing” and “moving on”. It is possible, of course, that staff working in the shelter may have fewer visionary perspectives about the meaning of a shelter, given the arduousness of the work, but

in interviews with me as a stranger, all interviewees supported the idea that their workplace directly liked survivors to redress from the abuse they had suffered.

4.2.2 Operations of a shelter and experiences with survivors

The reason why this shelter was set up is for women and girls to be safe after experiencing GBV in their own homes. (Shelter matron)

Staff spoke in depth about the fact that when survivors get to the shelter they are in a desperate state, stressed and at times crying because of their situation. Staff revealed that, from what they perceived, some of the survivors who enter the shelter space will have lost hope and are embroiled in negative thoughts and some even embracing suicidal thoughts. They mentioned that survivors think that their situation is not redeemable and the thought of dying is real. Staff raised the point that when survivors come to the shelter they will be broken and this shows that they will be injured both emotionally and sometimes physically. Staff explained that survivors who come to utilize the shelter will be in pain and desperate to get help. These are some descriptions of survivors when they come to the shelter given by staff;

When survivors come to Musasa most of the time they will be people who are stressed because of abuse and most of the time they have lost hope. (Counsellor 1)

They are people who don't know what to do next about their situation. They don't know how they can be assisted. Some will be suicidal when they come here not even seeing any hope about the future. Some think that it is better to die because they don't see what could be done about their situation. (Counsellor 1)

When survivors come to the shelter, they will be in a very bad shape. Just imagine someone being beaten or has gone through violence, someone has been raped and their self-esteem is very low, they have no hope, they think it's the end of the world and they cannot think of anything that is positive about their situation. They think they are just as good as dead. So when they come here they are broken. (Shelter Administrator)

These descriptions of immense stress constitute the “working-ground” of the shelter staff, and as they describe it, they are describing the impact of DV. Their work, thus, becomes an intensive engagement with the psyche, embodiment, and spirituality of the residents, as well as engagement with the practicalities of the labour of ensuring that the shelter space comprises food, opportunities for cleaning, and a range of other resources.

So the shelter becomes so much of help to this survivor who is helpless and feels hopeless. When they are in the shelter, they receive continuous counselling. They get ongoing psycho-social support. So this psycho-social support which they receive here helps them to heal psychologically. (Shelter Administrator)

So when these survivors come to Musasa they find a temporary shelter where they rest and psychologically get stable as they receive ongoing counselling. When these

survivors are disturbed by violence, their decision making is affected. Some do not even know what to do and others are suicidal when they come to the shelter. So when they come to the shelter where they are safe, they recover quickly and re-gain mental stability. (Counsellor 1)

When a person comes for counselling, they find a person to tell their story and pour out their hearts and have a shoulder to cry on. This provides a relief as they know they have a person who listens to their story and pays attention. They feel important when someone listens to their stories and help them think straight. (Counsellor 2)

In their interviews, staff reiterated that they offer counselling which provides relief to the survivor as they find someone to tell their story and pour out their hearts and have a shoulder to cry on. As far as they are concerned, ongoing counselling helps the survivor to heal psychologically and regain mental stability. In a different study, I would have explored in more depth staff perspectives on what counselling tools are to their minds the most effective, and asked more about their understandings of how very diverse women experience the work of counselling. For this research, however, my interest was in how those working with the survivors in the Gweru shelter described “justice” at a practical level, and here, access to free and open-hearted counselling, attuned to the power of DV, becomes a route to redress.

Staff narrated that they provide survivors opportunities to tell their stories as individuals and then share stories and experiences to give them confidence that they are not alone as explained;

The fact that a survivor is given a chance as an individual to explain her story and what brought her to Musasa is therapeutic on its own. They feel important and are able to say their stories, some will be emotional and start crying. Some get assistance through sharing their stories with others and knowing that they are not alone in the problems of GBV. The aspect of sharing stories helps clients to relieve stress and after hearing others speak of their challenges, they may feel that their case is better than what others experienced and that gives them relief. (Counsellor 1)

A shelter also allowed survivors to interact and share experiences and build relationships. According to the counselling staff, their presence within a shelter made a huge difference for the survivors as they found someone to talk to and walked them through their difficulties. Counsellors were trained to be good listeners and they avoided being judgemental. This helped the survivor to pour out their stories and made decisions about the future. It came out that through counselling and sharing experiences survivors relieved stress and thought of moving forward. Staff also commented that women had benefited a lot from the shelter services that were offered. Those who came with suicidal thoughts got support through counselling and became emotionally stable and moved on with their lives as one of the counsellors explained;

Women have benefitted a lot from the services that we offer. We have come across clients with suicidal thoughts but we continue giving them support, through counselling and they become emotionally stable and move on with their lives. (Counsellor 2)

Another point raised by staff was that when survivors face GBV they tended to develop a negative self-image and thought that they were no longer worthy and the inferiority complex became the order of the day. It surfaced that survivors of GBV looked down upon themselves as explained;

Most of the clients when they face GBV, they tend to have a negative self-image. They tend to look down upon themselves and they think they are no longer worth; they are inferior. (Shelter Administrator)

Staff indicated that GBV survivors went through difficult situations which were dehumanizing such that their self-esteem was affected negatively. In such situations, the shelter gave survivors a lot of support to help them build confidence and self-esteem and that contributed to their psychological healing and recovery as explained by one member of staff;

GBV survivors need lots of support as they go through very difficult times which are de-humanizing, at times you counsel those sexually abused, or physically assaulted with bruises all over and what they need is to build confidence and self-esteem. A shelter becomes a space for healing and recovery so that they move on with their lives (Counsellor 2)

Findings revealed that at Musasa, the negativity was dealt with through conducting confidence-building sessions which were aimed at promoting a positive self-image. It emerged that survivors were engaged in group sessions to enable them to build confidence and appreciate their worth as explained by one member of staff;

We would conduct group sessions with survivors where we would take them maybe through various sessions for example, grooming sessions, and confidence building. In our sessions we try to build confidence through the resilience building sessions where we empower them. We tell them that even though they faced difficulties, they can stand on their feet and live a worthwhile life. (Musasa Administrator)

This quotation suggests that staff also saw themselves as people with the mandate to encourage and inspire, a role that places a heavy load on staff themselves:

It's quite a process when they come here. I have watched them move from the stage of being broken to someone who is empowered. Some survivors when they come to the shelter they will be in a state where they cannot even realise their strengths. In the shelter we help them realise their strength and also to appreciate that they also have those strengths. This will help them to develop a positive self-image unlike when they first come here when they have a lot of negative self-image. (Shelter Administrator)

Staff reiterated that they conducted empowerment programmes which helped survivors to realise their strengths which were crucial for building a positive self-image and financial independence. Staff were thus placed in a dual role: they needed to operate both as those responsible for healing and as those who facilitated new economic opportunities, once healing has begun. They explained this as a belief that when survivors realised their talents, they would be appreciated by others more as they taught others the various skills they might possess for example baking or plaiting hair. One staff member explained;

In our shelter we have that component of livelihoods where we nurture the skills that they have. So we just take from the other survivors who have skills they possess and they teach others. For example, if we have someone good at dress making, they can assist others. (Shelter Administrator)

In their interviews, staff were keen to emphasize the optimistic aspects of their work, and it was interesting to me that the discussion steered away from any struggles they had in supporting survivors in multiple ways. I partially attributed this to the fact that I was a stranger, and I was interviewing professional workers who knew one another well; this is not a situation in which interviewees are likely to divulge difficult material. I also noted that their common interest in sharing the details of the work of alleviating survivors' pain and insisting upon the potential in their futures spoke to their hope for justice, in the face of very real evidence of injustice.

In thinking more about the nature of the injustices faced by shelter residents, a point raised by all staff is that a shelter must provide safety and protection to a survivor who will be running away from the perpetrator. A shelter becomes a safe space for the survivor as she finds refuge. As narrated by one member of staff, perpetrators are prohibited from entering the shelter and security is reinforced by security guards:

We provide a safe space. When survivors come here, the perpetrators won't reach them as they will not have access to the shelter. We have the security guards at the entrance who do not allow anyone to enter except those who are known to assist survivors, maybe the Police or Social Welfare personnel. Strangers will not be permitted here. (Counsellor 2)

The injustice here becomes ubiquitous and potentially lethal, danger and the shelter staff characterize shelter as a space where such danger is eradicated: intruders are not permitted to enter. There are security measures put in place to enforce safety and protection. Shelter staff revealed that a shelter plays a key role in providing safety to those who will have been sexually

abused particularly in a home setting by those who are supposed to take care of them, for example, the father or any other male relative. One staff member explains,

We can have another kind of client for example a minor who was sexually abused by a relative. Maybe the relative is the one who was taking care of the client. This means this client is no longer safe and cannot continue staying with the perpetrator. So that client will be removed from that place and put into a place of safety. (Shelter matron)

For staff interviewees, the role of a shelter as a place of safety and protection for those running away from abuse could not be underestimated and this opened up discussions of justice debates on how it was ever possible to find redress in the face of violence without the physical guarantee of protection from attack. I explored this issue in my Discussions chapter.

Safety for interviewees also involved financial support and access to resources such as medical care:

Some survivors come to the shelter injured and seeking medical help and they will be having difficulties in walking. When they come to Musasa we immediately take them to hospital for medical care. (Counsellor 1)

The shelter paid any bills for treatment and medication, and thus yoked financial support and recognition of the need for professional health care, something which cannot be provided inside the shelter itself but might not be available to a survivor without staff intervention.

On the same note, staff highlighted that at the shelter survivors were provided with all the basic needs including food, clothes and sanitary wear and that contributed to the peace of mind. One member of staff explained;

We provide to them every basic need so that they are comfortable and have peace of mind. They are not supposed to worry about food, sanitary wear, or clothes, we give them. (Shelter administrator)

Furthermore, staff raised the point that in most cases when survivors ran away from home at the height of DV they fail to pack any clothes or carry anything. This means that they had nothing to wear and in such cases, a shelter played a critical role in providing clothes for survivors hence restoring a sense of dignity for the survivor;

If a person was chased away without any clothes and children might also have no shoes, the shelter assists such cases. The shelter provides clothes for such cases. The shelter provides the basic needs for survivors and assists them with all they need. (Counsellor 1)

Survivors were supposed to experience a “decent” life, with ordinary resources available such as food and clothes, within the shelter space as narrated by staff;

We want them to have a decent life in the shelter so we provide everything they need. We provide everything from sanitary pads, tissues, everything will be provided for so that they don't have any worries. We want them to have peace of mind and forget any problems they might think they have. A shelter should be their home for the period they are staying there. (Shelter matron)

At one level, the staff's description of the work would be familiar to anyone who had worked in shelter provision, but what interested me for this research is the way a knowledge of DV and its impact roots staff discussion of the kind of work needed. The importance they saw in security, healing, and the restoration of dignity was a political one: their material suggested a detailed reading of what the provision of daily social justice might – and to them, does look like.

4.3 Conclusion

In conclusion, this study was concerned with the meaning of social justice for survivors of DV within a shelter space. In this Chapter 4, I have presented findings from stakeholders who set up the Gweru shelter and the staff in charge of running the shelter. Although none of these participants ever used the term social justice in their responses, both stakeholders and staff were consistent in their recognition of shelters as critical to surviving DV and in their hopes for what such shelters might offer, both in practical and political ways. Both groups described DV as an injustice against women which a shelter aims to address. The participants concurred that a shelter must provide safety and protection to a survivor who will be running away from the perpetrator. A shelter becomes a safe space for the survivor as she finds refuge. The next two chapters are concerned with the experiences of survivors of DV within a shelter space.

CHAPTER 5

AT THE THRESHOLD

5.0 Introduction

The previous chapter presented the material on both imagining and running a shelter to support survivors of domestic violence, using mostly content analysis of the material in interviews from those in political and feminist power (who saw clearly what such a shelter could mean) and from those currently running the Musasa Shelter. The findings suggest how these voices, placed very differently in the growth of this shelter, theorize the meaning of a shelter's place in the delivery of social justice, and I will return to this theorization in Chapter 7 (the final discussion chapter). As discussed in Chapter 3 (the methodology chapter), my approach to this research was grounded in the idea of an “exploded view” of the process of a phenomenon: a way of seeing it from multiple perspectives, which do not necessarily cohere, but which offer a range of ways of understanding how participants, differently situated across time and context, make meaning of something, in this case, a shelter designed to support survivors of domestic violence in Zimbabwe. The previous chapter synergized the views of those who imagined the shelter and those who currently work in it, and as described these views both cohere and diverge in relation to the link between a shelter and the provision of social justice.

In these two chapters (Chapters 5 and 6), I worked with material from interviews with twenty women, who have stayed as residents in the shelter, at some point between 2018 and 2021. The interviews with these women were very rich indeed, often lasting several hours, and traversing much ground concerning their lives, their experience of domestic violence and critically, their narratives of becoming shelter residents. In this chapter, I used mostly thematic analysis to synthesize their representation of themselves, as diverse individuals, and the way they found themselves at the door of a shelter: an “alien space”.

The chapter was divided into three themes. Theme One played a fundamental role in presenting the participants' key zones of self-representation in terms of where they grew up, their educational level and socialisation as girls among other things. The theme also included the sources of their vulnerabilities. Theme Two presented a theorisation of domestic violence as presented by participants as they talked about their experiences. The theme covered the deep seriousness of what participants were representing as dominant experiences with DV and how they heard about Musasa Shelter as a potential portal of support. Theme Three presented

findings on participants' encounter with an alien space which was the shelter and explored their feelings upon arrival.

5.1 Theme 1: Who are you?

This theme presented background information about the upbringing of participants and took into cognisance their diversity in terms of growing up and showing their resilience to the challenges they encountered during their development. The theme included dreams, interests and hopes and ended by highlighting the vulnerabilities of participants to DV.

5.1.1 Section 1- Where they grew up?

My parents are late. I was born in Zhombe where I stayed with my parents. We are four siblings: my brother, elder sister, myself and my younger sister who is at a place called Rubi. My mother passed on in 2012 and my father had passed on in 2007. After the burial of my mother, my aunt took me in. (Participant 1)

This participant and many other participants faced difficulties in their childhood emanating from the death of one or both parents. Demographic data about these participants, indicating where they grew up, their ages, level of education and marital status is reflected in Table 1, (Appendix 6).

The findings revealed that participants had diverse backgrounds and childhood experiences and no uniformity was witnessed. Participants presented complex narrations of their family sizes and shapes as they grew up, but most of them had lost either one or both parent(s) through death or divorce and were raised by either a grandmother, aunt or siblings. In most cases the way they were brought up was difficult but what they presented as encouraging is that other people surrounded their lives and offered love and comfort. Despite the loss of parents, participants had some support system that helped them to move on.

I grew up in Nhema in Shurugwi being raised by my grandmother and grandfather. My mother died in 2004 when I was 4 years old. My mother had divorced with my father and mother and I started staying with my grandmother and grandfather. (Participant 18)

I grew up in Masvingo. I grew up with my mother but she passed away in 2007 together with my father, so I grew up staying with my grandmother. I stayed with my grandmother then I eventually left Masvingo. Then I stayed with my sister in Kwekwe. (Participant 3)

As they were growing up, particularly in the rural areas, girls were socialised to do girls' gendered work as articulated by Participant 15. They had opportunities to work in the fields,

for example, weeding crops. They also had the opportunity to cook, clean utensils and do all household chores as explained by these participants,

I am the firstborn in my family. We are five siblings, three girls and two boys. Our home is in Gokwe that is where we were born. At home, we would go to the fields to weed crops. We would clean utensils, cook and do all household chores. (Participant 15)

Our mother had taught us to fetch water and to get firewood. We knew that our mother should find firewood at home upon her return from the fields. We would fetch water even with pots to ensure that our mother had no difficulties. (Survivor 7)

As we had been taught to wash plates after meals and during, we would say leave us to do the cooking, I would cook and after that we would agree with my younger sister that she cleans the plates and I cleaned the pots. (Survivor 10)

As articulated by these participants, girls are socialized particularly by their mothers to do feminine roles such as cooking and washing dishes, fetching water and firewood. Mothers played a crucial role in the socialisation process, and in participants' narratives, where a mother became absent, this education was taken up by aunts, older girl siblings, or grandmothers. This gendered training started at an early age and continued into adulthood. What the material suggested was that despite the diversity of family contexts, training in "girlhood" as a zone of particular labour, and as a site of inferiority to boys, and subservience to men in the family was a shared reality.

The findings also revealed that in terms of education, most of the participants experienced difficulties and did not manage to complete Form Four. This is the basic level of education in Zimbabwe which enables a person to enrol for a course or proceed to the Advanced Level. It emerged from the findings that a few participants had opportunities to do some courses and found themselves with requisite skills in various areas such as sewing, Hotel and Catering, Marketing and many others. One participant is even studying for a degree at Zimbabwe Open University (ZOU). This university qualification is ranked high in terms of the academic prowess of participants. This is a demonstration of resilience despite the challenges that participants underwent. The focus in our discussions was not on challenges but on aspects of growth and development.

I went to school and got to Form Four. When I came from my aunt, I then went to self-help colleges. I did a course of Hotel and Catering. I did not complete the course because I failed to raise the money to proceed. I then went for attachment and I did not manage to go back to college but looked for work. (Survivor16)

The pastor said that even without passed O levels I could still earn a living. He asked me what I liked in my life. I told him I liked sewing... They helped me to find a vacancy

for cutting and designing. I did the dress making course working as a house maid.
(Participant 7)

I did my primary school here in Gweru at St Michaels and I then completed it at Mpumelelo. I did 'O' Level at Fletcher High School. From there I did a certificate of Marketing at Kushinga Phikelela...I did a certificate of Marketing and now I am doing a Marketing degree with ZOU (Zimbabwe Open University). I work at Edgars.
(Participant 8)

These quotations suggest how participants presented their experience with education through optimism: although many went through challenges of access, all saw education as a route to strengthening their options for economic independence. None spoke of an expectation that wifehood, or domestic partnership, would sustain them.

However, it emerged from findings that participants as social beings did speak of their engagement in love relationships as they were thinking about their future partners. They found themselves falling in love, getting married and starting a family. Here is what some participants said,

...at Kushinga Phikelela, that is where I met the man who then married me in 2006. We have two children. We had our wedding in 2014 when we already had two children.
(Participant 8)

I then fell in love with a certain boy who stayed in Mambo Township. The boy impregnated me. (Participant 18)

I then decided to get married. I then eloped to my boyfriend until I had my first child.
(Participant 14)

It is interesting to note that some participants spoke of falling in love and entering into consenting relationships with their partners, as they never anticipated that these partners would be their abusers. Like any young woman growing up in the Zimbabwean context, their wish was to have a beautiful family and look after each other.

This section has shown that participants came from diverse backgrounds and most of them encountered difficulties during childhood experiences. Some grew up without one or both parents due to death or divorce and were looked after by other family members, particularly grandparents or aunts. Most of them did not complete school due to financial difficulties. They were socialised to do the gendered work for girls such as sweeping and cooking. Participants had hopes of starting a family and no one anticipated abuse by a partner at any point.

5.1.2 Section 2: Interests, dreams and aspirations

My wish was that if I went to school and passed, I would proceed with school to become a teacher or a nurse. But it failed because it was difficult to get the money because the

donor said they could take us to Form Four. When I got to Form Four, I did not pass.
(Participant 6)

This participant and others had dreams and aspirations of becoming a teacher or nurse. These were the traditionally gendered occupations for women which used to be highly respected by society. These occupations reinforce the work of women as carers, but the participants did not analyse their hopes in this way: they simply spoke of wanting to work successfully within a typical gendered framework of labour. Participants had unfulfilled dreams as they failed to meet the expectations for the courses they wanted to do.

I thought that when I complete my education, I will be a nurse. That was my wish. I really wanted to be a nurse but I did not pass Form Four. (Participant 7)

I failed English and Mathematics and want to write these examinations. My subjects for Form Four would become six and getting a place to train as a nurse will not be difficult. (Participant 17)

On the same note, one participant who had a passion for soccer and wanted to advance in that area lacked support and could not realize her dream. She narrates her story,

From primary school to secondary school, I loved soccer very much (She laughs). I was good at it and enjoyed it. That was my passion. I really loved soccer so badly. So, when I came here all hell broke loose because I played soccer at school. When I was here I really wanted to pursue that dream that's what I really wanted. When I returned here things were squashed like and there was nothing like that, a girl should not play soccer.
(Participant 5)

Her dream could not be realized because she was not supported by those staying with her. She indicated that she was discouraged from pursuing her dream although she loved soccer passionately as issues concerning culture were raised. The issue of gender stereotypes affects dreams and aspirations as society starts passing negative comments to those doing activities labelled as 'male' instead of 'female'. Soccer is believed to be for males and females are excluded. Any attempts to do soccer are not supported particularly by traditional people. Participant 5 comments,

You know all the cultural things and I was told a lot of things and I said, ok, it's no longer possible to do what I want so I lived under their control, under their rules.
(Participant 5)

This participant gave up her dream because of a lack of support. Similarly, another participant who was good at playing netball was not supported by her mother when teachers wanted to appreciate her talent by paying her school fees. She narrates her story,

At school I played netball which happened to be my favourite. The teachers who were coaching me said, "Come we will pay your school fees." My mother refused and said what she had said would stand. (Participant 12)

This participant was supposed to have benefitted from her talent but the mother refused and she had to drop out of school. If dreams are not supported, they die and this is painful to the dreamer. Many participants told stories of dreaming, and planning towards making those dreams a reality, where their economic context scuppered hope, and forced them into much narrower zones of "womanhood" under patriarchy than they had anticipated.

5.1.3 Section 3 - Vulnerabilities

I was married at 14 years because we were suffering without anything, therefore marriage was a way of trying to earn a better life. The man who proposed me was a man who worked hard to get money. He had seen that the life we lived was difficult and he said, "It is better if I marry you, I would request to marry you. If I request to marry you we would make the other children go to school." It also worked like that. I was married. (Participant 9)

This participant was a victim of child marriage at the age of 14, mainly because of poverty. She explained that she got married to have a better life and also to accord her siblings the opportunity to go to school. Child marriage exposed the participant to abuse. She was denied the opportunity to go to school and choose a career and a husband for herself. This section explored the challenges that some participants experienced which may have made them more vulnerable to DV. From the findings, it emerged that participants were exposed to multiple sources of vulnerabilities as they were growing up which included neglect and abandonment, educational deprivation, poverty and lack of resources, absentee parents in childhood, and their vulnerability to patriarchal conventions about womanhood.

It surfaced from the findings that some participants were victims of forced marriages as they were forced by those who had custody over them, such as a parent or a guardian, to go back to their boyfriends after coming home late. These were just children who were below 18 years and had not even reached the age of marriage. The legal age of the majority in Zimbabwe is 18 years. These girls were in secondary school and were not prepared for marriage but found themselves exposed to abuse. They narrate,

What made me to get married is that I returned home late after having gone to see my friend and I found my father back from church. He told me to go back where I was. We had not done anything and I was not pregnant. I then went. (Participant 11)

When I got home my aunt said, "I do not want to see you here. This is not the time for someone to come home. I phoned your colleagues and they said they were back around

9 pm.” I told her where I had gone and she said, “Go back where you were with your partner.” She said she did not even want to see me. (Participant 17)

These girls became victims of forced marriage as they had to go to the boyfriend’s home unexpectedly. They left school abruptly and found themselves staying at home as married women. This shows that coming home late for girls is an offence which can be costly and devastating as all their plans are disrupted. A girl was forced to stay with someone she had no serious relationship with and that exposed her to abuse.

Similarly, several participants narrated that they experienced difficulties during childhood as their parents were missing; either through death or divorce. Here is a narration by one participant,

My mother passed on in 2012 and my father had passed on in 2007. After the burial of my mother my aunt took me in. (Participant 1)

This participant who lost both parents found herself being taken care of by her aunt but the major challenge she encountered was that she was raped by her aunt’s son. As an orphan, she was taken advantage of and exposed to this dreadful situation where she was raped and impregnated at the age of fifteen years and had to drop out of school. The participant admitted that she didn’t know what to do with such a predicament. She narrated her story thus,

I was staying with my aunt and her son and the son raped me. I did not divulge the rape because I was afraid that I could be killed by my aunt or the brother to the one who raped me. I was only 15 years when I was raped and I had left school and the man who raped me was my aunt’s son. I didn’t know what to do with my life. (Participant 1)

If her parents were alive such a horrible thing could not have happened because the parents would protect her from such harm.

On the same note, some participants were abandoned by their single mothers who went to seek employment in Botswana leaving them behind. They became vulnerable because of abandonment and neglect. The participants narrated the source of their vulnerability;

I grew up here in Gweru. I was raised by my mother. My father divorced my mother. I was born after the divorce. I was raised by my mother. I stayed with my mother and she paid my school fees. We lived together until I was in Grade Seven. For Form One I was transferred from Gweru because my mother wanted to go to Botswana. She transferred me and left me dumped in Marondera. (Participant 5)

My mother then told me that she was going to Botswana. When she went away, she left my younger sister in my care. I did not refuse. (Participant 12)

Parents who migrate to neighbouring countries leave children to fend for themselves and act like adults. Participant 5 explained how she was left alone with no one taking care of her. She was made vulnerable to abuse because there was no one taking care of her, she explained,

I say it was dumping because no one was there for me. It is like I was left alone to stay there because there was no one this side who wanted to stay with me because my mother had said she wanted to go to Botswana. The resources for us to go together were not there. (Participant 5)

This participant became destitute and lived in the streets and became a rape victim because no one cared for her. She explained,

He raped me. To be honest I felt shattered. That was the last thing I ever expected. I felt shattered and he said, "What I have done shows that you are my wife." It was by force. For me it was rape because I was shattered, I wasn't ready for it. (Participant 5)

The main challenge was being left alone by her mother. If she was there, she could have protected her daughter from the abuse she went through.

From the findings, it is evident that some participants were exposed to multiple sources of vulnerability. Besides having absentee parents, they were denied access to education as they failed to go to school. They didn't have the opportunity to go to school, particularly Secondary school which prepares an individual to do a course and to look for employment. Participants narrated their stories,

My father died and we remained with our mother but she then got married and went to another home. I do not even know my relatives. We survived as children without relatives. We are people of no fixed abode; we could be with our brothers wherever we went. We never went to school. (Participant 10)

My father and my mother had divorced. I went with my mother to her home and I stopped going to school. In terms of school, I ended at Grade Seven. (Participant 13)

My father died when I was a young child. My mother then had to re-marry again and I then started staying with my step-father. When I was in Grade Seven, I stopped going to Form One because my step father was someone who was abusive. He did not want a girl child to go to school. It was not in him. (Participant 14)

These participants were denied access to a fundamental human right, which is education. Many participants ended at the primary education level and failed to attain Secondary school education which prepares candidates to take up courses and get formal jobs. One participant explained that with age she decided to get married but the husband became abusive as he did not want an uneducated wife. This participant narrates as follows;

With age, I found a man who married me. After marrying me he then said he did not want to stay with someone who was not educated and he started ill-treating me. (Participant 10)

Another participant whose parents had divorced and remained in the custody of the father and stepmother found herself out of school because no one was paying school fees for her and her sister. She narrates how she went to school dirty and food was difficult to get until such a time when they pulled out of school. Her story goes;

In 2006 my mother had a disagreement with my father and she left my father re-married. We went to school dirty without having bathed and food was difficult to get. My mother was then told by others that we were suffering and she came in 2011. She came and took us. I was now in Grade 7 and she told me that she could not pay my school fees. (Participant 12)

This participant ended her education in Grade 7 because her parents failed to pay for her school fees. After divorce, children are affected if both parents become irresponsible.

However, without much education one can only qualify for menial jobs which are jobs of low status and lowly paid people. This is what some participants underwent. Because of the agency, they decided to look for employment to look after themselves. Here are their stories,

When I was still at home, I got a job. I started working as a housemaid... I then met another person who said he wanted us to stay together. I left what I was doing and went away. I stayed there and I had my first child in 2016. I stayed but it was difficult. (Participant 12)

I went to school up to Form Four but I did not pass well and my father failed to raise my school fees and I decided to look for work here in Gweru and I got a job at Rural Police as a cleaner. (Participant 15)

I did not complete the course because I failed to raise the money to proceed. I then went for attachment and I did not manage to go back to college but looked for work. (Participant 16)

This theme has demonstrated that participants had diverse backgrounds and most of them had difficult childhood experiences. Most of them had lost one or both parent(s) and were raised by other family members such as grandparents or aunts and they also had siblings showing that they were not alone. Some participants showed resilience as they worked hard to realize their dreams and aspirations. Findings revealed that participants in the study were exposed to several vulnerabilities such as neglect and abandonment, educational deprivation and poverty among others. It is difficult to know whether such vulnerabilities led to their later abuse (all women may face domestic abuse); however, it was impossible to ignore their collective experience of especially difficult family and economic contexts.

5.2 Theme 2: Theorization of Domestic Violence as a Pathway

I was then beaten. I was hit on the mouth and my teeth started to shake. There was a protruding tooth, and if you look at my teeth they are not even, there is one which came off. (Participant 10)

This is the ordeal that one of the participants experienced as a result of domestic violence. The narrations given by this and other participants are quite chilling, and vividly demonstrate the extent to which DV leaves permanent injury on the survivor, which almost perpetually reminds them of the dominance and superiority exercised over them by their assailant. The deep mental and psychological anguish experienced by the survivors cannot be underestimated. This theme presented a theorisation of DV presented by my participants as they told me about their experience; this was not intended as a broad theorization of all experiences of domestic violence, its shape, contexts, causes and impacts. I treated my participants' stories of their encounters of domestic violence as theory, not simply as a witness. By this, I meant that their representations were analytic in their descriptions of dominant threads of abuse and that they included the impasse experienced around finding a way to share their knowledge so that they could receive a measure of social justice through the experiences of participants. There were three dominant areas under this theme and these were: the deep seriousness of what participants were representing as dominant experiences with DV, that is, the huge emphasis on physical and emotional abuse; the barriers around reporting DV and thirdly, the material around how they heard about Musasa Shelter as a potential portal.

5.2.1 The dominance of physical and emotional abuse

The collective representations of the shape of DV showed a significant variation ranging from one extreme to the other, but there was an absolute dominance in the material descriptions of physical and emotional abuse. These were the most glaring and visible forms of abuse. This cohort had a lot to say about the intense physical and psychological danger they were in and the shape of this danger was a potential zone for murder. The narrations brought to the fore the dangers that participants were in as they were brutalised and beaten with objects such as iron bars or handles of a pickaxe. The traumatic experiences suffered by these participants were, in many instances, life-threatening and painted a direly morbid picture of the grave consequences of unchecked expressions of men partners' aggression and dominance. Some participants gave descriptions of what they went through as follows,

I felt a cracking sound at the joint of my hand and when I tried to check I was hit again. When I realised what I thought was wrong I decided to wake up and check. When I woke up, I found him holding the handle of a pickaxe that he was using to hit me. I was

hit very much that even today I cannot count how many times I was hit. I was hit my right hand and it sprained on the elbow. (Participant 20)

When I stayed with him, I was always beaten and I told no one. I always had a swollen face and that is when I got pregnant. When I was three months pregnant, he beat me and I woke up in Hospital in the private ward... I then miscarried. (Participant 17)

He took an iron bar and started to poke me with it and he then started beating me with clenched fists. My niece pleaded with him not to beat me and he said he would beat us all. (Participant 7)

These very graphic narrations exposed the gruesome and heinous physical attacks that women were exposed to, which border on the verge of attempted murder. This inhuman treatment culminated in the participants' sustaining serious injuries such as broken hands, and one of them even incurring a miscarriage. Participant 10 narrated how she was hit on the mouth and her teeth started to shake being left with a permanent dental nightmare. Participants silently suffered various atrocities in their relationships. Furthermore, the narratives gave some detailed accounts of how participants were exposed to beatings, slapping, threats and degradation. Beatings became the order of the day. In most cases beatings would be accompanied by verbal abuse and threats;

He would beat me and scold me. He got to the extent of making me sleep outside lying that the landlord had sent us away. (Participant 16)

He got to a point where if I asked, he would respond by slapping me and he was always beating me. (Participant 17)

I would be threatened by him saying, "I will kill you" and he grabbed me on the neck saying, "I kill you, I cut your head off, I killed many people. (Participant 7)

Participants narrated how they were physically abused by perpetrators who were either their husbands or boyfriends. The people whom they once fell in love with, and whom they looked up to for protection, became their assailants. The narrations provided evidence of the deep injuries they suffered and the need for help. The environment they were living in was dangerous for them as human beings and left them with deep-rooted trauma, distrust and fear. Although participants also described other forms of abuse, including sexual abuse, they overwhelmingly spoke of assaults that regularly threatened their survival. This located domestic violence, for my participants, as a murderous situation, a 'dead-end' of intense seriousness, and a situation in which it was unlikely they would survive and many of them voiced exactly this. This theorized domestic violence not as a series of painful blows but as a clear declaration of intent to kill. Domestic violence quite literally, for my participants, was theorized as imminent physical death.

5.2.2 Emotional abuse

He would come with girls in the minibus, and they would have a party, smoking ‘mbanje,’ [marijuana], drinking beer, and I was told to go into the bedroom. (Participant 17)

Coupled with the recognition of DV as physically murderous, my participants also emphasized the power of emotional abuse within their experiences. The quotation above was narrated by one of the participants who was exposed to emotional abuse. The findings revealed that survivors of DV were also victims of emotional abuse. Emotional abuse was just as damaging and mentally disturbing as physical abuse. Survivors went through painful and stressful experiences which traumatized them and left them emotionally disturbed. In the case of participant 17 above, her husband began to engage in promiscuity, that is, having relationships with other women outside the home and even if the survivor got to know about it there was nothing she could do. As explained by participant 17, the perpetrator would come home with other girls and have a party whilst she was told to go into the bedroom. This was a painful experience that the participant had no control over. In another case, the perpetrator had impregnated another woman and had another family as described by this participant,

I did not know the truth but my husband had another wife who was advanced in pregnancy such that my younger child is almost same age with that child from that wife. (Participant 6)

Having a husband involved in another relationship was stressful for this participant. Furthermore, evidence that the survivor would not be treated as a human being who was able to make meaningful decisions about her life also surfaced. A lot of demeaning would be witnessed and the survivor was regarded as a person without a voice even on issues which affected her body and sexuality. She would not be listened to, instead, she would be ridiculed and de-humanized as reflected below,

In my stressed mind I was someone who was always abused and being abused most of the time. There was nothing which I would say and he would listen. It was always war. Some of the times he would ask me, “Do you think you are a person? We have real people not you”. (Participant 10)

It was more of emotional abuse than physical abuse. If he said he wanted sex at any time he gets home, anytime he wanted it, he had a say over my body. I totally had no say over my body because I wanted him to provide for me and the baby. (Participant 14)

He locked me outside. He said I would not get in until I accepted what he wanted. I found him seated on a chair by the door with the keys in his pocket and he said for me to get in I should accept anal sex. (Participant 4)

These findings revealed that participants could be forced to do things they were not comfortable with, and their bodies could be controlled by perpetrators. They could be forced to have unprotected sex or anal sex mainly because they wanted material support. Evidence gathered indicated that participants, because of a lack of empowerment and need for material resources, ended up without a voice over their lives and issues that affected them. It appeared that the need for material and financial support turned these women into objects and property of their assailants. A clear nexus could be drawn between the lack of empowerment and the subjection to inhumane treatment. It was as if the perpetrator ceased to identify the victim as an equal partner or a spouse, and chose instead to categorize them as one of their possessions over which they could exercise unfettered dominance and control. The perpetrator could do whatever they wanted and failed to consider that survivors had also rights and entitlements. Participant 14 clearly explained this,

He could control everything. I did not have a say when it came to my health, if he said he wanted unprotected sex I would just comply. I had no voice. I couldn't say no to unprotected sex. (Participant14)

Similarly, findings revealed that if the perpetrator had failed to pay anything to the parents of the survivor, as bride price (*lobola*), that could be categorised as emotional abuse because the survivor was not free to go back to her parents particularly at the height of abuse. In the African culture, the man was expected to pay bride price (*lobola*) and that made it easy for one to go back home especially in times of violence. This participant explained her predicament,

I saw that I did not have anywhere to go. I did not have an option with the child. He did not even go to my parents to tell them that he was staying with me. You know that in our culture parents say they would want certain things. He had not gone and he was saying he was waiting for the money to be enough. It was difficult for me to go and tell my mother that I brought a child. (Participant 13)

The findings showed an engagement with the toxicity of domestic spaces through physical and emotional abuse and this was the combination which created my participants' experiences as an 'endzone,' a space from which they either leave or remain to be erased. For my participants, this recognition then entailed the barriers to be overcome in finding a route out.

5.2.3 Barriers to reporting DV

The beating which was done to me and my mother, I took it as part of life not knowing it was abuse. (Participant 14)

This section explored some of the impediments that militated against the willingness and the desire of survivors to report cases of DV. The findings revealed that several factors contributed

to the failure to report DV and these include: normalisation of DV, perseverance by survivors, secondary abuse by the Police; and lack of knowledge about Musasa.

The findings revealed that in some cases there was a normalisation of domestic violence as articulated by Participant 14 above. In such a situation, DV was conceptualised as part of life and nothing was done to address it. This normalisation was more complex than it seems because both men and women were victims of this normalisation. This led to men becoming accustomed to the idea that a man must exert physical dominance over a woman to validate his role as a husband or boyfriend. On the other hand, it also led to women believing that it was expected of men, to physically abuse their wives or girlfriends to show leadership and control. Consequently, the abused failed to report because they also believed the abuser had a right to beat them.

Another barrier to reporting which came from the findings was that relatives of survivors discouraged them from taking action against abusers but encouraged them to persevere and stay in the marriage despite the abuse,

You find a situation where some people say 'persevere' because some relatives would have seen that they cannot look after you. (Participant 10)

I told my aunt and she said 'persevere that is what happens in marriages'. She said that is what I wanted so I should persevere. (Participant 17)

This presented the idea that relatives do not support the idea of leaving the marriage but advised the survivor to persevere despite the relationship being abusive. The logic behind perseverance appears to be double-barrelled. On one end, it appeared that relatives of survivors were unwilling to take on the added obligation of providing shelter and refuge to the woman who returns from a failed marriage with her children. This, therefore, spoke into the issue of financial empowerment earlier adverted to. On the other end, it also appeared that the other motivation for perseverance was so to avoid the social stigma of being negatively labelled as having returned from an unsuccessful union. The conclusions one can extrapolate are that in African culture, society takes pride in marriage. That is to say, couples living together than in divorce where women may be viewed as miss fits. Participants theorized this normalization themselves by locating themselves within 'family' or 'that is what happens'. They did not talk about 'African culture' or 'traditional families' because they were speaking entirely from within their deep experiences of these systems as normative.

The relationship with the police was also embedded in the knowledge that DV was normalized. Another impediment to reporting was fearing secondary abuse by the Police where the Police trivialize issues of DV and accuse the abused of perpetuating violence. This was narrated by Participant 9, who experienced secondary abuse by the Police as she said,

I ran to the nearby police camp and when I got to the camp, I told them that I had a difficult time at home. I told them, "That person has started beating me again. He was chasing me just now. I cannot go back home. I do not know what to do. Don't you have an alternative plan to help me?" I went to the extent of exchanging harsh words with the police because they did not see that I was being abused. They said I was provoking my husband. (Participant 9)

I told the police that they did not have the plan to deal with him. "You laugh with him and when I come here you say I am the problem. I am therefore taking my issue higher." I then proceeded to Police Central. (Participant 9)

The participant had run to the Police for help after experiencing DV at home but to her dismay and chagrin, she was told that she was the one who was provoking her husband. In this case, the survivor was viewed as the abuser and no assistance was given. In a sense, there were strong ties between such attitudes from the Police and the perpetuation of African traditional stereotypes. The reason why the Police accused Participant 9 of provoking her husband emanates from the patriarchal normative notion that the husband as the head of the household is at large to discipline his wife for transgressions. This leads to the fallacious presumption that if a woman was physically abused by her husband, then she most likely engaged in conduct that warranted such disciplinary action. It was discouraging to note that such an attitude could be found among the Police, who were entrusted with the onerous responsibility of being custodians of the enforcement of the law.

Furthermore, some participants admitted having limited knowledge about how the Police operated and also being afraid of the Police and which contributed to failing to report. The Police may take time to interrogate the accused and this may be a difficult experience for some survivors as it triggers trauma. This may be due to stigmatisation and labelling of the Police as harsh and unfriendly and survivors feared going there,

Others told me that if I went there the Police will be after me and I shelved the idea. (Participant 10)

I was afraid to report to the Police because I am afraid of them. I would ask myself what I would say. What do I do? (Participant 12)

This clearly showed that while the working class or the elite woman may have absolutely no challenges in engaging the Police because of their ability to access the necessary information enabling them to do so, my participants at the grassroots level where they still were very much in the dark about the entire process involved in mounting a report of DV to the Police. This issue showed that going to the Police was not a complete solution in itself. Naturally, survivors could not imagine having to go back to the same home as their abuser after reporting them for DV, as they feared for their safety and wellbeing. The issue of a shelter then became important in assisting the survivor.

Another reason which surfaced as a hindrance to reporting was the issue of corruption where some people would ask the survivor to withdraw the case and receive some payment. This was experienced by Participant 12 who was a rape victim and the children of the abuser were pressuring her to withdraw the case and get paid. She narrated her story,

When he was taken by the Police, I did not see him again but his children were saying, "Withdraw the case and we will pay you." I asked the children if he accepted that he was guilty and they said he accepted that he was guilty. They said he accepted responsibility but said, "Talk to her and if she says she wants anything we will pay".
(Participant 12)

Another factor which was revealed by the findings was a lack of knowledge about Musasa. Survivors admitted that they were not aware of the role of Musasa and its intervention mandate on DV so they could not go there to seek help. They indicated that during the height of their problems of abuse, they were at a loss of where to go and whom to engage to assist them,

I did not know where to go. I had no option, not knowing what to do. Some women told me to go to Musasa they can help me... I was wondering what I would say at Musasa because it was my first time hearing the name and going to Musasa made me undecided.
(Participant 12)

When I first heard about Musasa I thought it was where poor people stayed. I did not know what was done there and I did not know the nature of the people they helped.
(Participant 18)

Survivors could not utilize the shelter space because they were not knowledgeable about it. It is particularly important to note that survivors of DV end up feeling stranded, with no other option than to remain at the mercy of their assailants.

5.2.4 'Musasa as Portal'

The Police told me about Musasa. I went to the Police and told them that I had nowhere to go because I had been sent away by the man I was staying with and I have a little

baby... They said the following day they would accompany me to Musasa where abused women get assistance. (Participant 13)

Findings revealed that in their state of helplessness and hopelessness, survivors were informed about Musasa, a shelter for abused women, by the Police, a relative or a friend and they began to experience a glimpse of hope in their lives. In most cases, the Police took it upon themselves to inform survivors about Musasa Shelter. In the past, the Police had an obligation to look after survivors of DV at the Police station but that was not comfortable for survivors. After realising that the survivor has nowhere to go and needs accommodation, food and assistance the Police immediately direct the survivor to the shelter. The Police through the Victim Friendly Unit is aware that the survivor would be looked after well at Musasa as it is an environment that responds to survivor needs and assists with medical care, counselling, food and accommodation to restore human dignity.

Although most of the survivors acknowledged having no prior knowledge of Musasa, they believed that they would be assisted. Participant 15 admits that she had no knowledge of Musasa but when she got there, she found the place to be secure and comfortable. She says,

I did not know what was done there. I just got to the Police and they told me to go to Musasa. I was accompanied by two Police officers...They left me at Musasa and I put up there. When I got there, I found a place to be secure where I could stay comfortably (Participant 15)

This theme provides evidence of the deep injuries participants suffered and the need for help. The home environment they were living in was dangerous for them as human beings and left them with deep-rooted trauma, distrust and fear. Participants theorized DV, not as a series of painful blows but as a clear declaration of intent to kill. DV was experienced by many participants as an ‘endzone, a space from which they either leave or remain to be erased.

5.3 Theme3: At the Threshold

When they took me to Musasa, I was thinking that I would kill myself there at Musasa. That is what was in my mind. I did not look at anything that I could do except to die. (Participant 17)

This was narrated by one of my participants and suggested a hint of the despair with which survivors of domestic violence might arrive at the door of a shelter. This theme presented findings on participants’ encounters with an alien space which was the shelter and explored their feelings upon arrival. The findings revealed that the entrance to the shelter was difficult for most participants as it was dominated by fear and terror and yet they were in a so-called

“safe space” and one whose promise they had chosen in the face of what they had confronted within their homes. They were terrified to be in such an alien environment that they were not familiar with. The moment of entrance into the shelter was a kind of life/ death moment where survivors were standing at the threshold and were emotionally disturbed, feeling frightened, suicidal, and worthless and yet there was hope for them in the shelter space. There was tension between a sense of death coming through the suicidal emotions and the tiny glimpse of hope which were characterised by words about safety, hopefulness and happiness.

The dominant voices in the data were clear about the terror of the liminal space into which they were arriving, many of them explicating, naming a desire for death, and overwhelming hopelessness,

I felt very much abused. I saw no reason to live. I was no longer respectable and I felt excruciating pain but I did not know what to do. I had given up on my life. (Participant 4)

When I came in I was thinking of killing myself because I thought no one would ever understand that I was raped. (Participant 1)

I wished I could find something that would kill both the child and me rather than suffer without anywhere to go. I saw death as a better option. (Participant 13)

Survivors were in a state of limbo, feeling helpless and hopeless when they enter the shelter place. They failed to realize the potential power of the shelter which at that moment does not make any sense to them. They felt alienated and lost in this space which they were not familiar with. Many participants acknowledged that they had no prior knowledge of a shelter and its operations and that worried and troubled them a lot. Here is what they say,

I did not know where to go. I had no option, not knowing what to do. Some women told me to go to Musasa, they can help me... I was wondering what I would say at Musasa because it was my first time hearing the name and going to Musasa made me undecided. (Participant 11)

The Police told me about Musasa. I went to the Police and told them that I had nowhere to go because I had been sent away by the man I was staying with and I have a baby. (Participant 13)

This material showed clearly that the notion of a shelter arose for participants through the voices of others: “women”, “police”, and “Central” through direct identification of the participants as “women in trouble”. A shelter was a completely new environment for survivors. Everything seemed strange and the people surrounding them at that moment were strangers and they felt lost in such an environment. They did not know if the place was habitable or not. They were not sure if and how a shelter would change their situation hence feelings of

worthlessness, being unsettled, uncertain and deeply troubled were well articulated in their narratives,

I was pained emotionally when I got here at Musasa. I didn't know what to do. I had many questions about my life than answers. I was only 15 years when I was raped I had left school and the man who raped me was my aunt's son. (Participant 1)

At first when I got there I wondered if the place was habitable because it was a place I was not used to. I was not used to staying at a place with many people. On the first day I was troubled because I felt lonely. I was not settled; I was wondering why I came here. I was not used to this place. (Participant 11)

When you just get in you will be unsettled because you will be thinking a lot about your life, but eventually, you will be settled when you see that you stay well. (Participant 6)

From their narratives, participants were presenting a memory where they were emotionally disturbed and a sense of alienation prevailed, “feeling mute/ deprived of language,” and “wary of others” because of stress. A shelter being a foreign environment, they felt lost as revealed by their narratives,

I did not make any friends on the first day because I had stress. I could not even speak. I thought of what I would do with my child. (Participant 16)

At that time I was emotionally disturbed that I did not want to talk actually about it with my relatives around me. Everyone would be coming to you about what happened. I did not want to talk. (Participant 8)

The first day was difficult for me for sure. I thought I was lost. The first day was hard, I was used to our home where it would be myself and my child and not seeing many people. (Participant 14)

The stigma that surrounded shelter space was another hindrance to the appreciation of a shelter. In the African context, abused people should be taken care of by relatives and not strangers. A shelter is conceptualized as a place for those without relatives. Similarly, some people regard a shelter as a place for poor people and those people normally do not have a family to take care of them. This was highlighted by Participant 18,

When I first heard about Musasa I thought it was where poor people stayed. I did not know what was done there and I did not know the nature of the people they helped. But what gave me the courage to go there was that I had run out of options, without accommodation, without a place to sleep in and I decided to go and check what was done there. (Participant 18)

The findings revealed that a shelter started as a terrifying environment for participants because of many reasons including lack of knowledge about it, not being sure how they would be treated, and fear of stigmatization among others. However, although the shelter started as

terrifying to some participants, presenting tension between life and death, participants also saw a glimpse of hope and safety within this environment.

Being at the shelter was represented as much by strong fear and alienation as by glimmers of hopefulness within the data. Some participants mentioned that the way they were received at the shelter provided comfort and hope to them as they felt welcome in this alien environment. As witnessed below, this was represented in descriptions of affirmed communication and access to resources.

I didn't know what to do with my life. But when I sat down for counselling with the counsellor I was consoled, and I no longer have emotional pain. (Participant 1)

When I got to Musasa they said "We realise you are stressed, but you have come to a home where your burden will be made lighter as you solve your issues." They took the child, gave her food, and pampers. She gave me all that was needed by the child at that time. She also took me and showed me the room I would stay in. (Participant 13)

When I got to Musasa I was put into a room where I was asked to explain my issue. They took down my statement of account when I just arrived. I explained what happened. I was taken to counselling. They told me not to cry and that the man would be arrested for attempting to rape me. (Participant 1)

The findings, thus, show that for some participants, the threshold of shelter life constituted a difference in the lives of domestic abuse, both relief and happiness were expressed by some participants who felt safe and happy when they arrived at Musasa shelter. These participants upon arrival at the shelter acknowledged hope in the power of a shelter to transform their situation. Their narratives indicate that they felt relieved when they arrived at the Musasa shelter because they knew that their issues would be adequately addressed. Participants even highlighted that they knew they would be surrounded by people who cared for them at the shelter. Some of the participants, even without prior knowledge about what goes on within a shelter space, believed that they would be assisted. From their narratives, it could be realized that they were desperate for safety, accommodation and food among other things and they were confident that their issues would be addressed effectively within a shelter space. This is what some of them articulated:

When I got to Musasa I found it to be the place I needed for that moment. I was desperate for safety, I needed emotional stability. I needed to be told that I was safe and nothing was to happen to me. I felt a big relief when I arrived at Musasa. I knew I was not alone but was surrounded by people who would do everything to protect me. I felt safe. I experienced some peace of mind. (Participant 8)

I did not have any other option, I just wanted to be assisted. I was now destitute leaving in the streets and my baby was exposed to such a difficult life without food. Sleeping in the streets is not a joke. You don't know what can happen to you at night. (Participant 3)

Because in the first week, you were treated well, given food, slept in a good place, given everything you wanted, everything was in the order you could forget that you came because of a problem. I changed in the first week. I started to rest, to sleep without being abused. My body started to recover. All the pain in the anus started to end. I got peace in my body. (Participant 4)

Similarly, another cohort of participants expressed potential happiness and joy as they came to the shelter space, they were happy to be at the shelter. These participants seemed to be knowledgeable about the power of a shelter in addressing their issues and also the services they would receive. Some conceptualize a shelter as home mainly because upon arrival they were given everything that was stressing them, such as accommodation and food. From their narrations, they felt privileged to be at the shelter,

When I got to Musasa I was happy that I had gotten to a place where I would be looked after. I was received well and the stress subsided because of the warm reception. I was handled well, I was not worried about anything and I was given everything I needed. All the things I yearned for I was given at Musasa. (Participant 18)

When I came here, I was too happy that I had found help. I thought my issues were solved and there was just joy inside me (laughing). I thought my issues were solved as I was given shelter. (Participant 3)

To be honest, my first impression about Musasa, when I got to Musasa, I felt I was home (She started crying). That was me because I wanted the place to stay so badly. Somewhere I can at least find peace for the moment. To be honest I was more than happy when I arrived at Musasa. I was so happy, I said, at last, I have a home. (Participant 5)

The comparison between the word “home” used by Participant 5 and the representations of suicidal ideation from other participants signals a tension in the material which is important in understanding the relationship of a shelter to the provision of social justice to survivors of domestic violence. The moment of entering a shelter is simultaneously a nadir (“I did not know what to do with my life”), a theorization, “I knew I was not alone”, and a desire, “I wanted the place to stay so badly”

5.4 Conclusion

This chapter sets the stage for the relationship between social justice and sheltering. Although a shelter starts as terrifying for many participants, presenting tension between life and death, participants see a glimpse of hope and safety within this environment. Some of the participants,

even without prior knowledge about what goes on within a shelter space, believed that they would be assisted. From their narratives, it could be realized that they were desperate for safety, accommodation and food among other things and they were hopeful that their challenges would be addressed at the shelter. A shelter becomes a symbol of hope for participants.

CHAPTER 6

A SHELTER AS A 'HOME'

6.0 Introduction

This chapter presents findings on the participants' shelter stay and it explores the meaning of a shelter as a symbol of 'home', one capable of redressing their experiences of violation and humiliation within their own 'homes'. An analysis of participants' experiences within this initially alien space which they come to represent as 'home' is offered, and in the chapter which follows this one, (Chapter 7), I theorize these experiences as transformation which is rooted in questions of social justice. The analysis highlights the importance of factors such as staff expertise, rules, routines and services offered as a set of relationships to security, and hence boundaries which can reconfigure access to dignity, predictable behaviour, and the option of self-recovery outside the framework of battery.

6.1 Shelter as 'Home'

The findings revealed that the participants conceptualized Musasa Shelter as a symbol of 'home'. A home can be understood to mean a place where one lives permanently as a member of a family or household. It is conventionally understood to be a space of safety, care, and the recognition of individuals' unique value within a system and group. It was imperative in this regard to understand how a shelter; a strange set of buildings where participants live with strangers, negotiate new systems of authority and participate in new 'domestic' arrangements for meals, cleaning, self-care and so on, became a 'home'. The main ideas consistently explored by participants include participants' sense of relationships within the shelter and how boundaries were created between and among different people. They also included representation of access to critical resources (such as provisions). "Home" simultaneously became configured through participants' grasp of what was expected of them as shelter residents (although this was not a straightforward matter) and by the emphasis on 'rules', something which was represented as a means of restructuring the unpredictability and fear within the environments in which they suffered domestic abuse

6.1.1 Provisions

It emerged from the findings that the shelter became a 'home' for participants because they were provided with all the basic needs which were essential for the survival of any human being. That is, they were offered accommodation, food and clothes among other provisions. These basic needs are fundamental needs for a decent life. Human beings need accommodation

and food for survival so that they are not exposed to hunger and multiple diseases. No one would be comfortable with a lack of essential resources. A survivor of DV who leaves home in a desperate state would be at a loss of how and where to get all the basic resources for survival. Participants confirmed that they received everything they needed at a basic material level upon arrival at the shelter. They mentioned that even pregnant survivors were well taken care of as they were given all the necessary preparation for their coming babies including nappies, baby clothes and baby blankets. Here are some of the confirmations from participants;

Musasa was our home so we received everything. (Participant 1)

All the things that we used were given by the sisters. We were given bath soap, washing soap, a toothbrush, Colgate, and towels. Those who did not have clothes for change were given clothes. (Participant 12)

If pads are used up, you just tell the sister without worrying about where to get the money to buy them. (Participant 17)

I then got into labour and they provided me with preparation for the baby. I didn't have anything for my child so they provided all preparation, nappies, clothes for the child, baby blankets, and everything that I wanted for my child. I then went into Labour well. I delivered well. (Participant 5)

These testimonies confirmed that participants received everything from the shelter and were treated like human beings, meaning that they were provided with all the basics that enabled them to live a decent life within the shelter space. These were revelations that contributed to their comprehension of a shelter as a 'home'. Within a normal home, one is not subjected to suffering but can get the essential needs which contribute to one's dignity. To imagine that even pads for their menstrual periods were provided, was evidence that they were accorded decent treatment. They indicated that they would only notify the matrons of their needs and get an immediate positive response. The results have shown that the provision of basic needs contributed to the peace of mind which was of paramount importance for one's healing when one was in a desperate state. Peace of mind came as a result of having no worries and no stress. This was a huge step towards the restoration of dignity and the gaining of mental stability. By accessing basic needs, the worry of leaving the usual home in a desperate state because of DV was eliminated. A shelter became a 'home' in that it removed the worry about what participants would eat or where they would sleep, and that brought mental relief and promoted psychological well-being. Participants presented this environment as conducive to their recovery. There were some confirmations that revealed that participants' stress subsided because of the assistance and treatment they received which promoted peace of mind:

My mind was very much settled. You will not be worried about what you will eat tomorrow. Everything will be well arranged. You are not worried about what you will do. (Participant 17)

My stress subsided especially the worry that I had because I was handled well. I did not have stress about what would happen with my pregnancy because I was at a good home. I was happy that I was being helped and that my problem would end. I did not have stress and was no longer crying but I was living well like a person without a problem. (Participant 18)

My thoughts were settled but when you thought that you would leave you could be unsettled. Apart from thinking about that your thought would rest. You would remain there like someone at his home because everything will be in order. (Participant 4)

The language participants were using here made interesting links between material domestic necessities (such as blankets, or soap) and “mind”: the term “settled” evokes a home-coming, a space in which one did not have to battle for ordinary care, which manifested itself in the unquestioned provision of toothpaste, clothes for newborns, and a place to sleep. This was an indication that participants were indeed at ‘home’ where the basics were provided for and one did not need to worry about any material resources. This was enough evidence that participants were not struggling in any way but were settled in this comfort zone where they were treated well. They testified that they were happy with the assistance they were getting. From their narrations, there was an indication that when they came to the shelter in the initial stages, they were worried and stressed about these basic needs but due to the care and support they started receiving their situation was transformed into that of peace of mind and mental stability. From their articulations, a shelter was indeed a ‘home’ for them in many respects.

Furthermore, participants indicated that the food was adequate and they would not go hungry as they were treated to a variety of food. This was a critical area which contributed to mental stability. If a person was hungry, that person would not be settled as she might be thinking about where to get food. No one would tolerate hunger or starvation in any circumstances. Some participants even confessed that the food was a lot better than what they consumed at home since they were treated to delights such as beef, chicken, and rice. These were delicacies which were not easily found in most homes, particularly in the Zimbabwean context where the economic situation remains a challenge and most people struggle to get food to eat. Some participants had this to say:

The food was very much adequate. We would not go hungry at Musasa even if we were many. Those at the Office would not interfere with the cooking in the shelter. You would cook and dish on your own. (Participant 14)

People were very happy with the food because most people did not eat that food because of poverty at their homes. We would have meat, chicken, beef and rice. It appeared as if someone was at home. (Participant 17)

We would alternate until the week ended eating a variety of foods. We also had drinks. If per week we would have a single two-litre drink, we would have it. (Participant 12)

Participants showed that they were happy with the food they were offered and the issue of the variety of food surfaced. They also stated that they prepared the food themselves without the interference of shelter staff. There was no doubt that this aspect of food preparation contributed to their settling down and conceptualization of the shelter as 'home'. They were not visitors at the shelter. Normally a visitor remains restricted in performing certain duties and does not particularly participate in preparing food. If you prepare food for yourselves, you end up immersed in the feeling that you are at home. This presented peace of mind because they felt they were in their own home. Participants stated that they enjoyed four meals a day and admitted that this was more than what they had at home. Preparing their meals gave them autonomy and a sense of belonging to the shelter. They indicated that they felt valued in this 'home' as they were treated like human beings and given a variety of food. Human beings need to eat hence participants acknowledged receiving adequate food. If a person fails to eat, they would complain of hunger and they would feel neglected. People would run away from such an environment and would view it as a threat to their lives. From the narrations given by participants, it was evident that there was no starvation in the shelter as adequate food was available. Participants reiterated that they were well looked after as their meals were properly organised. This is what some of them said:

In terms of food, we had four meals a day more than what is done at home and I realised that we were valued. We slept in a clean place and if your blankets got dirty, you would get surf and wash them and you would be given other blankets. (Participant 18)

We were kept well as people, being given good food. We do not want to take away anything from the shelter, at Musasa people are looked after well. You would be given whatever you wanted. If you told the sister that you had no soap, she would give you the soap. If you said your child no longer had pampers, they would give you pampers. (Participant 19)

Honestly, for me, I did have peace of mind. I did not have any worries since I was being looked after and everything was provided for me. I knew food was there all the time, four meals per day and my baby got everything from the shelter so I was not worried about anything to be honest. (Participant 5)

What came out from the results is that the participants considered the shelter as 'home' because of the way they were looked after in that space. They received all the basic needs such as food and other provisions and they acknowledge that they were treated as human beings as they

were not neglected or left to starve. They found themselves surrounded by all the basic needs and that eliminated worry and stress and culminated in peace of mind hence promoting recovery. Participants were treated with dignity and respect as they were seen as human beings who needed decent treatment. They confirmed that the food was good as it was locally available Zimbabwean food they were familiar with comprising carbohydrates, protein, and vitamins. Some participants gave these explanations:

The food was good, beans, meat, chicken, vegetables and only the healthy food items. I liked beans and rice. We ate spaghetti, sadza, and meat, and we had sadza and met every day. In the evening we had sadza and meat and at times if we cooked rice, we would take it with beans or beef or chicken if it was in the afternoon. In the evening we could have sadza and meat or beans and chunks. We did not go to sleep hungry. (Participant 15)

Our meals were a real proper diet. Sometimes they could give us morning porridge, then tea time we would be given two slices of bread and an egg with margarine and jam, then lunch we eat rice and chicken or beef and supper would be sadza, meat and vegetables or Kapenta or chunks. (Participant 14)

These narrations revealed a healthy diet by Zimbabwean standards. These are the foods normally eaten in middle-class Zimbabwean homes. The staple food in Zimbabwe is sadza which comes from maize meal and is normally served with meat and vegetables. On special occasions, people are treated to chicken and rice. This is the reason why some participants mentioned that in their homes they could not afford such food as it is expensive to buy. Ordinary people would just eat sadza and vegetables without meat, or sadza and beans or chunks. It would be difficult to afford the type of food they were given within the shelter. This indeed contributed to the peace of mind as they would not miss their homes because a variety of food was served. Their meals were properly organised and they confirmed having four meals per day. Here is what they say:

In terms of food, it is well organised. There is a routine or a meal card or duty roaster which would be pasted by the door by the matron. When they woke up those who would be on duty to cook would go to the matron to be given food for that day. She would ask you if you checked what would be on the chart for that day. (Participant 7)

In the morning we started by eating porridge before we had tea. At times we fermented mealie-meal and then cooked porridge in the morning. Every morning we would wake up and bathe and then have porridge. At 10.00 am we had tea at 1.00 we had rice and beans or meat and, in the evening, we had sadza. (Participant 15)

We had four meals a day at the shelter. In the morning, we could have fermented porridge with peanut butter or margarine. We could have tea with bread from the store or home-baked bread. We would spread jam, margarine or peanut butter on the bread. Sometimes we would have eggs depending on what was on the menu. We had tea with milk and we would put sugar on our own. (Participant 18)

Participants presented a menu which was fascinating as it captured food items which people would not normally afford in their ordinary homes, such as eggs, margarine or peanut butter. These were viewed as luxuries among common people and to have those under a weekly menu demonstrated the high level a shelter operated in terms of looking after survivors. The concern for the shelter had been presented as that of treating the survivors of DV as human beings who were entitled to a decent life including partaking in decent meals. There was enough evidence that they were not hungry at all in the shelter since plenty of food was served. They were treated to four meals per day which they normally did not have in their homes. They were also served local food they were familiar with and this contributed to their recognition of shelter as 'home'. Their meals were well organised and planned as they were guided by a menu and this contributed to a comfortable stay at the shelter.

A shelter was conceptualized as a 'home' by participants through the provision of basic needs essential for one to live a decent life. The findings revealed that participants were able to get accommodation, food and all the material items they needed. This was important as it contributed to their peace of mind and eliminated the worry and stress they had when they entered the shelter space.

6.1.2 Relationships

It emerged from the findings that a shelter became a 'home' for participants through interacting with others within the shelter space. These others comprised both shelter residents and shelter staff, all of whom began as strangers, but who moved into close familiarity through the enclosure of the shelter space, the clarity of the shelter's discourse about who is allowed within the walls of the building, and the responsibilities of everyone towards one another look like. When participants enter the shelter, they began to realise that they were not alone but were surrounded by significant others, who complemented their lives and these included other survivors and shelter staff. They managed to make friends within the shelter and had to negotiate the fact that some people in the shelter had the right (as staff members) to regulate aspects of what was happening there, and the right to work as counsellors and advisors. Hence, their stay became meaningful as they interacted and started sharing experiences with people who could relate to their narratives of abuse and as they came to recognize that those in authority in the shelter understood something about what it takes to recover from such experiences. Participants highlighted that these friends constitute their shelter family as they started referring to each other as sisters. They were able to console each other and give each other moral and emotional support. They narrate:

We met in the shelter and we stayed together and told each other that such things happen in life, comforting each other. We stayed with each other well without any problem. (Participant 11)

We made friends in the shelter because each one had their problems. At times we had elderly friends. We got along very well. In the shelter, you stay like a family and you call each other sister, mother, and younger sister depending on your age and totem. (Participant 6)

Through Musasa I learnt that the others staying with you are your sisters and you are all one. Everyone around you was special to you and you valued them. Each person played a significant part in my life in different ways. (Participant 14)

We started to share our experiences. We started to advise each other by saying, “in your case, you can do this and that”. We were like one family. I would regard an elder one of me as my mother or elder sister; the younger ones would be my younger sisters. We could share our stories as a family, telling each other our stories and counselling each other. (Participant 1)

This demonstrates that participants gave witness to a sense of belonging and accepted that relationships were built out of mutual understanding and respect. They recognised each other as “family”; the term evokes not simply closeness but the closeness of “heritage” and “blood”. The family chosen within the shelter draws on knowledge of survivorship, and the “blood” involved has been literal. These relationships were crucial for participants as they brought mental stability and reassured them that they were not alone. They were a group of survivors of DV who had experienced violations and the support they gave each other was fundamental for their recovery. They gave each other incredible support and a purpose to move on. Participants acknowledged that the relationships within the shelter space were important as they promoted love and care from the others. They managed to do their things collectively as a ‘family’ for example, they cooked and ate together. Participants acknowledged that this new family appreciated them and did not judge them. Some narrated:

I saw life as very good that you would wish you would stay permanently. Nothing will be difficult. Musasa was good, you would wake up, bathe and eat and you would forget all your problems. We lived well as people in our own homes. We would do our things together, cook together and we ate and we do our work together. (Participant 19)

I started to feel at home because I felt they were people who loved me for who I am, and people who appreciate what I do. (Participant 5)

I stayed at Musasa with strangers but we became sisters through our totems, that is, the monkey, lion, and elephant totems. We became family and when you get sick at Musasa, everyone worries about you like your family. (Participant 14)

It emerged from the findings that participants started as strangers but developed strong bonds or relationships which resulted in them referring to each other as sisters. In Zimbabwean

culture, people are categorised according to totems which depict the various animals they are connected with. Totems just present categorisations of people as some are referred to as lions, some zebras, some monkeys and so on. Those with the same totem become connected and consider themselves relatives. Participants within the shelter space indicated that they formed strong relationships through totems, calling each other sisters and they were more like blood relatives forming strong bonds. They showed each other love, care and concern when they got sick.

It is interesting to note that within a shelter space, participants have time to play together and relax. Findings revealed that participants came closer as they engaged in recreational activities together as a family within the shelter space. They indicated that they played some games like netball, plaited each other's hair or watched TV and that brought them together as a family. Participants explained:

At times, we would play netball or plait each other's hair. We stayed well without any bad words coming from anyone. There were no issues of gossip. (Participant 19)

In the living room, there was a TV and I could also watch TV and laugh at humorous things. That is when friendship started in the shelter. I then befriended some who had been in the shelter already. (Participant 16)

You will just play with others getting stress free in there. You forget all your problems. They do not want to see you alone hurdled in a corner. They would tell you to play with others to get used to each other. (Participant 17)

These recreational programmes created a platform to de-stress and relax. As they played games they would forget about their depressing situations and embrace positive thinking. They stated that the staff did not want anyone to be lonely but would encourage them to mix and mingle together as a way of relaxing the mind. These activities brought participants together presenting themselves as a family.

Furthermore, findings revealed that participants did some duties within the shelter space which promoted working together as a family. It emerged that when participants stay at a shelter, they have a routine which guides their operations. In this 'home,' a person does not just wake up on their own time and do as they please but they follow some programme which stipulates all activities to be done each day. They were informed by shelter staff of all the activities, including when to wake up and what to do. This routine was important in transforming the alien space into a 'home'. The routine ensured that survivors were not in a predicament of not knowing what to do when they resided in the shelter. This routine gave them confidence that they were at their 'home' and should wake up with some purpose for the day. Participants allocated each

other duties showing who would do what, as some would cook or sweep whilst others engaged in other various activities. It was revealed through the findings that they organised themselves and ensured that their home was kept clean whilst others prepared the meals. The staff ensured that everyone took part in shelter activities and no one was excluded. Some participants explained the shelter routine thus:

There is a timetable showing what we do in a week at Musasa. We wake up at 5.00 am and we bathe. After bathing, we cook porridge. Others would be sweeping in the shelter and others would be sweeping the yard. At Musasa, you start by bathing when you wake up. After eating porridge, some people would go out to sort out their issues at the Court or with the Police. Others would go to the hospital. Those who remain behind you might teach each other to plait hair if it is on a Monday. You plait each other outside. (Participant 17)

We would wake up in the morning and each one made their bed. If you are on duty you will clean after bathing. You would start by making your bed as others made theirs and those not cleaning will go to bath. After bathing, the one on duty to cook would be through with cooking. (Participant 3)

From these narrations, it is evident that participants were engaged in multiple activities when they started their day. It is interesting to note the emphasis put on hygiene as participants were expected to bathe before they do any other activities. A prescribed programme stating the shelter routine guides them on what to do every single day. They knew what duties to engage in such as sweeping, cleaning and cooking among others. These were the duties normally done by women in their homes when they woke up in the Zimbabwean African context. Women take cooking and sweeping as their roles and do them without objection. As the shelter became their 'home' they had to engage in meaningful and productive work. They were expected to behave according to the timetables and programmes as they took the shelter as their 'home'. Routines contributed to knowing what to do as they became residents in the shelter. As some do shelter duties, others attend to their issues at the Courts or with the Police and others went to the hospital for medical care.

Furthermore, the findings revealed that participants had opportunities to work together as a family as they learnt various skills through empowerment programmes offered by the shelter. Participants mentioned that they engaged in skills development programmes meant for self-sustenance after leaving the shelter. They indicated that they were accorded opportunities to gain skills essential for them to make a living and look after themselves. They were taught practical skills which are meant to empower them and these included sewing, making mats, baking and gardening they narrated:

It was a home for me. They also taught me life skills. I can now sew, make mats and bake. I am still learning how to plait hair. (Participant 1)

You are taught life skills like sewing. I did not know how to sew: I had not done it but I was taught at Musasa and I can now do it. I was taught at Musasa but I had not done it in my life before. (Participant 12)

We learnt to live with others peacefully and we would also do handcraft by sewing, gardening and baking. We once sewed curtains and we changed those in the office and in the shelter where we stayed. We were taught gardening and how to trim lawns nicely. In the garden, we planted vegetables. (Participant 11)

There were many activities which included plaiting hair, sewing, baking, and gardening. If there was someone who could plait hair, she would teach others. Others would teach baking and making door mats and that is what we spent the day doing. We did gardening as well. We planted vegetables and rotate crops in the garden. (Participant 14)

The findings revealed that the activities that participants engaged in at the shelter brought them together as they had the opportunity to work collaboratively while teaching each other various skills, for example, those good at plaiting hair could teach the others and similarly those who were good at baking, and making door mats would do the same. Some participants confessed that they did not know how to sew and were taught sewing at Musasa and were able to sew items such as curtains and baby clothes. They also had opportunities to plant vegetables and do crop rotation. This exposure was beneficial to participants since they were engaged in productive work which assisted them to earn a living. These practical lessons allowed participants to use their hands and applied practical skills to make a living as participants explain:

We were told to use our hands for us to have a better future. We were taught to work with our hands manually. We were taught to make vegetable beds, to ensure they were straight, we did not know that before. We were taught that you should not always wait to be given but to be able to fend for yourself. We were taught that if we grew vegetables and tomatoes, we can sell and get money and buy what we want. (Participant 15)

The other thing which went well is that in sewing I benefitted a lot. I could not do it but they requested me to sew their trousers and I did it. If there are offcuts I can now take and sew a dress for my child. I realise that I was helped a lot. (Participant 12)

These results presented a shelter as a place where one could acquire new knowledge and skills through working with others. One was not left to be idle but was engaged in productive and meaningful work. After shelter stay one was able to apply learnt skills to make a living, for example, growing vegetables and selling or plaiting hair and charging clients. These practical skills enabled the individual to be independent and take care of themselves rather than being dependent on perpetrators who abused them and made them vulnerable to DV.

It was interesting to note from the findings that shelter staff also became part of participants' shelter families as they together with participants had the opportunities to sit down together, interact and share stories in a relaxed manner. Results revealed that they can chat and laugh together and this is therapeutic to the participants as it made them feel at home. These interactions were crucial in making a shelter a 'home' for participants as they were not lonely and they felt appreciated and loved. A sense of belonging and togetherness was displayed through the interactions. Participants highlighted that staff brought themselves down to the level of participants and they started interacting together without emphasis on work positions and social differences. Some participants narrated:

Our Matrons at Musasa were with us always to see how we were and they would be with us even during the night. At night, we sometimes would sit down with them talking and laughing. (Participant 17)

We would sit around and share stories with them. They did not treat themselves as important because they were staff and we were clients so we do not interact. They would come to tell stories with you and you realised that they could help you as they shared their stories. We were helped. (Participant 4)

The Sisters and Matrons respected us and treated us with dignity. They respected us and would greet us "My younger sister, how are you?" You would be happy because you would realise that you are relatives courtesy of Musasa. We were always happy with the Sisters because they respected us as people. (Participant 15)

Evidence gathered showed that participants worked collaboratively with other shelter residents and staff and made up the shelter family which was built on love and care for each other. They formed strong bonds and gave each other emotional and moral support. The way they interacted and shared stories and experiences presented evidence of building strong relationships. Participants and staff started referring to each other as 'sisters' and this brought peace of mind as participants felt they were not alone but were surrounded by people who cared for them. Within the shelter space participants engaged in productive and meaningful activities which promoted independence and sustenance after shelter life. They worked together on various activities including teaching each other skills for survival through empowerment projects.

6.1.3 Staff expertise

It emerged from the findings that staff expertise played a significant role in making the shelter habitable for participants. From the findings, participants confirmed that staff expertise was essential for the restoration of psychological well-being and mental stability. The negative thoughts and emotional instability that participants carried to the shelter were addressed by staff through counselling and drawing participants closer to them. Participants concurred that

they found the staff to be loving, caring and helpful. Staff assisted them to recover mentally and psychologically through counselling and providing an enabling environment for recovery. Staff showed their expertise by carrying out their various responsibilities such as counselling, advising and performing their duties at the shelter. As participants arrived at the shelter in their sorrowful state, they were welcomed by staff who immediately engaged them in counselling and which gave them some relief. Participants were given opportunities to narrate their stories as counsellors initiated the counselling process giving participants some confidence to explain everything. Some participants articulated this,

The staff who was there were taking care of us and made us feel at home. They were doing a lot of counselling and if they saw that you looked out of place, they would take you and talk to you. They told you, "It's part of life, that is what happens, life has ups and downs", explaining and comforting me also. (Participant 11)

On the first day I went in she said, "I see that you are emotional you need counselling. If we have counselled you, we will write down in our books the issue that brought you here". I then managed to explain my issue. She then showed me how to fill in maintenance forms. (Participant 13)

When I got to Musasa I realised that it was a helpful place. I realised that if you come here troubled about what you should do you can be assisted because they counsel you. You will forget your problems as you are restored to your original self. (Participant 12)

Evidence presented here showed that participants came to the shelter with problems emanating from DV which they could not solve alone. They needed someone to help them think through their challenges and find a way to move on with life. Participants acknowledged that because of counsellors' expertise, they were helped to recover from their depressing situation. Upon arrival at the shelter staff made use of counselling techniques to promote recovery. Some participants highlighted that at the initial stage, they were emotional about what they had gone through and were given time to settle down emotionally before narrating their stories individually. Participants referred to love, care and support as key ingredients that helped in the recovery process. They mentioned that the staff did not want anyone to be sorrowful or feel out of place. They immediately engaged such a person in counselling. Some participants narrated the following:

I can say all the sisters showed us love and took time with us. If you felt sorrowful, she would come and ask what the problem was. They did not want someone to be alone showing stress. (Participant 17)

That is what I mentioned when I said no relative of mine has offered to me such a reception. I was received with amazing care and love and I realised I had arrived at a place where the people care for me. (Participant 10)

I saw that the staff at Musasa had love for us and I liked all of them because no one acted differently. They all helped us in good faith. Those who mainly worked with us were our matrons who showed us love and would call us for counselling and they would tell us that there is hope in the future because things change. (Participant 18)

The work of counselling involves questions of confidentiality and the negotiation of difficult contexts brought by each resident; participants reiterated that they found the staff helpful as they supported them, and this support covered both psychological containment and material work. Counselling played a crucial role as it promoted the change of mindset. After finding a close person to talk to participants admitted that they were able to see hope and light in their cases. Staff assisted participants in various ways including accompanying them to the Police, court or hospital or offering any assistance that might be needed. Participants indicated that staff took them as a priority and addressed all their needs as they narrated:

Some were accompanied by the Police and others to court. Others took us to hospital. I saw that the staff at Musasa are loving because they helped us very much in our stay. They showed that they had time for us and if you told them anything, they would listen and find a way to help you. I saw that they were caring and wanted to assist us. All the staff was good and they drew us closer to them. (Participant 18)

We told our Matrons if you did not have panties or pushes to wear and they would go and collect for you and you would then sign on a paper to show that you were given. They would take the receipt and paste it on the page you signed as evidence that it was bought for you. (Participant 18)

The matron who looks after the clients who would have come will be available. She receives the clients and gives them what they want from blankets, soap, food, and everything which could be wanted. She will be having the clients in the day and in the night for a certain time before they exchange as one of them goes off duty. (Participant 7)

From these narrations, it was evident that staff expertise was crucial for a successful shelter stay, and the meaning of the word “love” became about recognition of the primary needs of a woman who is simultaneously recovering from often the very long experience of domestic violence. When participants come to the shelter in a distressed state, they were welcomed by staff who gave them confidence and hope that their situation would change and they would not be harmed by perpetrators. Participants narrated that if they needed help, the responses were provided expeditiously. They found it refreshing that they had people available to listen to their stories and assist them in finding solutions. Participants reiterated that both their material and emotional or psychological needs were taken care of by staff and no one was ignored. The importance of this collegial relationship between staff and participants brought peace of mind and participants acknowledged that they were treated like human beings and had no worries about their stay as they articulated:

The Sisters at Musasa handled us well, asking why you came politely. My mind was settled because they said they would help me solve my problem. (Participant 18)

The staff worked very well to help us. They had love and patience. If you did not know something, they explained to you what you had to do. All of them drew you closer to them for you to be comfortable. I never met anyone who spoke negative things. (Participant 19)

They handled us as human beings. I felt that I had my right to speak to them and we understood each other and I could say, "Sister, I did not understand here." And she would say, "You made a mistake here, you might do it this way" amicably. They treated us like human beings. (Participant 11)

Participants reiterated that they were treated as "human beings" within the shelter space. This demonstrated that they were treated with dignity and respect which any person should be accorded. The staff listened to them and addressed their needs. The staff took into cognisance that survivors were people or human beings who had fundamental rights like any other person hence they should be treated accordingly. Human beings should not be discriminated against or marginalised in any form but should be treated with dignity and respect. For example, participants raised the issue that they were given the platform to articulate their ideas freely and staff would respond without prejudicing them in any way. Participants confirmed that they were handled in a dignified manner and they felt respected. They stated that the staff talked to them politely and reassured them that their issues would be solved. There was reciprocity in their communication and participants indicated that it was not a one-sided affair. They even had the opportunity to ask questions if they did not understand anything. They did not feel disadvantaged in any way, particularly as survivors of DV they might have thought that they would not be listened to, but to their surprise, the staff listened to them and gave them a platform to articulate their ideas and they received attention.

Furthermore, it emerged from the results that participants were taken as "human beings" as their health challenges were taken seriously by staff. The participants gave testimony that they were taken to the hospital when they were not feeling well. They were not neglected or left suffering in pain but their health was taken as a priority. The treatment bills and the prescribed medicines were paid for by the shelter staff. Here are some of the participants' testimonies about healthcare services they experienced whilst at the shelter:

If you fell sick in the shelter, you would be treated quickly. You would have medicine bought for you if you fell sick, hence, we were handled as people. (Participant 18)

I was bleeding where the tooth was removed and they took cotton wool and gave me. They even gave me two extra packets of cotton wool so that if I would remove spoiled

one and put new one. They quickly went to buy the prescribed medicines and they came and gave me. (Participant 10)

I am asthmatic and one day I had an attack, they immediately hired a taxi and I was taken to General Hospital. Another time I had a toothache and I was taken to hospital again. They didn't mind what type of illness it was, they wanted you to receive medical care immediately. (Participant 14)

If you fell sick at Musasa you were really helped. If it was minor, you would be given pills but if it was severe you would be sent to hospital. I once had a cough and I was given pills by the matron. I was given the pills and I got better. There were others who were sick and an ambulance was brought take them to hospital especially for maternity. Others had a taxi brought in to take them. (Participant 15)

These narrations present evidence that participants were given attention when they fall ill within the shelter space. They indicated that the staff was well equipped to take care of minor illnesses as they made use of a medical kit and then took participants to the hospital for severe illnesses and deliveries in the maternity section of the hospital. Participants alluded that the medical attention they received contributed to their peace of mind as they did not worry about hospital expenses. In a context like Zimbabwe where accessing medical care is very expensive, and unaffordable, participants showed appreciation for the help they received. It would have been impossible in most cases for some to call for an ambulance if they got sick at home but it was possible within a shelter space because health issues are prioritised. Participants were not worried about what they would do if they fell sick because they knew they were surrounded by people who cared for their health. Accessing medical care brought relief as they commented:

That brought peace of mind again, that if I fall sick I would be taken to hospital and I am not using my own money but Musasa will pay everything. (Participant 14)

They would handle you well like a human being giving you enough respect for you to feel free. We were handled very well. If you fell sick they did not have conditions. If you felt sick even at night and you told them they would look for a taxi and you would be taken to hospital. (Participant 4)

Evidence gathered has shown that participants were handled like “human beings” within the shelter space mainly because they were given attention, care and respect. Findings revealed that their basic needs were taken care of including accommodation, food, and medical care among other things. Provision of all these necessities eliminated stress and led to the peace of mind. The shelter staff demonstrated that participants were a priority to them and deserved to be treated with dignity and respect. Participants within a shelter space were not disadvantaged in any way as they received all the attention.

Staff expertise was also reflected through responding to issues that brought participants to the shelter. Participants were assisted in finding solutions to their challenges. Some needed legal

advice including application for divorce, applying for Protection Orders or maintenance. The majority of participants who needed help with maintenance indicated that they were assisted to fill in forms and go to court and managed to get maintenance. This is what some participants said:

They helped me to fill in the maintenance papers and we went to court on 4 April 2020. We went to court and he was told to pay 50 dollars per month. (Participant 11)

I needed maintenance from my former boyfriend, father to my child so I was helped to fill in the forms and we went to court. They helped me to complete the forms and even with the court appearance. (Participant 14)

I was then helped to complete maintenance forms and they told me to wait for the court date. I was told to stay there until my issues were sorted out. (Participant 16)

Musasa is known for assisting survivors of DV with legal advice on issues that brought them to the shelter. Some perpetrators failed to take up the responsibility of looking after their children, hence, Musasa assisted survivors to get maintenance. Most participants admitted that staff facilitated the filling in of forms for maintenance or Protection orders and also accompanied them to a court or the Police. Musasa paid for anything survivors might have wanted to process their papers. Furthermore, participants had a chance to be empowered through access to information. Participants indicated that several organisations had an opportunity to teach them various topics including, health, reproductive health and women's rights and the law. Here is what some participants narrated:

Sometimes organisations from outside would come and teach us about our health, reproductive rights, that is, as a woman how should you view your body. When we go to Musasa most of us will not have that knowledge. I did not know that if someone has sex with you when you do not want; he will be raping me even if he is my boyfriend. (Participant 14)

We were also told that if you are raped you should report early to people close by and you report that the person can be arrested. We were told that you should not bath or change clothes to make sure that the issue is straightforward in court. (Participant 15)

People from Childline came and taught us that girls who are abused should phone on a number which they gave us. If you know an abused child in your neighbourhood, you can phone them or Musasa or Government offices. (Participant 16)

Musasa through networking with other stakeholders such as Childline has a facility to empower survivors on various topics which affect their lives. Teaching them about the law and reproductive health rights enabled them to gain insights about abuses they might be exposed to without knowing that it was abuse, for example, rape by a partner. Being equipped with such

knowledge would result in emancipation and transformation as they would be able to speak out about the abuses.

6.1.4 Safety and rules

It emerged from the findings that a shelter, as a ‘home,’ offered safety and protection for survivors. This was fundamental as survivors would have experienced the devastating effects of Domestic Violence and needed to be assured of safety upon arrival at the shelter for them to settle down. Safety was emphasised through an established system of rules and regulations that were enforced within the shelter space. These rules ensured that participants were not exposed to any harm or violations by those inside or outside the shelter. Rules were critical as a means of restructuring the unpredictability and fear within the shelter environment. The issue of security was central in ensuring that participants who were survivors of DV settled down. The findings revealed that when participants arrive at the shelter, they went through some initiation process where they were informed about shelter rules so that they adapted quickly and easily to the new environment. They were informed of the ‘do’s and ‘don’ts that govern shelter stay. One must abide by rules and regulations for the stay to be successful. Participants articulated what was expected of them in terms of behaviour, conduct and interactions both inside and outside the shelter. This is what some participants highlighted:

I was received by the matron and she started by telling me the rules to be observed in the shelter. She said, “The first thing we do not want in the shelter is to have people who communicate with those outside. We do not want phones at all...”. (Participant 15)

No visitors are allowed at Musasa. They also do not allow you to communicate with people by phone. They collect your cell phones and give you back when you are discharged. (Participant 1)

If someone comes, they could say that they do not know who they are looking for and they would say visitors are not allowed. They would tell them to look for her at home and not at Musasa. My father’s younger brother came but he never saw me I was told that he came and they told him that they do not allow visitors here. (Participant 11)

The quotations highlight that shelter residents were not supposed to communicate with those outside the shelter for fear of further victimization and harassment by perpetrators of DV. These shelter rules were important in ensuring that survivors were in a safe space and fear was eliminated. One had to comply with the rules and regulations for one to be safe and free from harm. Results present the shelter as a secluded place which does not allow interference from the outside world. It emerged from the results that the stay had to be anonymous and confidential hence participants and staff should not divulge the stay. These were precautionary measures meant to protect survivors from perpetrators. These rules indicated that a shelter is

not just an ordinary 'home' where a person is free to do what she wants without asking for permission. A shelter could be understood to be a difficult environment which infringes on one's rights and entitlements. This 'home' emphasizes adherence to rules and regulations for those who reside there.

To enforce these rules and regulations, all shelter staff remained vigilant and ensured that everyone adhered to set rules and regulations. There were also security guards during day and night who did the policing and monitored whether rules adhered to all the time as narrated by some participants:

The place has security guards who are always manning the place ensuring that no visitors come to the centre. (Participant 1)

There are security guards here who do not permit people to enter the gate or to go out. There is security the whole day and at night. There is also a dura wall and no one would see us. (Participant 11)

Besides having security guards in place, the shelter had a dura wall that ensured that no one saw what was happening inside. It was interesting to note from the findings that participants themselves concurred that rules and regulations were important for their safety and protection. Here are some of their narrations:

They said that if you get to Musasa you should not tell people because it is a secret place which seeks your protection and not that for many people. "You are the one who needs assistance on your problem therefore you should be quiet until it is solved. (Participant 18)

When we were in we were not allowed to go out of the gate especially with my case. They said, "You do not know what the person who has a case with you is planning. You can go out of the gate you could be harmed. If you wanted to go to hospital they would accompany you, you were not allowed to go alone. (Participant 12)

They were afraid that men would come and beat up their wives there. We were well protected at Musasa. We had no time for communication with those outside. (Participant 15)

Results showed that participants regarded rules and regulations as a necessity for their safety and protection. They appreciated that without rules they would be exposed to more harm since perpetrators would follow them up. This was interesting in that one would have thought rules, at the surface level, appeared as a cause for tension, between the idea of a shelter as a 'home' versus having lots of regulations. A 'home' should not have lots of rules as one can feel constrained, and one can feel confined but the point raised by participants was about creating a home that was based on safety. This was opposed to a home in which there was intense

vulnerability and their lives were in danger. The point that was raised by participants was that rules were essential for safety and these were their narrations:

I think that their strictness was a way of ensuring our safety so that we would not add more problems to those we had when we came. (Participant 16)

I felt that I was very much protected because no one knows that you are there and what is done at Musasa. No one is allowed to do as she pleases (Participant 18)

We were very much protected. Like in my case, I did not want the Police officer I was in love with to come to the shelter at all, it was not possible. (Participant 14)

The confidentiality of their stay at Musasa and the secrecy of the location of the safe house assured them that they were safe. Participants felt safe mainly because of the rules and regulations in place. The shelter staff ensured that participants were not exposed to any secondary trauma or violent attacks by perpetrators. The assurance of safety plays a crucial role in adjusting to the shelter environment. Without rules, safety cannot be guaranteed and no one would feel confident in such an environment. The point that communication with outsiders is prohibited guarantees participants of protection. The fact that when they went to the hospital, they were escorted, enhanced their perspectives of safety; they were accompanied for protection. Shelter staff made sure that they were not alone in case they were harmed by perpetrators. Participants confirmed that they felt safe at the shelter because it was a private place with strict rules in place

6.1.5 Memories and lessons learnt

Findings showed that participants had great memories of Musasa Shelter as it helped them to recover and move on with their lives. Some reflections about their stay showed that participants benefitted immensely from the shelter stay. Although they came in with broken souls or physical injuries, after undergoing both psychological and physical treatment they experienced healing and ultimately recovery. Participants had a lot to say and here are some of their reflections:

What made me happiest is that they looked after me well, they did not abuse me, they taught me life skills so that when we leave this place, we can work for ourselves. When I came to Musasa I was stressed because of my situation. I was desperate to find help and that is what I got at Musasa. (Participant 1)

I have many memories about Musasa. It is a place that took care of me when I had nothing. They gave me accommodation. They gave me food and where to sleep in. I could have died way back because of stress. (Participant 17)

I see Musasa as a good place., it is a place which helped me to be a real person; without bothering thoughts because sometimes you might think or see yourself as the only one with problems in life but they helped me so much. (Participant 6)

What is good about Musasa is that you find somewhere to sleep. You also find enough food. You will be settled in your thoughts. (Participant 9)

It emerged from the findings that Musasa shelter helped the participants to recover as their various issues were addressed. Some needed help with maintenance and that was achieved, others were helped to go to Court, in some cases facilitation to go back to school was done, while some got employment among others. Here are some narrations about self-initiated departures,

When I saw that the issue of maintenance had been resolved and the issue of being given my property, I realised there was nothing to stay for any longer. I then told the Sisters that my issues had been addressed therefore I requested to be allowed to go home. (Participant 19)

When I saw that my issue was addressed, I went and requested to go because we were given accommodation at Midlands Hotel. Musasa staff said I was free to go. Then I packed my things and went away. (Participant 3)

I initiated my going out of the shelter. I informed them that I was ready to move out since I had found a job with Newstart and I was ready to go and work. I needed to think outside the box. I knew I was in a box and needed to think outside the box. (Participant 5)

It is interesting to note that after their issues were solved most of the participants initiated their departure as they requested permission to go home and move on with their lives. The self-initiated departures were an indication that they had recovered and needed to move on with life.

6.2 Conclusion

This chapter revealed that when participants come to the shelter it initially starts as an alien space. They go through a transformative process which enables them to view a shelter differently and equate it to a 'home'. The shelter became a 'home' through its provision of all the basic needs such as food, accommodation and all other necessities and that automatically brought to them peace of mind. Their worries subsided as they knew that they were in a decent home. Participants realised that they were not alone but were surrounded by significant others who constituted the shelter 'family' that is, other shelter residents and staff. They had opportunities to share experiences and stories and this contributed to their recovery. They were engaged in meaningful and productive work as they got assistance on their issues. Participants confirmed that whilst in the shelter, they were treated like "human beings" meaning that they

were treated with dignity and respect. They were valued, loved and cared for. They were given opportunities to talk and express themselves freely. As they stayed in the shelter, they experienced safety and protection through the rules and regulations in place. Their experiences in the shelter were important for this study which sought to find out the meaning of social justice for survivors of DV which forms the discussion for the next chapter.

CHAPTER 7

DISCUSSION: THEORISATION OF SHELTERING

7.0 Introduction

This chapter aims to showcase the theoretical achievement of the research. The main objective of the study was to explore the meaning of social justice for survivors of domestic violence within a shelter space. What constitutes ‘social justice’ for survivors of DV is at the centre of this study. In this chapter, I theorize shelter experiences as offering access to a transformation in power rooted in what social justice looks like, where social justice is conceptualized through Martha Nussbaum’s theory of capabilities essential to the creation of an equitable society.

In carrying out the study, I worked with one particular shelter, Musasa, in Gweru, Zimbabwe, and explored the experiences of those who had worked with the shelter in multiple ways. This built what I have called an “exploded view” of the representations of living and working at a specific place. Data gathering was through in-depth interviews and involved listening to the voices of those who imagined and created the shelter and also those running it. At the centre of the study were twenty women who experienced the shelter as a space in which they lived and their voices were critical in theorising sheltering. Data were analysed using both thematic and content analysis and aimed to tease out the multiple threads of meaning through which people associated with the shelter in different ways made sense of its location and importance for tackling domestic violence in Zimbabwe.

This discussion chapter concentrated primarily on recognizing how the material presented in Chapters 4, 5, and 6 (the findings chapters) can be reorganised as it responds to the notion of social justice as theorized by Nussbaum. My argument claims the representations of the survivors’ and shelter workers’ experiences as a relationship to theory and seeks to reposition their material in a conversation with Nussbaum’s ideas.

7.1 Martha Nussbaum’s Capability Approach

Nussbaum (2011: 18) states that the Capability approach can be defined as an approach to comparative quality of life assessment in theorising about the shape of basic social justice. Gibelman (2000) in Reisch (2002: 349) maintains that social justice refers to “conditions in which all members of society have the same basic rights, protections, opportunities, obligations and social benefits”. Nussbaum (2011: 18) explains that the approach asserts that the important question to ask when comparing societies and examining them for their decency or fairness is, "What is each individual able to do and to be?". This fundamental principle of this theory aims

to cater for all people, with their differences or diversities. Nussbaum adds that the approach takes each person's human trajectory as an end, asking not just about the total or average well-being but rather about the opportunities available to each individual (Dotolo et al., 2018: 147).

According to Nussbaum (2000: 220), women are not too often treated as people in their own right, persons with dignity that deserve respect from laws and institutions. Nussbaum highlights a range of central human capabilities that every person should pursue, "treating each as an end and none as mere tools for the ends of others" (Nussbaum, 2000: 223). Nussbaum presents a list of ten capabilities that should be considered central human capabilities: "life; bodily health; practical reason; bodily integrity; senses, imagination and thought; emotions; affiliation; other species; play; control over one's environment" (Nussbaum, 2011: 31). According to Nussbaum, this list enumerates social relationships to what a complete good life for a human being would be. This theory uses a 'threshold level of each capability'; beneath that, it is held that truly human functioning is not available to individual citizens (Nussbaum, 2000: 223). Justice requires that every person be sustained at a threshold adequate level of capability to function in all ways that are important to human well-being. Citizens are expected to operate above the capability threshold.

Nussbaum (2011: 40) reiterates that "delivering these ten capabilities to all citizens is a necessary condition of social justice". Nussbaum suggests that "a society that does not guarantee these capabilities to all its citizens falls short of being a fully just society" (Nussbaum, 2011: 40). Nussbaum further argues that no society can lay claim to justice without these basic entitlements. According to Nussbaum (2011: 40), the Capabilities Approach focuses on that which people can do and be and addresses issues of inequalities which women suffer inside the family, inequalities in educational deprivations, and the resources and opportunities failure of work to be recognised as work insults to bodily integrity.

Bringing this theory into conversation with the research focus on the meaning of justice for survivors of domestic violence in Zimbabwe provides a strong theoretical tool to interrogate possibilities of "justice provision" beyond the law. I chose Nussbaum's theoretical framework through which to enquire about the meaning of social justice mainly because it is so deeply concerned with the lives of individuals and embraces diversity. The approach takes each individual's full humanity as an end and is concerned with the opportunities available for them as "social justice."

In the following discussion, I work with those capabilities most organically resonant with the research material and aim to synergize with the findings into a theoretical argument about the experience of “social justice” within Musasa.

7.2 Social Injustices Articulated by Survivors of DV in the Study

To position this discussion, I return briefly to the research literature with which I engaged in Chapter 2 on how survivors of domestic violence experience what can be called social *injustice*. The question of what constitutes justice or injustice for survivors of domestic violence has been explored by influential scholars, including Amartya Sen, Martha Nussbaum and Nancy Fraser. These theorists argue that justice is concerned with restoring human dignity and the well-being of citizens in society.

Fraser’s theory explains the forms of injustices people suffer and how these injustices are interrelated. Fraser contends that most social injustices are a mixture of economic and cultural injustices. Fraser advances an integrative framework that brings together both economic and cultural inequalities and injustices for various categories of people in life (Robeyns, 2003: 9). Fraser argues for a theory of social justice that combines both redistribution and recognition. A redistribution is a form of socioeconomic justice that looks at economic inequalities and injustices and how they can be addressed by redistributing material resources, wealth, opportunity, and income to all members of society, including those who were excluded (Wilson- Strydom, 2015: 149). Fraser proposes redistribution as a remedy to socio-economic injustices rooted in the political-economic structure of society. On the same note, Recognition looks at historical inequalities and the formation of constituencies that have been disadvantaged or marginalised in society. Injustices in this dimension include cultural domination, looking at certain cultures or groups as 'invisible', disrespect for difference and stereotyping (Wilson-Strydom, 2015: 149). Some dominant cultures may undermine minority groups and fail to recognise their existence. Recognition takes note of cultural diversity and recognises the importance of each social group, including its language, dress, and communication, among others.

Fraser introduces the notion of bivalent collectivity to illustrate why social justice has a socio-economic and a cultural dimension that cannot be separated (Robeyns, 2003: 2). According to Fraser, a bivalent collectivity is a group of people who suffer both socio-economic, maldistribution, and cultural misrecognition and includes class, gender, race, and sexuality

(Robeyns, 2003: 2). Fraser claims that the injustices that each category experiences simultaneously arise from economic and cultural dimensions.

On the same note, the Capability approach to defining a relationship to social justice was developed by Amartya Sen, an economist and further developed by Martha Nussbaum. The capability approach looks at the well-being of individuals and asks about the extent to which individuals can be and do what they have reason to value being and doing, that is, their quality of life (Nussbaum 2000, 2011, Sen 1985, 1999 in Wilson-Strydom, 2015: 150). Nussbaum (2003: 1) states that Sen has been concerned with inequalities between women and men and achieving gender justice in society. According to Sen, if people are asked what they can do and be, some understanding of the barriers societies have erected against full justice for women is established (Nussbaum, 2003: 1). This theory emphasises agency and freedom as important goals for women who have been treated as passive dependents of development. Women have to make decisions about their own lives. Sen, in this theory, notes that women have been excluded from fundamental entitlements, and hence the theory emphasises the inclusion of women in development and their participation. According to Nussbaum (2011: 18), “capabilities emphasise that the most important elements of people's quality of life include health, bodily integrity, education and other aspects of individual lives, which cannot be reduced to a single metric without distortion”. Nussbaum (2003: 16) mentions that Sen agrees that human capabilities should be made central by states the world over as fundamental entitlements of each citizen, and these include (education, health, political and civil liberties and the free choice of occupation).

In Zimbabwe, women as a category have been disadvantaged or marginalised and several factors have contributed to women’s vulnerabilities. According to the 2010-2011 Zimbabwe Demographic Health Survey, there is “a strong positive association between low levels of education, early marriages and vulnerability to HIV and gender-based violence”. The following factors increase women’s vulnerability to spousal abuse:

- Marrying at a young age, for example, women in the Apostolic sects are more prone to spousal abuse, often due to generational gaps between spouses
- Low levels of education
- Financial dependence on a male spouse. Only 9% of women have the property registered in their names.
- Certain cultural and religious beliefs strengthen male dominance and subjugation of women

(The 2010-2011 Zimbabwe Demographic Health Survey).

Furthermore, another study by Lasong et al. (2020: 1) in Zimbabwe revealed that domestic violence was strongly associated “with women whose husbands drink alcohol, products of abusive parents/ father beating their mother and/or polygamous marriage (had more than one wife)”. Numerous factors have been identified as responsible for exacerbating DV. Dziva, Dewa and Khumalo (2020: 2) identified economic and patriarchal forces as fuelling DV.

In Zimbabwe, the literature suggests that domestic violence is a social injustice which is exacerbated by many factors including, patriarchal forces and power dynamics in marriages, cultural and religious factors, unemployment, poverty and financial dependency of women and their lack of education. Domestic violence exists within entrenched cultural tolerances. In the Zimbabwean context, social injustice means the inhuman treatment of women as a result of their social status. Women have their rights violated because of DV. The literature revealed that Zimbabwean women like women in various contexts are vulnerable to all forms of domestic violence including; physical, sexual, economical, emotional or psychological and verbal abuse.

My findings complement these analyses and support the idea that survivors of DV are subjected to multiple forms of social injustice. Domestic violence survivors experience legal injustices in terms of the Domestic Violence Act and they are legally victims. This is an achievement in the Zimbabwean context and many other countries. For decades to survive DV was to be a legally recognized victim. Since the enactment of the DVA one can have the potential to access legal justice. One can be recognized as someone against which some criminal wrong has been done. On the other hand, social injustice consists of not being recognized as a victim of a criminal act but being physically or psychologically destabilized, rendered less within one’s community or weakened in relationship to one’s capacity to employment, she might have lost a family base, lost confidence, one might have lost a significant part of one’s life. If individuals are subjected to domestic violence, their rights are violated, and various capabilities are affected that is, life, bodily integrity, bodily health and affiliations, among others.

The representations by survivors of DV showed an absolute dominance of physical and emotional abuse, which I presented in Chapter 5. The narrations bring to the fore the dangers that participants are in as they are brutalised and beaten with objects such as iron bars or handles of a pickaxe. The traumatic experiences suffered by the participants are in many instances life-threatening. Findings revealed that survivors of DV go through painful and stressful experiences which traumatize them and leave them emotionally disturbed. While this may be

termed as physical or psychological injustice, I would argue that the social consequences include damage to social networks, especially those rooted in cultures of faith, damage to the kinds of self-esteem essential to building and sustaining social and public relationships, and compromised abilities to move with comfort and ease due to physical injury.

What emerged from the representations of participants is that DV is dehumanising in relationship to survivors' social being as they spoke of being stripped of their self-worth, and simultaneously of safe access to a home, family members and/or their health. They are often put to shame and humiliation as they go through this agonising experience. Being a victim of DV is often a leading cause of homelessness. Without a reliable and safe place to stay, survivors often move around begging friends and family to accommodate them and provide safety and other basic necessities. As survivors become helpless in face of violence, they run for safety, sometimes half naked, and their respect is often lost in society.

Being in the shelter means, for participants, that the survivor is far away from shame, victimisation and bodily harm that all affect her dignity. Participants who were the government actors who made the establishment of Musasa possible described a practical profile of “social justice” they named as a home – one for survivors. Social *injustice* for survivors means a complete breakdown of the notion of home, a complete breakdown of the notion of self-resilience, complete breakdown of the notion of safety.

The theorization of what causes injustice is core to thinking and planning about social justice. In this case, participants locate injustice within commonplace conceptions which relegate women and girls to positions in which abuse from men in their lives is likely – positions of inferiority, rigid labour roles, and vulnerability to gender-based discrimination.

7.3 Sheltering as a Space for Social Justice

In this section, I analyze the findings by utilising Nussbaum's theory of social justice which is grounded in her notion of capabilities. The study established how the capabilities come alive in the discourses presented by participants. The section is organized according to key capabilities I explored which include: issues of access to life and bodily integrity; capabilities around sociality; and the support of ‘practical reason’. The section demonstrates which capabilities are relevant to my understanding of social justice necessary for survivors of DV in Zimbabwe.

7.3.1 Theme 1: Access to life and bodily integrity

The findings from all the constituencies, that is, stakeholders who set up the shelter, staff in charge of running it and survivors who stayed in the shelter revealed that a shelter plays a critical role in the lives of survivors of DV. Although none of these participants ever used the term ‘social justice’ in their responses, their representations pointed to the development of the capabilities put forward by Nussbaum in her theory of social justice. First and foremost, sheltering was recognized as critical in the preservation of life through the promotion of safety and protection and bodily integrity.

The findings revealed that the capabilities of life and bodily integrity were the fundamental reason for shelter establishment. Stakeholders mentioned that the main reason for setting up the shelter was the recognition that they were increasing numbers of survivors of GBV who were becoming homeless after a domestic altercation.

The notion of a shelter was therefore, according to my participants embedded in practical concerns about homelessness and survival. The shelter was concerned with the preservation of the life of survivors who were chased away from home as a result of DV. Nussbaum (2011: 31) explains that the capability of life means; “being able to live to the end of human life of normal length; not dying prematurely, or before one’s life is so reduced as to be not worth living”. The creation of a shelter promoted longevity in survivors by ensuring that they were not victims of death due to DV. The imagination of sheltering as a strategy was described as a state response to having “nowhere to stay”. This is evident that those who established a shelter were primarily concerned with the development of capabilities for the preservation of life and promotion of bodily integrity which is concerned with the provision of a safe space to stay and protection from sexual assault and domestic violence (Nussbaum, 2011: 31).

The participants themselves were clear that a state-established shelter offered better protection from abuse than institutions that might know the survivors and the families better; the need for protection was unpacked by the majority of the participants, as a complex relational issue. The survivor might need protection from relatives and a shelter becomes a neutral place, unconnected to the meanings of family home.

The point that the survivor seeks refuge at the shelter because of fear of abuse was marked across all the participants’ discussions of the importance of a shelter. Such fear may arise from the survivors’ analysis of different micro-political dynamics in her home, and family, but it is

sufficiently deep for her to turn to strangers, within a state-based organization, to save her life. All participants conceptualized a shelter as a place of safety. In thinking more about the nature of the injustices faced by shelter residents, a point raised by all participants is that a shelter must provide safety and protection to a survivor who will be running away from the perpetrator. A shelter becomes a space where life can be guaranteed, a safe space for the survivor as she finds refuge.

Combatting social injustice here becomes ubiquitous, and potential danger is acknowledged by shelter staff characterize shelter as a space where such danger is eradicated: intruders are not permitted to enter. There are security measures put in place to enforce safety and protection. Findings revealed that a shelter plays a key role in providing safety to those who will have been sexually abused particularly in a home setting by those who are supposed to take care of them, for example, the father or any other male relative.

For participants, the role of a shelter as a place of safety and protection for those running away from abuse could not be estimated and this opens up discussions on justice to a debate on how it is ever possible to find redress in the face of violence without the physical guarantee of protection from attack. Furthermore, some participants mentioned that the purpose of a shelter is for survivors to access justice within that space.

Unlike the stakeholders, those working in the shelter, taking different responsibilities, located their job as one of social justice provision, seeing the shelter both as a place from which legal help may be reached, and simultaneously as a place which incarnates “justice” given its objectives of protecting abused women and prioritizing the possibility of a future beyond abuse: “healing” and “moving on”.

Furthermore, from their diverse backgrounds and experiences, participants pointed to the capability of bodily integrity as crucial for the protection and safety of survivors of DV. Unanimously, participants agreed that sheltering is important in that it ensures that survivors are protected from perpetrators who might want to harm them or even murder them and that is paying attention to the development of the capabilities of life and bodily integrity. The perpetrators were generally viewed as the major threat to the survivors by putting their lives in danger hence the need for protection. The life of survivors is important and needs to be protected.

Staff spoke in depth about the fact that when survivors get to the shelter they are in a desperate state, stressed and at times crying because of their situation. Staff revealed that, from what they perceived, some of the survivors who enter the shelter space will have lost hope and are embroiled in negative thoughts and some even embracing suicidal thoughts. They mentioned that survivors think that their situation is not redeemable and the thought of dying is real. Staff raised the point that when survivors come to the shelter they will be broken and this shows that they will be injured both emotionally and sometimes physically. Staff explained that survivors who come to utilize the shelter will be in pain and desperate to get help.

7.3.2 Theme 2: Support of ‘practical reason’

The findings revealed that a shelter promotes the capability of practical reason, which Nussbaum (2011: 40) explains as “being able to form a conception of the good and to engage in critical reflection about the planning of one’s life”. The shelter presents a platform for shelter residents to think seriously about their situation and those reflections help them to make informed decisions about their situation and the future. The majority of the key informants considered a shelter as a halfway home or a temporary home for the survivor. Interestingly, key informants do not describe a shelter as a service or a place but as a home. The desire to create a different version of a home was clear. Here, the capability of ‘practical reason’ from Nussbaum’s theory is emphasized as survivors within a shelter space have the opportunity to engage in critical reflection about planning their own lives. Survivors are presented with a platform to think seriously about their lives and explore ways of moving on.

Participants indicated that a shelter provides the opportunity to think and come up with a way forward. This is interesting given that the majority of participants primarily articulated DV as physical abuse; here, however, indirectly, they are clear that physical violence torments both a body and a mind, and new versions of a home might make it possible for a survivor to “find a way.”

Homes were not the only metaphor used to describe the hope embedded in a shelter, for these stakeholders. Some compared the shelter to a bus stop. The bus-stop image showed that a shelter was a temporary place where one had an opportunity to think, reflect, and perhaps choose a new option for a life path. It was highlighted that the survivors’ thoughts and minds are hurting, and in need of sustained attention; a shelter then provided the space for someone to think about their future, – there’s a connection between ‘space’ and ‘thinking’. There were also ideas about ‘newness’, what it takes to move from the bus stop into new terrain. A shelter

might, according to my interviewees, empower the survivor and gives her confidence to move on with life.

The key informants also indicated that a shelter provides an enabling environment for one to think seriously about their life. Similarly, staff alluded to the role of a shelter in according survivors the opportunity for ‘practical reason’. All staff conceptualized a shelter as a place of recovery where survivors of DV are accommodated temporarily to solve their problems and make decisions about moving on with life. They had the opportunity to make reflections on their lives and find ways of moving on.

Furthermore, survivors were given opportunities to narrate their stories to counsellors who initiate the counselling process giving them some confidence to explain everything. Evidence presented showed that participants come to the shelter with problems emanating from DV that they cannot solve alone. They need a community to help them think through their challenges and thus “practical reason” as a capability becomes *social*. Participants acknowledge that because of counsellors’ expertise, they were helped to recover from their depressing situation. Upon arrival at the shelter staff makes use of counselling techniques to promote recovery. Some participants highlighted that at the initial stage, they were emotional about what they had gone through and were given time to settle down emotionally before narrating their stories individually. They mention that the staff did not want anyone to be debilitating sorrowful or to feel out of place. They immediately engaged such a person in counselling.

The work of counselling involves questions of confidentiality and the negotiation of difficult contexts brought by each resident; participants reiterated that they found the staff helpful as they supported them, and this support covered both psychological containment and material work. Counselling played a crucial role as it promoted a change of mindset. After finding a close person to talk to participants admitted that they were able to see hope and light in their cases.

Another capability developed within a shelter space relates to senses, imagination and thought which according to Nussbaum (2011: 40) means being able “to use the senses, to imagine, think and reason and to do these things in a “truly human” way, a way informed and cultivated by an adequate education”. Evidence revealed that shelter residents were encouraged to be creative and utilize any skills they possessed.

These results present a shelter as a place where one can acquire new knowledge and skills through working with others. One is not left alone as a social being but is engaged in productive

and meaningful work. After a shelter stay, one can apply learnt skills to make a living, for example, growing vegetables and selling or plaiting hair and charging clients. These practical skills enable the individual to be independent and take care of themselves rather than being dependent on perpetrators who abuse them and make them vulnerable to DV, and I argue that this can be linked to engaging with “practical reason”, a capability engaged with connecting thought to reflection, and reflection to choice and planning.

7.3.3 Theme 3: Capabilities around sociality

This theme explored capabilities that are concerned with issues of community and belonging. The capabilities around recognition and acknowledgement and relationships with others are core for this theme. The findings revealed that capabilities that promoted collaborative working that include: affiliation, bodily health, and play were developed within the shelter space.

It emerged from the findings that one of the main capabilities, affiliation is developed within a shelter space and promotes a sense of belonging and togetherness. Nussbaum (2011: 40) explains that “affiliation means being able to live with and toward others, recognize and show concern for other human beings, engage in various forms of social interaction and be able to imagine the situation of another”. Nussbaum adds that affiliation further means having the social bases of self-respect and non-humiliation and being able to be treated as a dignified being whose worth is equal to that of others. The findings revealed that a shelter promotes affiliation for survivors through according to them opportunities to interact with others and share experiences. Survivors can associate and interact with other shelter residents and shelter staff, all of whom begin as strangers, but who move into close familiarity through the enclosure of the shelter space.

Survivors of DV highlighted that the other shelter residents become their friends and constitute their shelter family as they start referring to each other as ‘sisters’. They can console each other and give each other moral and emotional support.

This term, ‘sisters’ shows that there is equality and also, I would argue, a sense of feminism. Feminists don’t call each other friends, they use gendered language, ‘sisters’. It is a political term not only in patriarchal language but also in African feminist language. To be a ‘sister’ is not a biological relation, but a relationship of understanding of gendered power, not dictated by men. Survivors within a shelter space are in their own space which promotes relationships built out of mutual understanding and respect. The family chosen within the shelter draws on knowledge of survivorship. These relationships are crucial for participants as they bring mental

stability and reassure them that they are not alone. They are a group of survivors of DV who have experienced violations and the support they give each other is fundamental for their recovery. They give each other incredible support and a purpose to move on. Participants acknowledge that the relationships within the shelter space are important as they promote love and care from others. They manage to do their things collectively as a ‘family,’ for example, they cook and eat together. Participants acknowledge that this new family appreciates them and does not judge them.

Participants within the shelter space indicated that they formed strong relationships through totems, calling each other sisters and they were more like blood relatives forming strong bonds. They showed each other love, care and concern when they got sick. This leads to the development of the capability of emotions. According to Nussbaum (2011: 40), emotions mean “being able to have attachments to things and people outside ourselves; to love those who love and care for us, to grieve at their absence; in general, to love, to grieve, to experience longing, gratitude and justified anger”. Shelter residents became attached emotionally as they formed strong bonds.

It was interesting to note from the findings that shelter staff also became part of the participants’ shelter families as they together with participants had the opportunities to sit down together, interact and share stories in a relaxed manner. The results revealed that they were able to chat and laugh together and this was therapeutic to the participants as it made them feel at home. Participants highlighted that staff brings themselves down to the level of participants and they start interacting together without emphasis on work positions and social differences.

Evidence gathered showed that participants worked collaboratively with other shelter residents and staff and made up the shelter family which was built on love and care for each other. The way they interacted and shared stories and experiences present evidence of the development of affiliations and attachments within a shelter space. This is evidence that survivors are social beings in need of interaction. Such a family reworks the injustices experienced within the “domestic” of the violence participants had experienced and suggests different versions of “family.”

Furthermore, another capability developed within a shelter space is bodily health. Nussbaum (2011: 40) explains that bodily health means; “being able to have good health, including reproductive health, being adequately nourished” and having adequate shelter. It emerged from the results that participants are taken as “human beings” as their health needs are taken

seriously by staff. The survivors gave testimony that they were taken to the hospital when they were not feeling well. They were not neglected or left suffering in pain but their health was taken as a priority. The treatment bills and the prescribed medicines were paid for by the shelter staff.

Participants presented evidence that they were given attention when they fell ill within the shelter space. They confirmed that they received medical attention when they fell ill and they did not worry about hospital expenses as everything was taken care of at the shelter. In a context like Zimbabwe where accessing medical care is very expensive, and unaffordable, participants showed appreciation for the help they received. It would have been impossible in most cases for some even to call for an ambulance if they got sick at home but it was possible within a shelter space because health issues are prioritised.

Furthermore, participants indicated that the food was adequate and that they would not go hungry at the shelter as they were treated to a variety of food. This is a critical area which contributes to bodily health and mental stability. If a person is hungry, that person is not settled as she might be thinking about where to get food. Some participants even confessed that the food was a lot better than what they consumed at home since they were treated to delights such as beef, chicken, and rice. These are delicacies which are not easily found in most homes, particularly in the Zimbabwean context where the economic situation remains a challenge and most people because of poverty struggle to get food to eat.

Participants showed that they were happy with the food they were offered and the issue of the variety of food surfaced. Participants were treated with dignity and respect as they were seen as human beings who needed decent meals. They confirmed that the food was good as it was locally available Zimbabwean food they were familiar with comprising carbohydrates, protein, and vitamins.

These narrations reveal a healthy diet by Zimbabwean standards. These are the foods normally eaten in middle-class Zimbabwean homes. This is the reason why some participants mentioned that in their homes they could not afford such food as it is expensive to buy. The availability of food indeed contributed to the peace of mind as they would not miss their homes because a variety of food was served. Their meals were properly organised and they confirmed having four meals per day.

Participants present a menu which is fascinating as it captures food items which people would not normally afford in their ordinary homes, such as eggs, margarine or peanut butter. These

are viewed as luxuries among common people and to have those under a weekly menu demonstrates the high level a shelter operates in terms of looking after survivors. The concern for the shelter has been presented as that of treating the survivors of DV as human beings who are entitled to a decent life including partaking in decent meals. There is enough evidence that they were not hungry at all in the shelter since plenty of food was served. They were treated to four meals per day which they normally do not have in their homes. They were also served local food they were familiar with and this contributed to their recognition of shelter as 'home'.

It emerged that a shelter was conceptualized as a 'home' by participants through the provision of basic needs essential for one to live a decent life. Findings have revealed that participants were able to get accommodation, food and all the material items they needed. This was important as it contributed to their treatment as 'human beings'. Participants made confirmations that they lived a decent life within a shelter space. Such a relation to sociality moves the concept of "resource provision" from a need to a notion of capability.

It is interesting to note that a shelter develops play as another essential capability. According to Nussbaum (2011: 41), this involves "being able to laugh, play and enjoy recreational activities". Research findings revealed that participants had time to play together and relax. It emerged that participants come closer as they engage in recreational activities together as a family within the shelter space. They indicated that they played some games like netball, plaited each other's hair or watched TV and that brought them together as a family. Participants could have missed this capability before coming to the shelter because of DV.

These recreational programmes created a platform to de-stress and relax. As they played games they would forget about their depressing situations and embrace positive thinking. They stated that the staff didn't want anyone to be lonely but would encourage them to mix and mingle together as a way of relaxing the mind. Play is important for the well-being of individuals.

It emerged from the findings that the other capability developed through sheltering relates to other species, and this according to Nussbaum (2011: 41) entails "being able to live with concern for and in relation to animals and plants and the world of nature". Shelter residents indicated that they were not confined to staying indoors but were exposed to interacting with the world of nature where they did gardening and trimmed lawns. They had opportunities to plant vegetables and did crop rotation.

This exposure was beneficial to participants since they were engaged in productive work which assisted them to acquire various skills. These practical lessons allowed participants to use

their hands and applied practical skills to make a living after living in the shelter so that sociality encompassed the potential for self-reliance economically and nutritionally.

7.4 Conclusion

In conclusion, in this Chapter, I have theorized my findings in terms of a relationship to social justice, as described by the Capability approach put forward by Martha Nussbaum. The findings revealed that a shelter is a space for capability development hence the promotion of social justice. Although survivors initially indicated that they had experienced several social injustices because of DV, findings revealed that a shelter plays a critical role in the restoration of their dignity as human beings. It emerged that survivors access justice within a shelter space. Participants indicated that a shelter is established to preserve life, and promote bodily integrity, practical reason and sociality among other things. Survivors of DV gave a comprehensive account of how their knowledge both of DV as injustice and of the shelter environment can be theorized with a capabilities approach to social justice: they articulated what a shelter meant for them and how it transformed their lives to be ‘normal’ human beings again. Nussbaum (2011: 41) concludes that “a life without her list would not be a life worthy of human dignity”. All the participants have demonstrated that a shelter is a platform for justice provision beyond the law. The literature revealed that domestic violence is a violation of human rights for survivors of DV. Although many countries including Zimbabwe have enacted laws which prohibit DV and punish perpetrators of DV, such laws do not adequately address the needs of survivors of DV. Zimbabwe, like many other countries, has the Domestic Violence Act (2007) which criminalizes domestic violence and also has a provision to protect abused women by establishing safe shelters. The Zimbabwean law does argue for the provision of sheltering, but most research concentrates only on questions of legal “justice”. Several studies (Musasa Project, 2012; Chireshe, 2010; Makahamadze, 2011; Lipeleke, 2013) have investigated legal justice which is concerned with notions of criminalization of perpetrators, notions of innocence and guilt but fail to take into account the needs and interests of survivors of DV. This study is paramount in that it focuses on a shelter as a space for promoting the human rights of survivors of DV, something which is not addressed by the legal justice system. Sheltering becomes a platform which is core in the promotion of social justice for survivors of DV.

CHAPTER 8

CONCLUSION

8.0 Introduction

This doctoral research began five years ago with a commitment to the contribution of knowledge about gender-based violence which could find resonance with my Zimbabwean context and could make links with the global feminist theorization of social justice for survivors and explore the operation of support for survivors nationally. The study was rooted in my work within the gender-based violence sector, as someone who had participated in policy-based and practical support for shelters, and as the Director of the Nehanda Centre for Gender and Cultural Studies at the Great Zimbabwe University, in Zimbabwe, where I am responsible for supporting transformative feminist research often concerned with gender-based violence. The design of the research took time, and I worked carefully to develop a theoretical question about access to justice which I could weave into a located Zimbabwean context in which multiple parties, including survivors, participated. This meant two things. Firstly, as described earlier in this dissertation, I decided to approach the issue of gender-based violence through domestic violence given the recently passed Domestic Violence Act (2007). Secondly, because there has been research on access to legal justice, post the passage of the Domestic Violence Act, for survivors, I chose to explore different aspects of justice. This demanded a lot of reading and exploration, grappling with ideas of social justice diversely theorized in a global environment. In the end, because of the need to create a coherent study, this study articulated itself as succinctly as possible as an exploration of the meaning of social justice for survivors of domestic violence in Zimbabwe. The study sought to find out whether and how the provision of shelter space to the survivors (for which provision is made in the Domestic Violence Act, 2007) could be theorized as a form of social justice, despite the weaknesses of the courts. This concluding chapter provides a summary of the study, its significance and its core achievements. It also presents the limitations of the study and suggests areas for further research.

8.1 Summary of the Study

The Zimbabwean Government, together with many other countries worldwide after realizing that DV is a violation of human rights for survivors of DV, enacted laws which prohibit DV and punish perpetrators of DV, however, several studies have revealed that such laws do not adequately address the needs of survivors of DV. Although the Zimbabwean Domestic Violence Act (2007) has a provision to protect abused women by establishing safe shelters,

most research has concentrated on questions of legal justice (Musasa Project, 2012; Chireshe, 2010; Makahamadze, 2011; Lipeleke, 2013) focusing on criminalization of perpetrators and fail to take into account the needs and interests of survivors of DV. There is very rich literature which details the failures of criminal justice systems to take survivors' complaints seriously and to ensure that different offices of a state cooperate well to ensure that survivors are offered timeous, respectful and ultimately restorative support. This study began with the recognition that the modes of justice offered through court processes to survivors were not, in general, effecting any kind of redress for their diverse experiences of pain, economic destabilization, psychological damage or loss of family, and without suggesting that the DVA was unimportant (it is very important within the Zimbabwean suite of legal approaches to gender equality), the study looked for zones working with survivors in ways which might perhaps offer more resilient versions of justice than the legal. The existence of shelters for survivors proved to be a very interesting ground for this exploration, suggesting the possibility of living in social justice, and the study is the first of its kind in the Zimbabwean context. This study is significant within African feminist studies not simply because it specifically focuses on the Zimbabwean context, but because although feminist work on domestic violence has decades-long roots, the challenge of building contexts in which survivors can genuinely access justice remains. I strongly locate myself within African feminist theory which sees research as a form of critical activism, and I hope that this study can contribute to re-envigorating widespread support for the citizens of Zimbabwe who are survivors of domestic violence and are fully honoured in the spirit of commitment to social justice.

In my literature review, I show that there are several theories on what social justice might entail. Several strongly influential scholars, including Amartya Sen, Martha Nussbaum and Nancy Fraser, chart a discussion on what 'justice' would mean for citizens in society. These theorists argue that justice is concerned with restoring human dignity and the well-being of citizens in society. Martha Nussbaum came to a powerful role in this research as the key theorist with whom my research in a Zimbabwean context worked. In brief, she argues that social justice is not possible without access to a range of capabilities which sustain the possibility of change for those suffering under diverse systemic forms of inequality. In this study, I argued that the Domestic Violence Act (Chapter 5:16) enacted in 2007 in Zimbabwe, has provisions for both legal and social justice, in relation to its naming of the need to provide shelter space to survivors. This research, therefore, was interested in understanding how to theorize the work of sheltering as social justice through a complex exploration of one shelter from the experiences

of people very differently positioned in terms of bringing that shelter into dynamic life. Bringing this theory into conversation with the research focus on the meaning of justice for survivors of domestic violence in Zimbabwe provided a strong theoretical tool to interrogate possibilities of "justice provision" beyond the law. I argue that the capability approach, as articulated by Nussbaum, correlates very well with the research of feminists who have critiqued legal frameworks for their failure to recognise the rights and needs of survivors of domestic violence; the theory simultaneously brings nuance to the longstanding demands of feminists in Zimbabwe for the recognition of the meaning of all forms of gender-based violence as holistically destructive to survivors' lives, families, economic opportunities, and spiritual and psychological health (Tsonga, 2020).

Methodologically, in bringing the study to life, I worked with one particular shelter, Musasa, in Gweru, Zimbabwe, and explored the experiences of those who had worked with the shelter in multiple ways. This built what I called an "exploded view" of the representations of living and working at a specific place. The term "exploded view" comes from architectural design terminology, where a drawing shows the different parts in an assembly by separating each part for detailed viewing on its terms and then by reassembling those parts in their proper relationship to one another as a coherent construction. I saw the shelter as this kind of construction, whose process moved from the imagination of those who initially fought for its instantiation to the experiences of those who have lived there as residents.

Data gathering was through in-depth interviews and involved listening to the voices of those who imagined and created the shelter and also those running it. At the centre of the study were twenty women who experienced the shelter as a space in which they lived and their voices were critical in theorising sheltering. Data were analysed using both thematic and content analysis and aimed to tease out the multiple threads of meaning through which people associated with the shelter in different ways made sense of its location and importance for tackling domestic violence in Zimbabwe.

8.2 Theoretical Achievements of the Study

The study's theorization of shelter work as social justice contributes to a feminist theorization of redress for survivors of domestic violence in Zimbabwe. The core achievements, theoretically, for this study were that sheltering brings to life a form of social justice through capability development as theorized by Nussbaum. The findings gathered through what I called an "exploded view" of the representations of those who imagined and created the shelter, those

running it and survivors of DV who utilized the shelter space concurred that capabilities identified by Nussbaum are developed within a shelter space. Although none of these participants ever used the term 'social justice' in their responses, their representations pointed to the development of the capabilities put forward by Nussbaum in her theory of social justice. First and foremost, sheltering was recognized as critical in the preservation of life through the promotion of safety and protection and bodily integrity. The findings revealed that the capabilities of life and bodily integrity were the fundamental reason for shelter establishment. The notion of a shelter was, therefore, according to my participants embedded in practical concerns about homelessness and survival. The shelter was concerned with the preservation of the life of survivors who were chased away from home as a result of DV. The imagination of sheltering as a strategy was described as a state response to having "nowhere to stay". This is evident that those who established a shelter were primarily concerned with the development of capabilities for the preservation of life and promotion of bodily integrity which is concerned with the provision of a safe space to stay and protection from sexual assault and domestic violence (Nussbaum 2011: 31).

The participants themselves were clear that a state-established shelter offered better protection from abuse than institutions that might know the survivors and the families better; the need for protection was unpacked by the majority of the participants. Furthermore, from their diverse backgrounds and experiences, participants pointed to the capability of bodily integrity as crucial for the protection and safety of survivors of DV. Unanimously, participants agreed to shelter is important in that it ensures that survivors are protected from perpetrators who might want to harm them or even murder them. The perpetrators were generally viewed as the major threat to the survivors by putting their lives in danger hence the need for protection.

It also emerged from the findings that a shelter promotes the capability of practical reason, which Nussbaum (2011: 40) explains "as being able to form a conception of the good and to engage in critical reflection about the planning of one's life". The shelter presents a platform for shelter residents to think seriously about their situation and those reflections help them to make informed decisions about their situation and the future. The majority of the key informants considered a shelter as a half-way home or a temporary home for the survivor. At the shelter, survivors are presented with a platform to think seriously about their lives and explore ways of moving on. This is interesting given that the majority of participants primarily articulated DV as physical abuse; here, however, indirectly, they are clear that physical

violence torments both a body and a mind, and new versions of a home might make it possible for a survivor to “find a way.”

The capabilities that are concerned with issues of community and belonging include affiliation, bodily health and play also came up in the findings. Nussbaum (2011: 40) explains that affiliation means “being able to live with and toward others, recognize and show concern for other human beings, engage in various forms of social interaction and be able to imagine the situation of another”. The findings revealed that a shelter promotes affiliation for survivors through according to them opportunities to interact with others and share experiences. Survivors can associate and interact with other shelter residents and shelter staff, all of whom begin as strangers, but who move into close familiarity through the enclosure of the shelter space.

The findings revealed that shelter residents become friends and form their shelter family as they start referring to each other as ‘sisters’. They can console each other and give each other moral and emotional support. This term, ‘sisters’ shows that there is equality and also, I would argue, a sense of feminism. Feminists do not call each other friends, they use gendered language, ‘sisters’. It is a political term not only in patriarchal language but also in African feminist language. To be a ‘sister’ is not a biological relation, but a relationship of understanding of gendered power, not dictated by men. Survivors within a shelter space are in their own space which promotes relationships built out of mutual understanding and respect. The family chosen within the shelter draws on knowledge of survivorship. These relationships are crucial for participants as they bring mental stability and reassure them that they are not alone. They are a group of survivors of DV who have experienced violations and the support they give each other is fundamental for their recovery. In addition, shelter residents became attached emotionally as they form strong bonds. According to Nussbaum (2011: 40), emotions mean “being able to have attachments to things and people outside ourselves; to love those who love and care for us, to grieve at their absence; in general, to love, to grieve, to experience longing, gratitude and justified anger”.

Furthermore, another capability developed within a shelter space is bodily health. Nussbaum (2011: 40) explains that bodily health means; “being able to have good health, including reproductive health, being adequately nourished” and having adequate shelter. It emerged from the results that participants are taken as “human beings” as their health needs are taken seriously by staff. The survivors gave testimony that they were taken to the hospital when they

were not feeling well. They were not neglected or left suffering in pain but their health was taken as a priority. The treatment bills and the prescribed medicines were paid for by the shelter staff. In a context like Zimbabwe where accessing medical care is very expensive, and unaffordable, participants showed appreciation for the help they received. It would have been impossible in most cases for some even to call for an ambulance if they got sick at home but it was possible within a shelter space because health issues are prioritised.

It also came out that a shelter develops play as another essential capability. According to Nussbaum (2011: 41), this involves “being able to laugh, play and enjoy recreational activities”. Research findings revealed that participants had time to play together and relax. It emerged that participants come closer as they engage in recreational activities together as a family within the shelter space. They indicated that they played some games like netball, plaited each other’s hair or watched TV and that brought them together as a family. The findings also revealed that the other capability developed through sheltering relates to other species, and this according to Nussbaum (2011: 41) entails “being able to live with concern for and in relation to animals and plants and the world of nature”. Shelter residents indicated that they were not confined to staying indoors but were exposed to interacting with the world of nature where they did gardening and trimmed lawns. This exposure was beneficial to participants since they were engaged in productive work which assisted them to acquire various skills.

This is the first study of this nature in Zimbabwe, therefore, while the findings replicate the ideas of other studies elsewhere about the value of shelters, this is new for Zimbabwe in that the focus has been on the theorization of sheltering as a platform for social justice. Previous studies concentrated on the role of a shelter in providing services but not social justice. Although survivors of DV, initially indicated that they had experienced several social injustices because of DV, findings revealed that a shelter plays a critical role in the restoration of their dignity as human beings. It emerged that a shelter is established to preserve life, and promote bodily integrity, practical reason and sociality among other capabilities. Survivors of DV gave a comprehensive account of how their knowledge of both DV as an injustice and of shelter environment can be theorized with a capabilities approach to social justice. They articulated what a shelter meant for them and how it transformed their lives to be ‘normal’ human beings again. Nussbaum (2011: 41) concludes that “a life without her list would not be a life worthy of human dignity”. Participants demonstrated that a shelter is a platform for justice provision

beyond the law. The study established how the capabilities come alive in the discourses presented by participants.

8.3 Limitations of the Study

This study is limited in that whilst I was aware of several other theories of social justice, such as Nancy Fraser's theory on "recognition" and "redistribution", this study only utilized Martha Nussbaum's theory of social justice. Although the application of other theories of social justice could have enhanced the study, this was not possible because of time and resource constraints. The study is also limited to one shelter in Gweru through a case study design. More shelters could have been included but this was a case study design which concentrated on one shelter.

Furthermore, this study is limited in that it was carried out when the COVID-19 pandemic was a challenge for all nations worldwide. It was a difficult time to interview participants as the pandemic started with lockdowns which did not allow any interactions and gatherings. When the systems were relaxed by Government, members were supposed to adhere to COVID-19 Protocols and get vaccinated, sanitize, wear masks and practice social distancing. I was only able to carry out the study when the systems were a bit relaxed. The interaction with participants was not a simple matter as we had to wear masks, maintain social distancing and manage an atmosphere of social fear around the epidemic. This may have limited the density of my material, and it limited the number of people willing to work with me

I am aware of other limitations; I became concerned at the point about the overwhelmingly positive stories about envisioning the shelter, running it, and living in it. The international literature on sheltering does, almost unequivocally, support shelter provisions for survivors of domestic violence, but I am aware that running a shelter can be difficult. In the end, I accepted that what I was being told was consistent and that such consistency mattered, and became alive in the face of very diverse initial responses to me from different participants. The research therefore cannot speak to issues of funding difficulties experienced by shelters, or any negative experiences residents went through, and this could be seen as a limitation.

8.4 Areas for Further Research

This is the first study on the theorization of sheltering in Zimbabwe and it involved the meaning of social justice for survivors of Domestic Violence. Before carrying out this study I had no idea of the vast knowledge that survivors of DV have about sheltering and therefore, there is a need for more studies on social justice within the context of Zimbabwe so that scholars and

activists gain knowledge on the area. Studies could employ other theories of social justice in analysing sheltering. Studies could also involve more shelters in other provinces since I only focussed on the Midlands Province. Because I used NVIVO to analyse data, I had rich data which had to be thematised and I ended up leaving out a lot of it, but there is more to be heard from survivors themselves; they are very clear about the meaning of social justice. There is a need to engage much more with survivors as theoreticians themselves as they have rich data which needs to be central to understanding gender-based violence, a long-held feminist principle but one my research confirms. Further research can address inequalities that women suffer inside the family, inequalities in resources and opportunities available for every person and how equality can be promoted. Research on institutions which are promoting social justice in Zimbabwe can also be conducted, for example, investigating the Zimbabwean Government's commitment in promoting social justice; the role of Non- Governmental Organisations in promoting social justice and the work of Government Ministries in supporting survivors of DV.

My final hope for the research is that the work I have been able to commit to theorizing social justice for Zimbabwean women who have gone and are going, through domestic abuse may come to be valuable both in opening up new avenues for research and simultaneously in ensuring shelter-provision becomes understood as core to what Zimbabwe means by "justice for its citizens." I am not the same person who began this study, some years ago; I have learned a great deal and expanded my sense of what feminist research and thinking can affect and as stated in my initial acknowledgements, I owe a debt of gratitude, and express solidarity, with all those working to understand what domestic violence means and how to eradicate it as a norm. This may take longer than the rest of my life; I hope however that this research will have contributed.

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APPENDICES

APPENDIX 1: AUTHORIZATION LETTER FROM MUSASA



HARARE	GWERU	BULAWAYO	MASVINGO	MUTARE
64 Sofola Ave/Cnr. Frodwin Tel: (0242) 706284 Fax: (0242) 794983 musasa@musasa.co.zw	J. Josiah Tongogara Diposole Apex Office Tel: (054) 223220 Fax: (054) 223307 musasa@musasa.co.zw	45 Pitt Street Tel: (09) 662863 Fax: (09) 680233 musasa@musasa.co.zw	Richardson Street Simon Mupfema Tel: 099 2253923 musasa@musasa.co.zw	2810 Masvingo Road Chikanga Mutare

Toll Free: 080890 74

Great Zimbabwe University
P/Bag 1235
Masvingo
Zimbabwe

TO WHOM IT MAY CONCERN

RE: AUTHORISATION LETTER

Musasa has authorized Ellen Farisayi Zvobgo, Student No. ZVBELL001, to carry out her PhD studies at Musasa Gweru under the topic: **An Exploration of the Meaning of Social Justice for Survivors of Domestic Violence in Zimbabwe.**


We will give her all the assistance she might require

If you have any questions or concerns, you can contact Sharon Matingwira/ Agnes Murya at 0242 794983 or 0242 706284.

Yours sincerely,

Signed by candidate

Vimbainashe Mutende
Executive Director



Zero Tolerance To Violence Against Women

Board Chairperson: Ms. N. S. Makomva
Board Members: Mr. A. Mberwa, Ms. D. Tigere, Mrs. R. Mvumba, Mrs. J. Zvobgo, Ms. J. Mupfema, Mrs. H. J. Rweh
Executive Director: Mrs. V. S. Mufandareki

APPENDIX 2: ETHICAL CLEARANCE LETTER



School of African & Gender Studies, Anthropology & Linguistics

Room 4.6 • Fourth Floor
Harry Oppenheimer Institute Building
Engineering Mall
University of Cape Town
Rondebosch 7701
Telephone: +27 21 650 5526
Email: Zamambo.mkhize@uct.ac.za

This is to confirm that Ms Ellen Farisayi Zvobgo (ZVBELL001) has been registered as a PhD candidate in the Department of African and Gender Studies, Anthropology and Linguistics (Gender Studies) since 2017. She successfully presented her proposal to the Department for ethical clearance in October, 2018, and was given ethical clearance to proceed to the next stage of her research work.

A/Professor Jane Bennett, Deputy-Dean, Faculty of Humanities

Signed by candidate

APPENDIX 3: CONSENT FORM

I _____ have received the letter of information and understand that the information sought by Ellen Farisayi Zvobgo is for her Doctor of Philosophy Degree in Gender Studies at University of Cape Town, South Africa. As such excerpts from the interview may be included in the study. I understand that I have the right to revoke this authorization and withdraw from this study at any time.

Furthermore, I do understand that:

- All information pertaining to this study will be treated in strict confidence and there will be no disclosure of my name or identity as a respondent.
- The information obtained from this study is for the sole purpose of this study.
- The study will involve an in-depth interview with me at my convenient time and place
- During the interview, I will be asked to answer a series of questions related to the study, etc

In light of this, I hereby volunteer to participate in the study and grant the researcher permission to interview me for the purpose of data collection.

Respondent's signature _____ Date _____

Researcher's signature _____ Date _____

Principal Researcher: Ellen Farisayi Zvobgo

Cell +263712874112 or +263782457345

Email: zvobgoef@gzu.ac.zw

APPENDIX 4: INTERVIEW GUIDE MUSASA – STAFF GWERU

Introduction

I am a PhD student from Gender Studies Department, University of Cape Town, South Africa. My research topic is: An Exploration on the meaning of social justice for survivors of domestic violence in Zimbabwe. (The meaning of a shelter for survivors of DV). I am kindly asking you to provide information on the role of Musasa shelter, Gweru, Midlands Province. The information you give is strictly confidential and will only be used for this study. Thank you for agreeing to participate.

Background information

1. Kindly provide some background information about yourself and when you joined Musasa.
2. Explain to me your role at Musasa. What is your responsibility here? Explain the structure for the shelter.

Information about Musasa Shelter.

3. Kindly narrate to me your experiences with survivors of DV who come to the shelter
4. Explain the role of Musasa in assisting survivors of DV.
5. What is the meaning of a shelter for survivors of DV? How do you think survivors benefit from a shelter?
6. Provide information about funding, how do you get funding? Who are the key funders of the shelter?
7. Kindly state any challenges that you face at Musasa which affect your work.
8. Provide any information about Musasa shelter, pictures and other items.

APPENDIX 5: SURVIVOR INTERVIEW GUIDE

My research work is on why shelters are initiated and how people who start shelters think about the power of a shelter. The study intends to find out your experiences within the shelter space, how your life was like in the shelter, the services you were offered and whether the stay benefitted you or not. The study intends to find out whether the shelter stay changed your life in any way. Our discussion will focus on the following themes: 1) the theme of who you are. 2) How you came to Musasa. 3) What you were feeling when you came to Musasa. 4) Settling in at Musasa 5) Leaving the shelter/ reflecting back 6) theorizing social justice and sheltering. The information you give is strictly confidential and will be used for this study only and nothing else. No names will appear in the study therefore feel free to share anything concerning your experiences at Musasa. Explain in the language you are most comfortable with.

- 1) Theme 1: Who you are? (Tsanangurai zvizere upenyu hwenyu, zvamakasununguka)
 - Kindly give information on who you are, your family, where you come from, where you grew up, where you did your primary and Secondary education, your aspirations as you were growing up, your dreams and hopes as a girl as you were growing up.
 - What you did after completing your Secondary education, when you started getting interested in issues of dating, marriage and anything you want to share.
- 2) Theme 2: How you came to Musasa. (In Shona: Makauya sei kuMusasa, zvanga zvaita sei? Tsanangurai zvanga zvaitika)
 - Explain what led you to Musasa; what had happened?
- 3) Theme 3: Feelings when you came to Musasa (Pamakasvika Ku Musasa mainzwasei?)
 - What were you feeling when you first came to Musasa?
 - What did you think was going to happen? What was your first impression of Musasa?
 - What was it like on the first day?
- 4) Theme 4: Settling in (Kugara kwenyu mu Musasa)
 - What happened after that first day/ first week?
 - Did you make friends with other people there? Tell me about them
 - What happened each day? Was there a routine?
 - How did you get food and prepare it?
 - What other kinds of activities did you do? What was your favourite?
 - How many staff people worked at Musasa? What were they like? Favourites? People you didn't like?
 - Did you get things like soap and toiletries? Or did you have to bring those things?
 - What did you want to happen for you at Musasa? What did you really need? Did you get it?
 - Did you get help with your (situation- legal case, injuries, pain, etc) What happened?
 - Did things get better?
 - Commenting on shelter stay: Pointers include basics such as food, clothing, toiletries, security, privacy, confidentiality, bodily integrity, dignity,

psychological well-being, peace of mind, healthcare, education. (Think about 'safety' maybe as a core area- one to explore in depth ...did she feel safe? What made her feel safe/ not safe? What did Musasa do to help her feel safe?

5) Theme 5: Leaving the shelter/ reflecting back (Kubva pa Musasa ne ndagariro dzamuinadzo)

- When did she know she was ready to leave?
- What were her feelings about leaving?
- Where did she go?
- What was it like?
- Looking back, what were the best things about Musasa? What are the strongest memories? What were most difficult things? What should they improve?
- Would she ever advise someone to stay at Musasa- is it a good place?
- Why? Why not?
- Did shelter help other people with their lives? (Follow up)

6) Theme 6: Theorizing social justice and sheltering (Kodzero dzemadzimai ne misha yakaita seMusasa)

- Given your experience, what is the most difficult thing for women who face domestic violence (Use her language- beating from husband, etc)
- What is the most important thing we should do to support these women?
- Do you think we should have more shelters? Why? Why not?
- What would have happened to you if you had not come to Musasa?

APPENDIX 6: TABLE 1: DEMOGRAPHIC INFORMATION OF PARTICIPANTS

Pseudonym	Age	Level of education	Where she grew up	Parent/guardian	Religion	Marital status	Dreams and aspirations	Number of siblings	Employment
Participant 1	18	Form 2	Born Zhombe , moved Lower Gweru at 7 years	Both parents died and stayed with aunt		Never married, was raped by aunt's child and has a baby boy		4	Not employed
Participant 2	34	Form 4	Lower Gweru	Raised by mother and father	Christianity, Roman Catholic	Once married but divorced , a mother of two children now cohabiting		4	Doing farming in rural areas
Participant 3	24	Grade seven (Fees a challenge)	Zimuto, Masvingo	Both parents died and later raised by grandmother		Single mother of one child discovered the boyfriend had a wife		2	Hotel catering at a Local Hotel
Participant 4	37	Form 2	Gweru	Complicated background, stayed with mother, who remarried, later died and taken by	Christianity, Glory Bath church	Once married but husband died and has three children now cohabiting		7	Housemaid

				half brother					
Participant 5	20	Form 4 (Mother struggled to pay fees)	Gweru	Raised by mother alone who later left her and went to Botswana and left her with distant cousins		Single mother of one child	Wanted to be a soccer player	Only child	Youth Coordinator with an NGO
Participant 6	23	Form 4 (Fees paid by a Donor)	Chiwundura	Raised by mother and father		Once married but now Divorced	To be a nurse or teacher	6	Buying and selling in Informal sector
Participant 7	57	Form 4 (Fees paid by half brother)	Chivhu	Born in a polygamous family, mother left and was raised by step mother and father.	Christianity, Family of God	Single mother of one child	To be a nurse married to a working husband	10	
Participant 8	34	Degree	Harare	Raised by mother and father		Got married, has two children but now Divorced		3	Marketing officer at a big store
Participant 9	39	No education (No money for fees)	Kwekwe then Gokwe	Raised by mother alone, father died and later went to rural areas and		Child marriage, married at 14 years because of poverty but husband		6	Looks after properties of other people and gets free accommodation

				looked after by grandmother		later died, had three children, now co-habiting			
Participant 10	32	Grade 2 (No-one to pay fees)	Machinda-Masvingo	Father died, remained with mother who remarried and relocated to her husband and children were left alone		Married by abusive husband		6	Does piece works in people's homes
Participant 11	19	Form 4	Gweru	Born in a polygamous family, mother died and Father re-married. Raised by Step Mother		Forced marriage, she came home late and was forced to get married, had one child but later divorced		7	Not working
Participant 12	22	Grade 7 (Failed to progress with education because of lack of fees)	Zhombe	Parents divorced when she was young, father re-married and step-mother ill treated them		Single mother of one		2	Working as a security officer

Participant 13	26	Grade 7 (difficulties with fees)	Gokwe	Born in a large family of 12 children. Both mother and father are there but not educated Mother		Once married but husband died, has two children so she is now widowed		12	Housemaid
Participant 14	24	Form 2 (Could n't get money to proceed with school)	Gweru	Raised by her mother after father had died. Mother re-married and was ill treated by step father		Decided to get married, eloped to boyfriend, however boyfriend left for SA but later died		Only child	Now Youth coordinator for an NGO
Participant 15	22	Form 4 (Failed and father failed to raise money for her to re-write)	Gokwe	Raised by mother and father in rural areas				5	Housemaid
Participant 16		Form 4 and went to a self-help college	Chivhu	Grew up with mother after father had died, mother re-married and		Met a man and she eloped and they started staying together		Only child	Did Hotel and catering

				stayed with grandmother					
Participant 17	22	Form 4 did not pass	Gweru	Raised by mother and father but mother died, father re-married and was staying in SA, she ended staying with grandmother in rural areas.		Forced marriage. She arrived home late and aunt forced her to go back to the boyfriend's place	To be a nurse	Only child	Working in a shop
Participant 18	20	Form 2	Nhema, Shurugwi	Raised by grandfather and grandmother after mother had died. Father remarried and started staying with an abusive stepmother		Fell in love with a certain boy who stayed in Mambo township and he impregnated her		Only child	Not working
Participant 19	21	Form 2	Checheche, Chipinge	Raised by mother and father		I met a man in my home area and		6	Not working

						decided to get married but later divorced him			
Participant 20	32	Form 4	Gweru	Born in Shurugwi and stayed with mother and father in Gweru		I was married before doing any course but later divorced			Security guard

APPENDIX 7: TABLE 2: LENGTH OF STAY AT MUSASA SHELTER

Participant	When they came into the shelter	How long they stayed	When they left
1.	January 2020	9 months	September 2020
2.	January 2020	3 months	March 2020
3.	January 2019	1 year	December 2019
4.	March 2019	4 months	July 2019
5.	January 2019	1 year	December 2019
6.	April 2019	2 weeks	End of April 2019
7.	September 2017	3 months	December 2017
8.	August 2020	2 weeks	End of August 2020
9.	March 2020	1 month	April 2020
10.	February 2020	2 days	February 2020
11.	March 2020	2 months	May 2020
12.	March 2020	3 months	June 2020
13.	April 2020	3 months	July 2020
14.	January 2018	2 years	January 2020
15.	March 2020	2 weeks	End of March 2020
16.	March 2020	5 months	August 2020
17.	February 2020	2 months	April 2020
18.	July 2020	5 months	December 2020
19.	November 2019	2 months	January 2020
20.	September 2019	3 months	December 2019

APPENDIX 8: STATISTICS OF SURVIVORS AT MUSASA FROM 2015-2020



HARARE
64 Selous Awe/Cnr 7th Street
Tel: (242) 706152, 706284
Fax: (242) 794583
musasaproj@musasa.co.zw

GWERU
1 Jessica Tangogara
Opposite Arex Office
Tel: (054) 229270
Fax: (054) 229307
musasagw@musasa.co.zw

BULAWAYO
45 Fife Street
Tel: (09) 882888
Fax: (09) 883312
musasabyo@musasa.co.zw

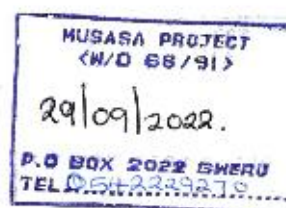
MASVINGO
Rebriffed Invest
Simon Macrodie
Tel: 039 2261727
musasach@musasa.co.zw

MUTARE
8810 Mountain Rise
Chilanga
Mutare

Toll Free: 080800 74

MUSASA GWERU SHELTER STATISTICS (2015-2019)

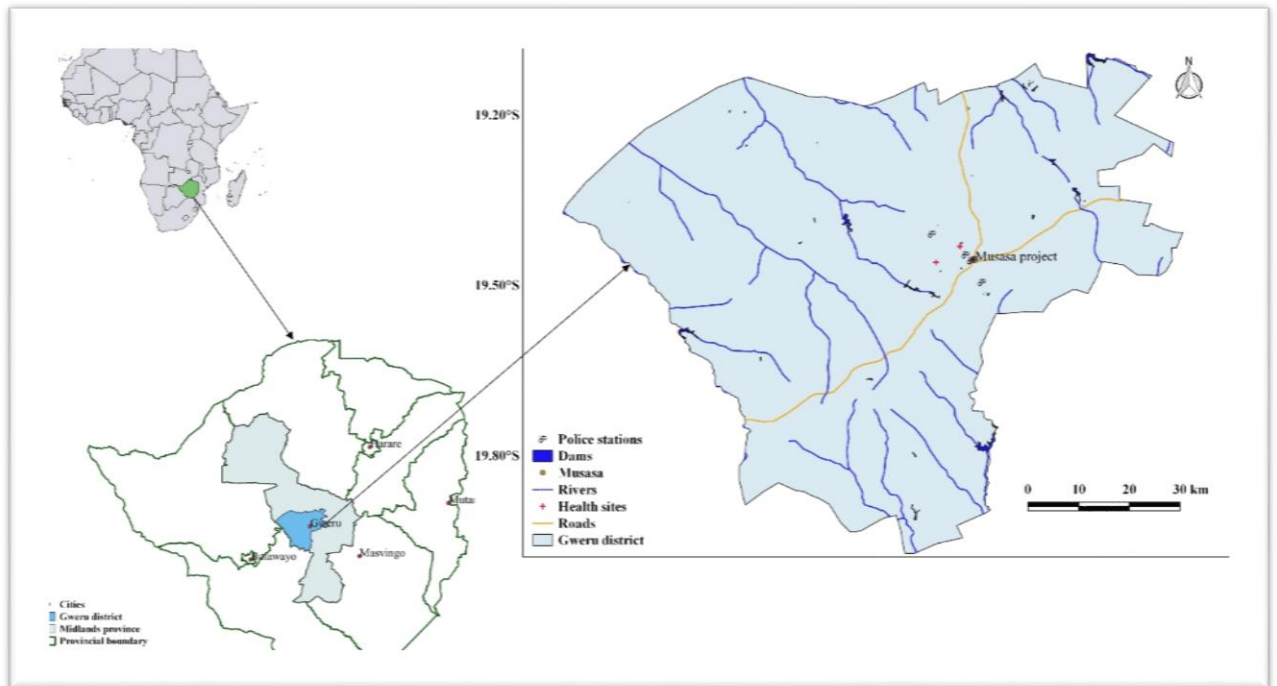
	2015	2016	2017	2018	2019	TOTAL
SHELTERED CLIENTS	171	291	490	534	535	2021
ACCOMPANYING CHILDREN	126	197	233	195	222	973
TOTAL	297	488	723	729	757	2994



Zero Tolerance To Violence Against Women

Board Chairperson Ms N. S. Makomva
Board Members: M. A. Mbengwa, Ms D. Tigere, Mrs R. Mungandze Zvaray, Ms Joylyn Magobeya Ndoro, Mrs H.J. Revai
Executive Director: Mrs V. S. MulenderekI

APPENDIX 9: MUSASA SHELTER MAP



APPENDIX 10: MUSASA SHELTER PICTURE, GWERU

