

**INTERGENERATIONAL TRANSMISSION OF DOMESTIC
VIOLENCE IN REFUGEE FAMILIES IN DURBAN, SOUTH
AFRICA**



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DEDICATION

I dedicate this work to my research participants from Burundi and the Democratic Republic of Congo; thank you for sharing your journeys with me. This thesis would have never been possible without you. I look forward to continuing to work within these communities. I would also like to dedicate this work to God and myself; this journey was not easy. It is easily one of the most difficult projects I have ever worked on. It was emotionally taxing and required a lot from me. I am proud of myself for not giving up and for pushing through and for God's love and mercy.

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ABSTRACT

The World Health Organization in 2021 reported that 30% of women globally experience violence, with South Africa being infamous for particularly high rates of violence against women, including domestic violence. Despite this, domestic violence experiences and its intergenerational transmission among refugee women living in South Africa remain underexplored. Refugee women living in South Africa are a vulnerable and marginalised population with regard to domestic violence, as their refugee status and other risk factors disproportionately increase their vulnerability. This qualitative embedded single case study adopted an integrated conceptual framework that includes concepts from Heise's ecological framework, social learning theory, and attachment theory to explain the theory of intergenerational transmission. The study aimed to investigate how domestic violence is transmitted intergenerationally among refugee women from Burundi and the Democratic Republic of Congo living in Durban, South Africa. A total of 30 mother-adult daughter pairs of refugee women from Burundi and the Democratic Republic of Congo were purposively sampled through focus group discussions and individual semi-structured interviews. Data was analysed using thematic and case study analysis. The findings revealed a complex interplay of psychosocial mechanisms, including internalisation, socialisation, silencing, re-enactment, guilt, and the influence of the family of origin, all embedded within multi-level risk factors. Some of these risk factors include exposure to domestic violence, lack of social support, refugee status, attitudinal acceptance, and gender norms, contributing to the transmission of domestic violence both within the first generation and from the first to the second generation. Findings also revealed potential protective factors that may be used in culmination with risk factors and psychosocial mechanisms of transmission, which could be critical for informing targeted responses to domestic violence within the study group, underscoring a critical need for targeted interventions. By elucidating specific factors and mechanisms influencing the intergenerational transmission of domestic violence among refugee families, this study enhances our understanding of how domestic violence can be interrupted across generations. It also guides research interventions and policy recommendations. This study also underscores the importance of religious, culturally sensitive, and context-specific approaches in addressing and preventing domestic violence and its transmission across generations in refugee populations.

Keywords: Intergenerational transmission, domestic violence, refugees, women

LIST OF ABBREVIATIONS AND ACRONYMS

ACEs	– Adverse Childhood Experiences
CBO	– Community-Based Organisation
DHS	– Demographic and Health Survey
DV	– Domestic Violence
DVA	– Domestic Violence Act
FGD	– Focus Group Discussions
G1	– First Generation
G2	– Second Generation
GLR	– Great Lake Region
IASFM	– International Association for the Study of Forced Migration
IOM	– International Organisation for Migration
RSS	– Refugee Social Services
UNHCR	– United Nations Refugee Agency
VAWC	– Violence Against Women and Children

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CHAPTER 1: INTRODUCTION

This chapter provides the background and context of this study, including insights into the intergenerational transmission of domestic violence in refugee families, both as a research phenomenon and an urgent problem, which necessitates exploration and resolution of the subject. This chapter will then outline the rationale for this research by providing a clear justification for its necessity and highlight the significance of the study by emphasising the study's contribution to literature and its potential impact on policy and the lives of refugee families affected by domestic violence, in South Africa, particularly Durban. Next, the chapter will discuss research questions and objectives, followed by a concise overview of the research design and methodology. Thereafter, the main assumptions guiding the study are outlined and succinct definitions of key concepts utilised in this study are provided. The chapter concludes by providing a brief preview of the upcoming chapters and a summary of the key points discussed and highlights of Chapter 2.

1.1 Background and context

South Africa is infamous for high rates of gender-based violence (GBV) against women, including domestic and intimate partner violence, sexual assault, and sexual harassment (PASSOP, no date). According to Felix (2023) and the South African Government cited in Mpako and Ndoma (2023, p. 1): “police Minister Bheki Cele reported that South Africa recorded 10 516 rapes, 1 514 cases of attempted murder, and 14 401 assaults against female victims in July, August, and September. In the same period, 881 women were murdered”. Additionally, the World Health Organization (WHO, 2018) reported that a staggering 60,000 women and children were affected by domestic violence annually in South Africa in 2018. There is strong empirical evidence suggesting that the continued perpetuation of violence against women and children (VAWC) is propelled by silence and the acceptance of violence as a norm in South African communities (Thobane *et al.*, 2020). Refugee women living in South Africa represent an understudied, vulnerable, and marginalised population in relation to GBV and are disproportionately more vulnerable to violence, particularly domestic violence, largely because of their refugee status in the country (PASSOP, no date). Domestic violence, also referred to as intimate partner violence by some, including the United Nations Women (UN Women) (2022), is defined as a pattern of behaviour or behaviours in any relationship that

is used to acquire and/or maintain power and control over an intimate partner. South Africa's Domestic Violence Act (DVA) No. 116 of 1998 defines domestic violence as:

- any form of abuse which includes physical, sexual, emotional, psychological, or economic harassment;
- damage to property;
- stalking;
- entry into a person's property without their consent; and
- any other abusive or controlling behaviour where such conduct causes harm or may cause harm to your health, safety, or well-being (Department of Justice and Constitutional Development (DJC and CD), 2023).

For this study, it is important to note that the term 'domestic violence' encompasses any of the aforementioned forms of violence occurring within the domestic environment among refugees residing in the same household in South Africa.

South Africa is ranked first in Africa and third in the world for receiving and hosting refugees and hosts 250 250 asylum seekers and refugees (United Nations High Commissioner for Refugees (UN Refugee Agency) (UNHCR), no date). An asylum seeker is a legally distinguished individual applying for refugee status and declaring themselves as refugees on arrival in the host country (Barakamfitye, 2017). As per the definition provided above, the term "refugees" will also be used in this study to refer to asylum seekers. According to Hamber (2019), refugees in host countries are vulnerable to a range of political, social, economic, cultural, spiritual, and existential challenges marked by psychological and physical harm.

Building upon the vulnerabilities highlighted by Hamber (2019), the plight of black African refugees in South Africa is exacerbated by the prevalence of xenophobia or Afrophobia, leading to instances of psychological and physical violence perpetrated by locals (Chenzi, 2021; Hewitt, Masikane and Toendepi, 2020; Wilson and Magam, 2018). This is due to intersecting risk factors such as gender stereotypes, cultural background, attitudinal acceptance, educational attainment, language barriers, refugee status, poor or the lack of family support, tolerant behaviour, financial dependability, and/or insecurity (Hewitt, Masikane and Toendepi, 2020). Additionally, the manifestation of xenophobia in the form of institutional discrimination further increases refugee women's susceptibility to domestic violence (Haffejee and Maksudi, 2020; Mutambara, Crankshaw and Freedman, 2021; Umubyeyi, 2019;

Umubyeyi and Mtapuri, 2019). While there are various risk factors for domestic violence in refugee families in South Africa, to the best of the researcher's knowledge, no studies investigating the risk factors and mechanisms involved in refugee women's experiences of domestic violence and its intergenerational transmission between two generations of refugee women living in South Africa have been conducted. This study aimed to investigate how domestic violence is transmitted intergenerationally within the family among refugee women from Burundi and the Democratic Republic of Congo (DRC). The study examined the link between maternal abuse history and increased risk of domestic violence among their adult daughters. The term "maternal abuse history" pertains to the occurrence of verbal, emotional, psychological, physical, financial, or sexual abuse experienced by one's mother.

1.1.1 Statement of the problem: Intergenerational transmission

Intergenerational transmission of domestic violence is a major social, justice, and public health problem both globally and more so on in Africa, especially South Africa, which has high rates of GBV (Crombach and Bambonyé, 2015; Hou *et al.*, 2016; Thobane *et al.*, 2020). According to the Marriage and Family Encyclopedia (2022), intergenerational transmission forms a part of a larger concept known as intergenerational relations, which describe a variety of patterns, behaviours, beliefs, attitudes, norms, and values associated with interpersonal interactions between family members in different generations (older to younger) (Demos, 2012; Marriage and Family Encyclopedia, 2022). Intergenerational transmission refers to the intentional or unintentional transmission of characteristics and behaviours within or across generations (Brown, 2017; Branje *et al.*, 2020). This occurs when traits are transmitted to their children through genetic, psychological, and socio-cultural (i.e. environmental) interactions or the interchange between genetics and environmental mechanisms of transmission (Branje *et al.*, 2020; Ehrensaft and Langhinrichsen-Rohling, 2020).

Expanding upon the broader context of research into intergenerational transmission, it is worth noting that this study focused on exploring both the psychological and environmental (i.e. psychosocial) mechanisms of transmission of domestic violence. The idea of intergenerational transmission is widely applied in research to explore phenomena such as domestic violence. The intergenerational transmission of domestic violence is rooted in the social learning theory (Akers, 2017; Bandura, 1969, 1973; Widom and Wilson, 2015), which states that children can learn violent behaviour by being exposed to violence either by witnessing it or experiencing it in their own homes. Researchers suggest that women who witnessed their mothers experience

abuse by their fathers or stepfathers growing up were 92% more likely to become victims of abuse by their male partners as adolescents and adults (Adams *et al.*, 2019; Borelli *et al.*, 2019; Paixão *et al.*, 2015).

Within the African context, the study of intergenerational transmission of trauma and violence is limited, with existing studies mostly centred around conflict-affected countries in the Great Lake Region (Burundi, DRC, Rwanda, Tanzania) (Alawode *et al.*, 2023; Berckmoes, De Jong and Reis, 2017; Crombach and Bambonyé, 2015; Fletcher, Gitter and Wilhelm, 2017). In South Africa, research on intergenerational transmission has focused on various phenomena. For example, Brown (2017) conducted a qualitative study in South Africa, which explored and described how women's childhood experiences of mother-child relationships influenced their mothering of the next generation. Additionally, Hoosain's (2013) study focused on the intergenerational transmission of trauma in displaced families in the Western Cape during apartheid in relation to their family's slave past. Other South African academics who have conducted intergenerational transmission research on trauma, poverty, education, violence, or mental illness include Eyal and Burns (2019), De Lannoy, Leibbrandt and Frame (2015), Frankish (2009), Frankish and Bradbury (2012), Gobodo-Madikizela (2016), Kim (2020a, 2020b), Kim *et al.* (2021), Kwenda, Ntuli and Gwatidzo (2015), Meinck *et al.* (2023), and Ritcher *et al.* (2018).

However, to date and to the best of the researcher's knowledge, there are no studies exploring intergenerational transmission of domestic violence within refugee families living in South Africa. The existing literature on refugees living in South Africa primarily focuses on refugee experiences of xenophobia (Barakamfitye, 2017; Cinini and Singh, 2019; Hewitt *et al.*, 2020; Kerr, Durrheim and Dixon, 2019; Mlambo, 2019; Tarisayi and Manik, 2020). Other studies focus on refugee women's experiences of intimate partner violence, examining the prevalence, nature, risk, and protective factors associated with the violence (Haffejee and Maksudi, 2020; Mutambara *et al.*, 2021).

1.2 Rationale and significance of the study

Currently, there is limited empirical research on the intergenerational transmission of domestic violence in refugee families from conflict-affected African countries living in South Africa. To the best of the researcher's knowledge, this is the first study of its kind in South Africa. Therefore, this study is significant and unique as it increases literature in the study fields of

gender, refugee, and GBV where the intergenerational transmission of domestic violence in refugee families in South Africa. Studying intergenerational transmission of domestic violence within refugee families allows researchers, academics, governments, and policymakers to understand domestic violence within refugee communities from conflict-affected countries like Burundi and the DRC. This knowledge helps us extrapolate the invisible pathways involved in the transmission of domestic violence in this vulnerable population, where women may be indirect transmitters of domestic violence.

To curb the spread of sexual and gender-based violence (SGBV) in the country and to achieve both the Sustainable Development Goals (SDGs) particularly SDG 5: Gender Equality and SDG 16: Peace, Justice, and Strong Institutions, in addition to the African Union's Agenda 2063's Gender Equality and Women's Empowerment (GEWE) strategy, which is informed by SDG 5: "Achieve gender equality and empower all women and girls" (African Union, 2020). South Africa has developed its own National Strategic Plan on Gender-Based Violence and Femicide (NSP-GBVF) (Department of Women, Youth, and Persons with Disabilities (DWYPD), 2020), which focuses on vulnerable populations living in South Africa. The NSP-GBVF lists refugee women and children as one of the most vulnerable populations to SGBV in South Africa. This study is, therefore, a response to the NSP-GBVF (DWYPD, 2020) as it aims to "realise a South Africa free from gender-based violence and femicide" by recognising all who are negatively affected by the crisis in South Africa, including refugee women. The study makes it possible for academics and policymakers to effectively develop evidence-based interventions and policies aimed at interrupting cycles of domestic violence within refugee communities.

1.3 Research questions

The primary research question that this study sought to answer was, *'How is domestic violence transmitted intergenerationally within the family among refugee women from Burundi and the DRC living in Durban, South Africa?'*

1.3.1 Secondary research questions

The secondary research questions for this study are as follows:

- What are the risk factors for intergenerational transmission of domestic violence within refugee families in Durban?

- What are refugee women's experiences of domestic violence?
- How do refugee women communicate their experiences of domestic violence to their adult daughters?
- What are the mechanisms of intergenerational transmission of domestic violence within refugee families living in Durban?

1.4 Research objectives

The main objective of this study was to explore the intergenerational transmission of domestic violence among refugee women from Burundi and the DRC living in Durban, South Africa, within family settings. The study focused specifically on refugee mothers and their adult daughters.

1.4.1 Primary research objectives

The specific research objectives of this study are the following:

- To explore the risk factors for intergenerational transmission of domestic violence within refugee families
- To explore what is transmitted in relation to domestic violence between refugee mothers and their adult daughters
- To explore the mechanisms of intergenerational transmission of domestic violence within refugee families between two generations of women in the same family
- To provide policy recommendations aligned to South Africa's NSP-GBVF, where issues of domestic violence in refugee families are concerned.

1.5 Brief research design and methodology overview

The study employed a qualitative embedded single case study research design, situated within an interpretivist paradigm. The study was conducted in Durban, a city within the KwaZulu-Natal province of South Africa. The study encompassed a sample of 30 mother-adult daughter pairs (total $n=60$) from Burundi and the DRC, which are both conflict-affected countries. Participants were selected via purposive sampling, adhering strictly to inclusion and exclusion

criteria detailed in Section 4.4.3.1. Eligibility criteria. The subsequent analysis involved thematic analysis and within-case analysis, as elaborated in Section 4.6 of Chapter 4. The outcomes of this data analysis are presented in Chapter 5. Rigour in research data was ensured through the application of Daniel's (2019) trustworthiness, auditability, credibility, and transferability (TACT) framework in Section 4.7, which discusses data verification techniques used in Chapter 4. The research process adhered to ethical protocols throughout, as detailed in Section 4.9 of Chapter 4.

1.6 Main assumptions

The study was guided by four main assumptions, which asserted that firstly, intergenerational transmission of domestic violence exists in refugee families. Secondly, refugee women play an indirect role in the transmission of violence within the family setting (Spencer, Stith and Cafferky, 2022). Thirdly, refugee women's transmission of domestic violence intergenerationally occurs through psychological and environmental mechanisms (Fletcher Gitter and Wilhelm, 2021; Heaton, 2015). Lastly, refugee women whose mothers have or had a history of abuse are vulnerable to becoming victims of domestic violence (Adams *et al.*, 2019; Borelli *et al.*, 2019; Eriksson and Mazerolle, 2015; Paixão *et al.*, 2015).

1.7 Clarification of concepts

The following are explanations of the concepts used in this study:

- **Domestic violence:** In this study, domestic violence is conceptualised as patterns of behaviour used to exert power and control over household members, including children, parents, intimate partners, and/or other adult individuals. Specifically, it refers to instances where violence occurs within a shared living space, focusing on interpersonal relationships among those living in the household (Burrill *et al.*, 2010).
- **Refugee:** The 1951 Refugee Convention defines a refugee as “someone who is unable or unwilling to return to their country of origin owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group, or political opinion” (in UNHCR, 2021).
- **Intergenerational transmission:** This refers to the intentional or unintentional transmission of characteristics and behaviours within a generation (horizontal transmission) or across generations (vertical transmission) (Brown, 2017; Branje *et al.*,

2020). Transmission occurs when parental traits are passed onto their children through genetic inheritance, psychological and socio-cultural transmission, or the interchange between genetics, psychological, and environmental mechanisms (Branje *et al.*, 2020).

- **Risk Factors:** These are characteristics at the individual, relationship, community, or societal level that increase vulnerability to negative outcomes, such as domestic violence (Centers for Disease Control and Prevention (CDC), 2021; Substance Abuse and Mental Health Services Administration (SAMHSA), n.d.)
- **Mechanisms of transmission:** In this study, mechanisms of transmission refer to developmental processes that occur both within the individual (genetic, also referred to as neurobiological and psychodynamic) and outside the individual (social information processing) that explain how characteristics are passed from one generation to the next (Berlin *et al.*, 2011; Dorsey, 2022; Ehrensaft and Langhinrichsen-Rohling, 2020; Lehrner and Yehuda, 2018)

1.8 Presentation of the study

This research paper is divided into eight (8) chapters. The first chapter briefly explains the context in which the study was carried out, introduces the rationale for conducting the study, describes the objectives and research questions, and presents a concise overview of the research design utilised. Chapter 2 includes relevant literature and clearly defines and explains key concepts used in the study. This chapter also uses literature to argue for the necessity of this study. Chapter 3 presents the conceptual framework, which was developed using fundamental concepts derived from four theories integral to the study's execution and analysis. These theories encompass the Theory of Intergenerational Transmission of Violence, the Social Learning Theory, the Attachment Theory, and Heise's Ecological Model. Chapter 4 provides a detailed description of the design and methodology employed. Chapters 5, 6, and 7 outline the research's first, second, and third themes, respectively, along with their accompanying subthemes. These themes and subthemes were derived from the data analysis, and each chapter provides a comprehensive discussion of the findings, supported by relevant literature. The study is concluded with Chapter 8, which discusses the main conclusions of the study and its limitations. Lastly, in Chapter 8, the study provides well-founded recommendations for future research, intervention, and policy.

1.9 Conclusion

In this chapter, the problem that the study aims to solve is explained, providing the reader with a clear comprehension of the research rationale, its importance, and objectives. Moreover, the chapter introduces the subject of intergenerational transmission of domestic violence, specifying that the focus of the study is on refugee mothers and their adult daughters. The main assumptions of the study are also presented in the chapter, along with a brief outline of the research methodology. The next chapter discusses relevant literature related to the study phenomenon and the previously mentioned research questions.

CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

The previous chapter provided the contextual overview of this study and explained that the intergenerational transmission of domestic violence in refugee families is a serious problem that necessitates exploration. The chapter then provided the rationale and significance of the study, including the current gaps in literature, research questions, objectives, the main assumptions and an overview of the presentation of this thesis. This chapter examines and provides insight into the research previously conducted both nationally and internationally on domestic violence. The main aim of this literature review is to further rationalise the research problem through understanding the concept of domestic violence and more specifically its intergenerational transmission and the current gaps in the study of this phenomenon. The following steps were taken when conducting the literature review: 1) formulation of the research problem; 2) collection of relevant literature via scholarly peer-reviewed journals, books, internet sources, and e-books from various fields, including psychology, gender studies, criminology, social work, and public health; and 3) evaluation of the sourced literature based on their focus, methods, outcomes, and relevance to the focus of this study. The information gathered from the initial evaluation of available research was analysed and used to rationalise the research problem. It further helped identify significant gaps in the literature, which necessitate the need for the current study.

The literature is presented using the funnel approach, which includes the definition and provision of a general overview of domestic violence and a description of the global and South African trends of domestic violence. The phenomenon of domestic violence is then narrowed to specifically focus on refugee populations globally and in South Africa, and an argument supporting the dearth of literature on studies of domestic violence in South Africa, substantiated by revealing the prevalence of violence affecting refugee children and youth. Thereafter, an effort is made to explain childhood exposure to domestic violence and its intergenerational effects based on available literature. Furthermore, a review of literature that provides insights into the impacts of demographical, socio-cultural, and historical contexts of Burundi and the DRC in relation to the intergenerational transmission of domestic violence is conducted. This provides the reader with an understanding of the context in which study participants come from and highlights the literary, contextual, and methodological gaps in

some of these studies. Lastly, the chapter provides a brief discussion on both global and South African policies and pieces of legislation on domestic violence to elucidate the initiatives taken by governments and international organisations to combat domestic violence and other forms of violence against women and girls (VAWG).

The chapter concludes by providing a summary of the literature review and reminds the reader of the main aim of this chapter.

2.2 A critical analysis of global trends in domestic violence

Domestic violence predominantly afflicts women and children within the larger context of GBV (World Health Organization (WHO), 2021). This gendered violence, more specifically targeting women and girls, is labelled as VAWG. The global prevalence of VAWG is alarming, with the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women, 2023) estimating that about one in three or 736 million women have experienced physical and/or sexual violence by an intimate partner or non-partner at least once in their lifetime.

Barker's (2016) assertion that men are primarily responsible for VAWG needs to be critically examined within the broader contexts of societal norms, power structures, and cultural factors. Meanwhile, the United Nations' (UN) (2022) description of domestic violence, which is often interchangeably used with intimate partner violence, seems to narrowly focus on power dynamics within intimate relationships. Such definitions may inadvertently overlook broader dynamics of household violence, where one or more members of a household use controlling and punitive behaviours to establish dominance over others within the household (Burrill, Roberts and Thornberry, 2010; Rose, 2021). For this study, domestic violence is reconceptualised to encompass patterns of behaviours exerting power and control over household members, including children, parents, intimate partners, and/or other adult individuals – specifically instances where violence takes place in the context of shared living space and centred on interpersonal relationships within the household (Burrill *et al.*, 2010).

Although Sardinha *et al.* (2022) offer an expanded definition of intimate partner violence, this definition remains predominantly tied to marital and cohabitation contexts between intimate partners. Sardinha *et al.* (2022, p. 809) also explain that intimate partner violence consists of “physically, sexually, and psychologically harmful behaviours in the context of marriage,

cohabitation, or any other form of union, as well as emotional and economic abuse and controlling behaviours.”

To differentiate between distinct categories of offenders, researchers have developed various typologies of intimate partner violence (Boxall *et al.*, 2015). These typologies are contextualised differently and exhibit gendered differences between male and female offenders (Hardesty, 2009). For this study, the researcher will discuss the typologies of intimate partner violence as outlined by Johnson (2008) and Miller and Meloy (2006).

Johnson's typology of intimate partner violence includes:

1. **Intimate terrorism:** A pervasive pattern of both violent and non-violent tactics (such as isolation) used to control one's partner, typically perpetrated by men against female partners.
2. **Violent resistance:** Violence used, largely by women, in response to the violence and control imposed by their abusive male partners.
3. **Situational couple violence:** The most common form of intimate partner violence, occurs among married or cohabiting partners. This type of violence arises from specific situations or stressors and is not driven by a desire for control (Boxall *et al.*, 2015; Hardesty, 2009; Johnson, 2008; Nawaz and Johnson, 2024).

In contrast, Miller and Meloy's (2006, as cited in Boxall *et al.*, 2015) typology of intimate partner violence focuses primarily on female offenders includes:

1. **Generalised violent behaviour:** Violence not only directed at intimate partners but also at others, including children, family members, neighbours, acquaintances, and even strangers.
2. **Frustration response ('end of her rope'):** Occurs when women with violent partners mirror the same violent behaviour in an attempt to stop their partner's aggression.
3. **Defensive behaviour:** Occurs when women attempt to protect themselves or escape during violent incidents, particularly when children are present. This type of behaviour often emerges when women know their partner is about to become violent, and they act

in defense of themselves or their children. Women exhibiting defensive behaviour are more likely to leave violent relationships.

The broader umbrella of domestic violence covers a range of sub-categories, including intimate partner violence, child maltreatment and/ neglect, and elder abuse (Ribeiro *et al.*, 2022). Throughout this chapter, based on the wording used by scholars in different studies, the word intimate partner violence will be used to indicate domestic violence. Domestic violence, in the form of intimate partner violence, manifests in multiple intersecting forms such as physical, sexual, stalking, verbal, emotional, financial, and neglect (Apatinga, 2019; Chikhungu *et al.*, 2019; Haffeejee and Maksudi, 2020; Ribeiro *et al.*, 2022; WHO, 2020a). Moreover, the underlying psychological aggression and coercive tactics used to control a partner or others within households are crucial to acknowledge (Shakoor *et al.*, 2022; Weiser *et al.*, 2022). Thiel *et al.* (2022) broaden the discourse, arguing that domestic violence transcends the boundaries of race, age, ethnicity, socio-economic status, sexual orientation, and relationship type.

UN Women (2023) notes the dire ramifications of VAWG, highlighting concerning rates of femicide – the intentional murder of women. Data indicates that approximately 45,000 women and girls worldwide were killed by a family member or an intimate partner, which translates to more than five women or girls killed every hour by a family member, with 56% of these murders occurring in private spaces like the home (UN Women, 2023). These statistics demand rigorous scrutiny and action. However, predominant narratives largely centre on violence against women (VAW), with domestic violence being elevated as the primary concern (Thiel *et al.*, 2022). The linkage of women's heightened vulnerability to domestic violence is deeply entrenched patriarchal norms and often exacerbated by religious interpretations (Akangbe Tomisin, 2020; Dabby and Yoshihama, 2022; Mshweshwe, 2020; Sabri *et al.*, 2018; Carter, 2015).

According to Gupta, Madabushi and Gupta (2023), patriarchy can be loosely defined as men's oppression of women; however, the definition of patriarchy varies across different fields of study. Reviewing and using varied and complex definitions of the term is beyond the scope of this literature review, and as such, the above definition will be used for the purpose of this study. Carter (2015) posits that many societies are shaped by religious doctrines mandated by male authorities, where attitudes and systems ultimately promote male dominance as the norm. Patriarchy informs gender roles, positioning men as the dominant gender and primary financial and political actors in society, while relegating women to domestic roles designed to serve and

support men as their inferior counterparts (Wood *et al.*, 2021). Religious leaders have distorted religious scriptures by selecting texts that depict women as inherently subservient to men (Carter, 2015). Women's vulnerability to VAW, particularly domestic violence, is further increased by socio-cultural and economic factors, including community traditions, poverty, substance and alcohol abuse, exposure to domestic violence during childhood, social change, living in violent neighbourhoods, and educational level (Apatinga, 2019; Chikhungu *et al.*, 2019; Clark *et al.*, 2018; Sedziafa, Tenkorang and Owusu, 2018).

Bonea, Buligescu, and Mihai (2023) argue that societal norms underpinned by patriarchy promote and maintain domestic violence, a view supported by feminist perspectives. These perspectives argue that unequal power relations between men and women stem from familial patriarchy, which is reinforced by broader patriarchal societies (Bonea *et al.*, 2023; Lenton, 1995). Within families, societal power imbalances validate, encourage, and dictate when and how men can perpetrate violent behaviours in their homes against women and girls (Lenton, 1995). Patriarchal systems emphasize men's power and control over women, further perpetuating domestic violence (Nawaz and Johnson, 2024).

According to the WHO (2021), intimate partner violence affects 20% of women in the Western Pacific and 22% of women in high-income countries and Europe. The organisation also revealed that intimate partner violence affected 25% of women in the WHO's Regions of the Americas, 33% in the WHO's African region, 31% in the WHO's Eastern Mediterranean region, and 33% in the WHO's South-East Asia region. Balde *et al.* (2022) explain that Africa and the Eastern Mediterranean are most affected by intimate partner violence based on this 2018 report by the WHO. It is essential to approach these statistics with caution, especially considering that the definition of domestic violence varies across organisations and studies, particularly in this current study, as the above statistics are aligned more with intimate partner violence definitions. Lastly, domestic violence violates women's fundamental rights as acknowledged by the 1993 UN General Assembly, which enshrined these rights in Article 3 of the Declaration on the Elimination of Violence against Women (The Office of the High Commissioner for Human Rights (OHCHR), 2022). For the purposes of this study, the below rights are noted:

- The right to life;
- The right to liberty and security of person;
- The right to equal protection under the law;

- The right to the highest standard attainable of physical and mental health;
- The right not to be subjected to torture or other cruel, inhuman, or degrading treatment or punishment.

The infringement of domestic violence on women's fundamental rights (Khan, Sackeyfio and Paraketsova, 2020) is not just a statistic but a call for structural and systemic change.

2.3 Domestic violence in South Africa: An analytical perspective on prevalence and trends

The issue of domestic violence in South Africa, including femicide, warrants serious attention. Existing statistics and literature place South Africa's domestic violence rates among the highest globally (Ramoshaba and Singwane, 2023; OHCHR, 2021). Naidoo and Van Hout (2022) emphasise South Africa's societal struggle with violence, especially against its women and children. This deep-rooted issue appears to be increasingly normalised, with many accepting it as an ingrained societal norm. Supporting this claim, the WHO (2018) documented that a staggering 60 000 women and children are affected by domestic violence in South Africa annually. A recent report by Statistics South Africa (Stats SA, 2022) revealed disturbing details: 39.7% of women aged 18 and older have experienced physical abuse at the hands of a partner, and 16.4% of divorced or separated women face sexual abuse. Additionally, 31.3% and 10.1% of cohabiting women experience physical and sexual abuse, respectively. In comparison, married women reported 14.3% for physical abuse and a lower 4.1% for sexual abuse (Stats SA, 2022).

The data also highlighted regional disparities, with the Eastern Cape having the highest rates of physical VAW aged 18 and older (31.4%), followed by the North West (29.5%) and Mpumalanga (26.4%). In contrast, KwaZulu-Natal and Limpopo reported the lowest percentages of physical violence at 13.7% and 14.2%, respectively. Sexual violence was most prevalent in the North West, with a rate of 11.8% (Stats SA, 2022). Domestic violence in the form of child maltreatment and/or neglect is pervasive throughout South Africa (Titi *et al.*, 2022). Stats SA (2022) reported that in 2021, children accounted for 20.7 million of the country's population, and of these children, 61.5% resided in extended households, while 36.5% lived in nuclear households. Unfortunately, a large number of these children experience abuse from their parents, caregivers, or other family members.

Domestic violence in South Africa has had profound negative consequences on the country's socio-economic, health, and justice systems (Mshweshwe, 2020). The high prevalence of domestic violence can be traced back to the historical legacy of apartheid (historical trauma), which exacerbated issues such as poverty, inequality (including gender inequality), and violence, all of which have become deeply ingrained in the fabric of South Africa's society (Naidoo and Van Hout, 2022). Additionally, the declining trust in governing systems and negative socio-cultural norms persist in South Africa, perpetuating a cycle of violence (Artz *et al.*, 2016; Naidoo and Van Hout, 2022). Naidoo and Van Hout (2022) further explain that the intergenerational impact of witnessing violence, deeply rooted in the country's violent history, has led to the normalisation and widespread acceptance of violence within families. This has been cited by domestic violence experts as one of the primary reasons for the failure of many strategies implemented to reduce domestic violence incidents in South Africa (Jewkes and Morrell, 2018; Mshweshwe, 2020; Rakubu and Olofinbiyi, 2022).

In 2016, the Optimus study provided the first nationally representative data on child maltreatment in South Africa, encompassing sexual, physical, and emotional abuse and neglect (Artz *et al.*, 2016; Titi *et al.*, 2022; Ward *et al.*, 2018). The study unveiled alarming statistics, with 42.2% of children experiencing some form of maltreatment. Notably, an even higher proportion, 82%, of children in South Africa reportedly experienced victimisation, which included exposure to family or community violence and criminal victimisation (Artz *et al.*, 2016). Specifically, the study found that 35.4% of children had experienced sexual abuse, 34.8% had been subjected to physical violence, 26.1% had endured emotional abuse, and 15% had suffered neglect. Family violence was also prevalent, with 24.6% of respondents reporting exposure to some form of family violence in their lifetime, with females (27.8%) experiencing it at a higher rate than males (22%) (Artz *et al.*, 2016; Ward *et al.*, 2018). Interestingly, the study found a minor difference between urban and rural areas concerning exposure to domestic violence, as 14.9% of respondents reported experiencing some form of family violence, regardless of their location (Artz *et al.*, 2016). Titi *et al.* (2022) also observed in Ritcher *et al.*'s (2018) longitudinal study titled "Birth to Thirty", that 25% to 45% of children in South Africa witnessed domestic violence committed by their mothers' intimate partner.

Empirical research surrounding domestic violence, particularly in relation to child maltreatment, has been widely researched in South Africa among South African children and youth. However, there are major literature and contextual gaps in comprehensive studies that

focus on the prevalence of child maltreatment among refugee children and youth populations in South Africa. Although the current study focuses on refugee women, the use of two generations of women, with the second generation consisting of young women who grew up in South Africa, might provide both a literary and contextual understanding of child maltreatment based on participants' lived experiences. This will also provide evidence on the nature and prevalence of child maltreatment and neglect in this vulnerable and marginalised community within the context of domestic violence.

2.4 Prevalence of domestic violence in refugee populations

This subsection offers an overview of the definition of refugees and discusses current literature on the prevalence of domestic violence in refugee populations internationally, as well as within the South African context.

2.4.1 Contextualising migration and defining refugees

According to Nail (2015), the 21st century is poised to become the era of migration. This is because it is in this era that migration is influenced by factors such as economic, environmental, and political insecurities. Nail (2015) also explains that the turn of this century has seen an unprecedented number of people moving within countries, regions, and internationally compared to any other time in recorded history. This study will focus on international migration, categorising it into voluntary and forced movements, with a primary emphasis on the latter. Voluntary migration, as Bauer (2023) posits, involves the wilful decision of individuals to relocate, often spurred by economic prospects. In contrast, the International Association for the Study of Forced Migration (IASFM) (in Becker and Ferrara (2019) explains that forced migration is driven by dire circumstances – ranging from conflicts, famine, environmental, chemical, or nuclear catastrophes. According to Banjo (2023), the UNHCR in 2022 reported that an estimated 108 million people globally were forcibly displaced from their countries due to war, civil conflict, persecution, conflict, human rights violations, and natural disasters associated with climate change. This was almost 20 million more people than the previous year, 2021.

Forcibly displaced people in this review are referred to as refugees and are the focus group of this study. The UNHCR (2016), in Article 1 of the 1951 UN Refugee Convention, defines refugees as:

“a person who is outside his/her country of nationality or habitual residence; has a well-founded fear of persecution because of his/her race, religion, nationality, membership in a particular social group or political opinion; and is unable or unwilling to avail himself/herself of the protection of that country, or to return there, for fear of persecution”.

This study will also include asylum seekers in the formal definition of refugees, as asylum seekers are legally distinguished individuals applying for refugee status and declare themselves refugees on arrival in the host country (Barakamfitye, 2017).

2.4.2 The prevalence of domestic violence in refugee populations globally

In relation to domestic violence in refugee populations, it is believed that the risk, severity, and prevalence of domestic violence are much greater for refugee women as compared to their local counterparts (Timshel *et al.*, 2017; Zannettino, 2012). These authors explain that the few studies that exist on domestic violence affecting refugee women and children estimate that it affects 30-50% of the refugee population globally. Refugee women in host countries, in the context of domestic violence, experience high levels of sexual, physical, verbal, emotional, and financial abuse (Ghafournia, 2011).

There are numerous intersecting risk factors that make refugee women especially vulnerable to abuse including entrenched gender inequalities, linguistic barriers, economic dependencies, cultural disorientations, isolation, socio-institutional marginalisation, and legal uncertainties in host nations (Fineran and Kohli, 2020; Ghafournia, 2011; Haffejee and Maksudi, 2020; Njie-Carr *et al.*, 2021; Wachter, Dalpe and Heffron, 2019). Further compounding these vulnerabilities are mental health ramifications stemming from the traumas of war, displacement, and encampment, with many women manifesting symptoms of post-traumatic stress disorder (PTSD), depression, and anxiety (Timshel *et al.*, 2017; Zannettino, 2012).

The experiences of refugees in different host countries vary. For instance, Filipino women in Australia were found to be six times more vulnerable to domestic violence-induced homicide than their Australian peers (Ghafournia, 2011). In their study on Liberian women's experiences of domestic violence in South Australia, Zannettino (2012) found that participants experienced high levels of domestic violence. Their experiences were perpetuated by factors including, but not limited to, the need to uphold cultural and traditional practices, especially those associated with gender roles. In addition to beliefs surrounding marital rape, acceptability of violence

within the home, poverty, fears of the Australian criminal justice system and deportation, and, most significantly, dishonouring the family by seeking help (breaking of the family). A study by Kalunta-Crumpton (2017) revealed that despite living in the United States of America for years, many Nigerian immigrant women refused to leave nor initiate divorce as victims of intimate partner violence due to traditional and cultural restrictions on women leaving violent marriages. A study by Liebling *et al.* (2020) on South Sudanese refugee survivors of SGBV and torture revealed that domestic violence is common in Ugandan refugee settlements, which was due to the prevailing acceptance of violence in South Sudan communities and families. However, the study revealed that domestic violence experienced by women was reportedly worse in the settlements than in South Sudan.

2.4.3 The prevalence of domestic violence in refugee populations in South Africa

Despite extensive research on the prevalence of domestic violence in refugee populations in high, middle, and low-income countries, significant gaps persist in the understanding of the prevalence and nature of domestic violence in refugee populations in South Africa. This includes literary, contextual, and methodological gaps related to the intergenerational transmission of domestic violence in refugee families in South Africa.

Currently, most of the literature on refugees' lived experiences in South Africa focuses on institutional and interpersonal violence outside the home, particularly in the form of xenophobia (Idemudia, 2017; Knight, 2008; Olofinbiyi, 2022; Suleman, Garber and Rutkow, 2018; Vromans *et al.*, 2011; Waiganjo, 2018; Zihindula, Meyer-Weitz and Akintola, 2017). Studies that examine domestic violence in the form of intimate partner violence often concentrate on other phenomena, such as HIV among refugees in the country, which indirectly uncover intimate partner violence experienced by women in this vulnerable population. For example, a study on risk factors associated with the acquisition of HIV among refugee women in Durban, South Africa, found that all 12 participants experienced one or multiple forms of intimate partner violence (Haffejee and Maksudi, 2020). Similarly, another study by Memela (2014) on the vulnerabilities of African refugee women in a low-income community in Durban's central business district (CBD) found that intimate partner violence was identified as a direct consequence of women's perceived insecurity in the country, perpetuated by institutional marginalisation and stigmatisation. Additionally, Kenge's (2017) study on the experiences of Congolese refugee women found instances of domestic violence in the form of

physical and sexual abuse, with the latter including the sexual abuse of young girls within the home.

2.5 Childhood exposure to domestic violence and its intergenerational transmission effects

Intergenerational transmission refers to the intentional or unintentional (conscious and unconscious) transmission of characteristics and behaviours continually within or across generations (Brown, 2017; Branje *et al.*, 2020). Grønhøj and Thøgersen (2009) explain that intangible things such as attitudes, norms, behaviours, and beliefs held are generally what are transmitted within a family. The intergenerational transmission of domestic violence refers to a pattern of violence within the home that persists across “an individual’s life course and across multiple generations” (Leinberger, 2018). Understanding the intergenerational transmission of domestic violence requires exploring the psychosocial mechanisms, both psychological and environmental mechanisms (see Section 3.2.1.2.2. Psychological *mechanisms* 3.2.1.2.3. *Environmental mechanism*), involved, particularly through childhood exposure.

The term ‘exposure’, as opposed to ‘observe’ or ‘witness’, encompasses a broader range of children’s experiences. To delineate this, Holden’s (2003) taxonomy of exposure is instrumental. Holden categorises ten types of exposure to domestic violence, which he identifies and explains in detail. The first six types represent direct involvement in domestic violence incidents. These include prenatal exposure, where domestic violence during pregnancy affects the developing foetus; children intervening in incidents of violence; victimisation of the child; child participation in the violence; observing interparental partner violence; and overhearing incidents of interparental partner violence within the home. The remaining four types pertain to indirect experiences of domestic violence. These involve observing the initial effects of violence, experiencing its aftermath, hearing about violent incidents, and cases where the child is ostensibly unaware of the violence (Haselschwerdt, Savasuk-Luxton, and Hlavaty, 2019a; Haselschwerdt *et al.*, 2019b; Holden, 2003). Holden’s framework offers a comprehensive understanding of the different ways in which children can be exposed to domestic violence, elucidating the nuanced nature of domestic violence exposure and its potential impact across generations.

An interesting concept related to childhood exposure in this study is dual exposure, also referred to as co-occurrence. Dual exposure¹ specifically refers to instances where domestic violence overlaps with direct child maltreatment and neglect, highlighting a scenario where children are subjected to both witnessing violence within the family and being direct victims of maltreatment and/or neglect themselves (Haselschwerdt *et al.*, 2019a; 2019b).

According to Sousa *et al.* (2011), there is strong evidence that illustrates the co-occurrence of child abuse and exposure to domestic violence by as much as 30-60%. Co-occurrence is conceptualised by Jouriles *et al.* (2008) as a phenomenon that occurs as follows:

- a) Within the individual – for example, a husband abusing his wife and child/children,
- b) Across individuals within a home – for example, husband abuses wife, and wife abuses child/ children, or
- c) When both the above-mentioned occur within a household where the husband abuses their wife and child/children, and a child/children are abused by both parents.

2.5.1 Adverse childhood experiences (ACEs)

According to Gartland *et al.* (2019), adverse childhood experiences (ACEs), such as exposure to domestic violence, including interparental partner violence or poor maternal physical and mental health, negatively impact children's mental health and development, leading to adverse outcomes later in life. The authors explain that this has serious and significant implications for their long-term health and functioning. Some of these long-term health problems often manifest in adulthood, both physically and mentally. Physical issues may include headaches, diabetes, heart disease, and gastrointestinal and respiratory problems, while mental health problems such as depression, PTSD, anxiety, substance use, self-harm, and suicidal ideation are also common (Gartland *et al.*, 2019; Genç, 2021; Wadji *et al.*, 2020). According to Alexander (2014), psychologists Sigmund Freud and Pierre Janet argued that chronic non-communicable health problems observed in women were attributable to trauma, whether past or present, rather than somatic causes, as believed by others in the late 19th century. Additionally, Fredland *et al.* (2018) highlight that over the past five decades, researchers have demonstrated that women who experience violence, especially multiple forms of violence, are at greater risk for both physical and mental health problems. Alexander (2014) states that there is often a failure of

¹The terms 'dual exposure' and 'co-occurrence' will be used interchangeably throughout this thesis.

traumatised parents to protect their children from perpetrators. As a result, even though child maltreatment may not exist in a generation, the effects of a parent's history of and exposure to domestic violence and maltreatment may present itself in helpless and hostile parenting. There are a string of alternating intergenerational sequences of abuse that are fairly common (Alexander, 2014). For instance, sexual abuse or neglect perpetuated by a parent may lead to anxiety and/or depression in a child but not necessarily abuse or neglect later in adulthood, which could lead to aggression in future generations (Alexander, 2014).

Children exposed to domestic violence and child maltreatment are at high risk for internalised and externalised problems later in life compared to children who were never exposed to domestic violence (Sousa *et al.*, 2011). According to Ports *et al.* (2020) early adverse experiences such as domestic violence in the forms of witnessing parental intimate partner violence, experiencing child maltreatment and/or neglect, have a significant impact on an individual's overall development. This can be observed throughout an individual's life, affecting their social and psychological development as well as health outcomes, including brain development, disease risk, and cognitive impairment (Ports *et al.*, 2020). ACEs often lead to internalised (psychological/emotional) and externalised (behavioural) problems, which are associated with negative social and health outcomes that can have intergenerational effects (Ports *et al.*, 2020).

The term 'externalising problems' can be described as expressions of psychological and/or emotional maladjustments that are outwardly projected in children, adolescents and adults, which present themselves in problematic behaviours, also referred to as antisocial behaviours, that cause discomfort or conflict with others and are often done to harm them (Ortuño-Sierra *et al.*, 2017). These behaviours include aggression; criminal/delinquent behaviours, such as alcohol and substance abuse, often used as coping mechanisms; fighting; theft; bullying; verbal and non-verbal intimidation; showing disrespect to one's parents and teachers; destruction of property; unsafe sexual behaviours; sexual abuse; and humiliation (Barakamfitye, 2017; Ortuño-Sierra *et al.*, 2017). Individuals who witnessed parental intimate partner violence and were also victims of child maltreatment and/or neglect are more likely to become victims or perpetrators of sexual and dating violence in adolescence (Southern and Sullivan, 2021). The authors explain that such individuals are likely to continue the intergenerational transmission of domestic violence by repeating patterns they witnessed and experienced while growing up.

As a result, most of these individuals resort to substance abuse to cope with their childhood and current experiences (Southern and Sullivan, 2021).

‘Internalising problems’, on the other hand, are problems that are described as low-frequency internalised emotions (Ortuño-Sierra *et al.*, 2017). These problematic emotions generate distress within the individual and present as anxiety, depression, PTSD, social isolation, withdrawal, fear, anger, and worry (Barakamfitye, 2017; Genç, 2021; Ortuño-Sierra *et al.*, 2017). Southern and Sullivan (2021) explain that victims of domestic violence are negatively impacted by their ACEs, which may result in poor self-regulation as well as intergenerational transmission of domestic violence due to dysfunctional relationships.

2.6 Legacy of violence: the intergenerational transmission of domestic violence in conflict-affected Burundi and the Democratic Republic of Congo

This subsection provides a brief understanding of Burundi and the DRCs ‘shared’ colonial histories and their subsequent post-colonial conflicts and the negative effects of colonialisation on the people of Burundi and the DRC. These effects will include a discussion on the intergeneration of domestic violence in these two societies.

2.6.1 Burundi

This subsection discusses Burundi.

- *2.6.1.1 Socio-cultural and historical overview and demographic context*

Burundi, nestled on Lake Tanganyika’s shores, is a small landlocked country in Central East Africa and forms part of the Great Lake Region (GLR) alongside neighbouring countries: DRC, Rwanda, and Uganda (Charak *et al.*, 2021; Mertens, Perazzonne and Mwambari, 2022; Weilenmann, 2022). Burundi has a population of 12.3 million, with women constituting approximately 50.7% of the population (Maksudi, 2022; Weilenmann, 2022). Burundi’s demographics reveal a predominantly young population with 45.1% aged 0-14 years, 54.4% aged 15-64 years, and a mere 2.5% aged above 65 years (Maksudi, 2022). Socio-culturally, Burundi is characterised as a patriarchal society (Nintunze and Bigirimana, 2021). Basse and Kwizera (2017) state that the Burundian society is governed by patriarchal gender norms. Gender norms are defined by Weber *et al.* (2019, p. 2455) as “spoken and unspoken rules of societies about the acceptable behaviours of girls, boys, women, and men on how they should act, look, and even think and feel”. These norms are centred around the country’s patrilineal

culture, which allocates social, political, and economic authority and dominance to men, particularly husbands at the family level. Husbands in Burundian society are the ones who make all the important decisions within their homes and are the primary providers for their families (Basse and Kwizera, 2017). Women, in contrast, hold an inferior position in the family and society, are expected to be subordinate and submissive to their husbands and have their primary roles restricted to submitting to their husband's sexual needs, childcare, and domestic work (Basse and Kwizera, 2017; Iradukunda *et al.*, 2019; Iyakaremye, Musabyimana and Umutoni, 2019; Sinha and Djankov, 2023).

Historically, Burundi's socio-political landscape has been marred by chronic cycles of ethnic and political conflicts, particularly between the Hutu majority and the Tutsi minority (Berckmoes, De Jong and Reis, 2017; Wittig, 2016). This turbulent past has subsequently positioned Burundi as one of the world's poorest nations, currently positioned as the second poorest country after South Sudan (Lambourne and Niyonzima, 2016; Ventura, 2023). The roots of conflict in Burundi can be traced back to its post-colonial era, with recurrent political and ethnic violence, notably the most recent occurring in 2015 (Turner, 2021). However, to grasp the depth of this ethnic discord, it is pivotal to understand Burundi's historical trajectory. Pre-colonially, Burundi was a kingdom characterised by socio-political hierarchies rather than ethnic disparities, although both were often aligned. The Hutus (85%), Tutsis (14%), and Twa (1%)² coexisted relatively peacefully under a monarchical regime that wielded uncontested authority, establishing Burundi as one of the GLR's most formidable kingdoms (Lambourne and Niyonzima, 2016; Nkurunziza, 2023).

Colonialism, however, brought about a paradigm shift in this dynamic. Initially under German control in 1885 and later ceded to Belgium post World War I in 1916, the colonial era ushered in the divisive tactic of 'divide and conquer' (Zikomangane, 2021). Nkurunziza (2023) illustrates how Belgians recast Hutus and Tutsis, originally social groupings, into racial categories. This reclassification eroded Burundi's secular identity, exacerbating the polarisation between Hutus and Tutsis – a division that resonates even today. Despite this induced division, the political system in Burundi remained fairly balanced across ethnic lines

² These are contemporary statistical figures (Mwiza and Okinedo, 2018).

during colonial rule, contrasting sharply with its neighbour, Rwanda, Burundi's false twin (Braeckman, 2011; Lambourne and Niyonzima, 2016).

- *2.6.1.2 Colonial influence on Burundi's ethno-political dynamics*

In both Burundi and Rwanda, colonial interventions significantly altered the traditional administrative landscape. Colonial powers systematically dethroned Kings, substituting them with chiefs under their direct control (Mwiza and Okinedo, 2018). The Tutsi minority, a strategic choice by the Belgians, occupied these pivotal roles, essentially becoming conduits of colonial administration in both nations (Mwiza and Okinedo, 2018; Nkurunziza, 2023).

Central to this divisive strategy was the Hamitic hypothesis, which is drawn from a blend of flawed biological and anthropological perspectives and served as the cornerstone for the colonialists' pseudo-scientific justifications, both for their colonisation of the region and for the ensuing divisions they instigated among the native populations (Palmer, 2018). Rooted in Biblical genealogy, the hypothesis contended that African civilisations were the descendants of Ham, Noah's son, originating from the Middle East (Chrétien, 2003 in Palmer, 2018). Based on this hypothesis, Tutsis were portrayed in a notably favourable light. Described as intelligent, refined, and inherently fit for leadership, they were physically characterised by their height, slender build, and supposedly Caucasian features, such as straight noses, thin lips, and high foreheads (Palmer, 2018). This contrasted sharply with the portrayal of the Hutus, who were depicted with broader noses, thicker lips, and shorter stature, aligning more with Bantu characteristics. Additionally, Hutus were stereotypically labelled as timid, dishonest, and lazy, further justifying the Belgians' imposed subservient status on them (Palmer, 2017). The Twa, accounting for a minor percentage of the population, were unfortunately reduced to near-animalistic depictions, often linked with derogatory connotations of being short and pygmy-like (Palmer, 2017).

As a direct consequence of this narrative, the Tutsis were elevated to a superior position over both Hutus and Twas. This racial and ethnic hierarchy manifested in tangible ways: Tutsis were appointed chiefs and sub-chiefs throughout the country, concentrating administrative powers within their ethnic group (Dezalay, 2020; Palmer, 2017). The repercussions of this divisive hierarchy were profound, sowing the seeds of tribal and ethnic discord that persistently plagued communities across Burundi and continues to shape its socio-political landscape (Lambourne and Niyonzima, 2016; Nkurunziza, 2023).

- 2.6.1.3 *Post-independence Burundi: A timeline of turbulence and violence*

Burundi's trajectory since gaining independence from Belgium in 1962 has been marred by political instability, punctuated by recurring bouts of ethnically fuelled violence (Daley and Popplewell, 2016). Burundi has experienced political violence enmeshed in ethnic conflicts with manifold roots. Lambourne and Niyonzima (2016) point out that one significant factor was the internal fragmentation within the Hutu rebel movement. This fragmentation led to the emergence of multiple rebel factions challenging the Tutsi-dominated security forces and local Tutsi militias. Concurrently, internal rifts among the Tutsi elite further exacerbated the aggressive pursuit of political power. The magnitude and nature of the ensuing political and ethnic violence draw haunting parallels to the infamous Rwandan genocide of 1994 (Daley and Popplewell, 2016; Dezalay, 2020). The chronological sequence of events related to violence in the country led to approximately 200 000 casualties in 1972 and another 20 000 casualties in August 1988. From 1993 to 2000, a civil conflict resulted in estimated casualties ranging from 200 000 to 500 000. This period led over 1.2 million Burundians to seek refuge in neighbouring countries, including Tanzania, Uganda, DRC, and Rwanda, with some who relocated to countries further south, such as Botswana, Namibia, Mozambique, and South Africa (Charak *et al.*, 2021; Daley and Popplewell, 2016). The political instability of 2015 further saw the displacement of nearly half a million Burundians (Purdeková and Birantamiye, 2023).

- 2.6.1.4 *Burundi's socio-cultural and historical contexts in relation to domestic violence and its intergenerational effects*

Burundi's socio-cultural and historical contexts are essential to understanding the intricate nature of women's encounters with violence, notably within households. Lambourne and Niyonzima (2016) note the cycles of violence in the country, from colonial times to the post-colonial period, including genocidal incidents, which have deeply affected both ethnic communities, resulting in trauma. According to Berckmoes *et al.* (2017), such traumas and violence extend beyond direct victims and influence family interactions. The widespread violence is reflected not just in wider society but also penetrates household environments, impacting men, women, and children alike. Sinha and Djankov (2023) explain that the country's decades-long civil war was responsible for increased incidents of domestic violence and marital rapes as many Burundian men were unable to provide for their families and thus turned to alcohol to cope with their inability to fulfil their gender roles. However, the literature

on domestic violence in Burundi remains scant, particularly studies that situate this violence within its socio-cultural and historical contexts.

However, the prevailing literature primarily emphasises intimate partner violence, although some mention domestic violence. This focus is largely based on the 2016-2017 Demographic and Health Survey (DHS), which sampled 7 366 women in Burundi aged 15-49 (Aboagye *et al.*, 2022a; Kiwuwa-Muyingo and Kadengya, 2022; Nzokirishaka and Palamuleni, 2023). Among married and cohabitating Burundian women, the prevalence of intimate partner violence stood at 48.4%. This rate ranked sixth highest among the 24 sub-Saharan African countries surveyed by the DHS (Aboagye *et al.*, 2022). In a study analysing data from the DHS across six East African countries, Kiwuwa-Muyingo and Kadengya (2022) found that Burundian women had the fourth highest prevalence of intimate partner violence at 31.5%. Notably, Burundi recorded the highest rates of sexual abuse against women by an intimate partner, standing at 18.4%, while the rates for physical and emotional abuse by intimate partners were 17.6% and 16.5%, respectively. Nandi *et al.* (2017) conducted a study on Burundian soldiers who returned from foreign deployment to assess the prevalence of domestic violence among them, specifically intimate partner violence and child abuse. Findings indicated that a staggering 96% of these soldiers experienced physical or psychological abuse during childhood. Additionally, 34% reported experiencing verbal abuse, with 12% having been threatened with death. The study highlighted that soldiers who were exposed to family violence during their childhood were more likely to perpetrate violence against their children. Additionally, exposure to family violence combined with depression associated with their work and previous exposure to family violence increased the risk for the soldiers' perpetuation of intimate partner violence. However, the study lacked clarity on whether the reported childhood family violence was strictly within immediate families (in the home) or extended to the larger family unit.

The few studies available on domestic violence in Burundi explain that the phenomenon is not only pervasive but also an acceptable and normal part of family life (Basse and Kwizera, 2017; Sinha and Djankov, 2023). This is largely because of the socio-cultural norms found within the country's gender norms, which influence Burundian men and women's attitudinal acceptance of intimate partner violence (Basse and Kwizera, 2017). Childhood exposure to domestic violence (i.e. dual exposure) has also been found to be a key factor in the acceptance of

domestic violence in Burundi, particularly intimate partner violence (Nzokirishaka and Palamuleni, 2023).

Nandi *et al.*'s (2017) research points to the intergenerational effects of past exposure to domestic violence. Domestic violence adversely affects both adults and children's physical and mental health and can perpetuate violent cycles, as discussed by Berckmoes *et al.* (2017). Despite Burundi's history of violence and its impact on families, notably regarding domestic violence, there is a notable scarcity of studies focusing on the intergenerational transmission of domestic violence in the country. Only three studies have explored intergenerational transmission of violence in Burundi, including a significant study by Crombach and Bambonyé (2015) that assessed a single generation's experiences of childhood maltreatment and its connection to intimate partner violence and child abuse. Sampling 141 men and 141 women, the research revealed that childhood maltreatment and perceived intimidation from an intimate partner strongly predicted the perpetration of violence against one's own children. Moreover, women who had faced violence from their partners were more inclined to be violent towards their children.

Another study by Berckmoes *et al.* (2017) studied 74 Burundian households across three provinces, comprising 15 men, 59 women, and 74 children aged 5 to 20. The research delved into mother-child intergenerational transmission of violence and resilience. The study revealed that children whose caregivers experienced domestic violence during childhood in the form of maltreatment and neglect presented with antisocial behaviours. These women were reported to have trouble being resilient when faced with stresses within the family and the wider community.

The latest study by Charak *et al.* (2021) examined intergenerational maltreatment in 359 parent-child pairs from all 17 provinces in Burundi. Their study revealed high incidences of child maltreatment, such as emotional and physical abuse, and both emotional and physical neglect. Their findings indicate that 14.5% of parents experienced at least one type of maltreatment, while 44.5%, 25.1%, and 14.1% of parents experienced two, three, and four different types of child maltreatment, respectively. Findings from their children revealed that 12.3% reported exposure to one type of maltreatment or neglect, while 46.3%, 18.5%, 5.4%, and 5.7% reported exposure to two, three, four, or five types of child maltreatment, respectively, with the fifth being sexual abuse.

Violence is transmitted through psychosocial mechanisms in the form of socio-cultural norms and beliefs (social information processing) and individual psychological processes (Crombach and Bambonyé, 2015; Fletcher *et al.*, 2021; Nandi *et al.*, 2017; Charak *et al.*, 2021). Notably, the bulk of the current literature available on the intergenerational transmission of domestic violence in Burundi is quantitative, which lacks rich insights into the experiences and mechanisms that continue to perpetuate the cycles of domestic violence in Burundi. While some studies use a qualitative approach these studies also focus on different phenomena. For example, the study by Berckmoes and Reis (2018) focuses on children's antisocial behaviours based on their exposure to broader societal violence. While a study by Berckmoes *et al.* (2017) focuses on caregiving in relation to reproducing cycles of violence (domestic and other interpersonal violence) and resilience, with limited insight into the influence of past exposure to domestic violence in the transmission of domestic violence.

Lastly, with regard to current literature on the prevalence of domestic violence in Burundi, much of the literature available has been conducted by international aid organisations and non-government organisations such as CARE International (Basse and Kwizera, 2017), the WHO, and the International Organisation for Migration (IOM).

2.6.2 The Democratic Republic of Congo

This subsection focuses on the Democratic Republic of Congo.

- **2.6.2.1 Socio-cultural and Historical overview and demographic context**

Located in Central Africa, the DRC is Africa's second-largest country after Algeria (World Bank, 2023; Emina, 2023). As of 2023, its population stands at 102 million, ranking as the fourth most populous in Africa and 15th globally (Emina, 2023). Notably, women make up 51% of the population, with 48% of them being girls under the age of 15 (UN Women, no date.). The DRC is endowed with an array of natural resources, including significant reserves of cobalt, diamonds, gold, uranium, and copper, alongside substantial hydropower potential, expansive arable land, rich biodiversity, and the world's second-largest rainforest (World Bank, 2023; Wong, 2012; UN Women, no date.; Mlambo, 2021). Despite these natural endowments, the DRC grapples with severe poverty, which is exacerbated by decades of dictatorship, political instability, and armed conflict. The DRC also ranks as the world's fifth poorest country, trailing behind Somalia, the Central African Republic, Burundi, and South Sudan (Mlambo, 2021; Ventura, 2023). Over 70% of the population (97 million) lives below

the poverty line despite the country's status as the leading global producer of cobalt and a major source of copper, which are minerals vital for electric vehicle production (Ventura, 2023). The roots of the DRC's economic challenges and underdevelopment are partly attributable to its colonial history, which is shared with countries such as Burundi under Belgian rule (Wong, 2012). Vinez (2017) asserts that understanding the impacts of colonialism is essential for comprehending its lasting socio-economic effects in former colonies, particularly domestic violence.

Socio-culturally, similar to Burundi, the DRC is a patriarchal society with rigid and discriminatory gender norms against women and girls (Rouichi, 2017). The DRC's patriarchal system encourages and maintains cultural beliefs and traditions where both women and men are socialised to adhere to gender norms that promote men as superior to women within the wider social context and the household (International Alliance of Women (IAW), 2020). Within the context of the home, women are expected to be subservient and submissive to their husbands. Men have all the decision-making power within the home, while women have limited to no autonomy in their marriage and are obliged to obey their husbands (Concern World, 2022).

The subsequent sections will provide a concise historical account of the DRC's colonial past and examine how colonialism and post-colonial regimes have perpetuated violence in addition to the socio-cultural context, focusing on the intergenerational transmission of domestic violence.

- *2.6.2.2 The Democratic Republic of Congo's colonial past and its influence on violence*

In 1885, at the Berlin West African Conference, King Leopold II of Belgium acquired the territory now known as the DRC, then named the Congo Free State (CFS) (Lowes and Montero, 2021; Nzongola-Ntalaja, 2013; Vanthemsche, 2012). King Leopold II persuaded the United States and European powers of his philanthropic intentions in the Congo, ostensibly aiming to end the slave trade in Central Africa (Lowes and Montero, 2021; Nzongola-Ntalaja, 2013; Roes, 2010; Vinez, 2017; Wong, 2012). However, Leopold's rule (1885-1908) was marked by brutal exploitation. The CFS, 80 times larger than Belgium, presented untapped opportunities, particularly following the discovery of rubber during the 20th century's rubber boom (Nzongola-Ntalaja, 2013; Vanthemsche, 2012; Vinez, 2017). Leopold granted large concessions to private companies, employing coercive methods to extract labour from the local

populace (Lowes and Montero, 2021; Roes, 2010; Vanthemsche, 2012; Wong, 2012). These methods included torture, murder, and other inhumane practices, forcing Indigenous Congolese people to produce rubber and other resources such as ivory (Wong, 2012). This regime, effectively a form of slavery, prioritised economic gain over human welfare and led to the deaths of approximately 10 million Congolese people (Mertens and Myrtilinen, 2019; Wong, 2012).

International outrage, fuelled by reports from missionaries, travellers, and former officials, alongside Belgium's financial issues, compelled the Belgian government to annex the CFS in 1908, renaming it the Belgian Congo (Roes, 2010; Vinez, 2017). Under Belgian rule, the country experienced a shift towards a more centralised administration. The colonial system, managed by the state, church, and private enterprises, provided limited education, which was focused on Christian morals and respect for colonial authority (Wong, 2012). Although physical violence against Indigenous populations decreased under the Belgian administration, new forms of oppression emerged. These included economic constraints, limited social mobility, and systematic racial discrimination (Roes, 2010). The colonial government maintained control through force, economic reforms, and suppression of armed resistance, perpetuating the marginalisation of Indigenous people within the economic system (De Heredia, 2019; Roes, 2010).

- 2.6.2.3 *Post-colonial history of the Democratic Republic of Congo*

After over 50 years of Belgian colonial rule, the DRC gained independence in June 1960, with Patrice Émery Lumumba as its first Prime Minister (De Groof, 2020; Kuklick, 2014; Mlambo, 2021; Nzongola-Ntalaja, 2013; Wong, 2012). However, the post-independence period was rife with turmoil, characterised by political, military, ethnic, and racial tensions (Mlambo, 2021). Lumumba, a staunch nationalist, was arrested within his first month in office and subsequently tortured and killed, an event that involved a collaboration between Belgium, the USA, and Lumumba's aide, General Joseph Desire Mobutu (Nzongola-Ntalaja, 2013; Pashi, 2013; De Witte, 2017). Following Lumumba's assassination, Joseph Kasavubu assumed power but was later ousted by Mobutu in a bloodless *coup d'état* in 1965 (Nzongola-Ntalaja, 2013; Mlambo, 2021; Pashi, 2013; Wong, 2012). Mobutu's three-decade dictatorship was marked by oppression, corruption, and widespread social issues such as inequality, poverty, and poor public services. Mobutu's regime collapsed in May 1997, when he was overthrown by Laurent-

Désiré Kabila's rebellion (Pashi, 2013; United Nations Economic Commission for Africa [UNECA], 2015).

Kabila renamed the country the DRC, but his reign was short-lived and disrupted by the outbreak of the Great War of Africa in 1998 (Tshimanga, 2021). This conflict, involving invasions by Rwanda, and Uganda into the DRC which resulted in significant territorial occupation which continued until 2003 (Tshimanga, 2021; Rustad, Østby and Nordås, 2016). After Kabila's assassination, his son, Joseph Kabila, assumed power, but the DRC continued to face persistent conflicts, especially in its eastern regions (UNECA, 2015). The long-standing armed conflict in the DRC has tragically led to the deaths of over two million civilians and the displacement of millions more, both internally and outside the DRC.

- *2.6.2.4 The prevalence of domestic violence in the Democratic Republic of Congo in family life*

The DRC is recognised as having one of the highest incidences of SGBV globally, a dire consequence of its prolonged political violence. This violence has manifested in various forms, including gang rape, forced marriage, mutilation of reproductive organs, and individual rape, predominantly affecting women, children, and some men, especially in Eastern DRC (Babalola, Gill-Bailey and Dodo, 2014; Heaton, 2015; Kelly *et al.*, 2012). While much of the SGBV in Eastern DRC is militarised, civilian-perpetrated crimes are also significant, including domestic violence. These include sexual violence, physical and psychological abuse, and coercive and controlling behaviour (Babalola *et al.*, 2014).

Research highlights the alarming prevalence of VAW in the DRC. Tiruneh *et al.* (2017) note that the DRC records some of the world's highest rates of VAW, with domestic violence being one of the most common types. This is due to the patriarchal nature of Congolese society, which has subsequently resulted in high rates of domestic violence, which is normalised and widely accepted by both men and women, especially when women fail in their domestic duties (Alawode *et al.*, 2023; Concern World, 2022; United Kingdom: Home Office, 2017). UN Women (no date) reports that approximately 52% of Congolese women have survived domestic violence, with 39% experiencing threats or injury from an intimate partner. In a study of 1 821 married or cohabiting women in the DRC, Tlapek (2015) found that 68.2% had endured sexual, emotional, and physical abuse by their partners. Valliant *et al.* (2020) discovered that nearly half of all women in North and South Kivu, DRC, reported physical and/or sexual intimate

partner violence, with over 60% experiencing emotional abuse from their partner. Literature on the prevalence and nature of domestic violence in the DRC, particularly literature which provides both data on the experiences of women as well as the prevalence of violence experienced by children within their homes, is scarce. Similar to Burundi, much of the current literature available on the prevalence of domestic violence experienced by women in the DRC is conducted by international aid organisations and non-government organisations such as Concern World, CARE International, and UN Women, with a few more conducted by researchers linked to both international organisations and universities.

Few studies have attempted to explore the intergenerational transmission of domestic violence in the DRC. A study by Falb *et al.* (2024) explains that life experiences of violence, including childhood exposure to parental intimate partner violence or physical abuse, can lead to the perpetuation of domestic violence across generations. Falb *et al.* (2024) found that over half of the families in Eastern DRC reported concurrent intimate partner VAW (60%) and child abuse, with almost 70% of women and almost 60% of men reporting high levels of violence during childhood, either as witnesses of parental intimate partner violence or direct victims of physical child abuse. A qualitative study by Falb *et al.* (2022) found that these cycles of violence in the Eastern DRC are sustained both within families and communities and are largely driven by entrenched social and gender norms, beliefs, and attitudes. These norms are related to the normalisation and acceptability of violence and the protection of family reputation, which are used as psychosocial mechanisms in the intergenerational transmission of domestic violence across generations.

2.6.3 Connecting the dots: Colonialism, armed conflict, and the intergenerational transmission of domestic violence in Burundi and the Democratic Republic of Congo

While this study primarily examines the intergenerational transmission of domestic violence among refugee families from Burundi and the DRC living in South Africa, it is crucial to understand the broader implications of colonialism's intergenerational effects. These effects manifest not only in the political violence experienced by the affected countries but also in the direct impact on domestic violence and its transgenerational transmission through psychological and environmental mechanisms. Belgium's colonial policies in Burundi and the DRC, based on racial categorisation and marginalisation, have been linked to several post-independence armed conflicts (Mannell, 2022). Historical trauma, a concept often overlooked in domestic violence discussions, refers to traumatic experiences, such as colonialism, that are

shared by a group and passed down through generations (Franco, 2021). This trauma, though not directly experienced by subsequent generations, profoundly affects them and is compounded by ongoing discrimination and oppression (Kirmayer, Gone and Moses, 2014; Mannell, 2022).

Colonialism significantly impacted African men's identity and their expression of power, often manifesting as violence within their families. Disempowered and disenfranchised by colonial socio-economic changes negatively affected African men's identity, social value, and self-esteem (Dery, 2019; Silberschmidt, 2001). Fanon's (1963) observation encapsulates this effect:

“Colonialism is not satisfied merely with holding a people in its grip and emptying the brain of all form and content. By a kind of perverted logic, it turns to the past of oppressed people, and distorts, disfigures, and destroys it”.

The mental presence of colonialism is especially difficult to eradicate and continues to affect generations, particularly in the form of intergenerational transmission of domestic violence (Mertens *et al.*, 2022). Additionally, the interplay of colonialism with patriarchal, religious, and knowledge systems has shaped African masculinities, influencing both male power and powerlessness in domestic violence, often conceptualising men as both recipients and perpetrators of violence, with VAWC being seen as an expression of their power (Ouzgane and Morell, 2005; Rowlands, 2021).

In addition to colonialism, armed conflicts similar to those experienced in Burundi and the DRC have been linked to an increased likelihood of men's VAWC in their homes (Devakumar *et al.*, 2021; Mannell, 2022). Nandi *et al.* (2017) identified former male soldiers' exposure to war trauma and childhood familial violence as predictors of domestic violence. Østby (2016) notes that armed conflict increases the risk of intimate partner VAW. These conflicts have shaped not only socio-economic factors associated with increased risk for domestic violence victimisation but also cultural and gender norms and values surrounding its acceptance. La Mattina and Shemyakina (2017) found that exposure to armed conflict during childhood, particularly between ages 6 and 10, was associated with higher rates of domestic violence acceptance among both men and women in sub-Saharan Africa.

Understanding the intergenerational transmission of domestic violence from these multifaceted perspectives offers a holistic view of how domestic violence continues across generations. This

highlights the deep-rooted and complex nature of this issue, particularly for people from conflict-affected countries such as Burundi and the DRC, particularly refugees from these countries.

2.7 Policy and legislation on DV globally and in South Africa

Globally, countries have adopted various laws and policies to address issues of domestic violence. A key international entity in formulating policies on VAW is UN Women. In 2012, UN Women released a handbook mandating states to implement laws, both internationally and nationally, to effectively address VAW. This legislative approach emphasises several strategies aimed at addressing all forms of VAW, including:

- prevention of violence through interventions;
- empowerment, support, and protection of victims; and
- criminalisation of all forms of VAW and effective punishment of perpetrators.

The African Union (AU) complements these efforts by aligning itself with the Maputo Protocol. This protocol firmly opposes practices detrimental to the growth and development of women and girls, advocating for the elimination of discrimination (AU, no date). Key aspects of this protocol include legislative measures against discriminatory and harmful practices, specifically *Article 2*. In *Article 2*, section 1 of the protocol highlights the actions states need to take to combat discrimination against women, which includes key legislative, institutional and other measures, namely:

- b) enact and effectively implement appropriate legislative or regulatory measures, including those prohibiting and curbing all forms of discrimination particularly those harmful practices which endanger the health and general well-being of women;
- d) take corrective and positive action in those areas where discrimination against women in law and in fact continues to exist;
- e) support the local, national, regional and continental initiatives directed at eradicating all forms of discrimination against women.

While in *section 2*. States Parties shall commit themselves to modify the social and cultural patterns of conduct of women and men through public education, information, education, and communication strategies, with a view to achieving the elimination of harmful cultural

and traditional practices and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for women and men.

Article 3 focuses on the right to dignity and highlights the following women's rights, namely: (2003, pp. 5-6):

1. Every woman shall have the right to dignity inherent in a human being and to the recognition and protection of her human and legal rights.
3. States Parties shall adopt and implement appropriate measures to prohibit any exploitation or degradation of women.
4. States Parties shall adopt and implement appropriate measures to ensure the protection of every woman's right to respect for her dignity and protection of women from all forms of violence, particularly sexual and verbal violence.

Article 4 of the protocol focuses on the rights to life, integrity, and security of the person and highlights the following (2003, pp. 6-7):

1. Every woman shall be entitled to respect for her life and the integrity and security of her person. All forms of exploitation, cruel, inhuman, or degrading punishment and treatment shall be prohibited.
2. States Parties shall take appropriate and effective measures to:
 - a) enact and enforce laws to prohibit all forms of VAW women including unwanted or forced sex whether the violence takes place in private or public;
 - b) adopt such other legislative, administrative, and social and economic measures as may be necessary to ensure the prevention, punishment and eradication of all forms of VAW;
 - c) identify the causes and consequences of VAW and take appropriate measures to prevent and eliminate such violence;
 - d) actively promote peace education through curricula and social communication in order to eradicate elements in traditional and cultural beliefs, practices and stereotypes which legitimise and exacerbate the persistence and tolerance of VAW;
 - e) punish the perpetrators of VAW and implement programmes for the rehabilitation of women victims;

- f) establish mechanisms and accessible services for effective information, rehabilitation and reparation for victims of VAW;
- i) provide adequate budgetary and other resources for the implementation and monitoring of actions aimed at preventing and eradicating VAW;
- j) ensure that, in those countries where the death penalty still exists, not to carry out death sentences on pregnant or nursing women;
- k) ensure that women and men enjoy equal rights in terms of access to refugee status determination procedures and that women refugees are accorded the full protection and benefits guaranteed under international refugee law, including their own identity and other documents.

Article 5 Elimination of Harmful Practices (2003, pp. 7-8)

State Parties shall prohibit and condemn all forms of harmful practices which negatively affect the human rights of women, contrary to recognised international standards. State Parties shall take all necessary legislative and other measures to eliminate such practices, including:

- a) creation of public awareness in all sectors of society regarding harmful practices through information, formal and informal education, and outreach programmes;
- b) prohibition, through legislative measures backed by sanctions, of all forms of female genital mutilation, scarification, medicalisation, and para-medicalisation of female genital mutilation and all other practices, in order to eradicate them;
- c) provision of necessary support to victims of harmful practices through basic services such as health services, legal and judicial support, emotional and psychological counselling as well as vocational training to make them self-supporting;
- d) protection of women who are at risk of being subjected to harmful practices or all other forms of violence, abuse, and intolerance.

In South Africa, two major laws address VAW. The Domestic Violence Act No 116 of 1998 (the DVA) and implemented by the Department of Social Development, is considered progressive (Mogale, Burns and Richter, 2012). First, the recognition of the DVA as the most progressive legislation is because it (a) recognises a wide range of VAW, (b) acknowledges that VAW can occur in a variety of familial and domestic relationships, (c) gives magistrates power to serve abusers with court orders and extend this to even the workplace of the victims, (d) compels the perpetrator to maintain the victim's finances while not staying in the same

house or accommodation, (e) disarms the respondent who is the perpetrator and offers police protection to the victim, (f) outlines the obligatory duties of the police, and (g) lays down penalties for failure to execute such duties.

In comparison the Criminal Law (Sexual Offences and Related Matters) Act No 32 of 2007 is administered by the Department of Justice and Constitutional Development, and does the following: (a) regulates all procedures, defences, and evidentiary rules in prosecution and adjudication of all sexual offences; (b) criminalises any form of sexual penetration, sexual violation without consent, irrespective of the gender of the victim; (c) criminalises exposure or display of child pornography and situations when an individual is forced or compelled to watch or witness certain sexual conduct; (d) criminalises sexual exploitation of children and mentally disabled persons; (e) provides a demarcation between the age of consent for consensual sexual acts between children aged 12 to 16 years; (f) provides special provisions in relation to the prosecution and adjudication of consensual sexual acts involving children up to 16 years of age; (g) criminalises any attempt, conspiracy, or incitement to commit a sexual offence; (h) provides the court with extra-territorial jurisdictions when hearing matters related to sexual offences; (i) it abolishes secondary traumatising of victims; (j) compels the perpetrator to be tested for HIV/AIDS; (k) gives the victim the right to receive Post-exposure Prophylaxis (PEP) treatment for HIV/AIDS; and lastly, (l) urges the establishment of one national register for sex offenders (Mogale *et al.*, 2012).

Furthermore, the South African Government has introduced the NSP-GBVF 2020-2030. This multi-sectoral strategy, involving both government and civil society stakeholders, aims to combat gender-based violence and femicide (GBV-F) in South Africa (NSP-GBVF, 2020). The plan recognises violence across diverse demographics and affirms access to services as a human right, including refugees who are considered a vulnerable group because of their refugee status (NSP-GBVF, 2020).

It is important to note that the legislation proposed by the AU and the South African government, specifically, the Maputo Protocol, the DVA, and the Sexual Offences and Related Matters Act; has failed to adequately protect women and girls from GBV, particularly domestic violence. In the case of the Maputo Protocol, several factors contribute to its inability to safeguard African women from domestic violence. Amani (2023) highlights that many African states have not sufficiently reformed discriminatory laws that uphold patriarchal and harmful gender norms, often influenced by religious and cultural beliefs. Similarly, in South Africa, a

range of issues, including patriarchal socio-cultural norms, inadequately trained police officers, court clerks, and magistrates, high caseloads, insufficient investigation of domestic violence cases by the police and the national prosecuting authority, and unclear performance targets for the NSP-GBVF indicators, have been identified as key reasons why the country has struggled to effectively combat domestic violence (Amnesty International South Africa, 2022; Rehse *et al.* 2021).

2.8 Conclusion

The aim of this chapter was to rationalise the research problem by contextually and methodologically arguing for the current gaps that exist in literature in an attempt to highlight the need for and significance of this study. This chapter discussed literature that explores the global and South African trends of domestic violence. Additionally, the chapter also presented literature on refugee women's vulnerabilities to domestic violence, which was discussed both internationally and within the South African context. The intergenerational transmission of domestic violence through psychosocial mechanisms in relation to childhood exposure and ACEs was also explained. A historical overview in relation to colonialism and armed conflict in Burundi and the DRC was provided, and their connection to the intergenerational transmission of domestic violence in the two countries was elaborated. Additionally, international and national policies and legislation, including the UN Women Handbook, the Maputo Protocol, the DVA, and the Sexual Offences and Related Matters Act, were discussed to highlight current legislative efforts to address GBV, particularly domestic violence. The chapter briefly addressed why these legislative frameworks have often failed to protect women and girls from domestic violence, especially in Africa and South Africa.

Lastly, this chapter highlighted the gaps in literature on the intergenerational transmission of domestic violence among refugee women in South Africa. The chapter that follows will present the conceptual framework that was used in this study to explore the intergenerational transmission of domestic violence in refugee families.

CHAPTER 3: CONCEPTUAL FRAMEWORK

3.1 Introduction

The preceding chapter presented an overview of the literature on current research on domestic violence and highlighted some of the gaps in research and argued for the significance and relevance of this study to fill those gaps. This chapter presents the conceptual framework, which is guided by the theory of intergenerational transmission of violence, underpinned by the social learning theory (Bandura, 1973), attachment theory (Bowlby, 1973), and Heise's ecological model (Heise, 1998, 2012). The conceptual framework then guided the development of the research questions and the methodological approaches and methods used, subsequently allowing for the rigour and credibility of the case study. This conceptual framework thus ensures a comprehensive understanding of the intergenerational transmission of domestic violence in refugee families (Collins and Stockton, 2018; Ravitch and Carl, 2019). The conceptual framework used in this study asserts the significance and contribution of the research, especially when examining the intergenerational transmission of domestic violence in refugee families, with specific focus on refugee women. This exploration draws upon concepts from formal theories grounded in the theory of intergenerational transmission (Ravitch and Riggan, 2016). In this case study, the conceptual framework therefore functions as a tentative theory in relation to the exploration of the intergenerational transmission of domestic violence among refugee women in this study (Ravitch and Riggan, 2016).

The chapter begins by providing a background on the intergenerational transmission of violence, followed by an explanation of the mechanisms of this transmission. Next is the conceptual framework, which is based on the theory of intergenerational transmission of violence and the three theories used to explain it. Thereafter, in-depth discussions of these theories and their relevance to the understanding of intergenerational transmission of domestic violence in refugee families – in relation to the risk factors for and mechanisms of the transmission of domestic violence are provided. Finally, the strength of this conceptual framework is argued to lie in its integrated approach to understanding the intergenerational transmission of domestic violence. By incorporating various concepts from the theories mentioned above, the study addresses the criticisms of these theories and provides a comprehensive understanding of the phenomenon. In conclusion, the chapter summarises the key points of the chapter and offers a brief preview of the proceeding chapter.

3.2 Background of intergenerational transmission of violence

According to Larkin (2004), the word *intergenerational* refers to different age groups or generations of people who are related or unrelated. This study focuses on the intergenerational transmission of domestic violence in refugee families, specifically among women. Intergenerational transmission refers to the intentional or unintentional (conscious and unconscious) transmission of characteristics and behaviours continually within or across generations (Brown, 2017; Branje *et al.*, 2020). Grønhøj and Thøgersen (2009) and Lochner (2008) explain that several attributes, including attitudes, norms, behaviours, and beliefs held within a family, are generally transmitted. According to Stein (2012), transmission can occur in one of three ways: 1) vertically over time from one generation to the next (cross-generational); 2) horizontally between group members within the same time period (within a generation); and 3) both vertically and horizontally. The intergenerational transmission of violence, or in the case of this study, domestic violence, refers to a pattern of violence within the home that persists across “an individual’s life course and across multiple generations” (Leinberger, 2018, p. vi).

The phenomenon of intergenerational transmission was first observed in the mid-1960s among the children and grandchildren of Holocaust survivors. Psychologists referred to this phenomenon as the intergenerational transmission of trauma, where trauma was passed down to future generations by those who directly experienced the traumatic Holocaust (Danieli, 1998; Dalgaard and Montgomery, 2015; Fraiberg, Adelson and Shapiro, 1975; Franco, 2021; Demos in Fromm, 2012; Yehuda and Lehrner, 2018; Zaman, 2020). According to Kogan (2012, p. 3), the 1970s showed a rise in great interest in the study of the transmission of trauma, particularly in relation to second-generation Holocaust survivors who had “grown up with, and taken in psychically, the parental generation that had encountered” the actual traumatic events. However, the concept of intergenerational transmission has been applied widely in research exploring different phenomena across different disciplines such as health, criminology, psychology, education, and sociology, including the transmission of poverty, health, psychopathology, attachment, education, domestic violence, intimate partner violence, parenting, childhood maltreatment, and collective trauma (Anderson *et al.*, 2018; Antle *et al.*, 2020; Behrman *et al.*, 2017; Besemer, 2017; Brown, 2017; Buisman *et al.*, 2020; Erten and Keskin, 2020; Feldman, 2022; Kanwal Aslam, Zaheer and Shafique, 2015; Leis and

Mendelson, 2010; Meinck *et al.*, 2023; Schulkind, 2017; Verhage *et al.*, 2018; Voith, Topitzes and Berg, 2020). This study focuses on the theory of intergenerational transmission, which, according to Ehrensaft and Langhinrichsen-Rohling (2020), describes and explains patterns and trends of violence observed within a family and passed down from one generation to the next. The authors state that the theory is “broad enough to consider links among child maltreatment, exposure to intimate partner violence between parents or caregivers in childhood, perpetrating and/or experiencing violence with partners in adolescence and adulthood, and finally perpetrating abuse against one’s own children later in life” (Ehrensaft and Langhinrichsen-Rohling, 2020, p. 3).

3.2.1 Risk factors and mechanisms of transmission

It is of utmost importance to explore the risk factors and mechanisms that account for the transmission of domestic violence intergenerationally as well as its interruption across generations. In this subsection distinctions of risk factors and mechanisms of transmission are explained in relation to this study.

3.2.1.1 Risk and protective factors

Risk factors, as defined by the Centers for Disease Control and Prevention (CDC, 2021) and the Substance Abuse and Mental Health Services Administration (SAMHSA, n.d.), are characteristics at the individual, relationship, community, or societal level that increase vulnerability to negative outcomes, such as domestic violence. Examples of risk factors that heighten women’s vulnerability include childhood exposure to violence, unemployment, attitudes accepting violence, social isolation, poverty, and male dominance (Heise, 1998, 2011; Sabbah *et al.*, 2017). In contrast, protective factors lower the likelihood of negative outcomes and mitigate the impact of risk factors (CDC, 2021; SAMHSA, n.d.). Protective factors for women against domestic violence include emotional self-regulation, strong parent-child relationships, employment, higher education, and a strong support network outside the family (Kong *et al.*, 2021; Spearman, Hoppe, and Jagasia, 2023).

3.2.1.2 Mechanisms of transmission

The terms risk factors and mechanisms of transmission are often used interchangeably to explain the intergenerational transmission of characteristics such as domestic violence. However, some authors, depending on their discipline and research methodology, prefer the

term mediating factors to describe these concepts (Berlin, Appleyard, and Dodge, 2011; Dorsey, 2020; Kong *et al.*, 2021; Lehrner and Yehuda, 2018; Racine *et al.*, 2021; Salerno and Merenda, 2013). In this study, mechanisms of transmission refer to developmental processes that occur both within the individual (genetic, also referred to as neurobiological and psychodynamic) and outside the individual (social information processing) that explain how characteristics are passed from one generation to the next (Berlin *et al.*, 2011; Dorsey, 2022; Ehrensaft and Langhinrichsen-Rohling, 2020; Lehrner and Yehuda, 2018). Below, three types of transmission mechanisms are explained.

3.2.1.2.1. Genetic (neurobiological) mechanisms

Genetic mechanisms of transmission are often associated with the neurobiology of domestic violence, particularly as a traumatic event (Hoosain, 2013; Mueller and Tronick, 2019; Yehuda and Lehrner, 2018). Besemer (2017) explains that the perpetuation or victimisation of domestic violence is strongly linked to neurobiological factors, where neurological processes contribute to impulsive aggressive behaviours or passive acceptance of violence. These traits are often inherited by future generations through cognitive, physiological, and neurochemical pathways (Besemer, 2017; Choi, 2020). According to Mueller and Tronick (2019), women who experience intimate partner violence during pregnancy are shown to have elevated stress levels, which can impact the neurohormonal chemistry of the foetus. In males, Choi (2020) explains that higher levels of testosterone and lower levels of serotonin are associated with increased hostility and aggression, thus increasing the likelihood of domestic violence perpetuation. Oxytocin, which is known as the “love hormone”, has also been found to be a predictor of violence in intimate relationships (Choi, 2020).

Exposure to high-stress levels during pregnancy can lead to increased maternal cortisol levels and downregulation of the 11beta-hydroxysteroid dehydrogenase type 2 enzyme, which is produced by the placenta and breaks down cortisol into an inactive form to protect the foetus’s brain (Ghnenis *et al.*, 2021; Huebner *et al.*, 2021; Mucci, Scalabrini and Northoff, 2018; Mueller and Tronick, 2019). The higher levels of cortisol transmitted to the foetus can lead to changes in behavioural development, affecting the foetus’s ability to cope with stress and potentially lead to mental health disorders in infancy or later in adulthood (Mueller and Tronick, 2019; Ramborger,

Zubilete and Acosta, 2018). Keels (2022) explains that neurobiological vulnerability increases an individual's susceptibility to emotional dysregulation and internalising and externalising behaviours in the presence of chronic traumatic stressors such as domestic violence. Multiple empirical studies suggest that exposure to adverse events during childhood, such as domestic violence, may result in epigenetic mechanisms that involve the biological embedding of early life experiences (Romens *et al.* in Shakoor *et al.*, 2022), which can contribute to the intergenerational transmission of DV (Shakoor *et al.*, 2022). It is worth noting that for the purpose of this study, a brief description of the neurobiological mechanisms of transmission, as mentioned above, is provided. However, these mechanisms were not explored in either the methodological or analytic processes of this study.

3.2.1.2.2. *Psychological mechanisms*

The psychological mechanisms of the intergenerational transmission of domestic violence are often paired with environmental mechanisms, which encompass interpersonal (familial and peer) and community and societal interactions (Shakoor *et al.*, 2022). According to Salberg (2019a, p. 567), “external events can impact internal processes and a new mechanism, identification with the aggressor, causes introjection”. Exposure to multiple adverse events, particularly during childhood, such as domestic violence and other forms of violence due to war, gang or neighbourhood violence, and poor socio-economic status, affect the psychological state of individuals (Genç, 2021; Leinberger, 2018; Shakoor *et al.*, 2022). The consequences of these adverse events often lead to psychological issues such as low self-esteem, depression, anger, silence, guilt, PTSD, complex PTSD (CPTSD), and anxiety. Additionally, individuals may experience difficulties in communication and emotional regulation, internalisation of ideas, values, attitudes, and re-enactment of behaviours, which have been observed and understood to be psychological mechanisms of intergenerational transmission (Berckmoes *et al.*, 2017; Lehrner and Yehuda, 2018; Leinberger, 2018; Margolin *et al.*, 2016; Shakoor *et al.*, 2022).

3.2.1.2.3. *Environmental mechanism*

Environmental mechanisms of intergenerational transmission of domestic violence have been empirically and widely studied (Shakoor *et al.*, 2022; Voith, Topitzes and

Berg, 2020; Widom and Wilson, 2015). These environmental mechanisms intersect and include the family of origin, community, culture, and societal norms and values (Shakoor *et al.*, 2022). The below section discusses different environmental mechanisms found in literature.

3.2.1.2.3. 1 Family of origin

The family is the main socialising and learning institution for children as proposed by the social learning theory (see subsection on the theory), hence why the social learning theory has been considered as one of the main theories over the past 20 years to explain the intergenerational transmission of domestic violence (Bandura, 1971; Copp *et al.*, 2019; Genç, Su and Durtshi, 2018; Linscott, 2017; Valgardson and Schwartz, 2019). According to Shakoor *et al.* (2022), the relationships among family members within a household, specifically parent-child relationships, are very influential in domestic violence transmissions. Studies have found that behaviours and attitudes held within family settings during childhood have been found to be introjected and emulated in adolescence and adulthood, especially violent and aggressive behaviours (Oliveros and Coleman, 2021; Linscott, 2017; Shakoor *et al.*, 2022). Largely, this is because children who grow up in households where they witness and/or experience violence may learn that violence is an appropriate and acceptable means of resolving conflicts between people in intimate interpersonal settings (Franklin and Kercher in Shakoor *et al.*, 2022; Oliveros and Coleman, 2021). According to Franklin and Kercher (2012), as cited in Shakoor *et al.* (2022), parents model violent behaviour by engaging in forms of violence within the home in front of their children and to their children, sending the message that marital or intimate partner aggression is appropriate. Individuals who grow up in violent households where they witness violence between parents, are at a greater risk of falling victim to violence or perpetuating violence as adults (Franklin and Kercher in Shakoor *et al.*, 2022; Hou *et al.*, 2016).

3.2.1.2.3.2 Culture

According to Copp *et al.* (2019), learning violence is not confined to the family. Instead, individuals also develop and change their behavioural scripts based on their experiences in contexts outside of the home. The cultural context is one such context, where cultural understandings about violence, specifically domestic violence, are learned from a

cultural lens. This occurs in the daily lives of all human beings and can be used by individuals to further reinforce their attitudes and beliefs surrounding domestic violence, which they transmit to future generations (Copp *et al.*, 2019). Individuals from cultures that emphasise traditional gender roles and norms have been shown to report positive attitudes towards the use of domestic violence (Franklin and Kercher, 2012; Hou *et al.*, 2016). The cultural transmission channel normalises gendered violence, leading to its acceptability and the occurrence of different forms of gendered violence, such as domestic violence (Nicolson, 2019; Tur-Prats, 2019).

3.2.1.2.3.3 Community

Similar to culture, the type of community in which people are raised has been found to influence the normalisation and the acceptability of gendered violence, such as domestic violence (Debowska *et al.*, 2021; Nicolson, 2019). This is attributed to the fact that children also learn and mimic behaviours that are observed in their community/neighbourhood or broader social context, such as their religious community (Genç *et al.*, 2018; Franklin and Kercher 2012). According to Genç *et al.* (2018) and Choi (2020), persistent exposure to violence in childhood and adolescence reinforces the development of behaviours, beliefs, and attitudes that normalise the perpetuation and victimhood of domestic violence. For example, children raised in communities marked by high levels of community violence, poverty, unemployment, and substance abuse by a parent and other key role models in the community are more likely to experience and perpetrate domestic violence (Voith *et al.*, 2020). These risk factors are often a result of socio-structural and socio-historical events that have been found to mediate the intergenerational transmission of domestic violence (Abdi *et al.*, 2021; Berckmoes *et al.*, 2017; Franklin and Kercher, 2019; Hoosain, 2013; Salberg, 2019b; Shakoor *et al.*, 2022; Spencer and Stith, 2020; Stith *et al.*, 2004). Additionally, although domestic violence occurs in all communities, studies have found that domestic violence is more prominent in communities characterised as previously disadvantaged with high levels of poverty, substance use and dependency, and low levels of educational attainment (Franklin and Kercher 2019; Keel 2020; Thobane *et al.*, 2020).

Notably, the direct association between any one of the above-mentioned mechanisms of intergenerational transmission of domestic violence are unclear (Anderson *et al.*, 2018). However, Shakoor *et al.* (2022) suggest that these mechanisms interact, resulting

in the intergenerational transmission of domestic violence. Furthermore, several studies posit that the combination of neurobiological and environmental risk factors for transmission (gene-environment correlation) increases the risk for intergenerational transmission of domestic violence from parent to child (Branje *et al.*, 2020; Choi, 2020; Lund *et al.*, 2022; Paris, 2022; Shakoor *et al.*, 2022). However, it is important to remember that this study focuses only on psychosocial mechanisms of transmission; thus, data will be analysed based on these mechanisms.

It is important to note that risk and protective factors operate within various mechanisms, including genetic, psychological, interpersonal, and social (environmental) conditions, which either perpetuate or disrupt the transmission of domestic violence. Violent and victim traits are passed from parents to children through three main transmission mechanisms: genetics, psychological and environmental processes, including the interaction between genetics and environment (i.e., gene-environment correlation) (Branje *et al.*, 2020; Ehrensaft and Langhinrichsen-Rohling, 2020; Leinberger, 2018; Keels, 2022).

This section discussed intergenerational transmission, defined it, explained the theory of intergenerational transmission of violence, and explained the mechanisms of transmission of domestic violence. The following section offers a description and discussion of the conceptual framework of this study, along with its significance.

3.3 Conceptual framework

This section proposes a conceptual framework for exploring the intergenerational transmission of domestic violence in refugee families. This framework is derived from the conceptual dimensions found within three major theories used to explain the theory of intergenerational transmission (Ehrensaft and Langhinrichsen-Rohling, 2020). According to Trafford and Leshem (2008), a conceptual framework aids researchers in selecting and prioritising key concepts of theories. It helps comprehend their potential relationships, facilitating the generation of meaningful research outcomes. This framework underscores the intricate interplay of various influences, providing insights into the underlying risk factors, mechanisms, and processes involved in the transmission of domestic violence within refugee families, particularly among women. The theory of intergenerational transmission of violence posits that individuals who have experienced violence during their childhood are more prone to engaging in violent and victim learning behaviours (Haselschwerdt *et al.*, 2019a). Ehrensaft and

Langhinrichsen-Rohling (2020) explain that this theory was developed around the social learning theory as the main theory where intergenerational transmission of domestic violence could be understood. This study uses this theory because it acknowledges the role of socialisation and the learned nature of violent behaviours within the family system.

The social learning theory further expands upon this concept by emphasising the impact of observational learning and reinforcement on the acquisition and perpetuation of violent behaviours and the acquisition, acceptance, and enactment of victim behaviours (Bandura, 1971). The framework particularly highlights how women learn victim behaviour from various sources, including their parents (especially mothers), peers, and the broader society. This shapes their perception of violence as acceptable within the household and its efficacy in maintaining control and resolving conflicts (Copp *et al.*, 2019). Key concepts used in the present conceptual framework are reinforcement, observational learning, and re-enactment.

The intergenerational transmission of domestic violence has also been understood from the attachment theory (Ehrensaft and Langhinrichsen-Rohling, 2020). This study incorporates concepts from this theory (i.e. internal working models and secure and insecure attachment styles) into the conceptual framework as it allows for the exploration of early child-parent/caregiver relationships. This will specifically elucidate how attachment patterns influence subsequent mother-daughter and intimate partner relationships. In the context of domestic violence, this study assumes that maternal attachment patterns serve as a determining factor for the attachment patterns between adult daughters and their susceptibility to becoming victims of domestic violence in their intimate relationships.

Lastly, the study also incorporates Heise's ecological model to enhance the understanding of domestic violence in refugee families by encompassing the influence of risk factors for the intergenerational transmission of domestic violence found within multiple levels from a socio-environmental perspective. This will be the main theory supporting the above-mentioned theories (see figure 1 on the integrated conceptual framework), as it addresses the gaps in the above theories (Ehrensaft and Langhinrichsen-Rohling, 2020). The model considers the interconnections between different levels of risk and protective factors and their contribution to the vulnerability of refugee women in relation to the transmission of domestic violence. It is important to note that both the social learning and attachment theories intersect with psychological and environmental mechanisms, with Heise's ecological model providing

evidence for environmental mechanisms. These psychosocial mechanisms are embedded within the conceptual framework of this study (Figure 1). The next section discusses the theories used in this study.

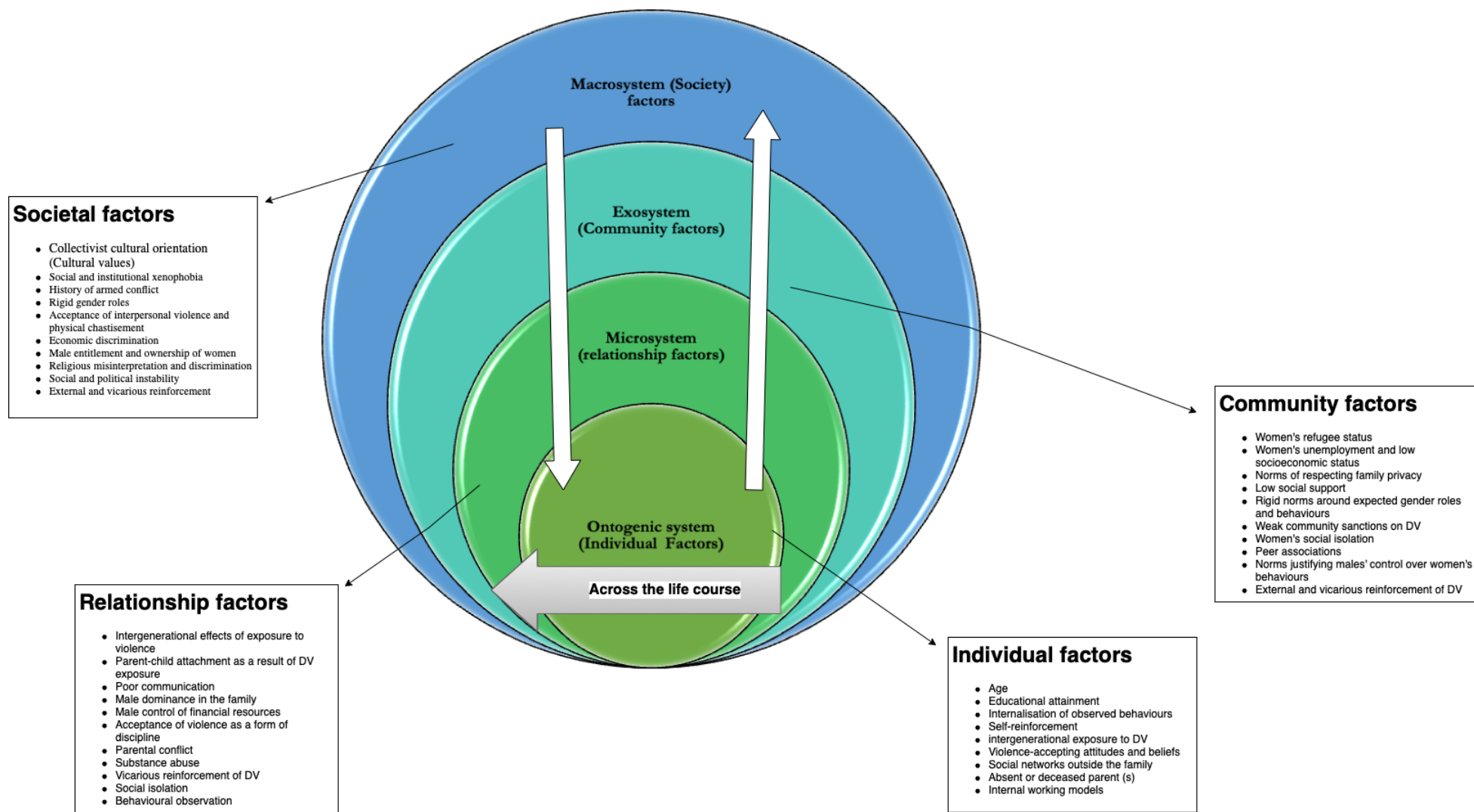


Figure 1: The conceptual framework

3.4 Social learning theory

This section will discuss the social learning theory.

3.4.1 *The role of social learning theory in understanding intergenerational transmission of violence*

As previously explained in the preceding section, the social learning theory is the most commonly used theory to explain the intergenerational transmission of violence (Keels, 2022; Shakoor *et al.*, 2022; Southern and Sullivan, 2021). This is especially because the theory recognises the immense influence that models (study participants) have, as they hold prominent positions as the primary ‘teachers’ in a child’s life as parents or caregivers (Bandura, 1973). The family, as the primary socialising agent for children, plays a crucial role in the intergenerational transmission of domestic violence (Copp *et al.*, 2019; Shakoor *et al.*, 2022; Southern and Sullivan, 2021). The theory suggests that violent or victim behaviours are learned and maintained through observation, modelling, and reinforcement based on a child’s past and present interactions with their parents or caregivers (Keels, 2022). Children learn behaviours by observing and participating in social interactions, particularly those exhibited by their parents or caregivers. Bandura (1971) suggests that human behaviour is primarily transmitted through exposure to social models, whether intentionally or unintentionally. Modelling can have three types of effects:

1. Observers acquire new behavioural patterns by observing others’ behaviour: This effect of observational learning is most evident when models display behaviours that observers have not yet learned but later imitate in a nearly identical form.
2. Previously learned reactions can be either strengthened or weakened through modelling.
3. Observational learning involves various subprocesses within the social learning framework.

Furthermore, Copp *et al.* (2018) state that, according to Bandura (1973), learning not only occurs through observing and modelling behaviour but also through communication and interactions with parents or caregivers. This is particularly true regarding the rhetoric about the acceptability of violence and its perceived outcomes. Children imitate behaviours they observe

and/or experience from influential models who perpetrate or experience domestic violence (Powers *et al.*, 2020). Consequently, the re-enactment or performance of behaviour is influenced by the desirability of that behaviour, which may result in valued rewards or punishment (vicarious reinforcement). Individuals tend to pay closer attention to models whose behaviour has functional value (Bandura, 1971, 1973; Gagnon, 2018). Reinforcement, through its incentive motivational effects, can effectively lead to the re-enactment of behaviour by individuals focused on the responses to that behaviour. Through different types of reinforcement, successful behaviours are eventually identified through exploration, while ineffective behaviours are discarded. When people face punishment for their actions, they often develop emotional responses to places, objects, or individuals associated with the pain and distress caused by those actions (Bandura, 1973). According to Bandura (1973), interpersonal reinforcers play a significant role in regulating ordinary interactions between individuals, including acts of violence and the acceptance of violence. This principle also applies to non-violent behaviour, such as victim behaviour.

Bandura (1973) posits that there are two main types of reinforcement, mainly self-reinforcement and cognitive representations of reinforcement. Self-reinforcement is explained by Bandura (1973) as a psychological function in which individuals manage their own behaviour based on self-evaluative and self-produced consequences. People establish standards of behaviour and respond to their actions in self-satisfied or self-critical ways according to their own self-demands. In contrast, cognitive representations of reinforcement are explained as our responses to the consequences of our behaviours, which are mentally constructed and are not solely prompted by external cues. Bandura (1973) argues that human behaviour is predominantly governed by our ability to anticipate the consequences of our actions, which depend on the current conditions of reinforcement. Hence, it can be inferred that violent and victimhood behaviours are learned as opposed to being a genetic predisposition (Bandura, 1973; Power *et al.*, 2022). The social learning theory argues that people maintain violent and victim behaviour for several reasons:

- a) External reinforcement: Both violent and victim behaviours often gain societal approval and improve status because the re-enactment of these behaviours is deemed appropriate based on people's age and gender (Edinyang, 2016). Bandura (1973) explains that certain behaviours hold high value in society, granting individuals who engage in such behaviours elevated social positions

that afford them greater control, status, and power. Bandura (1973) also distinguishes between social and status rewards, where status rewards increase an individual's social rank, enabling them to benefit from their newfound position, while social rewards merely result in social approval without necessarily changing their societal status. It is important to note that not all behaviours are governed solely by external reinforcement; individuals also regulate their own actions to some extent by generating anticipatory and self-evaluative consequences (Bandura, 1971).

- b) Increasing self-esteem through self-reinforcement.
- c) Vicarious reinforcement: This occurs when a child observes how someone's behaviour leads to a reward, punishment, or is simply ignored by others. There are two specific types of vicarious reinforcement:
 - i. Informative functions of observed behaviours: Individuals assess the outcomes of behaviours based on their observations of the consequences experienced by models (whether rewarded, punished, or ignored). These assessments are often influenced by the model's social position. By utilising informative functions of behaviours, individuals learn when and where it is most appropriate to perform certain learned behaviours based on the knowledge, they have obtained from observing the outcomes of models. Bandura (1973) explains that this allows individuals to differentiate between environments in which violent behaviours can be safely exhibited and those where perpetrating violence may be perilous. Children who witness their mothers benefiting from domestic violence, such as maintaining financial security despite the abuse, preserving family unity, experiencing reduced levels of retaliation, and avoiding social stigma (Bonea *et al.*, 2023; Heron, Esima and Browne, 2022) may interpret these situations as desirable outcomes. As a result, they might either avoid violence entirely or replicate victim behaviours, increasing their vulnerability to becoming victims of violence themselves.
 - ii. Incentive motivational effects: This occurs when individuals observe others being positively reinforced for their behaviours, which serves as a motivator or inspiration for observers who expect similar rewards.

3.4.2 The significance of social learning in the intergenerational transmission of domestic violence

This subsection discusses the significance of this theory to help understand the intergenerational transmission of domestic violence in refugee families, particularly among women and highlights the significant role of observational learning, modelling, and reinforcement in the intergenerational transmission of violent and victim behaviour. This is largely because the theory argues that children who are frequently exposed to violence perceive it as normal and appropriate. This perception continues into adulthood, where they justify the acceptance of violence in relationships as a means to resolve conflicts and manage their emotional state during interpersonal interactions (Hou *et al.*, 2016; Keel, 2022; Li *et al.*, 2023; Linscott, 2017; Meyer, Reeves and Fitz-Gibbon, 2021; Salberg, 2019b). Authors such as Southern and Sullivan (2021) and Antle *et al.* (2020) explain that individuals exposed to domestic violence in childhood, whether through witnessing or experiencing abuse, are more likely to engage in violent behaviour during adolescence and adulthood, transitioning from victim to perpetrator. Similarly, individuals, predominantly women, who have been exposed to violence are susceptible to becoming victims of violence in romantic relationships throughout their lives (Southern and Sullivan, 2021). These authors explain that both engaging in violent behaviour and accepting violent behaviour are socially reinforced through vicarious reinforcement in the form of rewards or appeasement.

Copp *et al.* (2019) emphasise that social learning involves more than simply imitating violent behaviours. They state that individuals may observe and internalise complex scripts for violent actions and, in certain circumstances, develop attitudes that support violence, particularly among women who accept and endorse violence. Additionally, attitudes and beliefs about domestic violence play a crucial role in behavioural choices, especially for women in violent home environments. Kanwal Aslam *et al.* (2015) explain that domestic violence victimhood is transmitted as a learned behaviour from mothers to daughters, with the daughters accepting their role as the abused. Furthermore, a study by Zhao, Gao and Zhang (2022) on the intergenerational transmission of domestic violence among Chinese women found that domestic violence was prevalent in their sample, with 55.16% of participants being victims of domestic violence, 60.51% reporting perpetrating domestic violence, and 34.44% witnessing domestic violence between their parents during childhood. Idris *et al.* (2018) argue that the

family setting is where individuals learn the various roles people play within the family, such as husband and wife, and parent and child. As children, we learn how to deal with adverse events such as violence (Idris *et al.*, 2018). However, it is important to acknowledge that other factors also contribute to the presence and perpetration of domestic violence and domestic violence victimisation, such as attachment style (see next section). Figure 2 illustrates the psychological process involved in social learning.

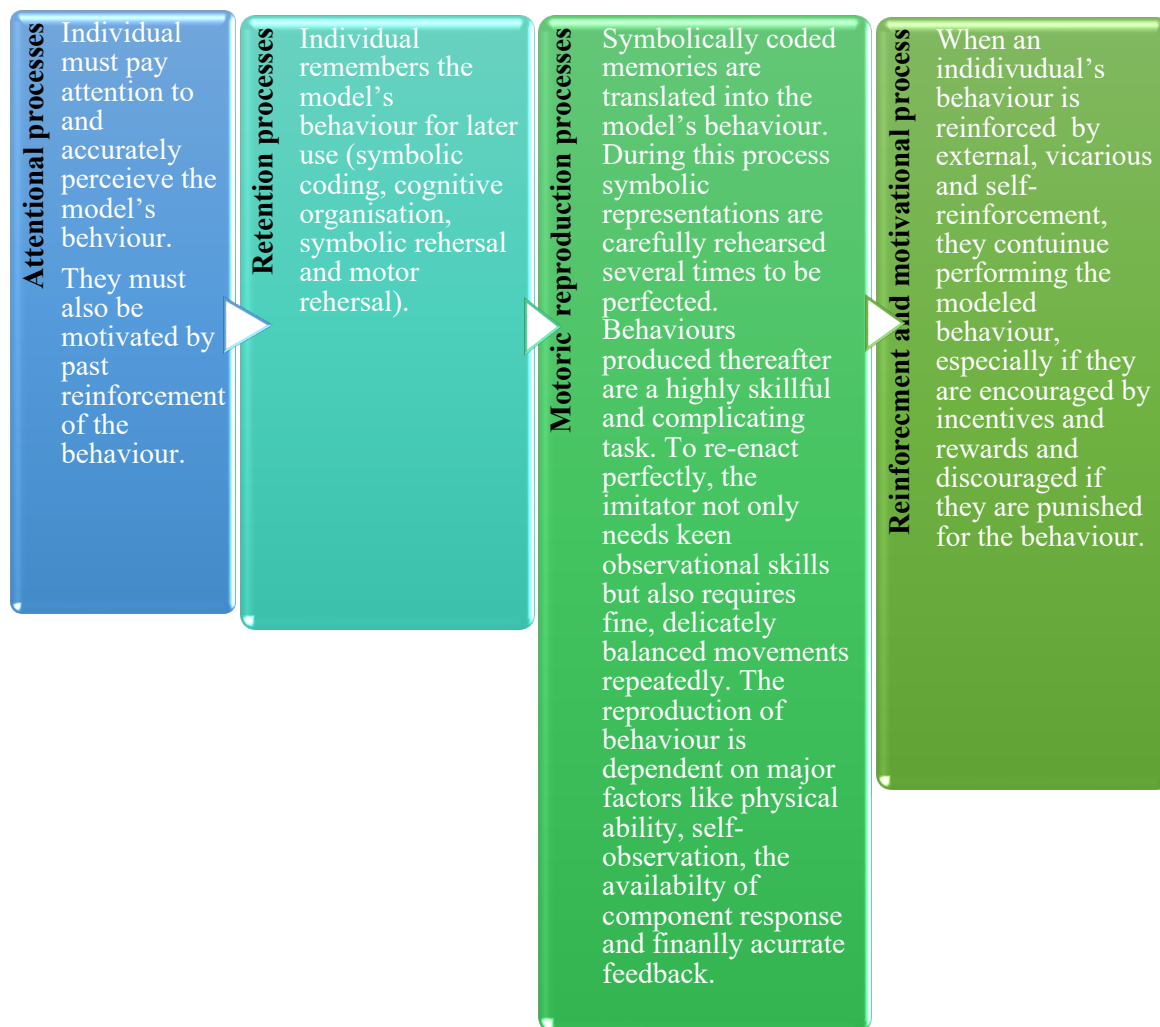


Figure 2: Social learning theory (psychological processes)

Source: Adapted from Bandura (1973)

3.5 Attachment theory

The attachment theory is used in this study because it is also one of the most commonly used theories in explaining the intergenerational transmission of violence (Alexander, 2014; Alink Cyr and Madigan., 2019; Geiger *et al.*, 2015; Marshall, Langevin, and Cabecinha-Alati, 2022). The theory was initially developed by British developmental psychologist and psychiatrist John Bowlby, whose full name was Edward John Mostyn Bowlby (Van Dijken, 1998). Further contributions to the theory were made by a Canadian American researcher, Mary Ainsworth (Keller, 2017). According to Morelli *et al.* (2017, p. 140), the attachment theory is considered psychology's most influential theory of relatedness and sets standards for healthy relationships for all individuals.

3.5.1 *Understanding the attachment theory*

Bowlby (2005) states that the attachment theory was developed to help explain specific behavioural patterns and traits not only in infants and children but also in adolescents and adults. Two key concepts within the attachment theory, namely attachment and attachment behaviour, are explained below. Holmes (1993) describes *attachment* as a general term that describes the nature and strength (lasting psychological connectedness) of a person's relationship with a discriminated figure or a small group of figures, which include parents or other caregivers. Generally, it is widely believed that attachment is crucial for the healthy development of both the mind and the body (Southern and Sullivan, 2021). Attachment behaviour, on the other hand, is defined by Bowlby (2005, p. 29) as "any form of behaviour that results in a person attaining or maintaining proximity to some other clearly identified individual who is conceived as better able to cope with the world". This behaviour is strengthened whenever a child happens to be sick, frightened, or tired and is therefore comforted and cared for by their parent or caregiver. However, this behaviour often continues into adulthood, particularly in times of distress. According to Bowlby (2005, p. 68):

“a child's attachment behaviour is responded to tardily and unwillingly and is regarded as a nuisance, he is likely to become anxiously attached, that is apprehensive lest his caregiver be missing or unhelpful when he needs her and therefore reluctant to leave her side, unwilling and anxiously obedient and unconcerned about the troubles of others. Should his caregiver reject him, he is likely to develop a pattern of

behaviour in which avoidance of them competes with his desire for proximity and care”. Both attachment and attachment behaviour are based on a system referred to as an attachment system. This system is a blueprint “of the world on which the self and significant others and their interrelationships are represented and which encodes the particular pattern of attachment shown by an individual.”

In his earlier writings, Bowlby (1958, p. 21 in Freeman and Simons, 2018, p. 203) referred to attachment as monotropic, which he describes as a “tendency for instinctual responses to be directed towards a particular individual or group of individuals and not promiscuously towards many”. In simple terms, a child attaches themselves to a single attachment figure, which is usually the mother. Bowlby (1988) explained that with monotropy, humans can develop deep feelings leading to a deep attachment to a person, usually the mother, which has profound implications on the individual’s psychological development and psychological pathology in their lifecycle. Holmes (1993) and Freeman and Simons (2018) have argued that monotropy is not an absolute phenomenon but rather a concept used to explain the hierarchies that occur within us, as we are social beings that place mothers at the top followed by other significant individuals such as the father, siblings, and grandparents. The theory recognises that mothers are the primary caregivers of children universally; however, it does not discount the fact that fathers can be primary attachment figures for some individuals. Thus, according to the theory, the mother plays a crucial and distinctive role in the attachment process and the future trajectories of a child’s life (Brown, 2017; Keller and Chaudhary, 2017). A child’s mother has great influence on their development. Bowlby (2005) states that it is imperative to understand how the mother’s past and often current experiences have led to the mothering style she employs. The theory is thus crucial in this study as it aids in understanding the intergenerational transmission of domestic violence in refugees, specifically among women. This highlights the incredible bond between mother and child, even in contexts where there are multiple caregivers or attachment figures.

Keller and Chaudhary (2017) argue that the concept of monotropic attachment, which is centred around the Western middle-class nuclear family, focuses largely on an infant or child’s attachment relationships primarily with their mothers. This perspective assumes that the psychological bond between mother and child is a natural outcome of biological connectedness (Keller and Chaudhary, 2017, p. 111). However, the authors also consider and explain that in

many non-Western societies, alloparenting is a concept where child-rearing is undertaken by multiple non-biological caregivers, such as aunts, uncles, siblings, grandparents, and neighbors (Keller and Chaudhary, 2017; Steele *et al.*, 2014). In these societies, children develop close attachments with several significant individuals throughout their lives. It is important to note that the recognition of multiple attachment figures does not diminish the unique investment made by the mother, including genetic material transmission, intrauterine pregnancy, delivery, and potentially lactation. However, other significant attachment figures also make valuable contributions to the child's life and development. The subsection below explains the different types of attachment.

3.5.2 *Types of attachment*

Bowlby (1988) believed that personality development was based on differing patterns of attachment resulting from differing attachment interactions rather than being a reflection of infant temperament or instinct. He divided attachment into two categories: secure or insecure attachment (Holmes, 1993).

3.5.2.1 *Secure attachment*

Secure attachment is defined as a person feeling happy, confident, safe, secure, self-reliant, and attached to their attachment figure (Bowlby, 2005; Holmes, 1993; Keller and Chaudhary, 2017; Morelli *et al.*, 2017). According to Morelli *et al.* (2017), Ainsworth's strange situation revealed that secure attachment was found in parents or caregivers who:

- a. Correctly respond to the child's messages by being responsive and flexible.
- b. Follow the child's lead to organise and support his or her activities in subtle and appropriately challenging ways.
- c. Respect the child as a distinct individual with free will.
- d. Motivate their child through constant praise and encourage logical reasoning.
- e. Are loving and involved parents; and
- f. Encourage good expressions of emotion.

Thus, the primary socialising figures (parents or caregivers) are involved in a child's social and emotional development and create a secure base for an individual (Wollett and Thomson, 2016). A secure base is formed when parents or caregivers provide an environment where their children are physically and emotionally nourished, comforted from distress, and reassured when in doubt or frightened (Ainsworth *et al.*, 2015, Ainsworth, 1978; Bowlby, 2005). Bowlby (2005) emphasises that parents, especially mothers, establish secure attachment by being available, caring, and sympathetic to their children's needs. Bowlby (2005) believed that parents who do not understand their children's attachment behaviour as an intrinsic and valuable part of human nature often fail to provide them with a secure base, often resulting in insecure attachment.

3.5.2.2 *Insecure attachment*

Insecure attachment is characterised by an individual having mixed feelings towards their attachment figure, including jealousy, anger, intense dependency and love, irritability, fear of rejection, and vigilance (Bowlby, 2005; Holmes, 1993). Exposure to high-conflict environments during childhood can lead to emotional insecurity and problems with self-regulation later in adolescence and adulthood (Zhao *et al.*, 2022). There are three types of insecure attachment namely: anxious, avoidant, and disorganised (Holmes, 1993). Ainsworth *et al.* (1978, in Brown, 2017) identified three attachment patterns: secure, insecure-anxious-ambivalent and insecure-avoidant, with insecure-disorganised attachment having been identified by Main, Kaplan and Cassidy (1985). Insecure attachment results from several factors in an individual (Bowlby, 1979, p. 137), including:

- a) "One or both parents being persistently unresponsive to the child's care-eliciting behaviour and/or actively disparaging and rejecting them.
- b) Discontinuities of parenting, occurring more or less frequently, including periods in hospital or institutions.
- c) Persistent threats by parents not to love a child, used as a means of controlling them.
- d) Threats by parents to abandon the family, used either as a method to disciplining the child or as a way of coercing a spouse.
- e) Threats by one parent either to desert or even kill the other or else to commit suicide.

- f) Inducing a child to feel guilty by claiming that his behaviour is or will be responsible for the parent's illness or death."

3.5.3 *The different types of insecure attachment*

Below is a brief explanation of the different types of insecure attachment.

1. **Insecure anxious-ambivalent attachment:** Anxious-ambivalent, regularly referred to as anxious attachment, is an attachment pattern that occurs during infancy, which frequently causes anxiety in the infant or child because of their parents' inconsistent parenting (Simpson, 1990; Wells *et al.*, 2023). This presents itself in open displays of opposition and hostility directed at their parent or caregiver during times of distress. According to Van Ijzendoorn *et al.* (1991), this is meant to attract the attention of their inconsistently responsive parent or caregiver. Individuals with this attachment style have low self-esteem, a great fear of desertion or rejection, relational clinginess, and illustrate excessive need to be assisted (Beeney *et al.*, 2017; Gouveia Schulz and Costa, 2016). In adolescence and adulthood, anxiously attached individuals tend to have high degrees of relationship anxiety, constantly seeking attention from others and are overly dependent on their relationships (Gouveia *et al.*, 2016). In romantic relationships or friendships, they worry constantly about whether others, particularly romantic partners, love them or if they will abandon them, and frequently feel the need to be extremely close to their partners (Ehrensaft and Langhinrichsen-Rohling, 2020).
2. **Insecure avoidant attachment:** Avoidant attachment is identified in infants who deliberately avoid their parents/caregivers and display signs of detachment when in distress (Simpson, 1990). These infants deactivate their attachment system and, as a result, reduce their expressions of need and stress in response to their parent/caregiver who is overwhelmed or has rejected their bids for attachment (Beeney *et al.*, 2017; Humphrey *et al.*, 2022). In adolescence and adulthood, avoidantly attached individuals are said to be uncomfortable getting close to others, are under-aroused, and become nervous when people try to get close, which is especially evident in romantic relationships (Slade and Holmes, 2019). According to Ainsworth *et al.* (1978) individuals with avoidant attachment also present with frequent negative emotions and downplay distress. These negative emotions are associated with individuals' pessimistic opinions of others while they have a good self-image (Gouveia *et al.*, 2016).

3. **Insecure disorganised attachment:** The disorganised attachment style is one of the more problematic attachment styles as it leads to both internalised and externalised problems later in life (Wright *et al.*, 2017). In the same way that the other insecure attachment styles occur, disorganised attachment also develops during infancy, due to a lack of a coordinated response by the infant (Wright *et al.*, 2017). According to Solomon and George (2011, p. 3), “Disorganised infant attachment is identified by behaviour that is contradictory, disordered, misdirected, fearful, or disoriented upon reunion with the parent...”. Van Ijzendoorn, Schuengel and Bakermans-Kranenburg (1999) and Van Ijzendoorn and Bakermans-Kranenburg (2003) state that disorganised attachment can be described as the disruption of an otherwise consistent and systematic emotion regulation technique. This is used to mediate their child-rearing experiences as a result of their mother’s behaviour (frightened or frightening) and disrupted communication in times of distress and fearful arousal in infancy (Duschinsky, 2015; Solomon and George, 2011; Van Ijzendoorn *et al.*, 1999). This type of attachment style is relatively common in individuals who experienced child abuse and neglect (Granqvist *et al.*, 2017). Beeney *et al.* (2017) explain that infants with disorganised attachment develop rigid and extreme attachment patterns described as controlling-punitive or controlling-caregiving behaviours, which they enact with parents and others. Controlling-punitive behaviours present themselves in children who seek control from their parent or caregiver and others through tactics such as humiliating, insolent, and malicious behaviours (Beeney *et al.*, 2017). In adolescence, Wells *et al.* (2023) explain that this presents itself in hostile or devaluing behaviour by the adolescent to parent and vice versa, as an attempt to gain control over the other, which continues into adulthood. Controlling caregiving (role-confused) behaviours in childhood and adolescence presents itself as children taking on the parental/caregiving role where they provide emotional support, guide, and/or provide encouragement to the parent or caregiver (Beeney *et al.*, 2017). Disorganised attachment has been linked to impaired socio-cognitive functioning identity development and the ability to recognise and appropriately respond to threats (Wells *et al.*, 2023).

Researchers believe that there are parallels between insecure attachment described in earlier life and difficulties in romantic relationships in adolescence and adulthood (McCarthy and Maughan, 2010; Paetzold, Rholes and Kohn, 2015). This is largely due to what Bowlby (1973, p. 78) termed internal working models, which occur when children cognitively construct “a set

of models of the self and others, based on repeated patterns of interaction experience, where representations of interactions are generalised, which form relatively fixed representational models which they use to predict and relate to the world". These internal working models often persist into adulthood (McCarthy and Maughan, 2010). Securely attached children store internal working models of caregivers as loving, reliable, and responsive. They subsequently see themselves as worthy of love and attention and continue these internalised assumptions in all other relationships, including romantic ones. In contrast, insecurely attached children may be cautious of people and the world because of their experiences with their parents or caregivers, who made them believe that they are not worthy of love and attention (Bowlby, 1973).

Paetzold *et al.* (2015) explain that insecure attachment presents itself differently in the three different insecure attachment styles and explain that anxiously attached individuals fear abandonment, which prompts them to approach partners that secure their needs by trying to remain as close as they can to prevent abandonment. In contrast, an avoidantly attached individual fears rejection and presents to their partners as distant (including emotionally) to protect themselves from possibly being rejected. On the other hand, the disorganised individual presents traits found in both anxious and avoidant individuals, where in moments of distress, they seek comfort from their partners but also sabotage this comfort by appearing chaotic and unclear. This is due to their fear of their partners leaving them, which causes apprehension and results in them distancing themselves from their partners. Adults' attachment is believed to be stable because they have consolidated their internal working models, which have been further influenced by their social environments and can be transmitted to the next generation (Jones *et al.*, 2018). The subsection below discusses the links between attachment styles and intergenerational transmission of domestic violence, focusing specifically on women and their relationships with their children and partners.

3.5.4 Links between attachment styles and intergenerational transmission

Women (i.e. mothers) who experienced violence during childhood and have unresolved trauma may lack the ability to adequately form secure bonds with others, particularly their own children, resulting in insecure attachment patterns (McCarthy and Maughan, 2010; Southern and Sullivan, 2021). These patterns have long-lasting impacts on the child as well as on future generations (Southern and Sullivan, 2021; Zimeray, 2022). This may result in situations where a child can, in turn, become a victim of intimate partner violence or a perpetrator of child abuse

and neglect (Lünnemann *et al.*, 2019; Zimeray, 2022). According to Zimeray (2022), attachment is an integral part of the intergenerational transmission of domestic violence, largely because parent-child relationships, especially in relation to violence, become internalised with regard to attachment. Exposure to a parent with a history of child abuse and witnessing domestic violence, particularly when the mother is the victim, often leads to the development of overly conscious and guilt-ridden individuals with anxious attachment styles. These individuals may harbour partial resentment, which persists into adulthood and is often expressed towards someone they perceive as weaker, such as a spouse or child. According to Giallo *et al.* (2020), mothers who have experienced child abuse can have disrupted attachment relationships with their own children, leading to anxious or disorganised attachment styles and difficulties in emotional regulation in their children.

In a study involving 1 507 women in Australia, Giallo *et al.* (2020) found that women with traumatic histories of childhood violence and experiences of intimate partner violence had poor mental health and struggled to respond to and meet the emotional needs of their children. These factors were present in approximately one in four women in the sample. The study also revealed that women with a history of childhood sexual abuse were more likely to engage in harsh parenting practices and exhibit anxious and overprotective attachment styles (Giallo *et al.*, 2020). Similar findings were reported by Hoosain and Smit (2017), in their study of women with a history of childhood sexual abuse. The study concluded that mothers with a history of child sexual abuse require guidance and support in parenting their own children, particularly in terms of protecting them from sexual harm. Bowlby (1979) notes that these individuals are characterised as having trust issues and are compulsively self-reliant and unable to cope with pressure, which manifests itself in psychosomatic symptoms, with some even engaging in compulsive caregiving roles in close relationships but refusing to receive care. In addition to having deep unconscious yearnings for affection and support that may manifest in abnormal care-eliciting behaviour such as eating disorders and failed suicide attempts (Bowlby, 1979). Subsequently, Giallo *et al.* (2020) explain that this leads to the formation and maintenance of unhealthy adult relationships, which make individuals with insecure attachments vulnerable to violence, particularly domestic violence, mitigated by internal working models (Ehrensaft and Langhinrichsen-Rohling, 2020).

According to Leinberger (2018), another example which aligns with this study is that of security, which can also be lost from witnessing violence within the home and affects the

attachment between a child and their parent/caregiver. This results in insecure parent-child attachments, unhealthily characterised by the child developing poor self-esteem and often having negative thoughts about relationships with others (Leinberger, 2018). Such individuals report trust issues where they expect others to reject them, be unavailable, or even hostile towards them, resulting in a problematic defence mechanism in their own romantic and parent-child relationships referred to by Bowlby as 'hurt people, hurt people' (Wollett and Thomson, 2016). According to Leinberger (2018), poor attachment to parents manifests itself as anxious and disorganised attachment styles in adulthood, where such women are prone to becoming victims of violence by their partners. The attachment theory is therefore used to understand intergenerational transmission of domestic violence through compulsive re-enactment and repetition of violence victimhood as witnessed by women (Leinberger, 2018; Wollett and Thomson, 2016). This results in domestic violence being transmitted to their own children through genetic, environmental, or psychological mechanisms or a combination of these mechanisms (Alexander, 2014; Wollett and Thomson, 2016). In this study, the focus is on psychosocial mechanisms rather than genetic mechanisms.

3.6 Ecological model of violence

The final theory incorporated in the conceptual framework of this study is Heise's ecological model on VAW. The model is used within the framework to provide a comprehensive conceptualisation of the intergenerational transmission of domestic violence in refugee families, understanding it as a multifaceted phenomenon rooted in the intersection of various factors across multiple levels (i.e. multifactor), including individual, relationship, family, community, and societal factors (Figure 1: Conceptual framework) (Heise, 1998). The model employs four concentric circles representing four systems: ontogenic system, microsystem, exosystem, and macrosystem. Heise's ecological model builds upon Bronfenbrenner's socio-ecological model of human development (Bronfenbrenner, 1979). This model aids in conceptualising the aetiology of the intergenerational transmission of domestic violence in refugee families from a socio-environmental perspective, recognising that violence perpetration and victimisation are not solely attributable to a single cause (Heise, 2011). This is because the social learning and attachment theories do not adequately explain the persistence of domestic violence, especially in individuals who have not witnessed or experienced violence in their homes but still engage in violent behaviour, as posited by the social learning theory. Similarly, they do not account for why individuals with secure attachment patterns may

perpetuate or become victims of violence, while those with insecure attachment patterns may not become perpetrators or victims, as proposed by attachment theory.

Heise's ecological model helps us understand that domestic violence, particularly its intergenerational transmission, is influenced by multiple intersecting risk factors operating at different levels within the social ecology (Heise, 1998, 2011; Ranganathan *et al.*, 2021). The socio-ecological model, according to Heise (2012), encompasses various factors such as life histories, traumas (including collective trauma), communities and households, and individual factors that contribute to women's susceptibility to becoming victims of domestic violence daily. Heise (2011, p. vi) also states that, "The ecology also includes messages and norms that friends, family members, and social institutions reinforce as appropriate behaviour for men and women, including the acceptability of violence within different contexts". Ecological approaches, as described by Sabbah, Chang, and Campbell-Heider (2017), are commonly used in behavioural and public health research as they focus on exploring the processes (psychological) and conditions that influence an individual's development, particularly their interactions within their environment (socio-cultural interactions). The subsections below explain each system within the socio-ecological model in relation to risk factors for and mechanisms of domestic violence.

3.6.1 Ontogenic system

The ontogenic system, or ontogenic factors, refers to personal characteristics such as personal history, skills, and personality traits that have influenced an individual's development (Heise, 1998; Sabbah *et al.*, 2017). Individual development is intertwined with a person's behaviour, responses to other systems, and factors that influence their risk of becoming a victim or perpetrator of violence (Sabbah *et al.*, 2017). These characteristics include childhood exposure to domestic violence, educational attainment, attitudes accepting violence, low parental or social support, employment status (referred to as personal resources), responses towards domestic violence, coping mechanisms, and social networks beyond the family (Antai and Adaji, 2012; Heise, 1998; Heise *et al.*, 2002; Ranganathan *et al.*, 2021; Sabbah *et al.*, 2017).

3.6.2 Microsystem

In Heise's ecological model, the microsystem refers to the family, specifically the types of relationships between family members within the home, in relation to domestic violence (Heise, 1998; 2012; Heise *et al.*, 2002; Sabbah *et al.*, 2017). The interactions between family

members and the subjective meanings individuals attribute to these interactions within the home are crucial in understanding the intergenerational transmission of domestic violence (Heise, 1998). Several factors at the microsystem level play a significant role in explaining domestic violence, including decision-making powers held by dominant male figures in the home, marital conflict, poor communication, substance abuse, and social isolation (Heise, 1998; Heise *et al.*, 2002; Ranganathan *et al.*, 2021; Sabbah *et al.*, 2017).

3.6.3 Exosystem

According to Heise (1998, p. 273), the exosystem refers to the social structures, both formal and informal, that influence or determine what occurs in the immediate settings where individuals are found. These structures have an impact on the interplay of factors in those settings. Ecosystemic risk factors for domestic violence are described as community factors which are influenced by the larger social contexts in which individuals come from (Heise, 1998). These factors include communities with high rates of unemployment, poverty, low socio-economic status, substance abuse, violence, and crime, in addition to limited educational and economic opportunities (CDC, 2021; Heise, 1998; Sabbah *et al.*, 2017). Weak community sanctions on domestic violence and low community involvement in addressing known domestic violence incidents, often due to respect for family privacy, also contribute to ecosystemic risk factors (CDC, 2021). Moreover, factors such as family and women's social isolation, lack of social support (both formal from family and informal from friends), rigid gender norms and behaviours, association with peers who condone and legitimise domestic violence, and norms accepting VAWC are additional elements that contribute to the ecosystemic risk factors (Heise, 1998, 2011; Heise *et al.*, 2002; Ranganathan *et al.*, 2021; Sabbah *et al.*, 2017).

3.6.4 Macrosystem

The macrosystem, as described by Heise (1998), encompasses a broad set of cultural values and beliefs that permeate and influence the other layers of the social ecology. Factors within this system have a profound impact on the factors and structures of the lower systems. Risk factors for domestic violence within the macrosystem include notions of masculinity that are linked to male dominance, toughness, and honour; male entitlement and ownership over women; and male approval of physical chastisement of women. In addition to rigid gender norms, social norms such as the cultural acceptance of violence as a means of settling disputes; gender discriminatory laws or policies; religious discrimination; collectivist cultural

orientation; armed conflict; corrosive macro-economic forces; and political instability for part of these macrosystems (Heise, 1998, 2011; Heise *et al.*, 2002; Ranganathan *et al.*, 2021; Sabbah *et al.*, 2017; Wessells and Kostelny, 2021). These factors within the macrosystem contribute to the perpetuation and normalisation of domestic violence within society.

3.7 Benefits of this conceptual framework for this case study

This conceptual framework based on the ecological model has helped expand understanding of the intergenerational transmission of domestic violence in refugee families by considering the influence of risk factors and psychosocial mechanisms at multiple levels from a socio-environmental perspective, extending beyond the immediate family context. It highlights the constant interconnections between various levels and their contributions to refugee women's vulnerability to domestic violence transmission (Meinck *et al.*, 2023). The framework lends greater validity to the theory of intergenerational transmission, which commonly incorporates social learning and attachment theories (Morelli *et al.*, 2021). Integrating these theories helped examine how intergenerational transmission, social learning processes, attachment styles, and ecological factors interact and reinforce each other, shaping refugee women's experiences of and susceptibility to domestic violence transmission to future generations. This framework promotes a multidimensional understanding of domestic violence and recognises that interventions should address factors and mechanisms at multiple levels to effectively prevent and reduce violence within refugee families' households.

Lastly, the conceptual framework of this study mitigates some of the criticisms of both the social learning and attachment theories in explaining the intergenerational transmission of violence (Copp *et al.*, 2019). For one, the social learning theory has been heavily criticised for its excessive focus on environmental factors as the primary influences determining violent and victim behaviours while underestimating genetic and individual contributions to behaviour development (Evans, 2023; Loveless, 2023). Critics argue that the social learning theory disregards individual agency in relation to violent behaviours (Evans, 2023). Empirical studies have supported this notion by reporting that not all individuals exposed to domestic violence in childhood become perpetrators or victims of violence, particularly in terms of intergenerational transmission (Ehrensaft *et al.*, 2003; Herrenkohl *et al.*, 2008; Li *et al.*, 2021; Renner and Slack, 2006; Stith *et al.*, 2000; Widom and Maxfield, 2001; Zhao *et al.*, 2022). This is mitigated by the framework as it considers psychological mechanisms (internal process) of transmission.

Similarly, the major criticisms of the theory include its focus on a monotropic view of attachment, particularly in terms of mother-child attachment, which fails to account for factors such as the number of children a woman has, her socio-economic status, and her safety and the father's role in child-rearing (Keller and Chaudhary, 2017; White *et al.*, 2020). The theory's oversimplification also neglects other significant environmental factors across multiple levels that shape violent and victim behaviours (Marshall *et al.*, 2022; O'Shaughnessy *et al.*, 2023). Furthermore, due to its Western context, the attachment theory does not fully incorporate cross-cultural norms such as alloparenting, which is prevalent in many non-Western societies where children are cared for by multiple individuals, including siblings, aunts, uncles, neighbours, and others. This highlights the development of attachment bonds beyond the mother-child relationship (Keller and Chaudhary, 2017). Additionally, the theory does not provide a comprehensive framework for understanding violence transmission across generations, particularly in high-risk populations like refugees, as it primarily focuses on attachment patterns and their formation (Barbaro *et al.*, 2017; Narayan, Lieberman and Masten, 2021; O'Shaughnessy *et al.*, 2023). The attachment theory therefore does not explore the intricacies and nuances of violent and victim behaviour transmission adequately. This conceptual framework allows for the exploration of all these intricacies and nuances.

3.8 Conclusion

This chapter introduced the conceptual framework and outlined its role in the development of the research questions, methodological approaches, and chosen methods. The background of intergenerational transmission and the mechanisms involved in transmission across generations were also provided. The chapter also explored the conceptualisation of the study, drawing from theories of intergenerational transmission of domestic violence, social learning, attachment theories and Heise's ecological model. Each theory is examined individually, emphasising its significance in understanding the intergenerational transmission of domestic violence in refugee families. Furthermore, the chapter discussed criticisms of these theories and underscored the importance of integrating key aspects of these theories into this study.

The next chapter presents the research methodology used in this study.

CHAPTER 4: RESEARCH METHODOLOGY

4.1 Introduction

The previous chapter discussed the conceptual framework developed to address the research questions and achieve the research objectives. The initial step in addressing these questions and objectives involves employing appropriate methodological approaches and methods. This chapter discusses the methodological approaches, processes, and methods used in this study. First, the reasons for selecting a qualitative embedded single case study research design as the most suitable approach to address the research questions and meet the research objectives are discussed. Subsequently, the research population and sampling method are described, and a flowchart outlining the sampling procedures employed for participant recruitment is presented. Afterwards, justification and elaboration on data collection and data analysis methods are provided. Data verification measures implemented to ensure the study's rigour are then explained. This is succeeded by a discussion on reflexivity, exploring the reflective techniques that were employed throughout the study to further ensure its rigour. Lastly, ethical considerations considered during the course of this study are addressed. The chapter concludes with a brief summary reminding the reader of the methodological approaches and methods used in this study and informs them of the next chapter.

4.2 Research design

The present study employed a qualitative embedded single case study research design rooted within an interpretivist paradigm (see next section). This choice stemmed from the curiosity to understand the subjective meanings that refugee women living in South Africa attach to domestic violence by focusing on their personal experiences and the subsequent intergenerational consequences rather than aiming for the transferability of findings (Ishtiaq, 2019). A qualitative approach was deemed most suitable for this study as it allows for accurate and detailed accounts of participants' experiences of domestic violence, offering flexibility that aligns well with the case study design. This alignment is particularly important based on the interest in gaining a deeper understanding of domestic violence and its transmission across two generations of refugee women, providing in-depth information about this relatively less explored phenomenon (Athota and Malik, 2019).

4.2.1 Case study

Case studies are particularly suitable for addressing “how” and “what” questions (Yin, 2018). The primary research question guiding this study was, “How is domestic violence transmitted intergenerationally within the family among refugee women from Burundi and the DRC living in Durban, South Africa?” The case study design facilitated an exploration of the intergenerational transmission of domestic violence (i.e. single case), which constituted the focus of this study. Employing an embedded single case study design allowed for a focus on two embedded units of analysis, namely refugee women from two neighbouring countries (Baskarada, 2014; Gustafsson, 2017; Yin, 2018). These units of analysis were contained within the original single case under study (Yin, 2018).

Of the three types of analysis used in case study analysis, a within-case study analysis grounded in pattern matching (discussed later in this chapter) was applied as it facilitated a comprehensive understanding of the intergenerational transmission of domestic violence among refugee women. The choice of an embedded single case study design was deliberate, as it allowed for an exploratory inquiry into the intergenerational transmission of domestic violence among refugee women from two neighbouring conflict-affected countries. This design helped mitigate the risk of misrepresentation, as the findings of this case study were not intended to be transferable to the entire refugee population living in South Africa or Durban, including those from the two countries investigated in this study. Instead, the embedded single case study design was employed to gain access to a specific population and collect data for the case study (Yin, 2018).

4.3 Research paradigm

A paradigm, as defined by Fossey *et al.* (2002 cited in Levers, 2013, p.3), is “a system of ideas, or world views, used by a community of researchers to generate knowledge. It is a set of assumptions, research strategies, and criteria for rigour that are shared, even taken for granted by that community.” People’s experiences not only constitute their realities but also contribute valuable knowledge within research. The understanding of knowledge has greatly influenced the conceptualisation of this study’s research questions, objectives, methodological approaches, data collection methods, analysis, interpretation of data, and research dissemination (Hoosain, 2013). Consequently, the study adopted the interpretivist paradigm, which, according to Ryan (2018) and Bryman (2012), emphasises the empathic understanding

of human behaviour rooted in historical and cultural events. Given the exploratory nature of the study, the study aimed to comprehend the subjective realities of refugee mothers and their adult daughters from two different countries living in Durban, South Africa, and explore the multiple meanings and ways of knowing related to domestic violence, guided by their experiences and influence on their behaviours (Levers, 2013).

The interpretivist paradigm acknowledges differences in cultures, genders, circumstances, and the development of societies (Alharahsheh and Pius, 2020). This was particularly relevant in this study as it worked not only with participants from two different countries but also with participants from two different generations. Hence, objectivity was practised throughout various stages of the study, and a reflexive journal was maintained. Engaging in reflexivity allowed the researcher to authentically write about the violent experiences endured by refugee women while upholding the rigour of the study without compromising the integrity of the research process or the scholarly objectives of the thesis. Further elaboration on this aspect is provided in the reflexivity section. Studies using the interpretivist paradigm are known to demonstrate a high level of rigour, as researchers rely on their own contributions to make sense of the various factors influencing participants' experiences and behaviours (Alharahsheh and Pius, 2020). This paradigm facilitated the researcher's understanding of refugee women's experiences of domestic violence as well as their resulting behaviours. This guided the understanding of the interconnectedness of the risk factors and mechanisms involved in the intergenerational transmission of domestic violence among refugee women (Bacchus *et al.*, 2016).

The subsequent section delves into the various aspects related to the chosen population and the sampling procedures undertaken.

4.4 Population and sampling

This section will discuss the concepts of population and sampling.

4.4.1 Study setting and population

The study was conducted in Durban, KwaZulu-Natal (KZN). The city is located on the East Coast of South Africa and is one of the biggest cities in South Africa. According to United Nations Human Settlements Programme (2020), Durban has the third-largest population in South Africa, with 4.2. million inhabitants (Statistics South Africa [StatsSA], 2023). Durban

has a large refugee population due to pull factors such as accessibility to local housing markets, health care and education facilities, and social assistance for refugees who qualify, which attract migrants to the city (Mawire *et al.*, 2020). Mawire *et al.* (2020) state that Durban boasts a diversified economy consisting of tourism, manufacturing, finance, transportation, and government sectors. Notably, there is no empirical data or statistics indicating the number of refugees living in Durban. The actual or estimated refugee population is not crucial for this case study, as the numbers do not directly impact the findings. The focus of this study is on the personal experiences of domestic violence among refugee women living in Durban and its transmission across generations. As opposed to targeting generalisation (transferability) of the study outcome to the entire refugee population in South Africa or Durban, including those from the two countries investigated in this study, the research objective is to delve into the specific experiences of the participants involved.

South Africa hosts 250 250 asylum seekers and refugees, many of whom come from Burundi, the DRC, Rwanda, South Sudan, Somalia, and Zimbabwe (UNHCR, 2022). It is difficult to estimate the percentage of women among asylum seekers and refugees in South Africa; however, in 2015, 35% of asylum seekers were women (Freedman, Crankshaw and Mutambara, 2020). Refugee³ women [G1] and their adult daughters [G2]) were sampled in this study.

³ Asylum seekers will also be referred to as refugees in this study.



Figure 3: Map of South Africa and KwaZulu-Natal

Sources: Alexander (2018) and SA Venues.com (2023)

4.4.1.1 Refugees from Burundi and the Democratic Republic of Congo

Refugees from Burundi and the DRC were specifically chosen as the primary focus of the study due to their interconnected histories. Both countries share a common experience of Belgian colonisation and have faced civil wars, leading to substantial migration within the region due to their close proximity. The porous borders between Burundi and the DRC have facilitated the movement of people, resulting in the exchange of cultural, linguistic, culinary, social, and behavioural norms, attitudes, and beliefs (Fiedler and Frère, 2018; Schwartz, 2019). Furthermore, Durban boasts a significant population of Burundian and Congolese residents, making it an ideal location to conduct the study and gather valuable insights from these communities.

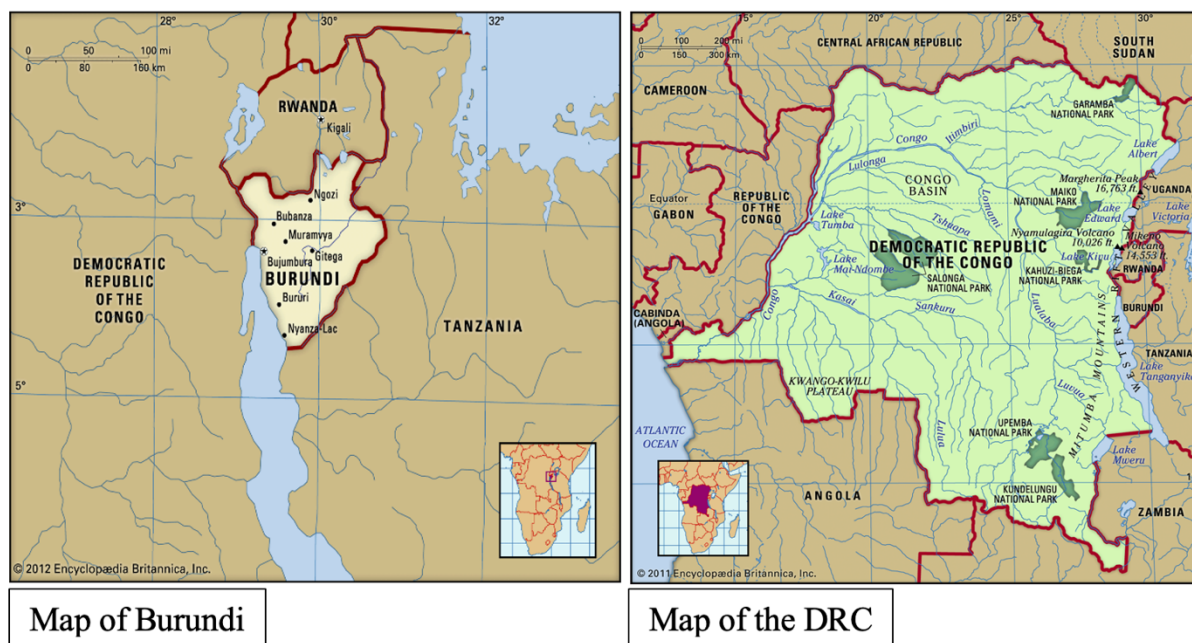


Figure 4: Maps of Burundi and the Democratic Republic of Congo

Sources: Eggers and Lemarchand (2024) and Wiese *et al.* (2024)

4.4.2 Sample size

The study consisted of a total sample size of 60 ($n=60$) women, comprising 30 mother-daughter pairs (embedded units) from Burundi and the DRC (Table 1). The researcher focused exclusively on mothers and daughters to examine how domestic violence transmission occurs between generations of the same gender.

Table 1: Sample size breakdown

Burundi refugee women	DRC refugee women
15 mothers	15 mothers
15 adult daughters	15 adult daughters

Mothers in this case study were either biological or non-biological, with the latter holding the cultural role of 'mother' through guardianship, such as stepmothers, aunts, older sisters, or family friends. It is important to note that the sample size was predetermined to meet the requirements for the PhD by the Department of Social Work and Social Development. This sample size was deemed sufficient to offer a new and comprehensive understanding of the

intergenerational transmission of domestic violence among refugee women from the two countries (Sim *et al.*, 2018).

Hennink and Kaiser (2022, p. 2) explain that data saturation ‘refers to the point in data collection when no additional issues or insights are identified, and data begin to repeat, so that further data collection redundant, signifying that an adequate sample size is reached.’ Failing to achieve data saturation is known to pose risks to the quality, rigour, and trustworthiness of qualitative study findings (Braun and Clarke, 2019; Vasileiou *et al.*, 2018). Therefore, the researcher considered data saturation to minimize these risks, which could otherwise undermine the depth of the research inquiry. For the FGDs, 20 participants were selected, while 40 participants were chosen for individual semi-structured interviews. (Please refer to the data collection section (4.4), subsections 4.4.1 (FGD) and 4.4.2 (individual semi-structured interviews) for further details. Throughout the data collection process, the initial sample size remained unchanged. This decision was made as data saturation became evident during individual semi-structured interviews and FGDs, where no new data, codes, or themes emerged, rendering further information from additional individual semi-structured interviews and FGDs redundant.

4.4.3 Sampling technique

Purposive sampling was employed to select the population sample for this study. Purposive sampling is a non-probability sampling method (Barakamfitye, 2017; Etikan and Bala, 2017), where samples are chosen based on specific characteristics to gather information from refugee women with relevant experiences and knowledge related to domestic violence (Shaheen, Pradhan and Ranjee, 2019). This sampling technique was chosen because it allowed for the identification and selection of participants whose characteristics aligned with the research objectives and could effectively address the research questions (Andrade, 2021; Anney, 2014; Shaheen *et al.*, 2019). This consequently contributed to valuable insights into the dynamics of intergenerational transmission of domestic violence within the specified population (refugees) and gender (women). Defining the sample characteristics aimed to enhance rigour and ensure the trustworthiness of both the data and the results (Campbell *et al.*, 2020). The specific characteristics used for participant selection were outlined in the eligibility criteria, which were utilised to assess the suitability of potential participants for the study. See below for details.

3. 4.4.3.1 *Eligibility criteria*

The following eligibility criteria were used to select participants for the study:

1. Participants had to be a mother and daughter, either biologically related or connected through guardianship⁴.
2. Both participants needed to reside in Durban during the study period.
3. The reason for their relocation to South Africa must have been to seek refuge, either as refugees or asylum seekers.
4. All participants had to be within the age range of 18 to 65.
5. The participants' country of origin is either Burundi or the DRC.
6. Participants could have any marital status (i.e. married, divorced, single, in a relationship).
7. Participants could be employed, self-employed, unemployed, or pursuing studies at a university, Technikon, or other educational institutions. This aspect was important in understanding the potential role of socio-economic status and educational levels as risk factors for domestic violence. Additionally, it aimed to explore the intergenerational transmission of domestic violence among refugee women from different demographic backgrounds.
8. All participants must have resided in South Africa for a minimum of five years.
9. Participants needed to be capable of speaking Kiswahili⁵ and/or English.
10. All participants must have either witnessed or experienced domestic violence, whether in their past or present relationships. Those who witnessed domestic violence could have observed various forms of it in their own homes.

The exclusion criterion for the study was the following:

1. Women who had experienced a severe traumatic (domestic violence) event resulting in injuries or hospitalisation within the three months prior to the study.

⁴ Involving both biological and non-biological mother-daughter pairs in this study will help determine whether heredity plays a significant role in the transmission of domestic violence within refugee families.

⁵ The research was conducted in both English and Kiswahili.

4.4.4 Sampling procedure

This subsection presents the sampling procedures employed (Figure 3). Comprehensive demographic profiles of all participants are provided and categorised as participant demographic information for Congolese mothers, Congolese adult daughters, Burundian mothers, and Burundian adult daughters, detailed in Tables 2, 3, 4, and 5, respectively. Additionally, Tables 6 and 7 contain tabulated representations of specific mother-adult pairs, namely Congolese mother-daughter and Burundian mother-daughter relationships.

The following is dedicated to data collection, discusses the two methods employed, and justifies their relevance to the study. The procedures undertaken during data collection are also explained.

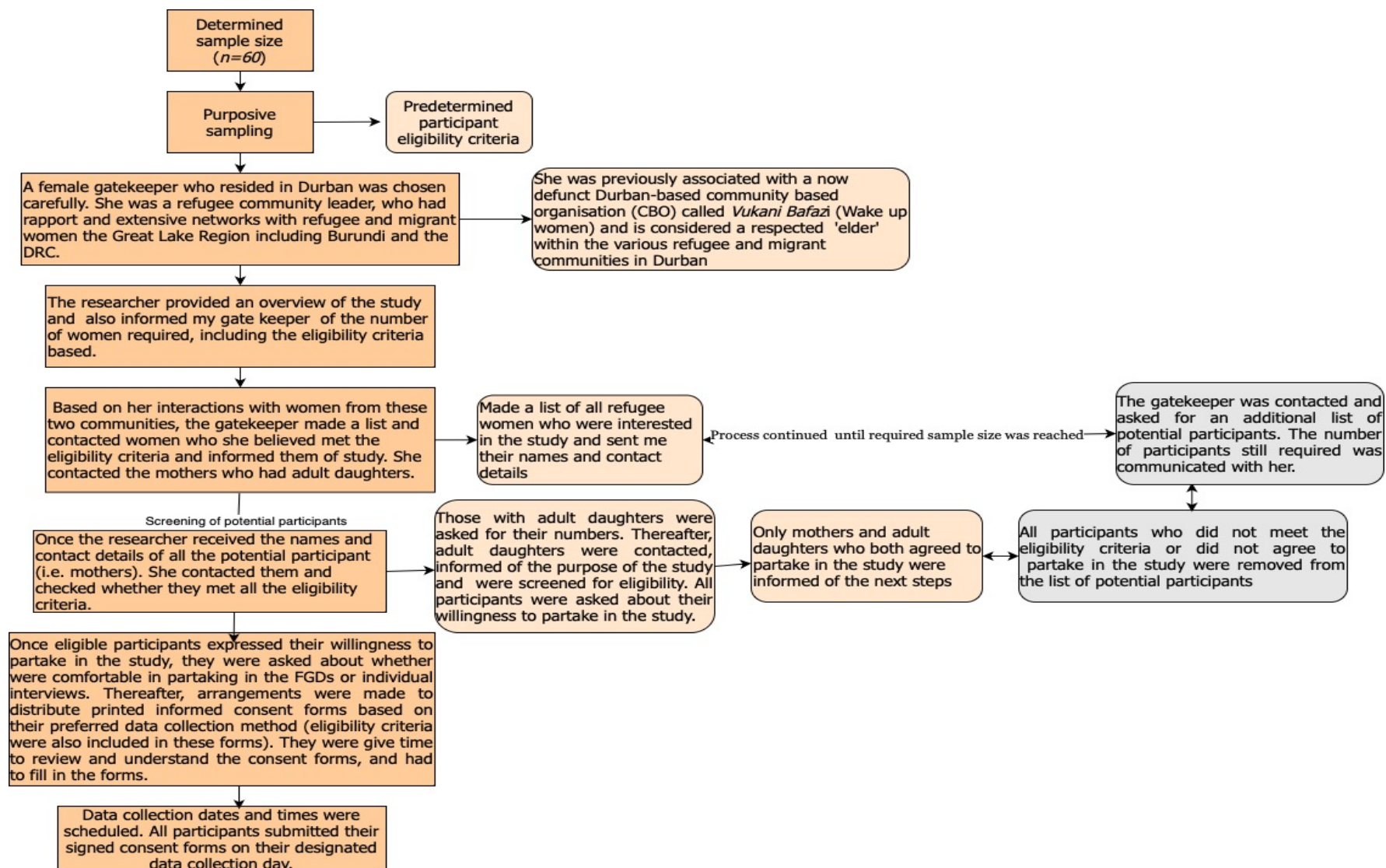


Figure 5: Sampling process flowchart

Table 2: Participant demographic information (Congolese mothers)

Pseudonym	Age	Place of birth	Year arrived	Marital status	Education	No. of children	Employment status	Religion
Lea	36	DRC	2008	Married	High school	3	Self-employed	Christian
Sikitu	40	DRC	2012	Married	Tertiary	7	Self-employed	Christian
Prospère	44	DRC	2010	Single	High school	2	Self-employed	Christian
Naka	65	DRC	2003	Widowed	Primary	10	Unemployed	Christian
Emmanulla	47	DRC	2001	Married	High school	3	Self-employed	Christian
Bilqis	36	DRC	2017	Divorced	Primary	3	Self-employed	Muslim
Iris	53	DRC	2008	Married	Finished high school	3	Self-employed	Christian
Malkiya	42	DRC	2000	Married	High school	5	Housewife	Christian
Candice	36	DRC	2012	Married	Primary	7	Housewife	Christian
Adette	46	DRC	2016	Married	Primary	3	Self-employed	Christian
Kinza	52	DRC	2002	Married	Tertiary	2	Self-employed	Muslim
Maira	53	DRC	1999	Divorced	None	6	Unemployed	Muslim
Zaylee	48	DRC	2007	Divorced	Primary	4	Self-employed	Christian
Eléa	53	DRC	2001	Married	Finished high school	4	Employed	Catholic
Wajiha	50	DRC	1998	Married	High school	6	Self-employed	Muslim

Table 3: Participant demographic information (Congolese adult daughters)

Pseudonym	Age	Country of birth	Year of arrival/birth	Marital status	Education	No. of children	Employment status	Religion
Zeenat	22	DRC	2000	Single	Tertiary	0	Full-time student	Muslim
Avril	22	DRC	2001	Single	Tertiary	0	Full-time student	None
Abir	27	DRC	1999	Single (divorced)	Completed High school	1	Self-employed	Muslim
Sanctifiée	21	DRC	2007	Single	Completed high school	1	Self-employed	Christian
Dikla	19	DRC	2010	Single	Dropped out in primary school	0	Unemployed	Christian
Donatille	21	South Africa	2001	Single	Completed high school	0	Unemployed	Christian
Cyrie	19	DRC	2012	Single	Dropped out in high school	0	Unemployed	Muslim
Fridoline	19	South Africa	2003	Single	Completed high school	0	Unemployed	Christian
Murelle	23	DRC	2017	Single	Completed high school	0	Unemployed	Christian
Mawiya	27	DRC	2013	Divorced	Dropped out in primary school	1	Employed	Muslim
Tumbuka	27	DRC	2018	Single	Dropped out of high school	1	Employed	Muslim
Zuri	20	DRC	2013	Single	Tertiary	0	Full-time student	Christian
Kaisa	22	DRC	2000	Single	Completed high school	0	Employed	Christian
Kenene	18	DRC	2008	Single	Final year	0	Full-time student	Christian
Phiona	23	DRC	2017	Single	Completed high school	0	Unemployed	Christian

Table 4: Participant demographic information (Burundian mothers)

Pseudonym	Age	Place of birth	Year of arrival	Marital status	Education	No. of children	Employment status	Religion
Aseela	45	Burundi	2005	Married	Tertiary	2	Self-employed	Muslim
Badriya	37	Burundi	2010	Married	Dropped out in primary school	1	Employed	Muslim
Hessa	48	Burundi	2007	Married	Dropped out in primary school	6	Self-employed	Muslim
Inaya	51	Burundi	2006	Married	Dropped out in primary school	4	Housewife	Muslim
Waqeefa	40	Burundi	2015	Married	High school	3	Housewife	Muslim
Lujain	39	Burundi	2009	Married	Dropped out in primary school	4	Self-employed	Muslim
Reen	42	Burundi	2008	Married	High school	3	Employed	Muslim
Lamees	40	Burundi	2000	Married	High school	5	Self-employed	Muslim
Siham	37	Burundi	2009	Married	Dropped out in primary school	4	Housewife	Muslim
Khuloud	34	Burundi	2004	Married	Dropped out in primary school	7	Self-employed	Muslim
Chinira	41	Burundi	2015	Married	Finished high school	4	Employed	Christian
Yakoota	49	Burundi	2005	Married	Dropped out in primary school	3	Housewife	Muslim
Beulah	47	Burundi	2003	Married	Tertiary	3	Employed	Roman Catholic
Thurayyah	43	Burundi	2008	Married	Dropped out in primary school	5	Housewife	Muslim
Shukriya	47	Burundi	2013	Married	Dropped out in primary school	3	Housewife	Muslim

Table 5: Participant demographic information (Burundian adult daughters)

Pseudonym	Age	Place of birth	Year of arrival/ birth	Marital status	Education	No. of children	Employment status	Religion
Mwamini	18	Burundi	2005	Single	Completed high school	0	Full-time student	Muslim
Arwa	24	Burundi	2006	Single	Tertiary student	0	Full-time student	Muslim
Ghaliya	19	South Africa	2003	Single	Tertiary student	0	Full-time student	Muslim
Basma	18	South Africa	2004	Single	Final year high school	0	Full-time student	Muslim
Fareeha	24	Burundi	2015	Married	Completed high school	2	Housewife	Muslim
Yumn	20	Burundi	2012	Single	Final year high school	0	Full-time student	Muslim
Husn	23	South Africa	1999	Single	Tertiary student	0	Full-time student	Muslim
Wadida	21	Burundi	2004	Married	Dropped out of high school	0	Housewife	Muslim
Lubaba	21	Burundi	2005	Married	Completed high school	1	Housewife	Muslim
Tricia	22	South Africa	2002	Single	Final year high school	0	Full-time student	Muslim
Ninziza	18	South Africa	2004	Single	Final year high school	0	Full-time Student	Roman Catholic
Kammla	18	Burundi	2008	Single	Final year high school	0	Full-time student	Muslim
Falak	20	Burundi	2008	Single	Tertiary diploma	0	Unemployed	Muslim
Ghusoun	20	Burundi	2015	Single	Dropped out of high school	1	Unemployed	Muslim
Intisar	27	Burundi	2016	Married	Dropped out in primary school	1	Employed	Muslim

Table 6: Congolese mother-daughter pairs

Mother	Daughter
Lea	Phiona*
Sikitu	Cyrie
Prospère	Fridoline
Naka	Murelle
Emmanuella	Donatille
Bilqis	Tumbuka
Iris	Kenene
Malkiya	Kaisa
Candice	Zuri*
Adette	Dikla
Kinza	Zeenat
Maira	Abir
Zaylee	Sanctifiée
Eléa	Avril
Wajiha	Mawiya

Table 7: Burundian mother-daughter pairs

Mother	Daughter
Aseela	Mwamini*
Badriya	Basma
Hessa	Ghaliya
Inaya	Arwa
Waqeefa	Fareeha*
Lujain	Ghusoun
Reen	Kammla
Lamees	Husn
Siham	Yumn*
Khuloud	Wadida
Chinira	Tricia*
Yakoota	Lubaba
Beulah	Ninziza
Shukriya	Intisar
Thurayyah	Falak

* Mother-daughter pairs by guardianship included stepmothers and foster mothers, such as aunts, older sisters, or family friends ($n=6$)

4.5 Data Collection

Ensuring that the voices and experiences of refugee women, a marginalised population in South Africa, were heard in this case study was crucial. To achieve this, two primary data collection methods were employed, namely: FGDs and individual semi-structured interviews. Both interviews were conducted in person. Using a combination of qualitative data collection methods in this case study facilitated triangulation (methodological triangulation) (Creswell and Creswell, 2018; Yin, 2018), enhancing the rigour of the findings. Figure 5 illustrates the data collection process. The data collection occurred in a two-phase process: In phase I, FGDs were conducted, followed by phase II, where individual semi-structured interviews were conducted. As explained by Yin (2018), ensuring transparency in the data collection process of a case study reflects the commitment to establishing the credibility and dependability of the research findings.

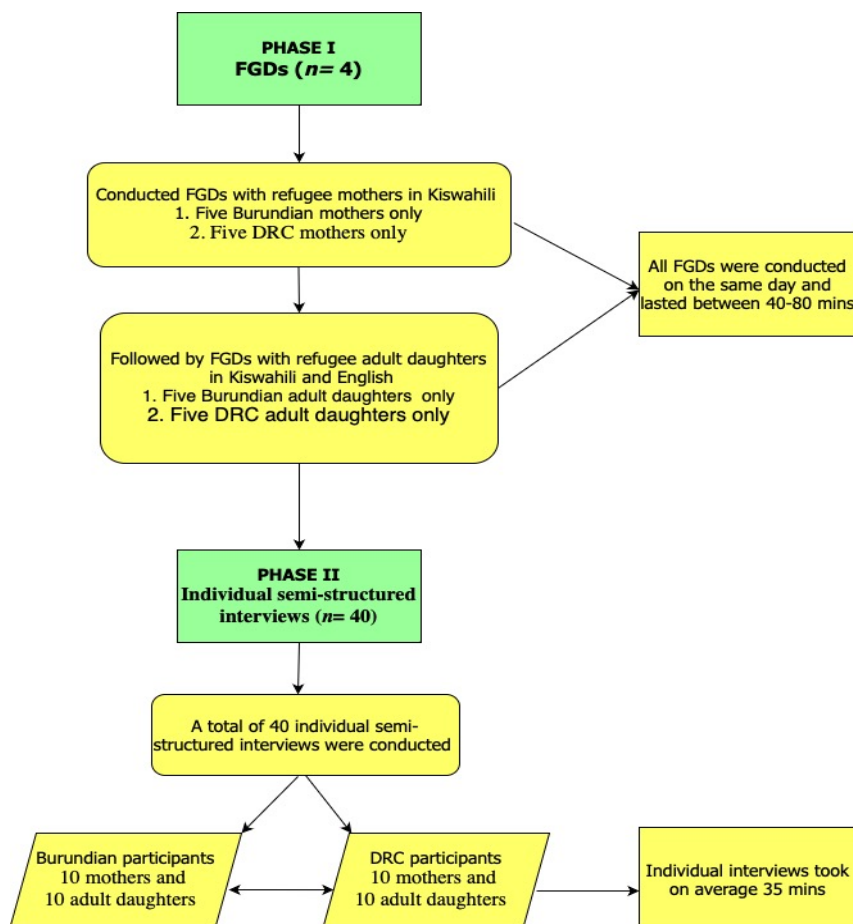


Figure 6: Flowchart depicting data collection process

Both the FGDs and individual interviews took place at the Denis Hurly Centre, a community centre located in central Durban. This venue offered a secure, private, and confidential setting, enabling participants to engage in extensive and open discussions on the research topic. Moreover, the community centre provided a safe space to confidently and easily collect the necessary data.

4.5.1 Focus group discussions

Carter *et al.* (2014) characterise FGDs as interactive and dynamic platforms where study participants engage in discussions about the research phenomenon and help explain participants' perceptions and identify the key aspects, they consider important. In this case study, FGDs were used to prompt discussions on refugee women's observations, attitudes, experiences, and socio-cultural norms pertaining to domestic violence. Questions for the FGD were developed with careful consideration of the study's research design, questions, and objectives and conceptual framework. Additionally, the researcher collaborated with her supervisor to co-construct these discussion questions. Some questions from the interview guides included:

- How would you describe your observations of family relationships in your refugee community here in Durban compared to what you observed growing up in your home country?
- What are the cultural, religious, and societal norms, attitudes, and beliefs that may contribute to the perpetuation of domestic violence in refugee homes in Durban?
- What topics are acceptable or unacceptable to discuss when it comes to one's family?
- What values, beliefs, and attitudes about being a man or a woman and relationships with partners would you like to pass on to your future generations?

These questions were posed in the FGDs with mothers (see Annexure A). In contrast, the FGDs with adult daughters included questions such as (see Annexure B):

- “How would you describe domestic violence within refugee families in your community and your own home?”
- “How would you describe your own values, beliefs, and attitudes about relationships, being a woman, and being a man that you would like to pass on to your future generations?”

The intention in posing these questions was to allow participants the opportunity to generate data that delved into the research objectives. This included the primary objective, which aimed to explore the intergenerational transmission of domestic violence among refugee women within family settings from Burundi and the DRC living in Durban, South Africa, and the following sub-objectives:

- To explore the risk factors for intergenerational transmission of domestic violence within refugee families
- To explore the mechanisms of intergenerational transmission of domestic violence within refugee families across two generations of women within the same family

Furthermore, the FGDs facilitated spontaneity and synergy as participants encouraged one another to elaborate on statements, clarified questions to one another, and expressed agreement or disagreement with certain views they held, leading to sharing of experiences (Tausch and Menold, 2016). In total, four audio-recorded FGDs were conducted, with five participants from each country selected from the pool of 20 participants. These FGDs were primarily conducted in Kiswahili during the mother FGDs (although a few women occasionally chose to speak English), and a mixture of English and Kiswahili was used during the adult daughter FGDs.

The FGD participants were divided as highlighted in Table 8.

Table 8: Focus group discussions participant breakdown

Burundi refugee women	DRC refugee women
5 mothers only	5 mothers only
5 adult daughters only	5 adult daughters only

The FGDs were conducted with small group sizes because they offered a straightforward, cost-effective, and efficient means of accessing information through group interactions (Busetto, Wick and Gumbinger, 2020). The FGDs also allowed the researcher to act as the main moderator of these discussions, enabling them to begin and conclude the FGDs and, more importantly, influence the interactions between participants to potentially uncover deeper insights into the transmission of domestic violence within refugee families, particularly among women (Busetto *et al.*, 2020; Femdal and Solbjør, 2018). The FGDs were deemed appropriate for this study as they aimed to explore the risk factors and mechanisms associated with the intergenerational transmission of domestic violence. This method provided the potential to

uncover deeper insights into the transmission of domestic violence within refugee families, particularly among women. Some emerging ideas from the FGDs that were unexpected included refugee women's adherence to socio-cultural norms and acceptance of domestic violence, their reluctance to interfere in other women's private affairs or aid children experiencing sexual abuse, and the importance they placed on family privacy.

However, some mothers in both FGDs were reluctant to engage in the discussion. This may be due to the researcher influencing hesitancy for participation as both an insider and outsider (Buys *et al.*, 2022). This was primarily due to the fact that the researcher was considerably younger ('outsider') than all the women interviewed in the mother-only FGDs. Additionally, background as a former refugee ('insider') presented further challenges. The power dynamics, which became apparent during these FGDs, were largely shaped by socio-cultural norms, particularly regarding the discussion of private family matters in public and interacting with younger women (further discussed in Chapter 6).

At times, certain participants had to be encouraged to share their views, regardless of how insignificant they felt their contributions were. However, participants' decisions to not speak were also respected. This occasionally led to another challenge, where participants provided responses that did not directly address the question asked. In such instances, intervention was avoided to avoid disrupting the conversation or asserting dominance over the participants. Fortunately, other participants redirected the discussion back to the initial question or sought clarification from the researcher, which provided an opportunity to restate questions and pose probing inquiries to clarify statements made during the conversations.

In the FGDs with adult daughters only, some participants struggled to participate, primarily because they found it challenging to conceptualise domestic violence or were uncertain about how much to disclose regarding the phenomenon. Nevertheless, the broad nature of the FGD questions provided participants with the opportunity to share their understanding of domestic violence and encouraged discussions about their own or others' experiences in a comfortable and safe environment. The general nature of the FGD questions aimed to alleviate any discomfort or distress in participants, which may have contributed to their reluctance to disclose personal matters within a group setting (Busetto *et al.*, 2020). However, various other factors, as mentioned above, also influenced some participants' reluctance to engage fully in the FGDs.

The four FGDs took approximately 17 hours to transcribe, with each recording lasting an average of 80 minutes, except for one that took approximately 40 minutes. As a result, the transcription process yielded 50 pages of FGD transcripts.

4.5.2 Individual semi-structured interviews

The rationale for using individual semi-structured interviews was to acquire a comprehensive understanding of the study participants' experiences of domestic violence as well as how domestic violence is transmitted intergenerationally within refugee families, particularly from mothers to their adult daughters (Carter *et al.*, 2014). Individual semi-structured interviews prioritise insights derived from participants' opinions, subjective experiences, and motivations rather than seeking a generalised understanding of the phenomenon (Adeoye-Olatunde and Olenik, 2021; Busetto *et al.*, 2020; Yin, 2018). Individual semi-structured interviews provided rich data that delved into the personal experiences of the participants, including their beliefs, attitudes, values, and norms. Consequently, this facilitated a more nuanced and insightful analysis of the intergenerational transmission of domestic violence among women in refugee families. These insights were derived from carefully crafted interview questions designed to delve into participants' lived experiences. Interview questions were developed with careful consideration of the study's research design, questions, objectives, and conceptual framework. These questions explored the participants' childhood experiences, current experiences, beliefs regarding domestic violence, values, and interactions with family members, spouses/romantic partners (for those married or in romantic relationships), parents, and children.

Some of the questions posed to refugee mothers included:

- How would you describe life growing up in your home?
- What did you learn from observing your mother's experiences of domestic violence, especially regarding what it means to be a wife and mother?
- How do you think what you witnessed and/or experienced within your family growing up has affected your own experiences of domestic violence as a refugee woman in Durban?
- What beliefs, knowledge, and values about motherhood and being a wife would you like your daughter and future family members to continue, based on what you learned from your mother and other women in your family or community?

The above-mentioned questions were posed specifically to refugee mothers (see Annexure C). Questions posed to adult daughters included (see Annexure D):

- What factors do you think make refugee women like yourself and your mother vulnerable to domestic violence in Durban?
- How has your understanding of domestic violence been influenced by observing the relationship between your parents?
- How has the knowledge you have about domestic violence also been influenced by social, religious, and cultural beliefs and attitudes?

Some of the questions had prompts that were used to help participants answer more comfortably, given the sensitive nature of the study. These questions were used to help elucidate the primary objective, which aimed to explore the intergenerational transmission of domestic violence among refugee women from Burundi and the DRC within family settings living in Durban, South Africa, and the sub-objectives:

- To investigate the risk factors for the intergenerational transmission of domestic violence within refugee families
- To examine what is transmitted in relation to domestic violence between refugee mothers and their adult daughters
- To explore the mechanisms of intergenerational transmission of domestic violence within refugee families across two generations of women in the same family

The semi-structured interviews involved a total of 40 participants, and all interviews were audio-recorded. The breakdown of participants from Burundi and the DRC is presented in Table 9.

Table 9: Individual semi-structured interview participant breakdown

Burundi refugee women	DRC refugee women
10 mothers	10 mothers
10 adult daughters	10 adult daughters

All the questions were conducted in English and/or Kiswahili. This approach proved highly beneficial during interviews, allowing for the exploration of additional ideas put forward by participants. Using both languages (dependent on the participant) enabled access to deeper

insights from participants and even allowed the researcher to provide examples based on her interactions with participants (Adams, 2015; Adeoye-Olatunde and Olenik, 2021). This approach increased participants' comfort levels, transforming the interviews from daunting narrations of their lives into discussions about the challenges faced by themselves and other refugee women in their communities. Unlike the FGDs, where some participants found it difficult to discuss domestic violence even in a general group setting, the individual interviews provided a flexible and safe space for participants to openly discuss their own and other women's experiences of domestic violence (Carter *et al.*, 2014).

Individual semi-structured interviews allowed for a more organic and adaptive interaction between the researcher and the participants, facilitating deeper exploration and understanding of their experiences and perspectives. The researcher could respond to participants' cues and delve deeper into sensitive aspects of domestic violence, which was easier to do due to the privacy and safety provided by individual interviews compared to the FGDs. This contributed to the richness and depth of the data obtained. It was during these individual interviews that the prevalence of domestic violence, including child maltreatment, particularly sexual abuse experienced by refugee adult daughters, emerged most prominently. The normalisation and acceptance of domestic violence by participants also added to the initial observations from the FGDs.

One prominent drawback, as highlighted by Adams (2015), is the time-consuming nature of individual semi-structured interviews. This was particularly true for the audio transcription, which took approximately 150 hours, with each recording lasting an average of 35 minutes (ranging from a few minutes to an hour). This transcription process resulted in 209 pages of interview transcripts. Another challenge encountered in the individual interviews was participant bias, where participants were influenced by what was socially accepted regarding domestic violence (Belina, 2023). Despite being alone in a private and secure space, some participants found it difficult to discuss their experiences in depth and instead preferred to provide general information about women's experiences. This dynamic also reflected the positionality and power dynamics between participants and the researcher (Buys *et al.*, 2022). In one instance, an interview lasted less than 10 minutes, despite the researcher's best efforts to ask more general questions related to the research topic. These experiences were significant because of a key idea that emerged from individual semi-structured interviews, which validated observations made in the FGDs concerning the need for refugees to protect family privacy.

Lastly, data or evidence from both FGDs and individual semi-structured interviews were converged into the findings. This is covered in the section that follows on data analysis procedures.

4.6 Analysis procedures

A reflexive thematic analysis (TA) (Braun and Clarke, 2006) was used to analyse the data collected in this study. According to Braun and Clarke (2023), conducting reflexive TA requires a reflexive, recursive engagement with one's data to produce a robust analysis. A contextualist epistemological position was used in this study as it would be difficult to separate responses based on the participants' knowledge and responses shaped by the researcher's values and expertise (Braun and Clarke, 2021). In line with contextualism, a reflective stance was maintained, acknowledging the researcher's inherent biases and subjectivity. This conscious stance guided the interpretative interactions with the data, yielding contextually grounded insights (Braun and Clarke, 2021). Given its positioning as the intermediary stance between (post)positivism and constructivism (Braun and Clarke, 2021), a hybrid approach was used when conducting the reflexive TA.

It is worth noting that the data analysis was conducted manually without the use of any software, as working with data manually allows for a deeper familiarity and understanding of the acquired data. Throughout the data analysis, the researcher transitioned between inductive and deductive analysis when coding the dataset. An inductive analysis embodies a bottom-up approach rooted within the data itself during the coding and theme formation stages (Braun and Clarke, 2021; Swain, 2018; Xu and Zammit, 2020). In contrast, deductive analysis represents a top-down approach driven by pre-existing theoretical constructs, such as the ones within this study's conceptual framework (Braun and Clarke, 2006; Braun and Clarke, 2021; Swain, 2018).

The focus was directed towards exploring data meaning by transitioning from a semantic level (where analysis delves into surface-level explicit meanings) to a latent level (uncovering deeper, implicit meanings) (Braun and Clarke, 2006; Braun and Clarke, 2021). The researcher also shifted from an experiential to a critical understanding of participants' experiences as well as from an essentialist to relativist theoretical framework. This method of analysis was chosen to provide a more complete and richer understanding of the studied phenomenon (Kiger and Varpio, 2020). This analytical approach was consciously chosen to offer a comprehensive and

richer understanding of the studied phenomenon, as advocated by Kiger and Varpio (2020). This hybrid method, spanning ontological perspectives, was driven by the necessity to both describe and explain participants' experiences of domestic violence. It sought to grasp the meanings attributed by participants while utilising their experiences to understand the intergenerational transmission of domestic violence among refugee women and their adult daughters. This exploration was facilitated by delving into the transmission mechanisms as conceptualised within the conceptual framework of the present study. The subsequent section provides an overview of how the data analysis was conducted using the six phases of thematic analysis.

4.6.1 Phase 1: Familiarisation with the data

Data was gathered from a total of 60 participants through focus group discussions and individual semi-structured interviews. The data was then diligently transcribed, except for a single transcript, which was expertly transcribed by a qualified researcher with a master's degree. Adhering to Braun and Clarke's (2006) guidance, both translation and transcription were executed verbatim. This comprehensive data collection and transcription process, coupled with note-taking and journaling, allowed the researcher to be deeply immersed in the data. Immersion is explained by Braun and Clarke (2021) as the process of developing an intimate and deep knowledge of one's data. During this initial phase, the engagement with the data was not passive; the data was actively delved into, contemplating how participants' accounts could address both the primary and secondary research questions, particularly concerning the transmission of domestic violence among refugee women. These first-hand accounts were then diligently linked with theoretical assumptions. This process of familiarisation revealed the complexities and richness of the data (Clarke, 2018). Writing notes while reflecting on emerging patterns and challenging the researcher's own assumptions based on both her academic background and personal experiences facilitated the development of critical and analytical insights into the data's nuances (Clarke, 2018; Braun and Clarke, 2021).

This process enabled the conception of the initial ideas from the data, which were greatly linked to the conceptual framework used in this study. Notes of these ideas were made as the researcher relistened and re-read the transcripts. This allowed the researcher to examine the accuracy of the recording's transcription. This helped further understand the data recall aspects of the interviews and FGDs, such as participants' body language, expressions and gestures. It was at this phase that the data from the FGDs and individual semi-structured interviews were

converged, and the initial ideas that were similar from both methods were noted. The aim of the FGDs was to provide a broader understanding of domestic violence in the two refugee communities, particularly in terms of the socio-cultural context. In comparison, the individual semi-structured interviews provided more nuanced insights into domestic violence and its transmission across the two generations of refugee women from personal experiences to broad socio-cultural contexts.

4.6.2 Phase 2: Data coding

Building upon the familiarisation phase, initial data codes were generated following Braun and Clarke's (2021) framework, which spans two continua: from semantic to latent and from data-driven to theory-driven codes. The more theoretical codes lean towards latency, while inductive codes embody greater semantic context. These codes function as analytical units, which, as Clarke (2018) describes, constitute "little things" that merge into themes upon clustering. These codes capture interesting things within the data. Throughout this flexible, organic process, codes evolved over time, evoking what held interest and analytical relevance within the data. During this phase, no major significant differences between the codes emerging from participants from the two countries were observed. Instead, the major differences in the data were evident between the two generations. Consequently, after coding the data from each generation separately for both countries, the final codes were categorised based on different generations due to the similarities observed between data from participants from the two countries. Detailed notes of the differences and similarities observed were made. Refer to Annexures E and F for data quotes, generated codes, and code types for mothers and adult daughters, respectively.

4.6.3 Phase 3: Generating initial themes

The process of generating the initial themes commenced after the initial coding of the data, following the approach highlighted by Xu and Zammit (2020). During this stage of data analysis, a series of activities were engaged in, including an analysis of codes sharing similar meanings within both the mother (G1) and adult daughter (G2) codes from both countries separately. Subsequently, themes were looked for by aggregating and clustering interconnected codes across the dataset that shared a fundamental idea or concept, thereby revealing a patterned meaning. This endeavour aimed to present cohesive and meaningful responses to both the primary research question and secondary questions, essentially forming the foundation for candidate themes (Braun and Clarke, 2021).

an important pattern of shared meaning related to the data (Braun and Clarke, 2021). Additionally, the themes were also assessed to check whether they collectively highlighted the most important patterns across the dataset in relation to the research question (Braun and Clarke, 2021). Once these were confirmed, reflection and revisions of the themes and subthemes were conducted. This revision process involved consolidating certain themes, converting some into subthemes while retaining others as they were.

Braun and Clarke (2021) explain that this phase entails not only the analysis of the interconnections between themes, current knowledge, and practical implications within one's field of inquiry but also emphasises situating one's research within the broader contextual landscape.

4.6.5 Phase 5: Refining, defining, and naming themes

This phase meticulously refines the analysis, ensuring the precise delineation of each theme along with a concise synopsis of both the theme and its corresponding subthemes. The final thematic map and their corresponding subthemes are visually depicted in Figure 8.

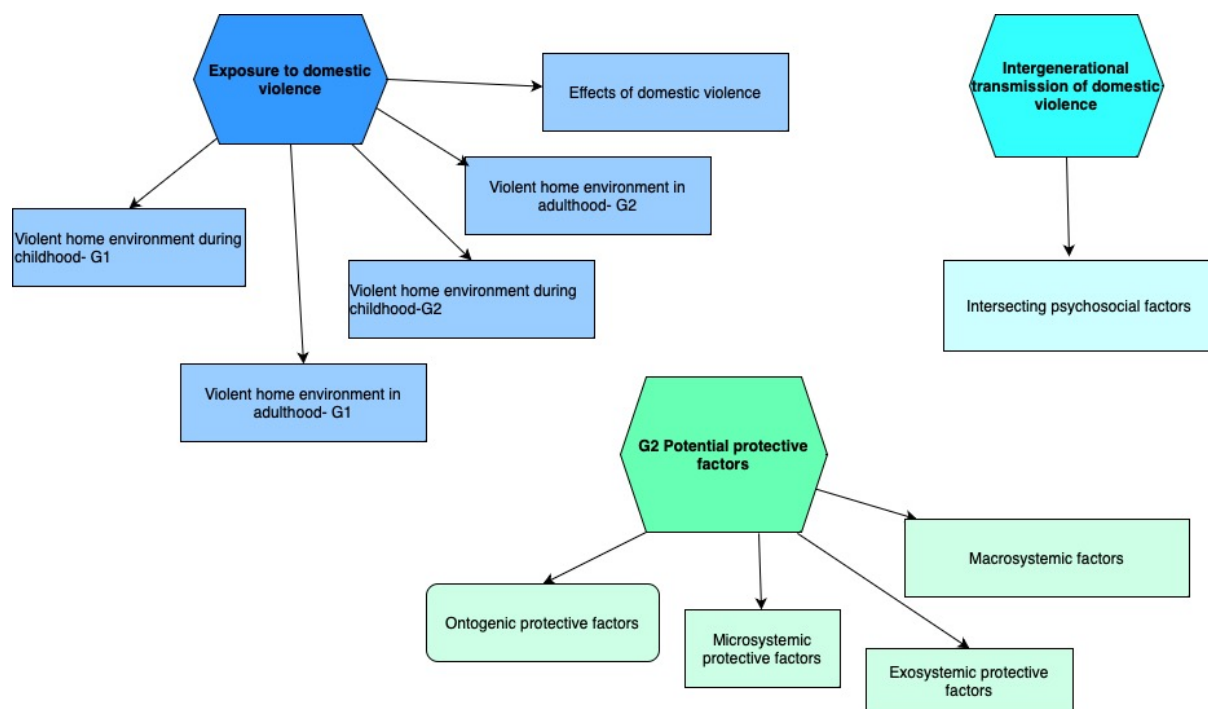


Figure 8: Final thematic map with three (3) main themes for both the mothers (G1) and adult daughters (G2)

4.6.6 Phase 6: Case study analysis

During this phase, a comprehensive within-case analysis was conducted, grounded in pattern matching of the identified themes, which encapsulated the important discoveries derived from the countries and generations. Significant patterns within the case data were closely examined (Yin, 2018), based on the TA and the notes made during that analysis. These patterns predominantly originated from the two generations rather than country-specific differences.

Pattern matching involved comparing the findings (i.e. patterns and themes) from this case study with the conceptual framework, which strengthened the rigour of the study by providing a systematic approach to the analysis of data (Yin, 2018). Refer to the table below for a presentation of the primary patterns that emerged during the within-case analysis of the themes.

Table 10: Illustrating the within-case analysis findings highlighting the key similarities and differences in the themes

Within-case analysis findings: Similarities and differences in themes		
Common themes	Pattern differences	Pattern similarities
Theme 1: Exposure to domestic violence		
Subthemes: Violent home environment for G1 and G2 participant	1. G1 participants disclosed that they rarely witnessed interparental partner violence when growing up, while a few stated that they never witnessed conflicts between their parents. 2. Most G2 participants reported witnessing interparental partner violence.	1. Both generations of women disclosed experiencing violence in the home. G1 reported mostly physical, verbal, and financial abuse, while G2 cited experiencing physical, emotional, verbal, and sexual abuse⁶. 2. Both generations acknowledged their mothers' perpetration of violence against them. However, G1 participants revealed that mothers were more often seen as disciplinary figures, while G2 participants acknowledged mothers' perpetration of violence beyond disciplinary measures.
Subtheme: Impacts of domestic violence	1. Many G1 participants advocated for victims of domestic violence to stay in the relationship regardless of the outcome. 2. G2 participants demonstrated a relatively good understanding of the psychological impacts of domestic violence on family relationships and recognised the need for victims to leave their abusers.	
Theme 2: Intergenerational		

⁶ This was the case for a handful of participants.

Within-case analysis findings: Similarities and differences in themes		
Common themes	Pattern differences	Pattern similarities
transmission of domestic violence		
Subtheme: Intersecting psychosocial factors	1. G1 participants find South African socio-cultural norms and attitudes towards domestic violence inappropriate and unacceptable, preferring to avoid discussing personal issues, particularly domestic violence, with anyone. In contrast, G2 participants aspire for their mothers to adopt a more open-minded attitude towards discussing domestic violence, reflecting their own desire for openness. 2. G1 participants are conscious of preserving their cultural and religious identities, learned from their parents, even in relation to domestic violence, intending to pass these values down to their own children. Conversely, G2 participants aim to break away from problematic cultural and religious norms learned from their parents, particularly their mothers, regarding domestic violence. 3. Many G1 participants are reluctant to discuss their experiences of domestic violence with their children, while G2 participants actively seek healthier and more open relationships with their spouses and children. 4. G2 participants observed older women using social media to harass and cyberbully others, with some experiencing digital intimate partner violence themselves.	
Theme 3: G2 Potential protective factors		
Subtheme: Ontogenic factors	G2 participants exhibited an attitudinal rejection of all forms of domestic violence, especially intimate partner violence. Additionally, a higher number of G2 participants were educated compared to G1 participants.	

Within-case analysis findings: Similarities and differences in themes		
Common themes	Pattern differences	Pattern similarities
Subtheme: Microsystem protective factors effects of domestic violence	G2 participants expressed a desire for healthier relationships with their spouses and children, emphasising the importance of open communication between themselves and their children.	
Subtheme: Exosystem	G2 participants advocated for women to unite in combating domestic violence, noting that women's failure to condemn such violence perpetuated the issue within their communities. They also emphasised the need for safe and empathetic spaces where victims of domestic violence could seek assistance.	
Subtheme: Impacts of education and social media on domestic violence awareness	G2 participants emphasised that educational programmes at school introduced them to the concept of domestic violence, its risks, and where to seek help. They also highlighted the significant role that social media plays in raising awareness about the prevalence and consequences of domestic violence.	

4.6.7 Phase 7: Writing up

According to Braun and Clarke (2021), the objective of this phase is to seamlessly integrate the analytical narrative and quotes obtained. This integration serves to offer readers a compelling and logically structured account of the data, effectively addressing the core inquiries of this research. This phase involves the creation of a comprehensive research report, which can be found in Chapters 5, 6, and 7. In these chapters, quotes extracted from the dataset are used to provide an exhaustive explanation of the primary themes and their corresponding subthemes generated during the data analysis. The use of quotes from the dataset, as recommended by Brown (2017), aims to enhance the study's trustworthiness. This approach ensures that the findings are firmly rooted in the voices of the participants. Additionally, in certain instances, non-verbal expressions or observed behaviours will be included in the above-mentioned chapters and duly noted. Next, within each of these chapters, a comprehensive discussion of the findings in relation to current literature is provided, highlighting the key contributions of this study.

Braun and Clarke (2006) elaborate on the significance of these quotes, highlighting their role in substantiating the identified themes within the data. Furthermore, these quotes serve to visually depict the prevalence and manifestation of each theme.

4.7 Data verification

This section outlines the data verification methods employed in the study. In qualitative research, data verification refers to the steps taken by researchers throughout the research process to enhance the rigour of the study, which corresponds to the concepts of reliability and validity in quantitative research (Morse *et al.*, 2002).

4.7.1 Rigour

According to Gill and Gill (2020), the term “rigour” lacks a precise definition, and there is no clear consensus on its meaning. However, the authors identified that Armour *et al.*'s (in Gill and Gill, 2020) definition of rigour best aligns with three key criteria related to research methodology. These criteria include (1) selecting an appropriate research methodology, (2) adhering to the methodology during execution and analysis, and (3) being transparent in acknowledging the methodology used. The definition put forth by Armour, Rivaux and Bell (2009) encompasses these criteria effectively. They explain that rigour can encompass

methodological thoroughness, precision, and the criteria used to evaluate the trustworthiness of the research results. Methodological rigour and the accuracy of the findings are interrelated because a solid methodology provides greater assurance of the validity of the findings (Armour *et al.*, 2009, p. 102). This definition is also echoed by Daniel (2019), who states that rigour in qualitative research is achieved when each element of the study methodology is systematic, transparent, and reported in a comprehensive, methodical, and accurate manner.

Daniel (2019) highlights the importance of assessing qualitative research to ensure the rigour of the study's findings, which can contribute to theory development and practical applications, such as evidence-based interventions. Qualitative research methodology is an epistemic endeavour that requires researchers to interpret data and provide meaning based on their observations during data collection (Daniel, 2019). The interpretations of this study were further enriched by the researcher's personal experiences and reflections on the social world in relation to the research phenomenon (Daniel, 2019). According to Johnson, Adkins and Chauvin (2020, p. 145), "the goal of rigour in qualitative research can be described as ensuring that the research design, method, and conclusions are explicit, public, replicable, open to critique, and free of bias". To ensure the rigour of the study, the four strategies proposed by Daniel (2019), namely trustworthiness, audibility, credibility, and transferability, which are collectively referred to as the TACT framework, were employed. These strategies were applied to enhance the overall quality and validity of the study.

4.7.2 Trustworthiness

Trustworthiness in qualitative research, as described by Daniel (2019), reflects the overall quality of a qualitative study and is fundamental to ensuring rigour in the research process, the relevance of the findings, and confidence in the conclusions. In order to enhance trustworthiness and maintain rigour, participants were selected based on strict inclusion and exclusion criteria. Additionally, a reflexive journal was kept by the researcher, where her personal biases, prior assumptions, and experiences were recorded (further elaborated in the reflexivity section). Furthermore, the researcher accepted and acknowledged all the outcomes that would come from this study, recognising the importance of transparency and embracing the full range of findings (Daniel, 2019). These measures contributed to the overall trustworthiness and rigour of the research.

4.7.3 Auditability

Auditability in qualitative research pertains to the researcher's ability to demonstrate the transferability and transparency of their research process, involving systematic data collection, analysis, and interpretation (Bowen, 2009; Daniel, 2019; Johnson *et al.*, 2019; Lincoln and Guba, 1985). This study provides a detailed account of the step-by-step processes undertaken both prior to and during the data collection phase. This includes explaining the rationale behind specific decisions and actions taken during the research process (Daniel, 2019). Providing this level of detail and transparency ensured that the research process was auditable, allowing for scrutiny and examination of the methods employed and the subsequent interpretation of the data.

4.7.4 Credibility

Credibility, as described by Ghafouri and Ofoghi (2016), refers to the authenticity and accuracy of a study. It is closely related to trustworthiness and is indicative of how reflexivity and triangulation were incorporated into this study. To establish credibility, the study findings should be dependable, congruent, and relevant based on the realities reflected in the data (Daniel, 2019).

This study carefully considered the authenticity and accuracy of the data and findings based on the information shared by the participants and the researcher's personal experiences during data collection and analysis. The use of a hybrid TA and within-case analysis (pattern matching logic) approaches also influenced the assessment of credibility. Additionally, credibility is associated with auditability; thus, a rich description of the data analysis processes is provided. Additionally, the data obtained from the participants during the FGDs, and individual semi-structured interviews was verified through the use of probing questions. Furthermore, all research data, including audio recordings and transcripts, were accessible only to the researcher and her supervisor. However, one FGD involved a G2 participant who preferred to respond in a Kiswahili dialect that is spoken in the DRC, which was difficult for the researcher to understand. For this specific FGD, a translator and transcriber proficient in the Kiswahili dialects from both Burundi and DRC and English was sourced to transcribe the participants' responses and help ensure accurate transcription. The transcriber has a master's degree and is a researcher with an understanding of the codes of ethics.

4.7.5 Triangulation

According to Fusch, Fusch and Ness (2018, p. 21), “the importance of triangulation cannot be underestimated to ensure reliability and validity of the data and results”. For this to happen, the data needs to be truthful, accurate, and answer the research questions, which is especially important in case study research (Bello, 2023; Fusch *et al.*, 2018; Yin, 2018). This study employed three types of triangulation, as conceptualised by Denzin (2009), to develop a deeper understanding not only of refugee women’s experiences of domestic violence but also of how domestic violence is transmitted intergenerationally across the two generations of refugee women from two different conflict-affected countries. These types of triangulation included:

- Data triangulation, where participants from two different countries and two different generations of women were used to generate data.
- Theory triangulation, where concepts from different theories were integrated into the data analysis.
- methodological triangulation, which was discussed previously in this chapter (see Data collection section).

The use of these different types of triangulation facilitated the internal coherence of the study, as the methodological decisions were aligned with the ontological and epistemological stance as well as the research questions and objectives. Triangulation enabled the precise comprehension of activities undertaken throughout the research process (Carter, 2010). Internal coherence is crucial for ensuring the credibility of this study (Carter *et al.*, 2014; Daniel, 2019; Fusch *et al.*, 2018), a topic which will be discussed later in this chapter. Triangulation played a pivotal role in enhancing the internal coherence, dependability, and credibility of this study, where multiple methodological and theoretical approaches were employed to corroborate and validate the findings, thereby addressing the research questions using appropriate methods (Daniel, 2019). Through these measures, credibility was established, ensuring the authenticity and accuracy of the study’s outcomes.

4.7.6 Transferability

According to Anney (2014, p. 227), “Transferability refers to the degree to which the results of qualitative research can be transferred to other contexts or settings with other respondents – it is the interpretive equivalent of generalizability”. Transferability is achieved by the use of “thick descriptions” of the data and the use of purposive sampling techniques (Anney, 2014).

Li (2004, in Anney, 2014) emphasises that rich and detailed information about the methodology and context should be included in the research report to enable judgements about the applicability of the findings to other contexts. Younas, Fàbregues, and Creswell (2023) explain that thick description involves the researcher providing a comprehensive account of the participants' perspectives, intentions, experiences, motives, meanings, and understandings. It also entails accurately describing the context in which the phenomenon was observed. This study employed purposive sampling, which allowed the targeting of individuals with specific characteristics that would contribute to fulfilling the study's objectives and addressing the research questions (Anney, 2014). This sampling approach facilitated a more thorough exploration of the research topic compared to other non-probability sampling methods. Purposefully selecting participants maximised the information gathered from a limited number of individuals, recognising that the findings were not intended to be transferred (generalised) to the larger refugee population in South Africa or Durban (Anney, 2014). The purposive sampling method enabled a targeted and in-depth examination of the intergenerational transmission of domestic violence among refugee women, providing valuable insights for the study's objectives. Additionally, thick descriptions facilitated the comparison of this research's findings across different studies, promoting complementarity and synergy in the context of transferability (Guba, 1981).

4.8 Reflexivity

Dean (2017, p. 1) explains that doing research with human participants requires an "account for our humanness". Reflexivity is a key aspect of contemporary social science literature, employed in research, professional practice, and therapy to highlight the process of understanding how one's actions are shaped by external influences and the surrounding world (Gilbert and Sliep, 2009). Reflexivity involves recognising and understanding how personal experiences and characteristics, such as the researcher's identity as a former refugee woman from Burundi in South Africa, have shaped her perspectives and worldview (Braun and Clarke, 2021; Dean, 2017; Makhakhe, 2021; Norton, 2018).

This inquiry emerged from the researcher's subjective experiences as a second-generation former refugee woman who arrived in South Africa as a child. Growing up in South Africa, the researcher noticed significant differences within their Burundian community regarding issues of domestic violence, particularly in terms of the normalisation of domestic violence, including intimate partner violence and child maltreatment and neglect. Exposed to both Burundian and

South African cultures, her attitudinal rejection of all forms of domestic violence was reinforced through her socialisation within broader South African society, particularly during her primary and high school education. This rejection was further strengthened during the researcher's tertiary studies, where she majored in psychology and criminology. Additionally, her master's degree in health promotion provided her with a deeper understanding of how personal various experiences impact behaviours, and physical and mental health.

Previously, the researcher investigated intimate partner violence among refugee and local women and challenges facing refugee youth in South Africa. However, the need to examine the intergenerational transmission of domestic violence became apparent to her during her preparation for marriage. During this period, the researcher received guidance from not only her mother and aunts but also from other close female family friends on how to navigate married life, much of which centred on patience and perseverance, even in the face of violence or mistreatment. While the researcher questioned these beliefs and norms, she was often advised to wait and experience married life first-hand and to do this to avoid ruining the family name. Drawing on this personal experience, the researcher conceptualised this study to explore how domestic violence is transmitted from refugee women to their adult daughters. She aimed to understand the risk factors and mechanisms present within this population that influence the transmission of domestic violence.

Whitaker and Atkinson (2019) emphasise that reflexivity in research extends beyond personal reflection by explicitly acknowledging and describing the intersecting relationships between the researcher and the participants within the research context. This practice enhances the credibility of the findings and deepens the readers' understanding of the study (Dodgson, 2019; Whitaker and Atkinson, 2019). Embracing reflexivity enabled the critical examination of the researcher's own biases, preferences, and background, and how these factors may have influenced interactions with the participants and the interpretation of the research findings. This self-awareness contributed to the overall rigour and transparency of this study, ensuring that the researcher's personal perspectives and potential biases were acknowledged and accounted for. In alignment with the previous point, Berger, as cited by Braun and Clarke (2021, p. 56), defines reflexivity by stating:

“it means turning off the researcher lens back onto oneself to recognise and take responsibility for one's own situatedness within the research and the effect that it may have on the setting and people being studied, questions being asked, data being

collected and its interpretation. As such, the idea of reflexivity challenges the view of knowledge production as independent of the researcher producing it and of knowledge as objective.”

Braun and Clarke (2021) emphasise that reflexivity is an ongoing process of reflecting on various aspects of the research journey, including expectations, assumptions, choices, and actions. Reflexivity, particularly with regard to self-awareness, was further enhanced by regular supervision sessions with the researcher’s supervisor Dr Shanaaz Hoosain and academic mentor, Associate Professor Dr Douglas Rhein. During these sessions, we discussed various aspects of the research journey, especially field experiences and findings. Additionally, conferences namely the 6th International Conference on Future of Women 2023, the Liberal Education Conference 2023, the 4th Annual Conference of The International Society for Academic Researchers (ISfAR2023) and the Migration Conference 2023 were attended to present the initial findings and feedback was provided. This further enhanced the rigour and transparency of this study. This continuous self-awareness extended mindfulness with regard to the theoretical and philosophical assumptions that underpinned this research and helped the researcher to understand her personal positioning in the study. Personal positioning and background played a critical role in shaping the research process and influencing how the researcher engaged with the data (Braun and Clarke, 2021).

Furthermore, the researcher’s personal positioning as a second-generation refugee woman (former) from Burundi deeply impacted the focus and direction of the study. She was conscious of the potential influence of her identity on participants’ trust and willingness to share their experiences. Being aware of these dynamics allowed her to adapt her approach to ensure a respectful and supportive environment for participants during data collection. For instance, due to shared histories and the researcher’s identities as a woman and a refugee (‘insider’), many participants felt comfortable and trusted her with their personal experiences, although not all, as indicated previously (see FGD and individual semi-structured interview subsections). In instances where participants showed hesitancy, the researcher was acutely aware of her position and the socio-cultural norms that prioritise privacy concerning domestic issues. She recognised the generational gap and understood how her own identity as a researcher (‘outsider’) impacted participants’ willingness to disclose certain sensitive information. As a result, the researcher adapted her approach to ensure their comfort and respected their choices, while still adhering to the objectives of the study. Navigating these dynamics required sensitivity and flexibility in

the researcher's questioning techniques. She aimed to create a safe and non-judgemental space where participants could share their experiences within their comfort level. By being mindful of their boundaries and socio-cultural norms, the researcher strived to balance between building rapport and maintaining the integrity of the research. Being mindful of her own experiences and how she might impact interactions with participants, she worked diligently to maintain an ethical and respectful stance throughout the research process.

The researcher found the data collection process to be highly rewarding, as it yielded meaningful and valuable insights for the study. However, she acknowledges that the nature of the research and the personal information shared by participants had a profound impact on her. During the transcription phase, she experienced vicarious trauma, especially when she revisited the emotionally charged sessions where participants shared their distressing experiences, some of whom even broke down in tears. Witnessing the visible effects of the violence participants endured deeply affected her. Recognising the toll this took on her mental and emotional well-being, she sought professional help from a counselling psychologist to address the vicarious trauma.

This was particularly challenging as some of the stories shared by participants were reminiscent of experiences that a close family member of hers had endured in a violent home. The emotional weight of these similarities added to the burden of dealing with the research data. To ensure the rigour and validity of the study, the researcher had to navigate her own subjectivity, which was inevitably influenced by her personal experiences. Through counselling sessions and reflexive journaling, the researcher actively worked to redirect her attention and align her thought processes with the epistemological and ontological positioning of the study, as advocated by Braun and Clarke (2021).

In the researcher's reflexive journal, she reflected deeply on the impact that conducting this research had on her mental health. The process allowed her to acknowledge and process the emotions evoked during the data collection and transcription phases. By addressing these issues head-on, she aimed to maintain her objectivity as a researcher and ensure that her personal experiences did not unduly influence the interpretation and analysis of the data. These reflections are captured below in an excerpt from the researcher's journal.

*Sasa kwanini?*** (But why?), why must women in this community go through so much, it's like a never-ending nightmare for some people. *Ona sasa kama Bilkis* (see people like Bilkis), who can hardly recall a day of anything in her life, she seems so depressed. Only living for her kids, what a sad, unhealthy and almost meaningless life to lead. These stories by these women make me so sad. I feel so helpless and question the purpose of this research. *Itasaidiya kweli?* (Will it really help?), will it really help these women or am I causing more harm than good. These interviews are triggering a sense of apprehension and remind me of the case I help with aunty Y and her kids, life didn't get any better after so I wonder if this research will actually help these participants. I am stuck, I'm scared and feeling so many emotions, I am struggling to cope honestly with all these emotions and feelings. (16 September – reflecting on data collected).

As the researcher delved deeper into the interviews and reflected on the experiences shared by the participants, she could not help but draw parallels to her own family's experiences with domestic violence. While conducting this research, the researcher made a conscious effort to separate her personal experiences from those of the participants. It was important for her to maintain objectivity and ensure that her own biases did not unduly influence the study. However, it is worth noting that the focus on mother-daughter relationships in this study was inspired by the dynamics the researcher observed within her own family. Growing up, the researcher witnessed the societal expectations placed on women, particularly their roles within the household and the endurance they were expected to exhibit in marriages. These narratives and expectations were ingrained in her as well, shaping her understanding of gender roles and relationships.

Reflexivity, as explained by Braun and Clarke (2021), is not just about self-reflection but also about understanding the knowledge researchers produce through their research and how it is produced. The researcher was deeply concerned about the potential for exploitation in conducting this study, and it was important for her to address this issue and ensure that she were not perpetuating a cycle of exploitation. One potential participant's concerns about researchers using their experiences for personal gain were notable. Despite explaining her intentions and study objectives, she understood and respected the potential participant's

** Italicised words are in KiSwahili and indicated the researcher's thought processes in her native tongue (she thinks both in Kiswahili and English)

decision not to participate. The researcher's findings, particularly regarding the severity of violence experienced by the participants and the influence of socio-cultural norms and religion on domestic violence within the macrosystem, underscore the necessity for evidence-based interventions and support systems that are culturally sensitive and informed by faith and involving multiple stakeholders. By doing so, the researcher aims to contribute to positive change within the community and fulfil her commitment to making a meaningful impact on the lives of those affected by domestic violence. This aligns with one of her research objectives, which is to provide policy recommendations to South Africa's NSP-GBVF, addressing the issue of domestic violence in refugee families, as revealed by this study.

The process of reflexivity was a constant reminder for the researcher to critically examine her own assumptions, expectations, and biases throughout the research. As a doctoral student, married woman, and mother, her personal experiences and values influenced her initial perceptions before data collection began. However, engaging with the participants and their lived experiences often challenged and shifted her preconceived notions. It was important for her to acknowledge that her positionality could potentially influence the research outcomes, and therefore, she remained vigilant in questioning her own subjectivity. As the research progressed, the realities shared by the participants unveiled the complexities of their experiences, beliefs, and understandings, which sometimes contradicted her assumptions. The process of data collection and analysis required her to constantly reflect on the evolving nature of her own perspectives. This reflection allowed her to be open to the diverse perspectives presented by the participants and adapt her approach accordingly. By embracing reflexivity, she was able to ensure a more objective and comprehensive understanding of the research phenomenon. She had to acknowledge that initially, she was not, as explained by Braun and Clarke (2021, p. 57), "a neutral conduit of information". Through being reflexive, she ensured that the research findings and interpretations were rooted in the participants' experiences and perspectives rather than being overly influenced by her own biases. The process of reflexivity acted as a safeguard against potential biases and enhanced the rigour of this study's outcome.

4.9 Ethical considerations

This section describes ethical procedures undertaken prior to, during, and after the data collection. The study obtained ethical clearance from the Ethics Review Committee of the Faculty of Humanities at the University of Cape Town (SWK-REC-

2022-SR008) (see Annexure G). In the subsections below, ethics procedures, including the treatment of participants, are discussed.

4.9.1 *Informed consent*

Participants were initially informed verbally about the nature of the study, both by the gatekeeper and in-depth by the researcher. Those who met the eligibility criteria were then provided with an informed consent form that provided detailed information about the study and the criteria for participation. These informed consent forms were both in English and Kiswahili for both individual semi-structured interviews and FGDs (see Annexures H, I, J, and K, respectively). Participants were explicitly informed that their participation was entirely voluntary and that they could withdraw from the study at any stage without any consequences (Arifin, 2018; Creswell and Creswell, 2018).

Participants were given one day to review and understand the informed consent forms. They were encouraged to complete and sign the forms if they felt comfortable and met the eligibility requirements. Participants were requested to bring their signed consent forms to the research site and submit them before the individual semi-structured interviews and FGDs commenced (Arifin, 2018). In cases where participants forgot to bring their consent forms, additional copies of the informed consent forms were made available to ensure that all participants provided their consent before data collection proceeded.

4.9.2 *Confidentiality, privacy, and anonymity*

The focus of this subsection will be on confidentiality, privacy, and anonymity.

4.9.2.1 *Confidentiality*

Maintenance of confidentiality throughout the entire research process, in line with the commitments made in the consent form, was prioritised to ensure that all participants' information remained secure and protected. Hoosain (2013) highlights the challenges of conducting research with family members, as other family members are also involved in the research and may have an understanding of the questions being asked. Therefore, participants were reminded, both prior to and during the individual semi-structured interviews and FGD sessions, that the researcher had an ethical obligation to strictly uphold the confidentiality of all shared information.

Regarding confidentiality in FGDs, it is important to acknowledge that there were inherent limitations due to the nature of group discussions (Muscente, 2021). However, various measures were taken to safeguard confidentiality. Each participant involved in the FGDs was required to sign an informed consent form prior to the sessions, which explicitly informed them about the importance of maintaining confidentiality. Participants were encouraged not to discuss or disclose any information shared during the FGDs with individuals outside the group. In terms of the gatekeeper and the transcriber, both were required to sign confidentiality agreements, as their roles in the study necessitated the protection of participant identities (see Annexures L and M, respectively). This was particularly crucial for the gatekeeper, given their strong connections within the community.

Moreover, all data, both electronic and written, were safeguarded and stored in a folder on a password-protected laptop and backed up on a password-protected UCT OneDrive. The password-protected UCT OneDrive was accessible solely to the researcher and her supervisor. Hard copies and written materials, such as signed informed consent forms, were stored in a secure cabinet within a locked room to maintain adherence to ethical guidelines (Arifin, 2018). As per standard practice, both the written and electronic data from this study will be retained for a period of five years following the completion and publication of research findings and subsequently destroyed once they are no longer required.

4.9.2.2 Privacy

The participants were assured of the privacy and confidentiality of this study by conducting all individual semi-structured interviews and FGDs at the Denis Hurley Centre. The centre offered a safe, secure, and private environment for participants, which allowed them to openly discuss domestic violence (Thompson *et al.*, 2021). The space also ensured that data could be collected confidently and securely.

4.9.2.3 Anonymity

Anonymity was ensured through several measures. First, during the data collection phase, no personal identifying information such as contact details, identification numbers, or addresses was collected from the participants (Wicherts *et al.*, 2022). Secondly, participants' real names were replaced with pseudonyms in the transcriptions to ensure anonymity. They were also reassured that their names would be anonymised in the final research report and any subsequent

publications (University of Cape Town Faculty of Humanities (UCT FoH), 2016). Thus, none of the participants will be associated with specific research findings in this thesis or any other subsequent publications.

Regarding the FGDs, it is important to note that complete anonymity was limited since participants' interactions outside of the group could not be controlled. However, participants were explicitly requested not to discuss any information shared during the FGDs with individuals outside of the group. According to Sim and Waterfield (2019), confidentiality becomes the primary concern if complete anonymity cannot be guaranteed. Therefore, utmost care was taken not to intentionally or inadvertently disclose any information obtained from participants, especially during the data collection process, where participants may have been identified by others, including the gatekeeper (Surmiak, 2020).

Anonymity was ensured in this study through several measures. First, during the data collection phase, no personal identifying information, such as contact details, identification numbers, or addresses, was collected from participants (Wicherts *et al.*, 2022). Participants were explicitly informed that their contributions to the final research report or any subsequent publications would remain anonymous (UCT FoH, 2016). None of the participants can be linked to specific research findings. Sim and Waterfield (2019) assert that confidentiality becomes the primary concern when anonymity cannot be fully guaranteed. Ethical responsibility was maintained by not deliberately or accidentally disclosing any information obtained from participants, particularly during the data collection process where participants might have been identifiable by other participants or the gatekeeper (Surmiak, 2020). During the research process, it was revealed that some participants had personal experiences or knowledge of other children's encounters with child sexual and/or physical abuse. However, confidentiality was still maintained as many of the participants were now adults when they relayed their experiences of abuse. This is particularly important in this study as domestic violence is a sensitive and private matter for many individuals who often do not disclose incidents of violence in their homes. By empathetically listening to their experiences, the researcher aimed to alleviate some of the mental and emotional burdens associated with domestic violence and provide a supportive, non-judgemental space for those who desperately needed it.

4.9.3 Protecting participants from harm

For this medium-risk study, participants were provided with a summary of the study outlining some of the potential risks and benefits of their participation. Adhering to the principle of ‘do no harm’, the potential for psycho-emotional and physical well-being risks for both participants and the researcher are acknowledged, given the sensitive nature of the research topic (Arifin, 2018; Creswell and Creswell, 2018). The primary aim of the research was to protect the psycho-emotional and physical well-being of all involved, particularly the participants. The main objective of the study was to explore the intergenerational transmission of domestic violence among refugee women from Burundi and the DRC living in Durban. While this objective holds potential benefits for participants and their communities, such as informing evidence-based interventions and policies, it also posed some risks, particularly in terms of emotional distress for participants due to the sensitive nature of the topic.

It’s essential to emphasise that the study was not intended to cause harm to any participant or individuals within the larger communities. However, given its medium-risk nature, participants were exposed to some potential risk of emotional distress. Consequently, the well-being of the participants was prioritised throughout the study (Brown, 2017). During interviews and FGDs, certain questions triggered emotional distress among participants, leading to instances where some participants cried. In such situations, sensitivity was demonstrated, and the participants’ emotional reactions to the questions were acknowledged (UCT FoH, 2016). During these instances, participants were offered the option to take a break, pause the interview, or even terminate the interview altogether, with all participants opting for the former. During these breaks, the researcher empathised with their feelings, provided tissues, and allowed them time to collect themselves. This approach was followed in both individual semi-structured interviews and one of the FGDs. Participants were also reassured that they had the freedom to omit or withhold any information that they felt would cause them further emotional distress.

At the conclusion of each individual semi-structured interview and FGD, all participants underwent a debriefing session where they were reassured about the maintenance of confidentiality (McMahon and Winch, 2018). Additionally, participants who exhibited emotional distress were offered the option of being referred to the Refugee Social Services (RSS) for counselling. Despite the offer, none of the participants in the study accepted the referral to the RSS for counselling. It is important to note that participants were informed that the RSS offers professional counselling and domestic violence support, and other social

services specifically tailored to meet the needs of refugees living in Durban and the surrounding areas. These services include skills training and livelihood activities, repatriation solutions, referrals to hospitals and schools, language classes for adults and children, and life skills training (RSS, n.d.).

4.9.4 Reciprocity

Lastly, the importance of reciprocity as an ethical principle is emphasised in this study (Hughes, 2019). Therefore, participants were not remunerated for their participation. Instead, they received transportation reimbursement to mitigate any potential economic burdens or inconveniences. This was particularly important as participants were required to travel to the Denis Hurley Centre, which posed a risk of income loss for some of them. The provision of transportation reimbursement aimed to protect participants from such economic risks and ensure fairness in their involvement in the study.

4.10 Conclusion

In conclusion, this chapter outlined the qualitative embedded single case study research design employed in this study and the appropriateness of the study design are argued. Furthermore, a detailed discussion of the different research methods used in this study and their appropriateness are also discussed. Additionally, the study population, research site, recruitment procedures implemented, and eligibility criteria for participants for this study were also discussed. Issues of ethical considerations and the rigour of the study have been elaborated upon. Overall, this chapter informs the reader of the methodological approaches and methods used in conducting this study. This includes the paradigm adopted, data analysis, and the reflexive processes undertaken. This assists in preparing the reader for the subsequent chapter, which presents and discusses the theme “*Exposure to domestic violence*” and its associated subthemes.

CHAPTER 5: EXPOSURE TO DOMESTIC VIOLENCE

5.1 Introduction

The preceding chapter discussed the methodological approaches and methods employed in this study, arguing for their appropriateness (i.e. a qualitative embedded single case study research design) in helping answer the research questions and achieve the research objectives. The purpose of this chapter is to address the research question: What are refugee women's experiences of domestic violence? The question was approached by focusing on the experiences of refugee mothers and their adult daughters. During the data analysis, the first theme was generated, i.e. "Exposure to domestic violence", which highlights the experiences of domestic violence faced by refugee women in Durban.

This chapter is divided into two main parts. Part 1 presents the first main theme: Exposure to domestic violence and its related subthemes as identified in the study's analysis (see table below). Herein, the findings that offer evidence of women's experiences of domestic violence across the lifespan, from childhood to adulthood, and across the two generations of refugee women are provided. Additionally, a range of consequences stemming from exposure to domestic violence in both generations, including perpetuation and victimhood across generations, are elaborated. Part 2 provides an in-depth discussion of the findings as evidence for the intergenerational transmission of domestic violence in refugee families, particularly among refugee women, within the context of existing literature. The chapter concludes with a summary of the chapter and provides a brief preview of Chapter 6.

Table 11: Theme 1 and its accompanying subthemes

Theme 1	Subthemes
Exposure to domestic violence	5.2.1. <i>Violent home environments</i> 5.2.1.1. Violent home environment during childhood – G1 ▪ Experiences of domestic violence in childhood – Physical abuse (by own parents) ▪ Physical abuse (by other caregivers) ▪ Witnessed interparental or intimate partner violence

Theme 1	Subthemes
	5.2.1.2. Violent home environment in adulthood – G1 ○ Physical abuse ○ Financial abuse ○ Verbal abuse ○ Psychological and emotional abuse ○ Sexual abuse 5.2.1.3. Violent home environment during childhood and in adulthood – G2 ○ Personal experiences of G2 participants: ○ Physical abuse ○ Sexual abuse and harassment ○ Child abandonment and neglect ○ Verbal abuse ○ Psychological and emotional abuse ○ Digital intimate partner violence ○ Observed violence by G2 participants: ○ Physical abuse ○ Financial abuse ○ Psychological and emotional abuse ○ Sexual abuse 5.2.2. <i>Effects of domestic violence</i> 5.2.2.1. Internalising and externalising behavioural problems 5.2.2.2. Parent-child attachment 5.2.2.3. Academic impact 5.2.2.4. Susceptibility to domestic violence 5.2.2.5. Poor perception of men

5.2 Theme 1: Exposure to domestic violence

The first theme of this study examines the various ways in which participants encountered domestic violence. This encompassed both participants' personal experiences with domestic violence and their observations of domestic violence incidents against others, which took the

form of intimate partner violence, child maltreatment, and/or neglect. Across both generations and the two communities, participants reported high rates of domestic violence exposure within refugee families. The subtheme, “violent home environments”, delves into how refugee women are exposed to domestic violence, particularly in relation to the co-occurrence of domestic violence. Co-occurrence refers to instances where domestic violence occurs at different levels. As explained by Jouriles *et al.* (2008), it can happen in the following ways: within the individual (e.g., the husband abuses both the wife and children), across relationships (e.g., the husband abuses the wife, and the wife then abuses the children), and in situations where both parents abuse the child or children.

5.2.1 Violent home environments

Within exposure to domestic violence, a subtheme that was generated from the dataset is titled “violent home environments”. This subtheme addresses the various forms of violence that both refugee mothers (G1) and adult daughters (G2) experienced or witnessed during their childhood and adulthood. Many participants in this study reported experiencing and/or witnessing one or more types of violence within their households. For many G1 participants, their exposure to domestic violence included childhood experiences of violence as well as instances of violence they encountered in adulthood within intimate relationships, such as with boyfriends or husbands. The findings from G1 participants concerning their exposure to domestic violence during childhood and later in adulthood are discussed below.

5.2.1.1 Violent home environment during childhood – G1

Experiences of domestic violence in childhood – Physical abuse (by own parents)

Many G1 participants reported that they experienced physical abuse during childhood. However, many of the participants explained that it was their mothers who were the stricter and more physically aggressive parents towards their children.

“...but my mom was extremely strict, if she calls you twice and you’re not there it was the end of your life and she was very strict...” (Thurayyah, Burundi, age 43)

“My mother was the disciplinarian she was the one that would beat us when we were wrong” (Zaylee, DRC, age 48)

By saying, “it’s the end of your life”, Thurayyah was referring to the harsh physical punishment she would receive from her mother. Overall, participants rationalised physical aggression by their mothers to their mothers simply wanting the best for their children. They explained that physical punishment was what mothers in Burundi and the DRC saw as the best way to discipline their children.

“I remember my dad would tell my mom, ‘You the way you are so strict to these kids it’s not good’ ... my mom would be like ‘no man, you are always spoiling these kids, they need some structure in their lives’ so that was how my parents were with us.” (Thurayyah, Burundi, age 43)

It is interesting to note that the participants’ experiences of domestic violence were not only limited to physical abuse perpetuated by their biological parents. The G1 participants who were raised by alloparents reported experiencing varying degrees of domestic violence compared to those who were raised by their biological parents. The study found that of the G1 participants, eight⁷ (8/30) were alloparented; these participants were raised by their older siblings and other family members as a result of being orphaned as children.

Physical abuse and neglect (by other caregivers)

Physical abuse was attributed to the fact that they were not the biological children of the people who were raising them. Siham spoke about her terrible experience of being alloparented by her maternal aunt.

“You know being raised by a mother and being raised by a family there is always a difference. There is always differences in the way in which one is treated, I lived a very terrible life, I was always neglected, I was beaten, thrown out [sobs] and even worse, I never got to know who my father was.” (Siham, Burundi, age 37)

Siham, like many of the other G1 participants who shared their experiences of being raised by people other than their biological parents, displayed emotional distress during the interview and sobbed greatly when she spoke about her experiences. Alloparented G1 participants

⁷ This number was obtained in the individual semi-structure interviews.

revealed that they also experienced child neglect, where their emotional and physical needs were neglected (CDC, 2021) by the people who were entrusted to fulfil these needs for them.

“aah, my life growing up was very difficult, hmm. I saw good things when my mother was still alive, but as soon as my mom died and my aunt who looked after me, I lived a very difficult life. I even left school because, I didn’t have anyone who could pay for my education... our Swahili families, once your mother dies, your uncles your aunts they don’t care. The one who cared about me was my aunt (mother’s younger sister) she also died, that was it.” (Lujain, Burundi, age 39)

However, unlike Lujain and Siham, Iris was given access to education but was neglected in every other way, in addition to being maltreated by her older brother and his wife. She explained what she had experienced growing up in the excerpt below.

“I see myself as a person full of sorrow, because I was never free. I never had friends, I never left the house I was like a house help, I looked after the kids, to clean the house but I would go to school, straight after school I must come home, I followed the law of the house. I could not take this and place it there, no I was afraid. I could not take this food and eat it without permission, I mean it was. I wasn’t not able to wear what I wanted, I wore what they wanted, I had no rights, I was very low, you have to follow?...if I was bought clothes if I wasn’t I had to live like that, I had no value in the home just like you see a slave lives in the home, that’s how I lived.” (Iris, DRC, age 57)

With regard to their childhood experiences of domestic violence (i.e. child maltreatment and neglect), G1 participants who were raised by their biological parents did not provide detailed explanations of their experiences. However, much of the in-depth description of their childhood experiences of domestic violence was provided by those G1 participants who were alloparented, as they observed differences in treatment compared to the biological children of their alloparents. They noted that their treatment was often harsher and unfair.

Alloparented G1 participants expressed a desire to raise their children into adulthood to shield them from having similar experiences to their own. This is evident in the quote by Lamees (Burundi, age 40):

“I will fight to make sure that my children get a good life, so that they can live with their mothers something different to how I grew up, where I missed out on having a mother. I don’t want them to miss out on the opportunity of having a parent like the way I was, yeah”.

In contrast, participants raised by their biological parents attributed their punishments to their parents’ responsibility of properly raising them, a practice they witnessed their own siblings undergoing.

The subsequent subsection presents findings related to G1 participants’ observations of interparental and intimate partner violence in the home during childhood.

Witnessed interparental or intimate partner violence

This study found that for a few G1 participants, exposure to domestic violence was also linked to observations of violent behaviours in their homes, from witnessing their parents either physically or verbally abusing each other. They reported that incidents of domestic violence largely involved their fathers inflicting violence on their mothers.

“Many times it was my father, he would shout and my mother and she would keep quiet and would just look at him, sometimes you would see that she had tears in her eyes.” (Candice, DRC, age 36)

“I never liked it. Even when I grew up I saw how my mother and father would fight when they would meet each other on the street they would just start swearing at each other, even if they weren’t married anymore... Yeah, they would fight but it was what it was I was never happy about it, but I just had to get used to it. When parents are divorced you as a child don’t have any more choice.” (Lamees, Burundi, age 40)

It is worth noting that Lamees’ accounts of what she witnessed as a child occurring outside of the home, as both her parents were divorced and lived separate lives. These violent encounters would erupt whenever they saw each other in public settings.

In contrast, some G1 participants witnessed domestic violence in relation to intimate partner violence between their older siblings and their spouses. These participants, who were raised by

their older siblings, witnessed violence perpetrated against their sisters or sisters-in-law, who had raised them.

“My brother and his wife would fight all the time, I was the oldest, they would fight all the time, if they took too long it was two days, every time. Even if she is cooking food, you would just see food flying and you guys will remain hungry because there was no food left. So, I decided that all men were the same. Because I would also go to my eldest sister’s house I would find the same thing at her home, my brother’s house it was he talk and she would talk, but at my sister’s house the husband was the one with full power, the wife was completely submissive. He would hit her every day, when he is drunk, he would just beat her...” (Iris, DRC, age 57)

Thurayyah explained that she witnessed violence between her older sister and her brother-in-law when she went to live with them for a short period.

“Since I was about 14,15 years old but the reason that made me not want to get married is what I saw in my sister’s house I saw what she went through at her home with her husband. What I witnessed was that my sister and her husband they were forever arguing, she would tell him something and he would just get angry at her and it’s just very violent in her home.” (Thurayyah, Burundi, age 43)

Observing violence between intimate partners, especially for Thurayyah and Iris, resulted in them fearing men and marriage altogether. This fear was so strong that they did not want to get married when they were younger.

“...I was just like ah so this is marriage I don’t want this thing if this is marriage because this is too stressful for me I don’t want this.” (Thurayyah, Burundi, age 43)

“...so from that I was so hurt and I never wanted a man. Can you imagine that from 0 until 30 years, this was my first male encounter. But, I was very rude to men I never wanted not even one close to me, but I was never one to swear a man, I was just very protective of myself, I believed that they were all the same. I stayed, when you live with people and any small mistake they swear at you, that is the life I lived in conclusion.” (Iris, DRC, age 57)

Iris' internalised perception of men led her to generalising that all men were the same. She mentioned that she became very unapproachable and antisocial towards men during her youth. Her observations of men's violent behaviours contributed to her marrying at a significantly later age, which was a contrast to socio-cultural norms of Congolese society.

In the next subsection, the findings in relation to G1 participants' personal experiences of intimate partner violence within their homes as adults are presented. These experiences account for instances of domestic violence experienced in their countries of origin and in South Africa.

5.2.1.2 *Violent home environment in adulthood – G1 (own experiences)*

In adulthood, the majority of G1 participants revealed that they experienced varying degrees of violence.

Physical abuse

One of the most prominent types of abuse experienced by participants was physical abuse by their husbands or male partners.

“Yeah, I lived with my husband, yeah my husband arrived here first and then I came after him. I came here with two children, the third one I had here, when I gave birth to my third child, you know how men are, he started beating me. I said aah, I can't continue living being beaten like an animal.” (Bilqis, DRC, age 36)

“Honestly, I will not lie to you there was a time when he beat me, he actually beat me only once in our life here together in South Africa and when he did it was such a brutal painful beating. I actually compare it to when men or a person or people are beating up a snake to kill it, a point where they want to behead the snake it was gruesome very terrible experience. And it was one of those beatings that you didn't even expect I had just come into the house and I just felt something on my body he hit me with a those big wooden spoons that we used to make pap.” (Maira, DRC, age 53)

Both Bilqis and Maira did not report their assaults, resulting in no hospitalisation or medical attention. However, Lujain explained that she and her husband frequently fought. The physical abuse she endured eventually led to grievous bodily harm, which resulted in her hospitalisation.

“...we use to fight every day, to a point where he cracked my skull, I have a scar here, with stitches. He broke my skull in 2011 yeah..” (Lujain, Burundi, age 39)

Some participants, such as Khuloud, revealed that both she and her children experienced physical abuse by her ex-husband.

“The second thing is that he was physically abusive, he would beat me and even the children.” (Khuloud, Burundi, age 34)

One of the concerns for many G1 participants was that their husbands would physically abuse them in front of their children. This is something that many G1 participants did not agree with, as many revealed that they had never witnessed their parents doing things in front of them.

“Sometimes he hits you while the children sit and watch and you think to yourself, I never saw this back home, I never saw my parents physically fight” (Candice, DRC, age 36)

This finding holds significance because several G1 participants reported never witnessing violence between their parents, except for a few instances. This can be attributed to cultural norms in their countries of origin that prioritise privacy between married couples (refer to Chapter 6). Therefore, their children witnessing the violence they are experiencing with their husbands is distressing and can be linked to their refugee status in South Africa. This is in contrast to their countries of origin, where women had privacy and people to protect them from public displays of violence.

Another characteristic that G1 participants reported, which differs from the lives of women in their countries of origin, is that of financial abuse. The subsection that follows provides details about financial abuse experienced by many G1 participants in this study.

Financial abuse

According to Anitha (2019), financial abuse, which is also referred to as economic abuse, relates to the financial control of women's money, assets, education, or paid work by men. For purposes of this study, this conceptualisation of financial abuse has expanded to include men's refusal to work and their reliance on their wives. Financial abuse

emerged as one of the most frequently reported types of domestic violence among G1 participants. Many G1 participants disclosed that financial abuse manifested in their husbands' compelling them to assume financial responsibilities for the household (exploitation), where they (the husbands) refused to provide support to their families (as they are obligated to by culture) or outrightly refused to work. These findings were consistent across both communities.

"It is this thing of men abandoning their responsibilities and leaving them with their wives. Because what they do is difficult, so what they now do because they see that women are also helping them is that they give all their responsibilities to the women. Now, that is the main reason why there are many problems and conflicts among refugee couples in South Africa. Especially Congolese men, they don't like working, the woman must go out to work, bring back food and for us all to eat. When the rent's due, he tells her 'mama' bring the rent so that I can go and pay, and that is the main cause of divorce here in South Africa, it's because of them leaving all their responsibilities to women. Men are forgetting their responsibilities and leaving them with women." (Kinza, DRC, age 52)

Financial abuse also took the form of men deliberately refusing their wives to work, which made women completely dependent on their husbands.

"Why would you tell a woman not to work? Because you will not say that you're in bliss, for him to refuse you from working, you hear me. There aren't even any nice fancy jobs for us to do. What is going to work for an Ethiopian, standing the whole day, its 12 hours of work you find yourself standing for. Do you enjoy that job [no]? But you find a man telling his wife don't work I will do anything. But when it comes to the things you need, he doesn't meet any of them. You will find a woman who is a stay-at-home wife, without lotion, she has been asking for lotion from today [example] but she will only get it after one month." (Aseela, Burundi, age 45, FGD)

Maira's husband banned her from working; however, after assessing the financial situation in their home and her need to be independent, she forced herself to work. This resulted in her husband refusing to contribute financially towards the household.

“I worked, I worked for a very, very short time but when I was working, I was able to fulfil all my duties as his wife just so that I could show him that you know what I also need to work. Because I also need to be financially independent, but he hated that, like he didn’t even pay for my children’s creche. I was the one that did it, with the money that I earned I took my kids to creche ...” (Maira, DRC, age 53)

Khuloud, on the other hand, was allowed to work by her husband, and she reported that he would steal from her when she was not at home.

“I never had peace at home, there was always something with him, nothing I did was good enough. If I had to go out and work whatever I brought back he would take by force... I mean I would have saved my money somewhere and he would just go and take it from there.” (Khuloud, Burundi, age 34)

G1 participants’ experiences of financial abuse reveal some of the economic hardships they face on a daily basis, making some G1 participants financially dependent on their abusers. Financial abuse was also closely linked to verbal abuse, making it difficult for G1 participants to challenge their husbands’ behaviours. The following subsection provides details of G1 participants’ experiences of verbal abuse.

Verbal abuse

Verbal abuse was another commonly reported type of domestic violence that G1 participants experienced from their husbands. Verbal abuse included name-calling and being shouted at by spouses in private or publicly in front of others, including children.

“Dog, that is the main word that Swahili men like using, you are called a dog [giggles]. So, when you hear that you’re being called a dog you just keep quiet because it’s difficult to just sit and be called a dog.” (Lamees, Burundi, age 40)

“My husband would shout at me in front of his kids, in front of people so things like that well, were very humiliating for me as a woman and especially since I had already children even bigger than those kids” (Shukriya, Burundi, age 47)

Verbal abuse often resulted in psychological and emotional abuse, as verbal abuse is used by perpetrators to attack their victim’s sense of self-worth. This is achieved by the perpetrator’s use of insults and threats, which results in emotional abuse, and their use of

verbal cues and other tactics and behaviours (psychological abuse) to manipulate, intimidate and control their victims and cause fear (Cinquegrana, Marini and Galdi, 2023; Karakurt and Silver, 2013).

Psychological and emotional abuse

Psychological and emotional abuse was reported by a few G1 participants who explained that their experiences of verbal abuse had negative psychological and emotional consequences on them.

“It affected me mostly like for example how my husband comes home and he just starts shouting at me, it really hurts, I am also a person I have feelings” (Malkiya, DRC, age 42)

“Interviewer, when I say mental abuse, I mean, because there are people that do not understand mental abuse, I mean you live in your home without peace, your own husband refuses to give you peace of mind there are men out there that will not beat you, but the things that they do are even worse than that person who is physically abused. There are women, when you hear of their husbands, the man is always on his phone. Can you imagine there are men out there your husband is talking to another woman in front of you, is there abuse worse than that?” (Aseela, Burundi, age 45, FGD)

Psychological and emotional abuse by men was often manifested in the form of infidelity. Many G1 participants disclosed that refugee men engaged in extramarital affairs, which was reported to contribute to the verbal, physical, and financial abuse they experienced.

“Yeah, because as I see it life here is very short, when your husband starts cheating on you, he has a wife and children, sometimes you find that those children don’t have food to eat. He can’t find money to pay for rent for two homes, he must pay for this one and that one, a local and again spare some for the children and his wife must also have clothes on her back.” (Reen, Burundi, age 42)

“You will find that a man has a wife and he has a mistress, when he comes home to his wife, he starts using harsh words on her [...] So, I decided let me not go there by myself and got embarrassed [...], when the wife asked him, he immediately

asked her. Who told you to touch my phone? Do I touch your phone? She was beaten...” (Waqeefa, Burundi, age 40, FGD)

The final type of abuse reported by a G1 participant was sexual abuse. This finding was interesting and important finding reported by the participant who highlighted the existence of sexual abuse among refugee couples.

Sexual abuse

Khuloud was the only G1 participant who described having experienced sexual abuse when she was listing all the types of abuse perpetuated against her by her ex-husband.

“Thirdly, he would want to have sex by force even when you were not happy and didn’t want to.” (Khuloud, Burundi, age 34)

Khuloud did not elaborate extensively on her experience, and due to the sensitive nature of her experiences, her encounter with sexual abuse was not discussed further.

The subsection below presents findings on the exposure of refugee adult daughters (G2) to domestic violence. It illustrates the transmission of domestic violence from G1 to G2, presented broadly in relation to patterns of transmission in this chapter. Chapter 6 will delve deeper into the specifics of what is transmitted, how it is transmitted, and the risk factors and mechanisms associated with transmission.

5.2.1.3 Violent home environment during childhood and adulthood – G2

G2 participants’ exposure to domestic violence included violence experienced and witnessed during childhood. Additionally, a few G2 participants who were married or in intimate relationships explained their experiences of violence as adults perpetrated by their intimate partners, which is presented in this section. The G2 participants, unlike G1 participants, spoke openly about their exposure to domestic violence in both group and individual discussions. Experiences of varying types of violence, in addition to neglect, from one or both their parents and other people living within the home were discussed. Below, their experiences are categorised as personal experiences of abuse (during childhood and in adulthood) and their sub-categories, as well as observed violence and their sub-categories.

Personal experiences of G2 participants

This subsection details the personal experiences of domestic violence experienced by G2 participants from the two refugee communities. These experiences include encounters of domestic violence experienced during childhood and adulthood.

Physical abuse

Many G2 participants revealed that they had experienced physical abuse, which was perpetuated by either their mother, father, sibling, or an adult or child living in the same home, or a combination of individuals in the home.

“Ja, well my stepdad use to tell my mom stuff and then my mom would come home and would beat us up because she was like so in love with him and so she didn’t hear anything that we would say and she would beat all of us up. He would also beat us up, like it was for example, we do something wrong he would beat us up and then when she comes she would beat us up. It wasn’t that beating where it was like no I am teaching your child no, it was like a really bad beating. Sometimes he would use electrical wires to beat us up, a charger, a screw, stuff like that it was really bad. Like there was this one time he beat me up with that, you know that police thing that shocking thing that would... a taser he used to make me bath in cold water and would shock me with that before he beat me up.” (Wadida, Burundi, age 21)

Two of the G2 participants who were married and later got divorced from their husbands revealed that their ex-husbands used to physically abuse them when they were together. Mawiya reported that her ex-husband was physically abusive and complained about how, in the middle of the physical assault by her husband, he would also verbally abuse her, calling her names and insulting her mother in the process.

“For example, my husband he would beat me to a point where he would start swearing my mother and honestly his issues with me are with me there is no way that he can now go and speak about my mother. Where does my mother come into the picture? I would sit down and keep quiet for the first time, second time and the third time but sometimes he would come home and start shouting and swearing at

me and then he might find you in a bad mood and then now you can't hold it back you've had enough, and you to start back chat him." (Mawiya, DRC, age 27)

In her description of her physical abuse experiences, Abir explained that her husband gradually progressed from psychologically abusing her, starting by intimidating her by shouting at her a few times. During this time, she explained that she became submissive to him, and once he saw that his intimidation and controlling tactics worked, he later resorted to physically abusing her.

"But first he starts like in a way which he triggers that, he sees if you can take it he starts in a way in which he starts shouting at you first and if you're submissive as you were told centuries of being told that you need to be submissive, whether you're wrong or right you need to be submissive when he is telling you something. So, he shouts at you, then the next time he shouts at you you're submissive and all that then the third time he just picks up his hand, or something and then he just starts hitting you." (Abir, DRC, age 27)

Physical abuse was reported by many participants, with reports indicating that it was inflicted by both parents (including stepparents and alloparents) during childhood. In adulthood, G2 participants who were in intimate relationships reported their partners as the perpetrators of the physical violence they endured. However, the prevalence of sexual abuse, which was experienced by more G2 participants than anticipated, was perpetuated or attempted by various individuals during childhood.

Sexual abuse and harassment

G2 participants, unlike their mothers, spoke openly about issues of sexual abuse and harassment. Some participants shared their own experiences of child sexual abuse and attempted abuse. One of the participants was Wadida, who in her interview spoke about how her stepfather had sexually abused her for about four years of her life.

"And he also use to use me as in, he used to rape me whenever he felt like doing it, and so it was just tough everyday was a problem for me" (Wadida, Burundi, age 21)

Zeenat explained that she experienced non-touching sexual abuse, where an adult man who had lived with them watched her bath when she was younger.

“So once, this man, I don’t know where, my mom was not at home, because it was my dad’s house it was like, I’m coming to stay there, type of thing so he came there, he stole the key from the bathroom somehow and he was watching me bath. I was 10 then, my mom wasn’t home, it was just me and my brother and I knew it was wrong, because at school they said, you know, you just know...” (Zeenat, DRC, age 22)

Dikla, on the other hand, revealed that she narrowly escaped an attempted rape by a young man who lived in the home with them.

“Example I was of almost raped twice when we use to stay in area X. So, I was still, I think 12 years old this is like my mom went to work so we lived in a two-bedroom apartment and living room so the other room they kept you know yeah uh people who rent but they only guys so as you know kids we don’t do nothing we use like going play there in that room because they were like our uncles we stayed with them for many years so this other one came with a young brother he was around 24, 25 it was only me that day me my young sister and my baby sister she’s still a baby. So my mom went to work and my father went to work so it was only the three of us in that guy so it was just in the room he started looking at me a certain way um I just took it as if you know when you’re with your uncle it’s just normal but it came to a point where he started telling me I must kiss him. Ah I just saw that there’s something wrong I went I told my younger let’s go out of this room I went in the kitchen he started pulling me towards the room, he started pulling me. I started shouting and shouting no one was there he’s pulling me my young sister came she pulled me from the back when she pulled me from the back, we all fell down and then the, then our gate our gate someone was knocking there. So, he got scared he went inside straight and closed the door.” (Dikla, DRC, age 19)

As reported by some participants, the phenomenon of having young refugee men, often from the same country of origin, live with families has consequently resulted in high rates of sexual abuse against young children. This was explained by Aseela in the Burundian mothers’ FGD, where she spoke about how refugee couples’ inability to afford rental prices has led them to sublease rooms, making young children, especially girls, vulnerable to sexual abuse by these young men.

“That is happening a lot in our homes, I’ve heard about two to three such instances where people are talking about the issue, where a little girl was raped in her home. You find sometime the issue is the way in which people live in their homes. You find that someone decides to rent a big apartment and that apartment is difficult for them to pay off, so they decide to sub-let it and they sub-let to young men, we call them singles. So you find that these young men, but you find that he rapes a child and he rapes a small child. There is a young man who I hear until now he is in jail because of the same issue...” (Aseela, Burundi, age 45)

Dikla further explained in her interview that after the traumatic experience, her mother revictimised and retraumatised her by not believing her story and instead requested to check her for any physical signs of sexual activity.

“...when my mom came I had proof that he did say those type of things and he wanted to do that and my mom came she asked what’s wrong. Because she found us crying, I was like mama this guy almost did this. But you know African moms she had to make sure that he actually did that first... You know she did that thing, that they do to... You just sleep down, take out your clothes and then she checks...” (Dikla, DRC, age 19)

Dikla also explained that after she was physically examined by her mother for any signs of forced sexual entrance, she tried to produce evidence of the perpetrator’s prior advancements by showing both her mother and father proof in the form of a letter that he had written to her. However, her father blamed her for what happened, insisting that she was at fault.

“So, I showed her the letter yeah to show what he did but my father thought that I it was my fault yeah, it was my fault that’s all of that happened. But then I was like how is it my fault and I was the victim I was still 12 years old what did I do, it’s not like I was wearing bad or what but it, it, it, it was just so complicating and I was hurt because it wasn’t my fault it was his fault the fact that it was a child he didn’t say that I was a child he wanted to take advantage of me yeah.” (Dikla, DRC, age 19)

This finding is intriguing as it brings to light issues of trust and some refugee parents’ hierarchical prioritisation of adults over children, which subsequently leads to other forms of child maltreatment, such as verbal, emotional, and psychological abuse and neglect. Unlike G1

participants, whom many attributed their experiences of maltreatment and neglect to being alloparented, many G2 participants disclosed experiencing severe child maltreatment and neglect, and in some cases, abandonment, by their biological parents. These experiences are substantiated in the interpretations and quotes provided below.

Child abandonment and neglect

Two participants spoke candidly about their experiences of child abandonment. During the Burundian adult daughter FGD, Mwamini explained how her biological mother left them (father, younger brother, and her) and started a new life in another country. She explained how this made her feel abandoned and as much as her father was around and there were other women such as Aseela who took on a motherly role.

“I am the mother, where I am right now, at first, I felt abandoned because she had her reasons to go, she explained them to me. I feel like a mother and a daughter, and a sister and an aunty to my younger brother. Being, in a household whereby I’m the only girl, one younger two older. You see, actually I could say I taught myself to be strong, I taught myself how to be independent, since I was 16”

(Mwamini, Burundi, age 18)

Yumn, when asked to describe her life growing up, sobbed and explained that her mother had abandoned her with her grandparents at the age of four. When she was older, her grandparents sent her and her sister to live with her mother and her stepfather. She further explained that she and her older sister were then maltreated and neglected by her mother and stepfather.

“Uhm, it was different and it was also difficult to cope with my mother, because ever since I was small my mother, left me when I was four years old and all, and I grew up with my grandparents and they took care of me. So, when I came here I, I found it very difficult because uhm, she didn’t treat me well like a child... I experienced a lot, she was married to another man, and people say that stepfathers are not good, and that’s what I saw when I moved in with my mom. Like I have a big sister and she came here, she was pregnant and then they were just not good to us, they were just good to their kids that they gave birth to... Yeah they use to hit us [sobs]... It was always bad.” **(Yumn, Burundi, age 20)**

Verbal abuse

Some participants revealed that they experienced verbal abuse in their childhood. Verbal abuse was reported to have been perpetuated by different people in the home, such as a parent (father or mother), sibling, or an individual living in the home with the family.

“...just yesterday when he came back from the mosque in the night, you know, there’s like a book that to really has all the hadiths of the Prophet (SAW⁸), you know. And so he came home and then he asked if you read and then we said no, we did not read and then he started swearing and insulting us again... he’s like uhm oh you guys are idiots, major witches and wizards, you and your flea market and your tea you act as if that it.” (Husn, Burundi, age 23)

Lubaba explained that the sibling dynamics in her home were strained, often because of the power that her older brother had over them as the younger siblings. She explained that she feared him and was often afraid to speak out, and when she did, she was met with verbal abuse.

“And the elder one is the one to control you, even if you tell them, it’s of no use, they just keep quiet. I keep telling them until they end up swearing you for nothing” (Lubaba, Burundi, age 21)

Zeenat revealed that when she was younger, her uncle, who had lived with them, called her names that were offensive and demeaning.

“...you’re a prostitute, you’re this because your mom lets you, I wasn’t even dressed inappropriately, what were you doing looking at a child. I was 9, if I am home I am wearing a skirt and what were you thinking, and when you look back you’re like why were you looking at a 9-year-old and sexualising them and telling them that you’re a prostitute, you’re nothing more than a piece of meat. Like for me what hurt was this was supposed to be this is your dad’s and you know in our culture that’s your father so this is my father per se, so that really damages

⁸ Sallallahu Alaihi Wasallam (Peace be upon him)-salutations upon the Muslim final Prophet of God.

relationships you have with men, or even your idea of marriage. It's like I'm good on probably getting married.” (Zeenat, DRC, age 22)

On the other hand, Ghosoun stated in her interview that she experienced intimate partner violence when she was still living with the father of her baby; they would argue a lot and, in the process, they would start insulting each other.

“No, we just argued but never anything physical because I was pregnant, but we would swear each other, something like that swear each other things like that that's all. With both swear each other than you would spend two or three days without talking to each other yeah things like that.” (Ghosoun, Burundi, age 20)

The findings reveal that verbal abuse by an intimate partner was not the only type of violence experienced by G2 participants who had intimate relationships (dating or married). Some G2 participants reported having experienced psychological and emotional abuse as well as digital intimate partner violence, which are presented below⁹.

Psychological and emotional abuse

Zuri revealed that she experienced both psychological and emotional abuse by her boyfriends in high school, who displayed controlling and intimidating behaviour while they were together.

“Not physical abuse but it's just more like control like yeah I've had like two of my exes where in school they didn't want me to be friends with the other boys in school yeah. It was like if they see me talking to another boy like if they just see me laughing, like we're just talking yeah he gets really angry. He's just like I don't like I don't feel comfortable when I see you talking to other boys at first it's like cute and it becomes very bad because they're like he's like you know this thing where you exchange like Instagram or Facebook passwords and then he's just going through and this is all why you talking to this boy why are you following that boy why is he commenting on your status and your pictures yeah it's scary because it's like you're controlling you know. Or wanting to know where I am all the time so it's like obviously I'll tell you like where I am and what I'm doing today but now

⁹ Digital intimate partner violence was experienced outside the home.

it's like for a small thing for an whole hour you did not say anything why? Why did you not tell me you know yeah?...” (Zuri, DRC, age 20)

Digital intimate partner violence

An interesting finding in this study was the discovery of intimate partner violence that was experienced by Zuri¹⁰, who explained in her interview how her boyfriend used social media to exert control over her during their relationship by monitoring her contacts and online activity on social media platforms (Freed *et al.*, 2017).

“He’s just like I don’t like I don’t feel comfortable when you see you talking to other boys at first it’s like cute and it becomes very bad because they’re like he’s like you know this thing where you exchange like Instagram or Facebook passwords and then he’s just going through and this is all why you talking to this boy why are you following that boy why is he commenting on your status and your pictures yeah it’s scary because it’s like you’re controlling you know” (Zuri, DRC, age 20)

G2 participants, like their mothers, were exposed to varying degrees of violence, encompassing witnessing domestic violence between parents (fathers abusing mothers) or between parents and children within the home. The section below presents quotes that underscore the different types of violence G2 participants observed while growing up in their own homes or in the homes of their friends and/or neighbours.

Observed violence by G2 participants

Many G2 participants revealed that in their childhood, they witnessed domestic violence frequently at home, while some cited that they had knowledge of domestic violence that happened in the homes of neighbours or friends. The different types of abuse participants witnessed are explained next.

¹⁰ Only participant to report digital intimate partner violence.

Physical abuse

Physical abuse perpetuated by one parent on another parent was reported by many G2 participants who reported that they either saw their parents fighting or saw evidence of abuse in the form of bruises on their mothers' bodies.

"No, you do hear it, but when you are small you don't actually consider that they are fighting to an extent where they are actually physical, but in the morning, she is red and she's all like bruised and she's just in bed, so you know ah ah that was actually physical. But at night you're just think ah its just a normal fight not physical and she's just like no I am not getting up, I want my food in bed." (**Abir, DRC, age 27**)

"Yes, physical fighting and sometimes he used to say that he will throw my mother in the window, so I never liked being around them whenever they start fighting I will just go outside and wait until they are done and then I can come back in the house." (**Yumn, Burundi, age 20**)

Mawiya explained how witnessing how her father constantly beat her mother caused her to develop hatred towards him, which carried on into adulthood.

"To be completely honest with you I don't have a good relationship with my father I'm not close with him and even if he is my biological father, he raised us and he's our father I don't love him. There's a sense of hate that I feel towards him because there is no way that I'm going to love the man who put my mother through so much a man who constantly beat my mother and made my mother cry in front of us there's no way he doesn't matter what he does for us but what he used to do to my mother that made me hate him because I saw it every day." **Mawiya, DRC, age 27**)

Physical abuse perpetuated against older or younger siblings was also commonly reported by participants. Husn, in her interview, described how her violent father had physically assaulted her younger brother, who suffered from asthma and, as a result, had trouble breathing after the incident.

"...but there was a time where my father hit my brother and he's asthmatic my 22-year-old brother. Uhm, but that time he was, was like 12. I think he's asthmatic

where he was really suffering with breathing after that and like my mother decided to like take the stuff and leave...” (Husn, Burundi, age 23)

Financial abuse

Many G2 participants revealed that financial abuse was prevalent in their homes as well as the homes of other refugee families. Participants explained that physical or verbal altercations often involving their fathers or stepfathers occurred after mothers requested money to feed the children or to pay the bills at home.

“Yeah, sometimes they would argue before. Yeah they used to fight because my mother would ask him to give him money to give her money to buy things for the house and he would say no and then my mother would tell him no, then my mother will tell him if you don’t give me the money then you won’t leave the house and that’s when there he will start fighting they will start fighting. But these days they don’t fight just arguing, arguing, arguing and then finish.” (Ghusoun, Burundi, age 20)

Many G2 participants explained that their mothers were financially abused by their fathers, who left the financial responsibilities to their wives. One such participant was Husn, who explained this in the excerpt below.

“My mother goes and she’s the one who is actually paying my siblings school fees. He doesn’t contribute to anything. He’s that type of father who gets money and invest in back into the business doesn’t take out to say okay, rent, food and you know, those basic needs that just to cover up, you know.” (Husn, Burundi, age 23)

Mawiya complained about the financial abuse that refugee women experience daily in the sense that their husbands were involved in extramarital affairs. These extramarital affairs consequently meant that men stopped providing for their families and rather provided for their mistresses. This phenomenon has subsequently left many women with financial responsibility for their homes. Something that the participant described as a role reversal is that refugee women are now taking on the male role of providing for their families, and the husbands are now adopting women’s roles of being provided for.

“Only about one in ten women are fine in their marriages but 99% of us marriages are in terrible state and on top of that you’ll find that a lot of the husbands having extramarital affairs and they say men are providing for this side women paying rent providing food everything, but they are treating the wives absolutely terribly at home. He doesn’t even pay for his wife said rent and then now you find that the woman is the man of the house she pays her rent she provides food for her kids she does everything it’s almost like the roles have reversed that woman is the new men and the men now is the woman. I say this because as a man you do not provide you do not take your responsibilities seriously and now it falls on to your wife so it means that now you are the new wife.” Mawiya, DRC, age 27)

Psychological and emotional abuse

Some G2 participants explained their observations of psychological abuse inflicted by their fathers on their mothers. Participants, such as Avril and Falak, openly explained the ways in which their fathers psychologically abused their mothers.

“Okay, foreign guys I don’t know why I said Swahili guys like okay first thing they blame the wife when they cheat, if like you wouldn’t do what and they use the excuse to bring another wife or whatever, you’ve been screwing up with her before you even got married but then it wasn’t halal now, you’re making it halal.” (Falak, Burundi, age 20)

“It wasn’t only physical it was verbal you know. Just always reminding you every day that you are nothing without me, I am the one who paid your bride price, like I own you, you should listen to me. My word is final, all like, you know words like uh regards of you want to kill me you want me to go to an early grave, stuff like that” (Avril, DRC, age 22)

Zuri explained the interconnectedness between physical, financial, and emotional abuse that her mother undergoes in the home as Zuri observes.

“Aah its really bad I know that in my ah my family is you know there is ah emotional abuse, there is physical abuse sometimes financial abuse and we you know sometimes you threaten my mom with like not to give her money for food imagine if she says what about the small children, he doesn’t care it’s just like it’s almost

like he's he changes like it just becomes a different person. And I know that my I've, I've heard even that with my other friends as well you know their fathers also do the same thing yeah so it's mainly like the common ones like physical, emotional um I guess even mental you know the emotional because you know that controlling it's very manipulative you know like if you don't do this, I'm gonna do this. I see my mom she's very stressed you know a lot of times sometimes we just find that crying yeah that's yeah physical, emotional and financial." (Zuri, DRC, age 20)

Sexual abuse

Some G2 participants, particularly those in the Congolese adult-daughter FGD, explained how they had friends or knew of people who were sexually abused in the home by a close male family member, such as an uncle. These participants explained that this phenomenon is common in the refugee community.

"Girls are being molested, raped by their uncles but who do they run to... And mostly like for example I know this lady who has been molested by her uncle..?" (Donatille, DRC, age 21)

"I also know of a girl so she was staying with her uncle she was she also came from Congo, she's staying with her uncle because her parents past away, her uncle and the aunt now the aunt she does work for you so she her uncle is raped every day." (Fridoline, DRC, age 19)

The findings from the FGD with adult daughters from the DRC, based on their observations and personal accounts, highlighted the alarming prevalence of sexual abuse experienced by refugee girls, including children and adolescents. There is also evidence from the personal account of Khuloud (G1), suggesting that such abuse may occur within older married couples as well. Overall, this subtheme reveals that refugee women and their children are subjected to high levels of domestic violence, resulting in the co-occurrence of various forms of abuse. The next section presents the subtheme, "Effects of Domestic Violence", which outlines some of the consequences of domestic violence as evidenced in this study.

5.2.2 *Effects of domestic violence*

The effects of domestic violence are the second subtheme under the theme, “exposure to violence”, which was generated from many data quotes. The data from this study revealed that both G1 and G2 participants had endured significant suffering, with many continuing to grapple with the aftermath of their exposure to domestic violence. This study identified five primary consequences of domestic violence exposure for the refugee women, namely: internalising and externalising behavioural problems, parent-child attachment, academic impact, susceptibility to domestic violence, and a poor perception of men, which are detailed within this subtheme. One of the most significant consequences of exposure to domestic violence is its impact on parent-child relationships, particularly avoidant attachment, as revealed by G2 participants in this study. Below are quotes that shed light on this important finding.

5.2.2.1 *Parent-child attachment*

Exposure to domestic violence, particularly abuse inflicted on G2 participants by their parents, especially their mothers, resulted in insecure-avoidant attachment styles. Many of the G2 participants in this study presented with avoidant attachment, as participants reported either a reluctance to form close bonds with their parents or feeling cautious and uncomfortable about becoming too emotionally intimate with them, especially their mothers. G2 participants, such as Wadida, revealed that her mothers’ inability to protect her during instances of physical and sexual abuse by her stepfathers fostered a profound sense of mistrust in her mothers’ capacity to provide protection. This reality, for Wadida specifically, was compounded by the fact that her mother continued to perpetrate violence against her after she disclosed her experiences of sexual abuse (see quotes by Wadida above on her experiences of abuse). Although her relationship with her mother has shown improvement over the years, she explains that she remains cautious about placing complete trust in her mother and letting her guard down. As a result, she avoids getting too emotionally close to her. She presents as a pessimist, particularly when it comes to trusting that her mother can help her in times of need.

“Well, the relationship between my mom and I is not as bad as it was when I was younger. Now we are getting a long, talking to each other because before I never ever sat with her in one room, it was very hard for me to do that, after she said I am lying and stuff it was very hard for me to even sit in a room with her. But, now all that has changed I can sit in a room with her, I can talk to her, but there are

things that I cannot tell her because I don't have, this kind of relationship with my mom. We are not that close for me to tell her deep stuff that I have inside."
(Wadida, Burundi, age 21) {Avoidant attachment}

This hesitation to fully trust one's mother was also voiced by Dikla, who described her efforts to establish a better relationship with her mother. However, personal experiences with her mother have made it challenging for her to comfortably develop a close and trusting bond. Dikla harbours negative emotions towards her mother, which have consequently contributed to the avoidant attachment she exhibits despite her attempts to bridge the gap and foster closeness with her mother.

"Eish me and my mother, we don't have a relationship because I passed through a lot, a lot and my mother's she was a strict mom, all of my siblings we don't share that special bond with her especially me, especially me I don't share that special bond it's only started let's just say this year and I'm, I'm just trying I'm trying to get that relationship with her but we don't share this relationship... I feel like she, she's not understanding you know a mother you're supposed to understand your kids especially if it's a girl if you have a daughter, you're supposed to come close with her like you must make a move to show her that you are there for her and you feel her pain." **(Dikla, DRC, age 19)**

Additionally, avoidant attachment was exemplified by certain participants, such as Husn, who expressed a lack of desire to form a close bond with her father. She elaborated that this reluctance stemmed from her father's violent nature, which not only adversely affected her mother and siblings but also had repercussions on her mental well-being and academic performance in high school.

"It has even come to a point where that uhm sometimes uhm like I don't want to be around my dad because I feel like he is a negative energy towards me and he keeps having a bad effect on my studies, because if I can go back to 2017. Where I can say we went through a really tough time, and it did have a negative impact when it came to my matric [final year grade 12] results... So, its, its really tough I have come to a point where I just want to study and move out. And I think my mom has noticed that I no longer want to stay with him, you can't keep coming and telling me about witchcraft and uhm blaming everyone because we don't know where you

are getting that thing from. So, yeah, we are tired of the insults.” (Husn, Burundi, age 23)

However, some G2 participants revealed that they had secure attachments with their parents.

“Uhm, with my mom we have a close relationship like we talk about anything but not everything. Like my relationships and all of that, certain stuff I don’t tell her so, but we are close. We are close, but then we don’t talk about everything because Congolese women have that [gestures]” (Kaisa, DRC, age 22) {Secure}

Apart from resulting in problems with attachment between parents and their adult daughters, as reported by many G2 participants, exposure to domestic violence also had serious consequences for both G1 and G2 participants, resulting in internalising and externalising problems, which are discussed in the subsection below.

5.2.2.2 *Internalising and externalising problems*

The study revealed that both G1 and G2 participants suffered from internalising and externalising behavioural problems. Many of the internalising problems presented themselves in the form of mental distress. The mental impacts of domestic violence (Fernández-González *et al.*, 2018) presented differently in the two generations of women. Some G1 participants described the emotional and psychological toll abuse had on them, where, for example, Bilqis presented with depression. Bilqis explained that she was exposed to domestic violence from early childhood and well into her adulthood. Dual exposure was in the form of both witnessing as well as experiencing different forms of domestic violence. She described herself as an unhappy person who does not get excited by anything. Throughout the whole interview with Bilqis, the researcher observed her body language, which remained the same. She also had poor eye contact, although this may be attributed to cultural background, she kept her eyes lowered because anytime she attempted to look at the researcher, she teared up. This was also paired with the hopelessness that she exuded.

“I won’t lie to you, my whole life even now as an adult I don’t know, I can’t see something and I say that this thing makes me very happy or in my life I don’t know what to tell you. There is nothing that can make me very happy yeah [tears up].” (Bilqis, DRC, age 36)

In describing the mental toll of infidelity of men on women, Wajiha, who also included herself, spoke about how infidelity negatively affected women, especially if their husbands had children with their mistresses.

“However you find that some men just have children out of wedlock with other women so they basically cheated on their wives, so these things have an impact.”

(Wajiha, DRC, age 50)

Kaisa a G2 participant explained how her father’s anger problems negatively affects them, in addition to witnessing what her mother goes through with her father.

“Yes, even us too. Instead of saying something nicely, he wants to say it out of anger so mxm all that haibo it’s really, psychologically it’s messed up in a way.”

(Kaisa, DRC 22)

Additionally, internalising problems presented themselves in the form of illness, particularly in G1 participants, as a severe consequence of domestic violence. Kinza (G1) and Intisar (G2) explained that they were aware of the negative consequences of domestic violence on victims’ physical health. Kinza briefly explained how, from her experience and observation of intimate partner violence, it can lead to poor health in many women.

“I think it’s because they are afraid of people laughing at them. And I don’t think that’s nice because, they don’t find a solution to their problems, because with somethings if you remain silent, they may cause physical complications and you yourself are making yourself sick. But when you talk to people you feel liberated yeah.” **(Kinza, DRC, age 52)**

Intisar, on the other hand, explained how her mother’s experiences of domestic violence have resulted in her ailing health.

“My stepfather was just very verbally abusive he never beat but it was just very verbally abusive and you know what I tell you you’d rather get beaten than to be told something terrible because words hurt deeper and more in the heart is longer lasting then physical abuse. That constant unrest in the home caused her health to deteriorate so much so that my mother actually has so many hospital cards one in

Phila Hospital¹¹ and another one St John's¹² hospital that she's gone to in the past few years. She's been Phila about six times, the last time we went to hospital she went to St John's and all because her pressure, the constant problems at home has caused her pressure to skyrocket, where she needed medical attention.” (Intisar, Burundi, age 27)

Externalising problems presented themselves in G2 participants in the form of substance abuse, while G2 participants reported cyberbullying as a common feature in older refugee women (G1). Substance abuse due to the impact of domestic violence was another major finding and was reported by both G1 and G2 participants. This externalising behavioural problem was reported by participants as an escape that victims and/or witnesses of domestic violence used to cope with the violence that was inflicted on them daily. In the Burundian mother FGD, Inaya explained how substance abuse was common in the refugee community, which she explained was different from her country of origin. She explained that substance abuse had become an epidemic where it has become common to see young children in primary school and women abusing substances, such as marijuana (zola).

“Grade 7, grade 8 a child starts smoking. I don't understand if it's the country, I don't understand what is the problem? Different from what I witnessed back home, you see. Here things are messed up. Even the women here, they start smoking zola, they're drinking like there is no tomorrow.” (Inaya, Burundi, age 51)

Among the G2 participants who revealed that they abused substances to escape the realities of what was happening at home, they also revealed that they tried as much as they could to stay away from home. This was explained by Wadida and Sanctifiée, who were so negatively affected by domestic violence that they resorted to using drugs and abstaining from their homes.

Wadida, who experienced child maltreatment, which included physical, sexual, verbal, and psychological abuse and neglect at home, resorted to taking drugs when she was in high school to help her cope with the situation at home.

¹¹ Researcher replaced the actual name of the hospital mentioned by participant (i.e. pseudonym).

¹² This is also a replacement for the actual hospital mentioned by the participant.

“But when I got to high school things started being tough, I started having bad friends and started doing drugs and stuff like that, I was never at home. I just felt like that use to help with the situation at home. Yeah, so, that’s how I grew up.”

(Wadida, Burundi, age 21)

Similar sentiments were shared by Sanctifiée, who used drugs and stayed away from home to escape the violence she observed between her parents.

“I don’t want to I don’t want to have kids they won’t be running away from home and then do certain things outside just to escape how home is like yeah. And that’s why you get like myself I used to like whenever things got bad at home I’ll just have friends who used to get into drugs and then I’ll just I wouldn’t want to go home so now you do the drugs with them. I would do that and then whenever I got home I just feel like I’m in my own world whenever whatever that is happening with my parents whatever they’re gonna get into it. I’m not going ...be there in the moment with them.” **(Sanctifiée, DRC, age 21)**

G2 participants revealed that refugee women enacted a number of antisocial behaviours that were to the detriment of young women (G2s) as well as other women. These toxic and antisocial behaviours often took the form of bullying (including cyberbullying), humiliation and intimidation.

“I’m telling you I’ve heard not even more than one woman I’m sitting in my house, but I will hear all the stories, you know a story will trend verbally on WhatsApp and it will just trend there’s like a whole Twitter out there and it will just find you. Yeah so and so’s mother, and you’re like oh my God Mama so and so you too, she did that they left each other.” **(Falak, Burundi, age 20)**

“This gossiping and things they do, these little fights here and there its very useless, and we need to be together as women and a lot of women in our culture do not stand together. They’re the first ones to push you down. First ones before the men put you down, they’re the first ones to do it, they’re like you saw that so and so’s child they’re da da da, but then they like I’m your aunt, I am your mother. But what are you doing that’s not representing how a mom should be.” **(Zeenat, DRC, age 22)**

Interestingly, one G2 participant reported maternal aggressive behaviour as an externalising problem, which she attributed to her experiences of child maltreatment. Zuri explained that a combination of a range of factors, such as refugee status, limited employment, and financial difficulties experienced by refugees, particularly refugee men, are significant factors contributing to their mothers' experiences of abuse by their fathers. Consequently, this results in many refugee mothers taking out their frustrations on their children.

“He’s my uncle, you know my father they, they, they fight a lot you know. It’s really bad I think see it more now that I’m older and there’s a lot of quarrelling a lot of shouting, umm it’s just I think it’s just the pressure you know things are not easy here in South Africa and us being refugees and yeah they just fight about a lot of things so you know it’s sometimes it’s just better when he’s not there oh at least if it’s just like us the children at home. Even though sometimes she does take it out on us, it’s better when he isn’t there.” (Zuri, DRC, age 20)

Refugee women (both G1 and G2) reported that the impacts of domestic violence extended far beyond their relationships with their parents, affecting various aspects of their lives, including mental health and behavioural outcomes. Additionally, their experiences of domestic violence had detrimental effects on the academic achievements of the children of the G1 participants, as elaborated in the subsection below.

5.2.2.3 *Academic consequences*

This study revealed that domestic violence has devastating consequences on children's ability to attend school and access basic education. This was reported by G1 participants, who explained that they chose to put their children's educational wellbeing before their own personal well-being. This consideration led many of them to stay with their abusive husbands. The heavy financial dependence of refugee women on their abusers was reported as a significant factor in remaining in abusive marriages, which severely affected their children's education. Some participants explained that they had to pull their children out of school because they have no one to pay for their children's school fees.

“He doesn’t provide for me at all. To a point where my child is sitting at home not going to school because my other son died, he was the only one that use to help me

with the fees but now there is no one to help me pay school fees. My son stopped going since 2020 during Corona...” (Yakoota, Burundi, age 49)

“It’s true every parents want goodness for their children but sometimes because of circumstances they do not get what they hope for, based on what they see at home between parents. They may have dreams of becoming doctors, pastors but sometimes they don’t achieve their goals because of you as parents because you couldn’t work together or you, we were unable to give them the resources to achieve their goals.” (Sikitu, DRC, age 40)

In the above quote, Sikitu was referring to her own children whom she was struggling to provide for. Her daughter Cyrie was forced to drop out of school because of financial issues.

“And just yeah and it’s what my education I had to drop out because of some reasons you know it’s, it’s very difficult for, for us refugees to go to school yeah you’re difficult.” (Cyrie, DRC, age 19)

Participants who were exposed to domestic violence, where they witnessed interparental partner violence or experienced child maltreatment and/or neglect, were rendered more susceptible to becoming victims of partner violence later in life. While this phenomenon is observed across both generations, the subsection below serves as an indicator of intergenerational transmission of domestic violence among refugee women.

5.2.2.4 Susceptibility to intimate partner violence

One of the major consequences of witnessing violence between parents (interparental partner violence) is an increased likelihood of individuals becoming victims of intimate partner violence themselves. Illustrating that observing violence during childhood can lead to the intergenerational transmission of domestic violence, refugee women learn that intimate partner violence is acceptable in marital relationships. Many of the G1 participants who revealed that their mothers were victims of intimate partner violence later reported experiencing intimate partner violence themselves in adulthood (as indicated in the subtheme: violent home environments).

“I learned something big I learned something very huge especially in terms of how a woman should carry herself. Because my mother focused on her children she

focused on us and she wasn't involved in weird things... I mean it's what I said earlier before that what men won't marry someone else or have a second wife but only for you to hear that he's had children outside your marriage with other women and that affects you a lot, hmm yeah. And you will never trust him again for the rest of your life." (Wajiha, DRC, age 50)

Chapter 6 explores various facets of the intergenerational transmission of domestic violence. This will encompass an examination of what is transmitted across generations, the mechanisms involved in this transmission, and the risk factors associated with intergenerational transmission of domestic violence within refugee families.

Furthermore, it is worth noting that exposure to domestic violence led to the formation of negative perceptions of men among certain G1 participants, as detailed in the subsection below.

5.2.2.5 *Poor perception of men*

Witnessing violence between intimate partners, especially for Thurayyah and Iris (G1s), resulted in fear of both men and marriage. This fear was so strong that they did not want to get married when they were younger.

"...I was just like ah so this is marriage I don't want this thing if this is marriage because this is too stressful for me I don't want this." (Thurayyah, Burundi, age 43)

Iris' internalised perception of men led her to generalise that all men were the same. She mentioned that she became very unapproachable and antisocial towards men during her youth. Her observations of men's violent behaviours contributed to her marrying at a significantly later age, which was a contrast to the socio-cultural norms of Congolese society.

"...so from that I was so hurt and I never wanted a man. Can you imagine that from 0 until 30 years, this was my first male encounter. But, I was very rude to me I never wanted not even one close to me, but I was never one to swear a man, I was just very protective of myself, I believed that they were all the same. I stayed, when you live with people and any small mistake they swear at you, that is the life I lived in conclusion." (Iris, DRC, age 57)

Part 1 of this chapter presented compelling evidence of domestic violence exposure including both experiences and/or observations among refugee women included in this study, spanning from childhood to adulthood for both G1 and G2 participants. This section elucidates intergenerational patterns of domestic violence and explores the consequences of such exposure on the participants. The second part of this chapter involves a comprehensive discussion of the findings in relation to existing literature.

5.3 Discussion

The second part of this chapter provides an in-depth discussion of the findings on refugee women's exposure to domestic violence, contextualising them within the framework of the research question and existing scholarly literature. These findings serve as substantiation for the phenomenon of intergenerational transmission of domestic violence within refugee families, with a specific focus on refugee women. Furthermore, these findings are used to corroborate two of the initial assumptions: first, the existence of intergenerational transmission of domestic violence in refugee families, and secondly, the vulnerability of refugee women with mothers who have a history of abuse to becoming victims of domestic violence themselves. The discussion begins by providing a concise overview of the contributions of this study to the existing body of knowledge. Subsequently, the discussion addresses the first primary discussion point of the chapter, focusing on the exposure of G1 participants (older refugee women) to domestic violence during both their childhood and adulthood. Following this, the chapter delves into the exposure of G2 participants (younger refugee women) to domestic violence during their childhood and later stages of adulthood, where connections with existing literature are established, drawing comparisons and contrasts between the findings of this study and those of previous studies.

In this chapter, the primary focus is to establish connections between the findings of this study and existing studies rather than emphasising the link to the conceptual framework of this study. Although some theoretical connections are drawn, it is important to note that theoretical linkages based on the conceptual framework of this study are more prominently featured in Chapters 6 and 7. The part concludes the overall conclusion of the chapter.

The research findings contribute to the existing knowledge on intergenerational transmission of domestic violence in refugee families in South Africa, with a specific focus on women from Burundi and the DRC. It also contributes to insights into the lifespan exposure of domestic

violence and its intergenerational implications. The study revealed extensive exposure to domestic violence among women from two generations, originating from Burundi and the DRC. This exposure significantly affected their own experiences of violence, perpetuated against them by their intimate partners. The study highlighted that participants' exposure to domestic violence occurred largely in their homes during childhood and adulthood. However, the nature of the violence reported in the home differed between participants from the two generations.

5.3.1 Childhood exposure to domestic violence and adult intimate partner violence in G1 participants

This study revealed that many older refugee women who lived with their biological parents referred to their personal experiences of “child maltreatment” as disciplinary measures necessitated by their parents, particularly their mothers. This “child maltreatment” primarily manifested as physical abuse or violence perpetuated by their parents, especially their mothers. Older refugee women did not view this physical punishment as abusive; instead, they perceived it as a necessary method employed by their mothers to discipline them for undesirable behaviour and to instil values of respectability within their communities. Shapiro (2023) explains that adult parents who experienced harsh punishment when they were children often reframe their parents' aggressive behaviour as a normal and often necessary child-rearing mechanism rather than abusive.

Interestingly, this study uncovered that participants who experienced alloparenting reported high rates of child maltreatment and neglect, predominantly manifesting as physical abuse and neglect, and in contrast to participants who were raised by their biological parents, deemed this treatment as abusive. This finding aligns with Ayaya *et al.*'s (2023) research, which reported that among 1 227 orphaned children in family-based care, 23% experienced emotional abuse, and 31% suffered physical abuse. These findings are significant considering that sub-Saharan Africa is home to 37% of the world's 140 million orphaned children, as reported in a 2015 UNICEF study (cited in Ayaya *et al.*, 2023), making alloparenting a common practice in these societies (Steele *et al.*, 2014). However, contrary to Keller and Chaudhary's (2017) assertion that alloparental care, particularly allomaternal care, fosters strong, trusting relationships and a sense of security in children, this study found that alloparenting led to high levels of child maltreatment and neglect among many older refugee women who were alloparented. This has subsequently created trust issues in those older refugee women. The researcher found that these

specific women often developed insecure avoidant attachments¹³, evidenced by their reluctance or refusal to allow anyone, including close relatives, to raise their children.

Their experiences with violence and other ACEs made them determined to be the sole caregivers for their children. It is important to note that the advocated benefits of alloparenting, as suggested by Chaudhary and Swanepoel (2023) and Keller and Chaudhary (2017), are based on the communal living standards prevalent in many low- and middle-income countries, where mothers often rely on alloparents for childcare due to economic constraints. However, the findings of the present study suggest that the positive outcomes of secure attachment in alloparenting, as argued by Steele *et al.* (2014) to be crucial for developing empathy and prosocial behaviours, may not hold true for children who were orphaned and forced to rely solely on alloparents, particularly in the case of older refugee women. This especially applies if these children experience child maltreatment and neglect, as found in the settings described in this study.

Older refugee women reported experiencing various forms of violence at home, which extended beyond the abuse perpetrated by their mothers or alloparents. Some participants reported instances of witnessing domestic violence during their childhood, encompassing both interparental partner violence and intimate partner violence involving their older siblings and their spouses. This dual exposure¹⁴ to domestic violence was linked to an increased vulnerability to intimate partner violence among refugee women in their marital homes. The study revealed that numerous older refugee women experienced one or more acts of violence from their husbands or intimate partners, encompassing physical, verbal, financial, sexual¹⁵, psychological, and emotional abuse. This underscores refugee women's perception of domestic

¹³ It is important to acknowledge that assessing the attachment style concerning all G1 participants in their intimate relationships was not feasible due to several factors, including participants' reluctance to discuss their relationships (including those with their parents) during the study. Consequently, traits of avoidant attachment were only detected among G1 participants who were raised by alloparents, primarily because of their own experiences. These experiences led to entrenched trust issues, particularly concerning the involvement of others in raising their own children.

¹⁴ The subsequent sections establish a connection between refugee women's dual exposure. Specifically, their own experiences of abuse and the perpetuation of child maltreatment reported by their adult daughters. Here, the emphasis is solely on their encounters with intimate partner violence as a consequence of exposure to domestic violence.

¹⁵ Sexual abuse was only reported by one G1 participant, this is likely due to cultural and religious norms that shun the exposure of one's sexual interactions with one's spouse to others. This will be explored more in Chapter 6.

violence as a normal and acceptable aspect of family life, shaped by life-long observations, thereby heightening their susceptibility to experiencing domestic violence from their spouses in adulthood within the context of South Africa. Additionally, this presents the patterns of intergenerational transmission of domestic violence victimisation among refugee women. This pattern aligns with findings from several studies, which have demonstrated that intimate partner violence victims witnessed interparental partner violence or intimate partner violence involving their parents or other intimate partners during childhood (Haselschwerdt *et al.*, 2021; Paixão *et al.*, 2015; Powers *et al.*, 2020; Smith *et al.*, 2011; Zhao *et al.*, 2022; Zimeray, 2022). According to the social learning theory, children who are frequently exposed to violence may normalise such behaviour and, as adults, may rationalise the acceptance of violence in their relationships (Li *et al.*, 2023; Rada, 2014). Specifically, women in these circumstances often replicate the victim behaviours they observed during their childhood, imitating the actions they saw in their mothers and other female family members (Haselschwerdt *et al.*, 2021; Li *et al.*, 2023; Pingley, 2017; Shakoor *et al.*, 2022; Southern and Sullivan, 2021).

Interestingly, the majority of older refugee women in this study reported that they had never witnessed physical or verbal abuse being perpetrated against their mothers by their fathers. However, many of these women still reported experiencing one or more forms of intimate partner violence. This discrepancy can be attributed to the fact that exposure to interparental partner violence does not necessarily require the child to have directly seen or heard the violence. It can also include indirect exposure, such as observing signs of abuse or sensing it (Anderson and Kras, 2005). However, there are two plausible explanations for this finding: the first is related to socio-cultural norms around discussing private family matters with outsiders (Thobane *et al.*, 2020), such as the researcher, and may have hindered participants from disclosing interparental partner violence experiences during childhood. This reluctance could be further compounded by factors such as the researcher's age (young woman) and common refugee background, which may have introduced participant bias. Secondly, due to these socio-cultural norms, many parental interactions, both violent and non-violent, may have occurred out of the participants' sight. This includes expressions of love and affection as well as conflicts.

A more in-depth discussion of the factors associated with modelled victim behaviour in older refugee women and its transmission to their daughters will be extensively covered in Chapter 6.

5.3.2 *Childhood exposure to domestic violence and adult intimate partner violence in G2 participants*

This study revealed a significant co-occurrence of child maltreatment and interparental partner violence within refugee families, with younger refugee women often witnessing their fathers as perpetrators of interparental partner violence against mothers. Additionally, many younger refugee women recounted personal experiences of maltreatment, along with their siblings, often inflicted by one or both parents. Lawson (2019) and Tullberg and Vaughn (2023) describe ‘co-occurrence’ as the simultaneous presence of intimate partner violence and child maltreatment and neglect, where parents, especially mothers, may be victims of intimate partner violence but also perpetrators of child maltreatment and neglect. Notably, many younger refugee women reported experiencing verbal, physical, emotional, and psychological abuse, along with neglect and abandonment, primarily inflicted by their mothers. However, there were still some participants who reported their fathers, siblings, other family members or adult housemates as the perpetrators of such abuse.

Van Wert *et al.* (2019) note that parents who have experienced child maltreatment and/or neglect during their own childhoods are at an increased risk of becoming abusive or neglectful towards their own children. Consistent with this, the current study observed evidence of intergenerational transmission of child maltreatment and neglect, a finding supported by research from Adams *et al.* (2019), Armfield *et al.* (2021), Madigan *et al.* (2019), Morelli *et al.* (2021), and Putnam-Hornstein *et al.* (2015). Although many older refugee women did not perceive their parents’ aggressive behaviours as abusive, they often replicated these behaviours with their own children. This pattern suggests that women with histories of child maltreatment are more likely to maltreat their children, as supported by studies from Kozybska *et al.* (2022) and Madigan *et al.* (2019). The current study revealed that the incidence of child maltreatment and/or neglect perpetuated by mothers was further intensified by their own experiences of intimate partner violence perpetuated by their husbands or intimate partners. Maternal experiences of partner violence led to significant repercussions for children within the home, who are typically the most vulnerable family members (Paixão *et al.*, 2015). In many cases, maternal anger towards the father was displaced and unjustly directed at the children.

This pattern of behaviour has been observed in other studies as well. For instance, Miedema and Kyaw (2022) conducted research on Burmese mothers, finding that a mother’s past exposure to physical abuse, coupled with intimate partner violence from a spouse, correlated

with an increased likelihood of child abuse perpetuation. Similarly, Falb *et al.* (2022), in their study on intimate partner violence and child abuse co-occurrence in Eastern DRC, reported that a significant proportion of participants (56.1% of women and 50.5% of men) experienced co-occurring intimate partner violence and child abuse. Notably, women in this study were more likely than men to perpetrate child maltreatment. The work of Lawson (2019), and Renner (2021) further supports this study's findings, illustrating that witnessing interparental partner violence, coupled with personal experiences of child maltreatment in childhood and intimate partner violence in adulthood, adversely affects women's behaviour, increasing their propensity to mistreat their own children. Paixão *et al.* (2015) further elaborate that in over 65% of cases where children witnessed violence against their mothers, approximately 20% of those children became direct victims of violence themselves.

Interestingly, this study found that sexual abuse and attempted abuse were commonly reported forms of child maltreatment in refugee families, as indicated by both younger refugee women (in individual interviews and FGDs) and, to some extent, older refugee women (in the FGDs). This maltreatment often occurred within the home and was reported to be perpetrated by father figures and subtenants, with the latter commonly residing with refugee families due to financial constraints. Younger refugee women frequently reported that their disclosures of abuse were met with disbelief or even revictimisation and retraumatisation by their mothers. In one notable instance, a participant reported that, after disclosing an attempted rape, she was subjected to virginity testing by her mother. This procedure was conducted to determine if there had been any actual penile penetration by the accused. Another participant recounted being physically and verbally abused by her mother after such disclosure. These responses left participants feeling neglected, unloved, and as though their traumatic experiences were unworthy of attention.

Rakubu (2019) notes that virginity testing is legal in South Africa under Section 12 of the Children's Act 38 of 2005 for children aged 16 years and older who give consent. However, the manner in which the virginity testing was conducted in the reported case was illegal, as consent was not obtained from the participant, especially following a traumatic event such as attempted rape. It appears that the mother conducted this test in an attempt to ascertain the credibility of her daughter's account. The practice of virginity testing in many parts of Africa may be influenced by socio-cultural and religious norms that value virginity as a symbol of family pride in marriage (Rakubu, 2019). Because of the socio-cultural and religious

significance of women's virginity, it is possible that the mother may have conducted the test not only out of concern for potential future consequences for her daughter but also because of the implications for her family's reputation should it be found that the daughter had been 'damaged'.

The retraumatisation and revictimisation experienced by younger refugee women can be linked to the older refugee women's own personal histories of childhood sexual abuse. Research has shown that the risk of intergenerational transmission of child sexual abuse from mothers to daughters is 3.6 times higher for daughters of mothers who were sexually abused compared to those who were not (Borelli *et al.*, 2019; McCloskey, 2013). However, in contrast to these findings, the current study did not establish a connection between the sexual abuse experiences of refugee mothers during their childhood and the sexual abuse experiences of their daughters. This absence of reported links could be due to older refugee women not having experienced sexual violence in their childhood or their reluctance to disclose such traumatic experiences, potentially viewing them as distant memories.

Interestingly, in contrast to older refugee women, many younger refugee women reported witnessing their mothers endure various forms of abuse by their fathers, including physical, verbal, financial, emotional, and psychological abuse. They often observed these violent incidents occurring in their presence or overheard the abuse between their parents. A significant number of younger refugee women who were exposed to interparental partner violence or intimate partner violence, as well as suffered some form of child maltreatment and neglect, also reported experiencing violence in their adult or adolescent intimate relationships. This violence, described as intimate partner violence, manifested in various forms in their marriages/partnerships, including physical, verbal, emotional, and psychological abuse. A notable aspect of this abuse was its occurrence through technology, a phenomenon referred to as digital intimate partner violence (Freed *et al.*, 2017). While several participants mentioned digital intimate partner violence, one younger refugee woman specifically described how her partner used technology and social media to exert control and authority over her. This was described as her boyfriend's excessive monitoring of her social media interactions, particularly with the opposite sex. This finding aligns with study findings by Henry *et al.* (2022), which investigated technology-facilitated domestic violence against refugee and immigrant women in Australia.

Overall, the findings of this study confirm the existence of intergenerational transmission of domestic violence in refugee families in Durban, South Africa, as was assumed prior to data collection. It was observed that many younger refugee women experienced a historical reproduction of violence, mirroring the abuse faced by their mothers during childhood and adulthood. This repeated cycle of violence, particularly in the latter stages, is often associated with intimate partner violence, aligning with findings from studies by Lünemann *et al.* (2019), Paixão *et al.* (2015), and Puno *et al.* (2023). This also corroborates an initial assumption proposed regarding the transmission of domestic violence victimhood from mothers to adult daughters, as detailed in Chapter 1.

5.3.3 Exploring the realities: Effects of domestic violence exposure on refugee families in Durban, South Africa

This study highlights the prevalence of intergenerational polyvictimisation within refugee families. Defined by Ford and Delker (2019, p. 1) as “the exposure to multiple types of victimisation”, this phenomenon was evident as many participants from both generations experienced various forms of child maltreatment, neglect, and witnessing interparental partner violence or intimate partner violence during childhood, then later encountered intimate partner violence in adulthood or dating violence in adolescence. The heightened risk of polyvictimisation for domestic violence among refugee women, adolescents, and children in South Africa can be attributed to a confluence of factors, including their refugee status, language barriers, limited access to protective resources, and poor assimilation, all of which are exacerbated by xenophobia. Xenophobia in South Africa, manifesting in both social and institutional forms, has been discussed in research by Akinola (2014), Landau Ramjathan-Keogh, and Singh (2005), McKnight (2008), and Muchiri (2016). Xenophobic attitudes and practices have had a significant impact on refugees. One such consequence is refugees’ varied responses to available services, including their poor understanding as well as the refusal of available protective services, specifically to key pieces of legislation, such as the DVA, which is designed to protect all women from domestic violence. This also includes the South African Children’s Act, which aims to safeguard children (Hendricks, 2014). These challenges not only complicate refugees’ interactions with these protective measures but also increase their vulnerability to polyvictimisation, further perpetuating the cycle of intergenerational transmission of domestic violence within these families, particularly in Durban.

This study found that dual exposure to domestic violence profoundly affected both generations of refugee women participants negatively. Specifically, five main negative effects of exposure to domestic violence were identified, namely: 1) insecure parent-child attachment; 2) the development of internalising and externalising problems; 3) academic consequences; 4) susceptibility to intimate partner violence (i.e. intergenerational transmission of domestic violence); and 5) negative perceptions of men among some participants. A well-established consequence of domestic violence exposure is the increased likelihood of younger refugee women becoming victims of intimate partner violence and the potential perpetrators of child maltreatment as a result of ACEs (Adam *et al.*, 2019). This risk is particularly evident as some younger refugee women, upon becoming parents themselves, may replicate the child maltreatment behaviours they learned from their mothers. Additionally, some individuals who had witnessed interparental partner violence disclosed experiencing intimate partner violence perpetrated by their husbands or boyfriends.

In this study, exposure to domestic violence led to both internalising and externalising problems among both generations of refugee women. Internalising problems manifested as depression, anxiety, anger, and psychosomatic disorders, including physical symptoms such as high blood pressure. Conversely, externalising problems included substance abuse in some younger refugee women, perpetuation of child maltreatment, and bullying within the refugee community between women. Various studies have linked domestic violence exposure, especially the co-occurrence of child maltreatment and neglect and intimate partner violence, to such internalising and externalising issues (Brown *et al.*, 2021; Brühl *et al.*, 2023; Conger *et al.*, 2013; Ehrensaft and Cohen, 2012; Miranda *et al.*, 2011; Pingley, 2017). Mazza *et al.* (2021) note that domestic violence victims, particularly those who have experienced child maltreatment and witnessed interparental partner violence or intimate partner violence, often develop mental health (internalised) problems that may manifest as externalising problems. These can include the individual's involvement in intimate partner violence (as a victim) in adulthood. Lawson (2001) suggests that this interaction between internalising and externalising issues can increase the likelihood of continuing intergenerational cycles of domestic violence, particularly if these issues are not adequately addressed.

This study uncovered that dual exposure to domestic violence frequently resulted in insecure-avoidant attachment, notably among younger refugee women, as evidenced by the manifestation of avoidant attachment patterns due to this exposure. Adams *et al.* (2019) suggest

that mothers in violent relationships, especially those experiencing multiple types of violence, are frequently overwhelmed both physically and emotionally. This stress can lead to their inability to adequately care for their children as well as punitive and inconsistent parenting practices, which are then internalised by younger refugee women. This internalisation occurs through internal working models, influencing how these individuals form attachments, particularly with their mothers (Alexander, 2014).

Moreover, insecure maternal attachment¹⁶ in some participants manifested in negative perceptions of men, stemming from the violence they witnessed being inflicted on their mothers or other maternal figures. This observation was characterised by what some women described as internalised misogyny, resulting from witnessing violence by fathers, stepfathers, or other male relatives against women. Refugee women used these gendered violent events to develop schemas that portrayed women as devalued (McCloskey, 2013). Consequently, this contributed to a profound disdain and, in one case, an intense loathing for men, whom they saw as perpetrators of VAWG.

Lastly, this study uncovered a disturbing socio-economic impact resulting from exposure to domestic violence in refugee families. It was revealed that financial abuse, a form of domestic violence, significantly hindered refugee children's access to education. This finding underscores a heightened sense of helplessness and hopelessness among many refugee women concerning their children's overall well-being. This research thus significantly enhances the existing literature by elucidating the educational outcomes of refugee children and youth directly influenced by exposure to domestic violence in South Africa. This is in contrast to previous research, which identified various gender-specific factors contributing to school dropout among refugee children and youth, such as the need for employment or gang involvement for boys or marriage and family responsibilities for girls (Krafft *et al.*, 2022; Rossiter and Rossiter, 2009). This study found that financial abuse by fathers or father figures emerged as the primary cause of school dropout. This highlights a different dimension of the challenges faced by refugee children in their educational journey.

¹⁶ Further discussion on maternal attachment among refugee women and its links to intergenerational transmission of domestic violence will be discussed in Chapter 6.

5.4 Conclusion

This chapter delved into this study's first theme: "Exposure to Violence", along with its accompanying subthemes, where the childhood and adulthood experiences of refugee women and their families living in Durban, South Africa, were highlighted. A key finding was the intergenerational transmission of domestic violence in refugee families, affecting both generations of refugee women. Notably, older refugee women mostly reported single exposure to domestic violence, while many younger refugee women experienced dual exposure. These findings align with existing literature but also contribute new insights into the specific experiences of refugee women in South Africa.

The study confirmed two of its initial assumptions and revealed concerning consequences of domestic violence exposure. These consequences include intergenerational effects, life-long challenges such as internalising and externalising problems, insecure attachment, and, in some cases, poor educational outcomes for refugee children. Overall, the findings underscore the necessity for future research in this area and highlight the urgent need for comprehensive, evidence-based interventions. These interventions should aim to reduce domestic violence in refugee families and should be implemented not only in South Africa, the host country, but also in the countries of origin where the initial exposure to domestic violence occurred for younger refugee women.

The next chapter presents the findings highlighting various dimensions of intergenerational transmission of domestic violence within refugee families, with a particular emphasis on what is transmitted, the risk factors associated with transmission, and the mechanisms of transmission, especially among women. Subsequently, a thorough examination of these findings in the context of extant scholarly literature is undertaken.

CHAPTER 6: INTERGENERATIONAL TRANSMISSION OF DOMESTIC VIOLENCE

6.1 Introduction

The preceding chapter examined the first theme of this study, elucidating refugee women's experiences with domestic violence across their lifespans and the consequences of these experiences. It explored accompanying subthemes, particularly the emerging patterns of intergenerational transmission stemming from exposure to domestic violence within this demographic. In this chapter, attention shifts to the second theme generated from data analysis: the “intergenerational transmission of domestic violence”, alongside its associated subthemes. Herein, data, in the form of direct quotes¹⁷, is provided to address the following research questions:

- How is domestic violence transmitted intergenerationally within the family among refugee women from Burundi and the DRC living in Durban, South Africa?
- What are the risk factors for intergenerational transmission of domestic violence within refugee families in Durban?
- What are the mechanisms of intergenerational transmission of domestic violence within refugee families in Durban?
- How do refugee women communicate their experiences of domestic violence to their adult daughters?

This chapter addresses these research questions by examining the risk factors that predispose participants to domestic violence and exploring the diverse psychosocial mechanisms intertwined with these risk factors. These factors also influence the transmission of domestic violence in refugee families. The main focus of this chapter is the participants' experiences and the subjective meanings they attached to these experiences, as informed by the conceptual framework.

¹⁷ The data primarily comprises of two generations of women from each country, rather than exclusive quotes per family, for reasons elaborated in the conclusion chapter. However, some specific mother-adult daughter quotes are included.

Similar to Chapter 5, this chapter is divided into two main sections: Part 1 provides an overview of the main theme followed by an in-depth exploration of the subtheme, “Intersecting psychosocial factors”, as categorised according to the ecological model. Part 2 delves into a detailed discussion of findings in relation to the conceptual framework and existing literature. The chapter concludes by summarising the main findings on risk factors and psychosocial mechanisms influencing the transmission of domestic violence in refugee families and provides a brief preview of Chapter 7.

6.2 Theme 2: Intergenerational transmission of domestic violence

The emergence of the second theme, the “intergenerational transmission of domestic violence”, was informed by numerous quotes collected throughout the study. These quotes collectively contributed to the development of the theme and its corresponding subthemes. This theme highlights the complex interplay of multi-level risk factors and psychosocial¹⁸ mechanisms that influence the intergenerational transmission of domestic violence within refugee families, particularly among women, as evidenced in this case study (Ehrensaft and Langhinrichsen-Rohling, 2020). Evidence of intergenerational transmission was found in both biological ($n=24$) and non-biological mother-daughter pairs ($n=6$), with no differences between the two groups regarding ecological risk factors and psychosocial mechanisms. Table 12 succinctly summarises the characteristics transmitted across and between generations, the mechanisms of transmission, and the types of transmission and their ecological level in relation to the risk of transmission within refugee women.

¹⁸ Psychosocial mechanisms refer to the interplay between psychological and environmental mechanisms. In this chapter, each individual mechanism is clearly identified when not considered as part of this combination.

Table 12: Summary of Transmitted Characteristics, Psychosocial Mechanisms, Types of Transmission, and Ecological Risk Factors

What has been transmitted (Characteristics)	Mechanism of transmission (how characteristics are transmitted)	Type of transmission	Ecological risk factor(s)
Attitudinal acceptance	Internalisation of domestic violence and socialisation ¹⁹	Vertical and horizontal	Ontogenic, microsystem, exosystem, and macrosystem
Normalisation of domestic violence	Internalisation of attitudes and socialisation	Vertical and horizontal	Ontogenic, microsystem, exosystem, and macrosystem
Expectation of domestic violence	Socialisation	Vertical and horizontal	Ontogenic, microsystem, exosystem, and macrosystem
Isolation and loneliness	Silence, shame, guilt, internalisation of attitudes, re-enactment, and socialisation	Vertical and horizontal	Ontogenic, microsystem, exosystem, and macrosystem
Intimate partner violence victimhood	Re-enactment and socialisation	Vertical and horizontal	Ontogenic, microsystem, exosystem, and macrosystem
Child maltreatment	Re-enactment and socialisation	Horizontal	Ontogenic, microsystem, exosystem, and macrosystem
Low educational attainment	Socialisation	Vertical	Ontogenic
Poor communication	Re-enactment and family of origin	Vertical	Ontogenic and microsystem
Poor parent-child relationships	Re-enactment and family of origin	Vertical	Ontogenic and microsystem
Financial dependency	Silence, family of origin, community, and society	Vertical and horizontal	Ontogenic, microsystem, exosystem, and macrosystem
Silence	Socialisation	Vertical and horizontal	Ontogenic, microsystem, and exosystem
Perseverance	Silence, shame, guilt, internalisation of attitudes, re-enactment, and socialisation	Vertical and horizontal	Ontogenic, microsystem, and exosystem
Gender norms	Socialisation, shame, guilt, re-enactment	Vertical and horizontal	Microsystem, exosystem, and macrosystem

¹⁹ Socialisation encompasses participants' experiences within their families of origin, their communities, and the broader society they come from, including the contemporary South African society.

6.2.1 Intersecting ecological risk factors and psychosocial mechanisms of domestic violence transmission

This study identified numerous ecological risk factors and psychosocial mechanisms that influence the transmission of domestic violence within refugee families in Durban, South Africa. These identified risk factors and transmission mechanisms are contextualised within the conceptual framework of the study, which draws upon Heise's ecological model to help comprehend the intergenerational transmission of domestic violence. Additionally, the framework incorporates key concepts from the social learning theory, such as internalisation, reinforcement, observation, vicarious learning, and re-enactment and the attachment theory, focusing particularly on insecure (especially avoidant) attachment and internal working models. It has been observed that various characteristics, intimate partner violence victimhood, and child maltreatment are transmitted vertically (from refugee mothers to their adult daughters) and/or horizontally (within the same generation) (Brown, 2017; Branje *et al.*, 2020) through a multitude of psychosocial mechanisms within interactions with risk factors across ecological levels.

6.2.1.1 Ontogenic system

Within the ontogenic system several characteristics transmitted were also risk factors, such as normalisation and expectation of intimate partner violence, isolation, loneliness, and low educational attainment, were observed to be transmitted both vertically and horizontally within the study groups. This excluded attitudinal acceptance of intimate partner violence, which was only transmitted horizontally among older refugee women (G1). The aforementioned characteristics were identified not only as transmitted characteristics but also as risk factors that influenced the transmission of domestic violence from mothers to their adult daughters (Ehrensaft and Langhinrichsen-Rohling, 2020; Heise, 1998). These characteristics were found to be transmitted through psychosocial mechanisms. Notably, these characteristics stem from childhood exposure to domestic violence (refer to Chapter 5 for more detail). Below is a detailed analysis and interpretation of each characteristic within this system.

The normalisation, expectation, and attitudinal acceptance of domestic violence

In this case study, many G1 and G2 participants exhibited an internalisation of violent behaviours by male partners as normal, representing a characteristic and risk factor transmitted both vertically and horizontally through psychosocial mechanisms. The G1 participants, at an

unconscious level, adopted attitudes, beliefs, and expectations held by their mothers and other women regarding the violent nature of men and the perceived normalcy of intimate partner violence perpetrated against them by their husbands in marriages (Antle *et al.*, 2020; Erten and Keskin, 2020, Fraiberg *et al.*, 1975). This internalisation stemmed from participants' observations of interparental and/or intimate partner violence in their homes during childhood²⁰ and throughout their lives. The G1 participants have also come to accept domestic violence (particularly intimate partner violence) as a normal and expected aspect of marital life, attributing it to the inherently violent nature of men. Khuloud's quote exemplifies this perspective, as she grew up witnessing intimate partner violence between her older sister and brother-in-law who had raised her, and later her own experience of intimate partner violence in her marriages.

"It honestly showed me that men are not good, but what we need to do as women is to be strong, we stay in our marriages just for the sake of being married because you are a woman. Yeah, but to say that you're truly happy, to say that you must be excited about your husband, because he is your man, you find that feeling isn't there, because of what you grew up observing from childhood. When you realised from a young age that a man isn't someone who helps develop a woman... Yeah, conflicts are normal they occur in the home, like you know how we Black people say that conflict between a man and his wife to fight is part of normal everyday life..." (Khuloud, Burundi, age 34)

This quote underscores the attribution of violence inflicted by men to be an issue perceived to be prevalent only within Black communities, a topic further explored in the discussion. Moreover, the quote sheds light on women's internalisations, which are rooted in their childhood observations. It is important to note that while many G1 participants did not report observing interparental partner violence in their homes during childhood, they still held widespread normalisation and acceptance of intimate partner violence, which they transmitted (i.e. normalised) to their adult daughters. The internalisation of violent male behaviours among G1 participants has consequently resulted in their attitudinal acceptance, normalisation, and

²⁰ This was for those who explicitly reported observing interparental partner violence.

expectation of intimate partner violence. These attitudes stem from their observations of abuse experienced by peers and socialisation by their mothers and other women within their families, community, and society. This phenomenon will be further explored later in this chapter. Such perspectives were elucidated by G2 participants, such as Khuloud's daughter, Wadida, who explains that her mother, like many other refugee women in her community, was raised in environments where intimate partner violence was normalised. Consequently, this results in their internalisation of male violent behaviours within the home and in intimate relationships as normal and an expected aspect of life.

"I just think it's the way they grew up, they just feel like anything can happen to me and I don't have to say anything I just have to deal with it and take the situation as it is. And because our parents grew up like that, they feel like we need to be the way they grew up... I feel like the people back home they always feel like you need to stay in that situation, and you don't have to leave or you don't have to. For them there is nothing called uhm aah abuse, for them there is nothing like that."

(Wadida, Burundi, age 21)

The normalisation²¹ of domestic violence was also found among G2 participants. This finding has resulted in some G2 participants experiencing intimate partner violence in their marriages or romantic relationships.

"Aah, I feel like it happens in each home, majority homes but we don't see it we don't tend to analyse, we don't tend to put it in our heads because we see it a normal thing we see it every day, like Arwa said we see it as a normal thing, so we don't put it in our heads. Oh, this happened, or this happened, so we just take it like a normal thing, and we continue." **(Ghaliyah, Burundi, age 19, FGD)**

The normalisation of domestic violence among G2 participants can be attributed to the effects of intergenerational exposure to domestic violence. Similar to their mothers, G2 participants

²¹ This refers to the normalisation of both intimate partner violence and child maltreatment as revealed by many participants. The disparity between the two generations of refugee women arises from the understanding that many G1 participants perceived domestic violence solely within the context of their own experiences of intimate partner violence. In contrast, G2 participants understood domestic violence to mean the co-occurrence of both interparental partner violence and child maltreatment.

have internalised violence as a regular aspect of domestic life. Many young women have demonstrated perceiving domestic violence as a normal and expected aspect of family life within their respective refugee communities. This deeply ingrained unconscious normalisation of domestic violence is reflective of the impact of intergenerational exposure.

Lack of social support

One of the other major individual risk factors for domestic violence found within this study for both G1 and G2 participants was the limited social support available within and outside their families in South Africa (Heise, 1998, 2012). This was found to be perpetuated by the transmission of isolation and loneliness from mothers to their adult daughters and among refugee women in the same generation (Augustijn, 2021). The transmission of isolation and loneliness is a consequence of G1 and G2 refugee women's lack of social support networks, with whom they can confide about their experiences of domestic violence. This occurs through psychosocial mechanisms such as silence, shame, guilt, re-enactment, internalisation of attitudes, and socialisation within their families and communities. Closely linked to internal working models, which have impacted refugee women's ability to trust others, including their own families, due to the socio-cultural norms surrounding the importance of family privacy. These norms, held by these women, will be further discussed later in this chapter. This study revealed that many refugee women, especially mothers (G1), trust and confide in very few people, in anyone at all, regarding their own and their children's experiences of domestic violence. This reluctance is exacerbated by feelings of shame, guilt, and internalised attitudes associated with the normalisation of domestic violence. This subsequently results in social isolation and loneliness, where refugee women lack trustworthy social support networks to guide and assist them in relation to their experiences. The G1 participants' attitudinal acceptance and normalisation of intimate partner violence have been transmitted both vertically from their own mothers or mother figures and horizontally from other refugee women within their communities, which has led to many G1 participants deliberately refraining from disclosing their negative experiences. This is exemplified by Kinza, who is one of the few participants who confide in one or two trusted individuals about her issues and receives advice to remain in her marriage, regardless of the domestic violence. This underscores the horizontal transmission of refugee women's normalisation and expectation of men as violent perpetrators by refugee women, thereby reinforcing attitudes and beliefs regarding men's inherently violent nature.

“I don’t tell people, I do however have one friend who I speak to and she told me, to just focus on taking a care of children. That I should not get into another relationship, because of what my husband has done to me and I decide to get involved with another man, she says I will be giving myself another headache. He may also be worse than my husband or even hate your children. So, that’s why I decided to sit still and focus on my children.” (Kinza, DRC, age 52)

In her interview, Kinza’s daughter Zeenat elaborated on the absence or limited social support that refugee women have, emphasising that this poses a significant risk in their experiences of domestic violence.

“Our parents are very isolated because you get to South Africa and you mustn’t have friends and you know you’re now a married woman, you mustn’t have friends. Yes, you can’t have friends like you can’t spend all your time with your friends because now you’re married but I also feel like friends are important. I feel like a lot of abusers they put you away from your support system because you have no one else to lean to because they can get to control you and play with your mind.” (Zeenat, DRC, age 22)

However, similar to many other G2 participants, when asked about her own social support networks and who she approached when she experienced maltreatment as a child, Zeenat stated that she did not turn to anyone. Instead, she resorted to avoiding being at home and being near her abuser.

“No, I feel like you just knew that it was wrong, this is not supposed to be but yeah, I think you don’t think you feel like there was anyone you could talk to when you’re young. School was an escape, when you’re in school and I feel like a lot of peace, I remember my mom used to be like why don’t you like coming home, or why do you like being at other people’s house, it was like I don’t like being at home. Home has no positive you know, energy or you know about it so yeah, I don’t think we had anyone to talk to.”

Zeenat’s quote reveals that many G2 participants lack social support, indicating the intergenerational transmission of isolation, loneliness, and silence transmitted by their mothers. The transmission of isolation, loneliness, and silence occurs through psychosocial mechanisms, wherein they are socialised within the family by their mothers and in their communities to

remain silent and refrain from seeking help for violent experiences. These patterns are then re-enacted, as observed through their social interactions. Consequently, many G2 participants develop avoidant attachment styles, wherein they trust very few people or no one (Antle *et al.*, 2020). This echoes Wadida's (Khuloud's daughter) experience, who explained that her mother pitted her relatives against her after she disclosed her sexual abuse by her stepfather in an attempt to force her to remain silent about her experience.

“Well the first time, ah he raped me I tried to tell my mom but she didn't believe me and then she hit me. Yes, I remember she said that I am lying for him and I don't want her relationship to work. Yes, and then she went and she told everyone, her sister that I don't want her husband in the house and all those stuff, and I was blamed and I was called a liar and things like that. So, because of that every three days this thing kept happening to me and I couldn't tell anyone because I was young, he told me that if I tell anybody he is going to kill me...I can't trust anyone, I don't trust anyone at all, at all. I am not lying to you I don't even trust my own husband, but I am learning how to. I don't trust anyone I just have trust issues with people I can't sit down and communicate with people for long I can't even sit down and tell people stuff anymore. Because I don't trust anyone anymore, I just want to be with God and that's it.” (Wadida, Burundi, age 21)

Disclosure for many G2 participants, such as Wadida, often led to negative responses from the individuals they sought help from. This resulted in feelings of shame, guilt (a sense of moral transgression), loneliness, and isolation (Barnes *et al.*, 2022; Orth, Robins and Soto, 2010). Through these experiences, many G2 participants learned vicariously the importance of re-enacting their mothers' and other women's behaviours of non-disclosure, even in childhood. Further exploration of this can be found in other sections of this chapter.

Low educational attainment

Low educational attainment is a risk factor that also emerged as a characteristic that was transmitted vertically from some G1 participants to their adult daughters (G2). This study found that many G1 participants had low educational attainment across both communities. Among all G1 participants, only one, Maira from the DRC, reported never attending school throughout her life.

“I have never had a formal education my parents never educated me because they didn’t have the means to educate me however, I did get married to an educated man however he also never made an effort to help me get an education....” (Maira, DRC, age 53)

It is worth noting that many other G1 participants reported having only gone to primary school (five from the DRC and nine from Burundi). Another five mothers from the DRC and three Burundian mothers explained that they attended high school, while two other mothers from the DRC and one from Burundi stated that they finished Grade 13, which is the highest grade in high school in both countries. Lastly, in both communities only two women in each group reported obtaining a degree or diploma from a university in their home countries. However, once in South Africa, all four university-educated women did not continue practising in their field of speciality and had to find other informal work to support their families because of their status as refugees. Low educational attainment among the G1 participants was found to be associated with early marriage and unemployment or involvement in informal work. These factors were reported by G1 participants and heightened their susceptibility to intimate partner violence due to their financial dependence on their spouses (refer to Chapter 5, section on G1 participants’ experiences of financial abuse).

Similar findings concerning low educational attainment were reported by some G2 participants, particularly those who were married or divorced. These young women identified low educational attainment and unemployment as significant factors influencing their experiences of intimate partner violence in their marital homes. Abir’s (Maira’s daughter) account below exemplifies her own experiences, underscoring how a refugee woman’s financial dependence on her husband creates power imbalances that abusers exploit. Abir narrates the gradual escalation of violence, a pattern akin to the cycle described by Sillman (2019), which encompasses periods of calm, escalating tension, bursts of violence, and a subsequent return to calm.

“So, what gave him the power, I think he knows you’re not educated, you’re not educated enough to stand up to him and tell him, because you know for a man to stand up and actually start hitting you, because from my side and from the way I experienced it, I think it’s a kind of like a situation where he doesn’t just one day and starts hitting you unless he has anger management issues or something.” (Abir, DRC, age 27)

Notably, many G2 participants who were either married or divorced had varying levels of education, ranging from completion of high school to dropping out of high school or primary school. Low educational attainment is regarded as an environmental mechanism in this study as it is intertwined with socialisation within the family of origin, community, and society, and is deeply rooted in gender norms which prioritise the education of boys over girls (Basse and Kwizera, 2017; Rouchi, 2017).

There are a few individual risk factors within the ontogenic system, such as attitudinal acceptance, normalisation, expectation of violence, and low educational attainment, which were also identified as characteristics transmitted across and within the two generations of refugee women. Additionally, isolation and loneliness were identified as risk factors for lack of social support. These characteristics were transmitted via psychosocial mechanisms such as silence, shame, guilt, re-enactment, and internalisation due to socialisation with the family of origin (particularly by mothers) and community. These subsequently resulted in the transmission of domestic violence within and across generations. Below, the risk factors and mechanisms of transmission found within the microsystem are explained.

6.2.1.2 Microsystem

Microsystemic factors encompass a variety of intersecting interpersonal risk factors and some core characteristics from the ontogenic system that are transmitted through psychosocial mechanisms, exacerbating the transmission of domestic violence in refugee families. Within this system, the primary characteristics transmitted vertically between refugee mothers and their adult daughters include the normalisation and expectation of intimate partner violence, financial dependency, and perseverance²². The main risk factors that further influence the transmission of domestic violence include male dominance and financial control, poor communication in parent-child relationships, and reluctance to discuss violence.

Male dominance and financial control

²² Perseverance was closely linked to refugee women's normalisation and expectation of domestic violence. This characteristic, along with the normalisation and expectation of intimate partner violence, will be further explored throughout this chapter and unpacked across the different ecological levels.

Male dominance emerged as a significant risk factor for domestic violence in refugee families, closely linked to refugee women's low educational attainment and their socialisation within both their families of origin and larger communities. Both G1 and G2 participants in this study revealed instances of male dominance and financial control. Some G1 participants disclosed that their husbands exerted power and control over them, including control over the family's financial situation, which meant that many of these women were financially dependent on their husbands. Maira's account of her experiences with her husband encapsulates many of the other women's experiences of domestic violence as a result of male dominance and control.

"...overtime I realised that and if I think about it now I realise that this man didn't want me to be empowered in any way possible. I forced myself to work I forced his hand for me for him to allow me to work. I would sell on the streets but he would get very upset about the fact that I was working, that I was earning money... He's six years older than me, I realised years later that everything he did from the behaviours that he enacted while we were still in Congo to our life here in South Africa were intentional. His intention was never to help me be anywhere I wanted to be in life he just wanted to dominate and control me and do as he pleased with me. To a point where I wouldn't have anywhere to go or fall anything to fall back on." (Maira, DRC, age 53)

Abir, Maira's daughter, explained that what she witnessed happening to her mother also occurred in her own marriage, as her husband controlled all financial resources and was the dominant partner in the marriage. She explained how, despite her education (high school)²³, she was unable to work and thus fully depended on her husband to provide for her. Apart from her financial dependence on her husband, Abir spoke about the importance of perseverance, which she believed she had observed her own mother doing in her marriage with her father. The intergenerational effects of domestic violence are apparent in G2 participants and their mothers (G1s), who transmitted the normalisation of intimate partner violence and perseverance. These transmissions occur through mechanisms of socialisation within the family, instilled by mothers who believe men to be inherently violent, dominant, and require

²³ The participant explained that she only went back to school to pursue her tertiary education after her divorce.

control over women and the internalisation of violent behaviours by men. Further discussion on this topic will be provided in the community risk factors section.

“even if you’re educated like me you don’t have a job because at the end of the day you tells you know you cannot have a job in my house it’s either I work or you do work yeah you work so you choose I’m the man or are who you know. Educated he tells you to put all this education under the bed and he’s like you know what you’re not gonna do that in my house so at the end of the day you’re not working you’re not earning an income that if he throws you out where you’re going to go you can’t go back to your parents because that’s where the rules are set you cannot be divorced because your parents are not divorced because your parents they are together through thick and thin so you’re supposed to like obey and just get to it you just supposed to take it” (Abir, DRC, age 27)

The above descriptions, as reported by Maira and her daughter, Abir, illustrate the extent and the consequences of male dominance and control (including financial), which are rooted in the observations made during the socialisation of both G1 and G2 participants in their homes. Both G1 and G2 participants explained that they were raised (socialised) to be subservient and submissive to their husbands and that their husbands’ word is final. Additionally, women are socialised by their mothers and other mother figures about the importance of obeying their husbands, creating power imbalances that result in male dominance over their wives. Financial control, as a consequence of this, becomes the byproduct of the above. Below, Beulah, a G1 participant explains this well.

“I remember when I was getting married, I was taught that when your husband is upset and he is shouting don’t shout back, don’t raise your own voice because surely if he takes the decision to hit you then you have no one else to blame but yourself because you are the one who provoked him further. What you do in that situation is you try to calm him down you ask him what is wrong, you plead, you ask for forgiveness you try and speak to him so that his anger dissipates. That’s what you should do. And when you are the one who is wrong you need to sit down and ask for forgiveness that’s how we live we just need to understand each other and to be patient and persevere with our challenges that’s how we live.” (Beulah, Burundi, age 47)

The G2 participants understand that their own and their mother's socialisation within the family of origin is informed by gender and social norms that privilege men over women and children. Subsequently resulting in their dominance over women, which is then internalised and accepted by women as a normal part of marital and family life. These women then learn to imitate (re-enact) the submissive and victim behaviours of their mothers. This is explained well by Mawiya, who explains how refugee women are socialised to be submissive and subservient to their husbands; however, she reveals that women start questioning the authority and dominance of their husbands, which initiates intimate partner violence.

"I think one of the main things is you know as a woman when you come into marriage and show your husband that you love him and show him that you want this marriage and you want it to work and you respect him. You show him that whatever he tells you listen to and you follow his instructions and his rules those are the things that sometimes make some men especially our men believe that they can now do whatever they want to you. So, then you find some women getting to a point where they start speaking back they, start standing up for themselves and that, way problems also occur because of stuff like that." (Mawiya, DRC, age 27)

The quote by Mawiya elucidates the socio-cultural norms prevalent within refugee communities and their societies in their countries of origin, which are upheld within the home by refugee women and subsequently transmitted to their adult daughters. This consequently results in refugee men exerting power and control over their wives.

Poor parent-child relationships and poor communication

An intriguing phenomenon observed in this study is the unconscious transmission of poor communication between parents and their adult daughters, particularly with regard to domestic violence. Participants from both G1 and G2 groups explained that communication issues were instigated by the parents themselves. They explained that communication was primarily one-directional, with parents holding exclusive authority to dictate or narrate household events.

"What use to happen was that he never allowed them to say anything [her brothers], it's not like these ones [modern parents] here were parents allow their children to talk, back home the way our parents were is that they would never give children an opportunity to speak. I mean whatever the mother says that's all, so he would just come in, punish you doesn't want to know what happened no. That

doesn't happen, whether it's true or false, he just goes by what he has been told, and that's when he takes his decision. It's not like here where a father asks what happened here [referring to South Africa generally] and then makes a decision based on who was wrong, we grew up in such a way that our parents never gave us the chance or showed us that we had rights, we were valued, aah aah we were never given rights." (Lamees, Burundi, age 40 [G1])

As observed, some G1 participants also transmitted poor parent-child relationships and poor communication with their own children. They re-enacted the victim behaviours and learned the silence they witnessed in their own mothers during childhood, adhering to hierarchical positions within their homes where their fathers were the dominant figures. The G1 participants perpetuated these same behaviours in their own homes after marriage. The G2 participants also reported poor relationships with their parents. The study revealed that the participants not only observed interparental partner violence and child maltreatment but also inconsistent parenting styles from their parents due to violence in the home. Poor parent-child relationships are a risk factor for domestic violence and greatly affected the ability of G2 participants to engage in conversations with their parents about violent behaviours at home.

"Yes, you're supposed to respect your parents, you can't disobey them, but you know, it depends now, if your parents are like trying to give you advice of witchcraft and you don't want to follow that, I don't think you should know like follow it. You can tell me respectful way that uhm, you know, okay, papa I don't think what you're saying that coz I know yes, it does exist, but not supposed to believe in witchcraft. okay, so, but like it's really hard for me like to say that. I'm going to tell you because of the way it's always ready to fight [giggles]you know it's ready to fight. Is that type of person that doesn't want to listen" (Husn, Burundi, age 23)

Husn, like many G2 participants, explained that poor parent-child relationships led to poor communication with their parents. Most G2 participants developed an avoidant attachment with one or both parents, with many reporting having an avoidant attachment with their mothers. This finding was deeply rooted in the transmission of silence within the family regarding incidents of violence. The G2 participants also explained that those who disclosed issues of abuse, especially those involving themselves, faced repercussions as victims. This was articulated well by participants in the adult daughters DRC FGD, who explained that many young refugee women are facing abuse, particularly sexual abuse, and rely on their parents or

caregivers for survival. Disclosure of the abuse risked not only disbelief but also the loss of their only known and available family support in the country.

“Sometimes they won’t believe your words so she’s [her friend] like I told her why can’t you go and report him she says if she tries to report him they might kick her out of the house so she doesn’t know where she after what she goes insane so when I was like if I were you in your place I would go and speak out because you would be helping other young women who are out there cannot speak out so you be bold enough to go into because she’s like if I have to speak out ... can throw me out of the house...” (Fridoline, DRC, age 19)

“Some situations that are extremely difficult because the people that you are dependent on most are the people harming you so it’s difficult. When someone rapes you for example and you’re completely dependent on them it is a must that you must remain quiet...” (Murelle, DRC, age 23)

The quotes above highlight the challenges encountered by young refugee women who have experienced abuse, especially during childhood, revealing the roots of their avoidant attachment. These violent experiences were notably pronounced within maternal relationships, as exemplified by Wadida’s quote within the ontogenic system. Additionally, other G2 participants described behaviours observed in first-generation refugee women. These women are often known for consciously refraining from confronting or pursuing legal action against their husbands or other male figures in the household who have sexually abused their children or children under their care.

“I know this lady who has been molested by her uncle but she has spoken to her aunt about it but African women have this tendency of protecting their marriage and not believing the young girl telling her to keep quiet making everything look like it’s normal meanwhile it’s not” (Donatille, DRC, age 21)

Donatille’s excerpt above reveals the widespread distrust prevalent among many young girls in these two communities towards their mothers and mother figures, who prioritise protecting their family names and reputations over their children. Something that has resulted in avoidant attachment between adult daughters and their mothers.

Reluctance to disclose violence

This risk factor answers the research question concerning how refugee women communicate their experiences of domestic violence to their adult daughters. This study found that many G1 participants revealed that they refrain from discussing their experiences of abuse with their daughters, even when these incidents are witnessed first-hand. This reluctance is rooted in G1 participants' normalisation and attitudinal acceptance of domestic violence, and their internalisation of men being inherently violent and fear of social isolation. Many G1 participants indicated that they did not witness violence between their parents during childhood. This lack of exposure can be attributed to G1 participants' mothers' entrenched pattern of non-disclosure, which participants observed while growing up. The quote below by Wajiha explains how she, like many other G1 participants, refuses to disclose her violent experiences with her daughter.

"Yeah, I mean the things that I have told her but there are a lot of things that I haven't told her because I don't want the things that I'm going to tell them to affect them. Yeah, so I decide to remain silent." (Wajiha, DRC, age 50)

Vertical transmission of silence (reluctance to disclose) by G1 participants to their adult daughters through the mechanism of socialisation within the family. Malkiya, for instance, described her silence as a conscious training for her daughters on how to coexist with a man – further transmitting the normalisation and expectation of intimate partner violence and the notion of men's inherent violence. She explained that she teaches her daughters through enacting submissive behaviours; the behaviours illustrate the benefits of remaining silent even if she does not go in-depth with explaining her experiences to her daughters except for what they observe.

"I pull them close to tell them that you see what your dad did that's just how he is, don't worry about it he always shouts... But you see when your father shouts I remain silent, even if it hurts I remain silent, I know that if I speak when he speaks he will end up beating me imagine he beats me and punches my tooth out or bruises my eye or bursts my lip. You guys won't be happy you guys will say mommy should've kept quiet. My silence calms him down and the days keep moving. I cannot say that I don't have a mouth to not talk back but I chose not to, because they say a dumb woman doesn't destroy her home. That's why I remain quiet and

calm, and then they themselves see how he comes after a while to apologise about what he did. And they see how I don't show him that I am upset, because it will affect them [the children], so I just continue as normal, I even clean and make him lunch even after he has spoken rudely to me. If it is to put his bath water, I do that so that he is fine, so that it doesn't affect them [sighs] that's it." (Malkiya, DRC, age 42)

The reluctance of G1 participants to disclose their experiences of domestic violence with their adult daughters (G2) contributes to the normalisation of domestic violence, especially intimate partner violence, and perpetuates silence surrounding the issue. Subsequently resulting in violent behaviour by men in intimate relationships to be understood as a normal part of marriage based on these observations. Mawiya, Wajiha's daughter, explains this in the quote below.

"I honestly don't know what the problem is whether it is that a men just choose to marry without thinking things through or maybe they have some type of devil that is on their heads and the devil overcomes them it's really difficult for me to pinpoint what the issue is. But then you'll find that 99% of refugee women here in Durban are facing difficulties in their marriage and most times it's that their husbands are the ones that uh starting a lot of other cause of their problems they are extremely violent. Only about one in 10 women are fine in their marriages but 99% of us marriages are in terrible state" (Mawiya, DRC, age 27)

Mawiya explained her own experiences of intimate partner violence by her ex-husband, who was physically abusive at the beginning of their marriage. She explained that the only recourse she felt she had at that time was to threaten him with reporting him to the police, further highlighting the transmission of silence and social isolation, where 'strangers' in extreme cases could be involved in issues affecting a married couple.

"When I first arrived he had started the behaviour of beating me, but then I got to a point where I told him no if you continue this way I am going to would report you because you didn't marry me to beat me up my body is not to be used as a punching bag. I told him if he beats me up again, I'm going to report I'm gonna take him to the police... Oh, when it came to my body I told him, it is better that he does whatever else he wants to do to me but not harm your body."

Although Mawiya expressed her disagreement with physical violence, she was tolerant of other forms of violence by their husband. She likely did not disclose this to anyone, possibly due to fears of social isolation and shame. Additionally, like many other G2 married participants and their mothers, she opted for non-disclosure.

These quotes reveal the extent to which intimate partner violence has been normalised within Burundian and DRC refugee families, particularly among women, indicating vertical transmission from G1 to G2 participants.

6.2.1.3 Exosystem factors

Exosystemic factors encompass a variety of intersecting community risk factors found within this study that exacerbate the transmission of domestic violence in refugee families. These risk factors include: 1) women's refugee and socio-economic status, 2) widespread silence and acceptance of domestic violence, and 3) toxic femininity. Within this system, characteristics such as attitudinal acceptance and normalisation of intimate partner violence, financial dependency, silence, intimate partner violence, the lack of social networks, and perseverance were transmitted. These characteristics were transmitted through mechanisms such as silence, internalisation of violent behaviour by men, shame, re-enactment, and socialisation within the family and community. The transmission of these characteristics was observed to occur both vertically and horizontally.

Women's refugee and socio-economic statuses

Both G1 and G2 participants explained that being a refugee woman in South Africa in their two communities significantly increased vulnerability to domestic violence. For G1 participants specifically, their refugee status, coupled with their low socio-economic status, linked to various individual risk factors such as low educational attainment, unemployment, or limited income, resulted in many being financially dependent on their husbands. Additionally, having many children and adhering to cultural norms that discourage the disclosure of private family affairs while simultaneously encouraging male dominance and control have also contributed to the transmission of intimate partner violence within and across generations of refugee women. Horizontal transmission, observed among refugee women (G1), involved both conscious and unconscious acceptance of intimate partner violence as a norm, with encouragement to persevere and focus on maintaining the family unit, often due to the belief

that they have nowhere else to go and nothing else to rely on. Thurayyah's quote below summarises this sentiment well.

"So, there are so many problems in our refugee marriages it's very bad. It's just that people are in marriages, and they don't have anything else to do they have, nowhere else to go... they're staying in these marriages because of the kids yeah it's very sad it's very difficult where do we go?.. The problem is with us the woman firstly you find that a woman is not educated, she's studied up to grade 6, grade 7. Then we have no work but even with the fact that we don't have work we it's because we ourselves do not try to be proactive in finding work or creating our own work right so when I went is this it's very easy for him to treat you any way he wants to if he threatens that he wants to kick you out of the house then he can easily threaten you because he knows there's nothing that you can do and that you will stay in the home because he is the one providing everything that you need... That's why woman suffer because the woman does not have a source of income, she has no work she does not have family here, she doesn't have school to back her up, she has absolutely nothing to her name except for him, that's why he knows he can cheat on you, or abuse you because there is nothing you can do. Abuse is ramped here in South Africa so much so that some decide let me just return home. We also have no one to turn to when we're in trouble because we are all scared of each other your problems are not safe with anyone." (Thurayyah, Burundi, age 43)

Intimate partner violence, financial dependency, silence, and low educational attainment were transmitted to vertically many G2 participants who were either married or in romantic relationships. These G2 participants, much like their mothers, had accepted intimate partner violence as a norm and endured violence similar to what their mothers and other women in the community had done. Ghosoun reports her experiences with verbal abuse from her boyfriend, whom she had gone to live with after she fell pregnant as a teenager.

"I use to go to school but after giving birth, I don't go to school anymore to school, I was in grade 10...No, we just argued but never anything physical because I was pregnant, but we would swear each other, something like that swear each other things like that that's all. With both swear each other, then you would spend two or three days without talking to each other yeah things like that...amongst us refugees it is very different because we're just sitting in our homes and we just keep

quiet and then we hope that we solve our own problems by ourselves.” (Ghusoun, Burundi, age 22)

Ghusoun’s vulnerability to experiencing intimate partner violence, like many G2 participants in this study, stemmed from low educational attainment and complete dependence on their husbands or boyfriends for support. Similar to many G1 participants, G2 participants who were married or in romantic relationships and experienced violence found it difficult to disclose their experiences. Despite having social networks, such as their parents and families already living in South Africa, unlike their mothers, who had limited to no social networks, the G2 participants refrained from seeking support due to their socialisation regarding keeping private family matters hidden. This finding will be further discussed in the subsection below.

Widespread silence and acceptance of domestic violence in refugee communities

As previously indicated within the microsystemic and exosystem, silence, shame, guilt, attitudinal acceptance, and normalisation are transmitted within G1 Burundian and Congolese refugee communities by women and enacted within families. These communities encourage family privacy, which is culturally entrenched and characterised by silence, shame, and guilt transmitted both vertically and horizontally. Family privacy manifests as deliberate and sometimes forced silence regarding violence experienced in the home. Both G1 and G2 participants cited family privacy as a crucial component of family life, observed by many in their communities. Within the first generation, an interesting finding regarding silence and attitudinal acceptance was their refusal to interfere in other people’s private family affairs, particularly those related to domestic violence. This norm was prevalent in both Burundian and Congolese communities, where individuals consciously knew to respect the privacy of other families, expecting the same in return for their own family. Although this was cited by most G1 participants in this study, a great reflection of this was found in the Burundian mothers during FGDs, where Hessa (age 48) exemplified this concept. She explained how she, her husband, and other neighbours remained silent regarding their Congolese neighbour’s affairs despite witnessing the violent physical abuse perpetuated by the neighbour’s husband.

“I have a neighbour there where I live, they are from Congo yeah, that man we are just fine with him as a neighbour. However, I see what he does to his wife, I’m sure even his wife asks herself, how come my neighbour and his wife have lived here all these years and I’ve never see her go through any of the things that I go through

with my husband. I mean every day when the night falls, especially around 1am, that woman has two children. The mother is beaten up, to a point where you feel sorry for her.”

Hessa's empathy for her neighbour did not translate into action beyond acknowledging the situation. Neither she, her husband, nor any of her neighbours took any action or confronted the aggressive husband for years. Despite witnessing the extent of the violence endured by her neighbour, Hessa explained that neither she nor her husband intervened.

“There was a night when that woman was beaten by the balcony to the point that the whole house woke up, including the children. We went to see what was happening from the window, into their balcony, firstly her younger sister was beaten, she was the one who was first beaten and then when her sister tried to intervene and to stop him from beating up her sister. The man then beat the woman up, he beat her up so bad that he left her naked, she was beaten up so badly to the point that she was crawling on that balcony. She was crawling on the balcony towards the husband asking the husband and he was stomping on her hands, as he tried to throw her from the balcony. My children, I had to tell them to go back inside to sleep because what we were witnessing was a very shameful site. That woman cried so much, and then the husband dragged her back in doors. I mean that was what we witnessed every day, so I don't know what they would fight about in that house, I mean you cannot know, and there is no way that you can go and intervene.”

Hessa's account of her neighbour's struggle with an abusive partner, along with her and other neighbours' reluctance to intervene, sparked a discussion on the widespread practice among refugees of avoiding involvement in the private family matters of others, regardless of the potential harm. Participants in this FGD noted that many refrain from intervening or even inquiring about violence in another family's home due to a fear of being perceived as intrusive. This hesitance to intervene is largely driven by the general notion within both communities that domestic violence is normal. Participants understand that they themselves may be going through similar experiences, and they aim to avoid community scrutiny of their own situations compounded by a lack of trust within the community.

“And it’s really difficult for you to hear that people have fought here and you go to intervene...Or you cannot ask anything, and they will ask you you’re asking like who? Did I ask you to come and help me?” (Badriya, Burundi, age 37)

“They will first ask you when they open the door, are you here because you want to know my business and then they will close the door on you pooh.” (Aseela, Burundi, age 45)

The G1 participants’ intentional non-disclosure was due to the fact that they were cautious about who knew about their personal experiences with domestic violence (including their children’s maltreatment). This high level of caution was rooted in a pronounced lack of trust within the refugee communities of Burundians and Congolese people. The G1 participants expressed a preference for remaining silent rather than seeking help, fearing that those they might approach for support would inadvertently share their confidential information with others.

“I just don’t like it, because women talk too much, when you go and tell her your problems that now becomes a story, yeah... Yes, I’d rather remain silent.” (Lujain, Burundi, age 39)

Some G1 participants explained that they had one or a few close people they could confide in. However, many of these women who reported confiding in others about their experiences received disheartening responses. They found themselves being judged and socially isolated by their communities, often without the assistance or support they were seeking. This is largely due to the normalisation of domestic violence within these communities, where disclosing such experiences results in victims’ stories being shared with others, resulting in shaming, stigmatisation, and ostracisation. This situation often serves as a cautionary tale, where refugee women learn vicariously about the negative consequences of disclosing issues of domestic violence. This included instances where refugee women sought help for their children’s experiences of sexual abuse, as explained by Badriya below.

“There are other people, instead of helping you they have to first go and tell everyone what happened to your child first, and then you find that your child gets pointed fingers at and that’s not nice. You hear someone coming to you for help, either to go to the police, or take the child to the hospital or let’s do this or that and things end there and then. Because for someone to tell you their things they

are showing that you are their person but it's not like that here. Because my child was abused and I was not happy about that and if I come and I tell you it's because I hold you in high regard, so if I tell you, safeguard what I've told you...there people that come and use what happened to that child, years after that thing has happened and bring it up again. Eeh, is this what happened that child and that's why, people keep their things private, that's the problem." (Badriya, Burundi, age 37)

Badriya's quote further emphasises the insistence on non-disclosure, perpetuating cycles of silence within these refugee communities. Refugee mothers (G1) justify their socialisation by keeping family matters private from their children (G2).

However, a few G1 participants mentioned that they do have a select group of individuals to whom they disclose their problems. This trusted circle typically includes close friends, family members, or religious leaders.

"I don't tell people, I do however have one friend who I speak to and she told me, that you just focus on looking after your children." (Kinza, DRC, age 52)

Kinza's account reiterates the horizontal transmission of intimate partner violence where women motivate one another to stay for various reasons, including their children. Thurayyah's account below emphasises the depth to which refugee women do not trust each other, with some choosing to tell family members and religious leaders (discussed further in upcoming sections) who will advise them to remain in their marriages.

"You know like I tell you there's no you can't trust anyone with your things everyone is afraid of everyone here. I don't tell anyone you might actually tell someone your things and then you find that the following day or after 2-3 months you find that your business is out in the public and people know your personal information so that's also not nice because it makes you feel very bad. So what I've decided is that I only speak to my family especially my younger sister, I speak to her especially because she's very clever she is younger than me but she is so wise the advice that she gives to me is always the best so that's why I always go with what she advises me. And the reality of what I do what I do is because people here honestly don't want to see goodness for someone else everyone wants to see someone the other person suffer if I'm suffering, I want to see you suffer as well so

that's why even with my closest friends I don't even leave my house to go and tell them my problems. I'd rather keep it to myself and speak to my sister because I know she wouldn't tell people here because I don't trust them... I only speak to my sister." (Thurayyah, Burundi, age 43)

This study sheds light on a significant trust issue within Burundian and Congolese communities, contributing to the pervasive silence surrounding the reporting of intimate partner violence. Furthermore, it reveals that refugee women from the G1 group struggle with profound feelings of shame and failure as mothers. These women carry a deep-seated sense of duty to prove, both to themselves and to their mothers back home, that they can endure suffering as their mothers did (perseverance). They emulate the strength of their mothers, who serve as their primary role models, and internalise the belief that enduring men's violent and dominating behaviours are an inherent part of living with men and that remaining strong is what women should do. Consequently, G1 participants often view persevering through these hardships as essential for maintaining their marriages, mirroring the perseverance modelled by their mothers and peers.

"I just learned to be patient and not to be angry with everything your husband does. Because that time when my father was angry he would put a lot of bad things on my mommy he would even put the bad things on my mommy's family and his family say you see this woman I go out to look for money and I just asked her to look after the kids, too much things. So, I guess the way she was quiet she didn't just say yay this happened and this happened why don't you just come and help me to look after these kids focus on herself and do for herself she was just quiet and just accept everything. She saved the mistake and she even asked for forgiveness and says that she will not do it again I am going to do better now. I am going to focus. So I just learned from that in my country they say the mistake of the man is right they don't make mistake, so make the life better and to make life go and then to keep your life going. That is how it works." (Chinira, Burundi, age 41)

Horizontal transmission of attitudinal acceptance and the normalisation of domestic violence among G1 participants was transmitted through silence and feelings of guilt about telling other women their personal experiences of abuse. This is because many of them compared their experiences to those of other women, whom they perceive to be more severe than their own. This realisation led them to remain silent, feeling a sense of gratitude that their own challenges

were not as severe as those faced by women close to them. Such realisations and observations further reinforce their normalisation of domestic violence, their attitudinal acceptance of domestic violence, and the need for refugee women (G1 participants) to persevere through their realities. Many G1 participants came to view domestic violence as a normal part of life, believing that it is a universal experience, albeit faced differently by each woman.

“I have tried to tell this elderly woman who is my senior here, she often tells me her own experiences as a married woman, and when I analyse it I see that her problems are much worse than my own, so because she is wise she doesn’t leave. And you yourself sit there and see how she’s gone through all of this and has remained in her marriage throughout it all, she’s raised all her children with him, and then she tells you that they have all gone through it. That’s when she explains her own experiences, she tells me that her husband doesn’t provide for his children, he doesn’t buy them clothes, nor transport, I must struggle to find things to do so that I will take care of my family. You find that sometimes the man doesn’t have a job, sometimes he gets R1000/2000 and then you may find that he has a right to do what he does and again sometimes he doesn’t have the right to.” (Candice, DRC, age 36)

Similar to G1 participants who aimed to enact their mothers’ perseverance and strength to avoid bringing shame upon them, viewing their own mothers as exemplar wives who endured hardships for the sake of their families, the G2 married participants reported similar sentiments. The transmission of intimate partner violence, its normalisation, silence, and the value placed on perseverance by G1 to G2 participants occurred through psychosocial mechanisms such as shame, silence, and imitation fostered within the family. The G2 participants explained that disclosing instances of domestic violence within the home, whether experienced by themselves or their mothers, typically resulted in judgement and feelings of shame, as it was seen as embarrassing for their families. Many reported not receiving the assistance they sought when disclosing their experiences. Children in Burundian and Congolese refugee communities are encouraged to prioritise family preservation and endure abusive situations.

“... one thing I have noticed about us refugees is that when something happens within the family they always keep it under the carpet. You must remain silent you can’t tell anyone, because once you start telling people and then you will look like you’re the bad one, even the people who are outside won’t even feel sorry for you.”

They will be like you should have kept quiet because this is your family and this and that, all those the thing.” (Wadida, Burundi, age 21)

The quote by Wadida highlights not only the lack of empathy towards victims of domestic violence, as expressed by the participant and others, but also reflects the widespread normalisation of domestic violence within these communities. Many individuals within the Burundian and Congolese refugee communities have come to accept domestic violence as an expected aspect of life, making it challenging for refugees to recognise the severity of such behaviour. Additionally, in terms of witnessing their mothers’ abuse, many G2 participants refrained from disclosing this abuse due to concerns about the repercussions it would have on their parents, particularly their mothers. Abir articulated the difficulty in revealing private family matters such as abuse, as it may negatively reflect on one’s mother.

“No, you were not allowed to talk to anybody, you couldn’t talk to anybody, it was just like ah I don’t know, you can’t talk to anybody about it because at the moment when you talk to people about it and you’re embarrassing. At the end they call it embarrassing, you’re embarrassing your family, you’re embarrassing your mother, you’re putting your mother in such a state where she is even embarrassed to walk on the streets, or they will disrespect your father. Because people outside they, don’t actually see him that what, so you can’t actually talk about it, there was no option as in talk about it, that wasn’t an option...” (Abir, DRC, age 27)

In both Burundian and Congolese communities, the act of disclosing domestic violence has been associated with numerous consequences for both victims (children and mothers) and perpetrators. As explained by G2 participant Abir in the quote above, this reluctance to disclose stems from the pervasive acceptance of domestic violence as a norm within refugee communities. This acceptance and the silence surrounding domestic violence are transmitted both vertically and horizontally between generations (particularly among women) within these communities.

Moreover, within the exosystem, which is closely intertwined with the micro and ontogenic systems, this silence is linked to a noteworthy phenomenon observed in this study: toxic femininity. This concept, identified within this study, sheds light on factors that render individuals more vulnerable to domestic violence as well as its transmission.

Toxic femininity

Toxic femininity emerged as a significant risk factor influencing the reluctance of many G1 participants to discuss their experiences and seek assistance for their abuse. Within the context of this study, participants who are victims of intimate partner violence have identified stigma associated with their experiences, perpetuated primarily by other women. It appears that some women derive satisfaction from the suffering of their peers.

“You see we can’t report because you know where the problem lies, is that you find other women telling you, oh you’re going to report your husband, aah oh my God, she’s reporting her husband. Eeh, you hear, they first build a sense of fear in you, eeh if you open a case for him he will have issues. They will show you that reporting a man is a big deal. They don’t care that he what he is doing to your body is a big deal, you’re being abused, physically, mentally everything.” (Aseela, Burundi, age 45)

Thus, many G1 participants consciously transmit silence and perseverance to their adult daughters by advising them on the importance of maintaining privacy and refraining from disclosing personal problems, especially related to domestic violence, to friends who might pose a threat to their marriages. In the quote below, Yakoota explains the advice she offers her daughter based on her own experiences and observations of events within the community. She warns her daughter not only to refrain from sharing personal experiences with her husband with friends but also subtly advises her to limit the frequency of visits by friends to avoid potential negative consequences. This cautionary approach aims to protect her daughter from making ill-informed decisions and prevents her personal issues from becoming public knowledge.

“Don’t be one of those women who when they’re their friend comes home you open up to your friend and you tell your friend everything that’s going on between your husband and you, you don’t know. We know each other, human beings are oh weird so you might say this to someone thinking that you can trust them by the time they leave your house they’re going to go and advertise your business or they might even advise you know that is impossible if your husband that’s not the type of marriage that you should be in you leave your husband and after you leave your husband you find yourself that it’s either the person goes now when you’re single

and you're out of your wedding marriage they go after your husband or they are the first ones to go and talk about you behind your back saying that you are stupid you left your home after such small things so that's the problem" (Yakoota, Burundi, age 49)

The presence of toxic femininity among refugee women has created trust issues, which have, in turn, eroded community unity, reduced social support networks, and reinforced the norm of keeping family matters confidential. Consequently, even severe cases of domestic violence are often concealed from potential sources of assistance. Moreover, toxic femininity reinforces harmful gender norms regarding male behaviour and exacerbates division and competitiveness among women, hindering a unified response to domestic violence. The G2 participants have observed that refugee women play significant roles in perpetuating domestic violence within their communities. According to them, a culture of competition and gossiping about each other's misfortunes prevails over mutual aid and support among refugee women.

"I think the environment, the society there is a lot of things happen because nowadays society they don't they don't have the thing to help one another. They just like if this happened in someone's life they are happy, because of the competition that's why, when they see people fighting, they are happy. They talk about it everyone happily like its somewhat normal but they see it as a normal thing, but it's not normal. Because at the end of the day who is suffering? The kids the kids are the ones who are suffering." (Dikla, DRC, age 19)

"This gossiping and things they do, these little fights here and there its very useless, and we need to be together as women and a lot of women in our culture do not stand together. They're the first ones to push you down. First ones before the men put you down they're the first ones to do it, they're like you saw that so and so's child they're da da da, but then their like I'm you're aunt, I am your mother, But what are you doing that's not representing how a mom should be." (Zeenat, DRC, age 22)

The quotes from both Dikla and Zeenat offer insights into the prevailing issues within both Burundian and Congolese refugee communities in Durban, echoing sentiments reported by both G1 and G2 participants. These quotes highlight the disunity and toxicity within these communities, where the acceptance and normalisation of domestic violence (particularly

intimate partner violence) have created an environment where women take pleasure in the challenges faced by others. This attitude has fostered widespread silence and led women to socialise their children, including adult daughters, to prioritise family privacy above all else, fearing the repercussions of disclosing domestic violence on the family's reputation.

6.2.1.4 *Macrosystem*

Macrosystemic factors encompass societal risk factors such as the normalisation of interpersonal violence, rigid gender norms, male entitlement and ownership of women, religious misinterpretations, collectivist culture, and external and vicarious reinforcement. These factors contribute to the transmission of characteristics such as the normalisation and acceptance of domestic violence, silence, and perseverance within refugee communities. These characteristics are deeply ingrained in the values and beliefs of the societies from which refugee families originate and are perpetuated within the private homes where they reside. These characteristics are transmitted both vertically, from one generation to the next, and horizontally, among peers and community members.

Intersection between cultural norms and religious beliefs

The older refugee women's attitudinal acceptance and normalisation of domestic violence, especially intimate partner violence, were also prevalent within the larger societies from which they originated. These patterns were largely influenced by religious beliefs and societal norms, which in turn shaped gender norms within these communities. This study identified a strong adherence to traditional gender norms among many G1 and a few G2 participants, with these norms often reinforced by religious interpretations and cultural beliefs deeply ingrained in both Muslim and Christian communities.

“In cultural we taught that men should dominate us, so and in religion there are some, even in Bible uhm I mean in Christianity, Islam... its taught that men are more dominant than us woman...” (Kenene, DRC, age 18 G2)

Kenene's quote illustrates how refugee women are socialised to conform to gender norms dictated by their cultures and religious beliefs. The interaction between cultural and religious values significantly heightens the susceptibility of refugee women from both communities to violence and its transmission. G1 participants, in particular, attributed their perceptions of marriage and their aspirations for success to the socio-cultural norms and beliefs they were exposed to before marriage and the behaviours they observed in their own mothers, particularly regarding divorce.

“I wanted to return home I wasn't gonna handle this and it was just too painful however I remembered what my mother had told me when it came to marriage so

I didn't leave because I remembered what my mother had told me.” (Eléa, DRC, age 53)

“Yeah I grew up being told divorce isn't a good thing, you get married and then you get divorced and return home, that's not a good thing at all, that's why I said to myself, aah I must be strong here. I will not get a divorce.” (Reen, Burundi, age 42)

Refugee women come from societies where divorce is highly discouraged, and as a result, they are often informed that once they are married, there is no turning back, as explained by Eléa and Reen in the above quotes. This socio-cultural norm is further exacerbated by the religious beliefs of refugee women and their personal interpretations of their faith. This study revealed that many G1 participants stood firm in their marriages. This was primarily due to their belief in the notion of “till death do us part” and the conviction that marital problems are simply tests from God that they must endure to attain salvation.

“I want to ask God to guide me and help give me patience to persevere, he must show me the way. I will rely on waiting for what God has written for me. When things become too much then I will see what I will do if I leave because I can't keep fighting for the same thing, because my kids are growing I can't let my children be influenced negatively because of a man, that's not right, yeah. So that's one of the biggest one I have in that house, it enters here and comes out there, but there's nothing much I can do I must just leave it and see what God has written for me, I don't have a choice, my children are grown and I cannot sit and tell everyone my issues, I want him to take me from that place but he doesn't want to. You know everyone has their own problems I might want him to remove me from there but someone else has worse issues than me that how the world works. I must fight I have no other choice.” (Lamees, Burundi, age 40)

The quote by Lamees encapsulates the profound psychological impact of religion on refugee women, particularly in terms of their internalisation of attitudes related to the acceptance of domestic violence. Many women believe they are engaged in a battle uniquely prepared for them by God, a fate they perceive as predetermined. Consequently, refugee women's normalisation and acceptance of domestic violence, specifically intimate partner violence, along with their determination to persevere through their ordeals and maintain silence, are

deeply rooted in their religious beliefs. Lamees' quote reflects a sense of hopelessness and feelings of entrapment. Although she recognises the harmful impact of domestic violence not only on herself but also on her children, she experiences internal tension about leaving her abusive husband. This tension is rooted in her own childhood history of maltreatment by her stepmother (refer to the last paragraph on page 119-120), a factor she heavily considers whenever she contemplates leaving. As a result, she feels compelled to wait until her children are older before taking that step. She explains that she must "fight," indicating her need for patience until the right moment to leave arises. In the meantime, she turns to religion as a coping mechanism, helping her endure the abuse and navigate the lack of social support within her community. Moreover, Lamees' quote highlights the theme of self-sacrifice reported by many G1 participants, who endure hardship for the sake of their children, seeing it as their God-given responsibility. Many G1 participants believe that their endurance demonstrates devotion to God's commandments, with the expectation of being rewarded in the afterlife for their perseverance and self-sacrifice. They often focus on gratitude for not experiencing violence at the same intensity as other women in their communities.

The concept of perseverance among refugee women is deeply entwined with their spirituality, their devotion to God, and their societal standing, which is closely linked to their marital status. Emmanuella, participating in the DRC mothers' FGD, highlighted the Christian belief that marriage is indissoluble, with no exit option once entered, a truth applicable to both men and women, regardless of their marital happiness. She stressed that, guided by this principle, she and her husband have navigated their marriage and are imparting the same religious values and beliefs to their children.

“Marriage is all about patience, I would never like it if my child must be in multiple marriages. You get married here, you leave him and move onto another man, or he marries and leaves his wife and marries someone else. Aah aah, no, when you marry once you will stay and if you get married once you stay. You’re the one who chose that person no one chose for you; you have to bear patience and persevere until death do you part. Because us Christians we are taught that death is the only thing that separates a marriage, there is no other reason to separate a marriage. Oh, it’s because he was with other women so I must leave him, aah aah, death. Us Christians once you’re married you have tied yourself to a rope, never should the thought that I will leave one day or that I will leave this woman. You stay like that

until she dies, then you can remarry, or you can get remarried. That is what I teach my children, when you get married you stay.” (Emmanuella, DRC, age 47)

This study revealed that many G1 participants, whether by avoiding seeking help from peers, close contacts, or religious leaders, often found no improvement in their situations after seeking assistance. As a result, many opted to endure the abuse, finding solace in prayer instead. These participants held a strong belief in divine intervention as their primary form of support, with many expressing feelings of relief and renewed strength to persist in their marriages.

“I won’t go to anyone and speak to. So whatever problem I do not to go and tell everyone I just sit and pray and because it’s not good and even as a mother as I told you whatever problem you have you don’t tell your child you keep quiet and you pray because God is going to reward you.” (Beulah, Burundi, age 47)

Notably, many G2 participants highlighted how men misuse religion as a tool to control, dominate and abuse women. Mawiya and Kaisa specifically condemned this behaviour, arguing that such misuse of religious teachings to justify harm against women is inherently sinful.

“They overdo it now, just because they quote from the Bible where it says that the husband is the head of the house. They over do it now, it’s like the wife is like a slave now where she’s caged she can’t even make a decision, when they are planning to do something if she decides to, or sometimes like with me like I feel like let me just ask my mom. But she’s like oh ask your father first, aren’t you also my parent. It’s like mxm they are too controlling. They start saying the Bible says what, it’s like they abuse it too much.” (Kaisa, DRC, age 22)

Intisar, in her interview, explained how abusive cultural norms intertwined with religious teachings are employed to psychologically and emotionally manipulate women, thereby increasing their vulnerability to domestic violence. While she references the Quran as an example, she also points out that Burundian culture itself normalises VAW, a practice that women have been conditioned to accept and normalise over generations.

“The problem with us Burundians is that yes we have culture but it’s so that we use the culture that we have to, to abuse women no it is the religion that a lot of men from back home he used to abuse women so you find people using the Quran

as their justification for a lot of the things that they do. so for example you find that man is hardly supporting his wife but then you learn to marry 3 or 4 and then they will tell you no it is not me even God tells us that I can marry more than one wife and most women don't know how to argue with them because that's scripture. You don't understand that for you to even want to get married to a second or third or fourth wife you need to make sure that your first wife you're not only clothing them and you're not only giving feeding them but you are able to look after her in wholistically and the two can even satisfy her so but men take things very lightly they just take no it's almost I'm feeding her then I can just go and marry someone else which unfortunately that is not the case it does not work like that in three leaders and that is when you find the men abusing their wives that's one of the major reasons that's why men abuse their wives" (Intisar, Burundi, age 27)

Similar views were expressed by Christian participants, such as Avril, who questioned the value of religion, especially in light of its role in diminishing women's worth and autonomy in society.

"I feel like with religion, religion is always going to play a role, where women are always inferior to men in religion so I don't see the importance of religion, I haven't been influenced by religion, at some point I even stopped like reading the Bible and stuff like that, I actually stopped everything; you know it's firstly why is this religion in favour of men? Secondly, uh if you say that you are God why is it that you have [scoffs] you know um, but first my experience here in varsity now, seeing how it happens to other students as well um for me it has actually been an eye opener, it's also like its teaching me life lessons. As much as I grew up around it, you know, I feel like it has taught me more life lessons, so basically, I know what I want and what I don't want to experience in a person, I know when it's the right time to leave so that I don't experience personally experience DV yeah." (Avril, DRC, age 22)

Avril highlighted how witnessing the detrimental effects of religious teachings on women's independence and their experiences with intimate partner violence prompted her to abandon her Christian faith and religion altogether.

Collectivist culture

Another significant macrosystemic risk factor identified within the two refugee communities discussed in earlier sections is collective cultural orientation in the form of silence transmitted horizontally within both refugee communities. This culture prioritises family and marital status over one's individual well-being. The G1 participants explained that refugee women, even those subjected to extreme and sometimes life-threatening violence by their spouses, often feel compelled to remain in these situations due to social pressures. These pressures come from family, friends, and notably religious leaders, who persuade victims to stay in abusive marriages. An example includes individuals such as Lujain, who was one of the very few G1 participants to have had the courage to report abuse to the police, only to be convinced by community members and religious leaders to withdraw the charges.

"I just decided to leave it because, they had asked me to sign so that he could be jailed for six years but the Islamic scholars came and told me aah look this is the father of your children. You have children together, you can't get him jailed for six years, that's a very long time, forgive him. But in the court they said he must be arrested for six years... personally I was ready to get him arrested but people's voices aah forgive each other, aah that's how it ended" (Lujain, Burundi, age 39)

Lujain explains that she was persuaded by people close to her and her husband and religious leaders who convinced her that her actions were wrong and unfair to her abusive husband, and from this pressure, she dropped the charges. However, she did explain that after his release, nothing major has changed in her home except for the physical abuse, as she still endures verbal and emotional abuse.

"Yes, he just talks, and when he sees that I am not responding then he also keeps quiet. But he talks to a point where I have no peace of mind." (Lujain, Burundi, age 39)

The collectivist culture is prevalent among refugee women and has led to the normalisation of physical chastisement of women and acceptance of men's violent behaviours. The G2 participants noted that adherence to strong socio-cultural and religious beliefs about divorce is widespread. Such beliefs are so deeply ingrained that women who manage to leave marriages due to domestic violence face encouragement to return and stigma for their decision to leave.

“So we as women, we think that where can I go from here you can’t go anywhere society that forbids people from divorcing when you married especially as the foreigners society our society is very delicate and it says there is no divorce and if you are divorced you know there’s an outsider like you just, you just I don’t know I don’t know what what’s the exact word they can call you because at the end of the day when you are divorced you can’t walk amongst ladies and be seen as a lady you are seen as something else in their eyes...So, I think we take it when a person is domestic when the person is violent to us because we are supposed to take it we were told to take it over centuries of time we are told to take it so there’s no breaking the norm because if you break the norm you look like somebody that looked like somebody that’s abnormal in the foreigners community” (Abir, DRC, age 27)

The quote by Abir explains how socio-cultural norms about divorce are strictly upheld largely by women who stigmatise and ostracise divorced women, particularly G1 refugee women in these two communities.

South African policies and their negative effects on refugee families

In this study, the presence of horizontal transmission of domestic violence, along with its normalisation, attitudinal acceptance, and silence within refugee communities, was evident through G1 participants’ resistance to acculturation. Many G1 participants expressed significant hesitancy and misunderstanding about the laws of the Republic of South Africa, which are designed and implemented to protect women and children. This reluctance and confusion heighten the vulnerability of refugee women to abuse, leaving them without adequate protection. Participants indicated that these laws, which are perceived as undermining men’s traditional dominance and ownership over women, grant women an excessive degree of freedom. Such freedom is viewed as leading to an imbalance of power and, ultimately, to societal breakdown. This perspective highlights a troubling acceptance among refugee women of physical chastisement as a means to exert control and resolve conflicts, further illustrating the complex dynamics involved in adapting to new legal frameworks.

“I commend women back home they had patience, they use to suffer but they had patience, they never had nice lives. Can you imagine a woman would go to the farm, return home with wood on the head and a baby on the back and she should

prepare food for the household. The husband when he returns home with her and stretches his legs. Will you say what we go through here is bad no, when a man pulls her ears, she never fights back. There is a freedom here that they gave us, a man could beat and even shout at his wife, and she would never say anything. But here the women here do not know the value of men.” (Iris, DRC, age 53)

Iris, like many G1 participants in this study, expressed the sentiment that South Africa grants women too many rights and freedoms. This perception suggests that such rights have eroded men’s masculinity and disrupted their natural behavioural patterns. This, unfortunately, provides further evidence for refugee women’s (G1 participants) acceptance and normalisation of domestic violence in the form of intimate partner violence. A quote by Sikitu, who – along with other refugee women in the DRC FGD and some other G1 participants – revealed that they attribute their children’s behavioural issues, including substance use and teenage pregnancy, to child protection laws.

“The one thing that I see is contributing to this thing mostly, I’m so sorry about this is but I think it’s to imitate. We come from back home and there are things that we were taught growing up, a person must live like this and must behave like this, a child must behave like this and must live this, a woman must be like this and must behave like this. But when we arrive here, we find things that are very different from what we were taught, so we start copying what we find here. For example, back home you could beat up a child to any point you deemed fit but here if you beat up a child they call the police for you, no my mother is abusing me... You hear, that is one of the things that makes our children very rebellious and not want to listen to us, and you as parent once you hear someone telling you they’ll bring the police for you, you think must I go to jail because of one child leaving the others to suffer.” (Sikitu, DRC, age 40)

This finding is interesting as it highlights how laws enshrined to protect women and children are perceived and misconstrued by G1 participants in the two communities to hinder the ‘natural’ structure of a family. These laws are being blamed by participants for certain challenges they face in their homes, particularly with regard to children and their normal child-rearing practices of using aggression on children.

In summary, macrosystemic risk factors associated with refugee families' experiences of domestic violence and the transmission of domestic violence are rooted in refugee women's adherence to socio-cultural norms and religious beliefs.

In Part 1 of this chapter, data was presented regarding the transmission of characteristics across and within generations of refugee women, explaining how these transmissions occur through psychosocial mechanisms found within multiple levels of risk. This second section provides a comprehensive discussion of these findings in relation to existing literature.

6.3 Discussion

The findings of this study offer a unique perspective on the intergenerational transmission of domestic violence among refugee women from war-affected African countries such as Burundi and the DRC living in South Africa. First, the qualitative evidence provided details of the transmission of various characteristics, including attitudinal acceptance, normalisation, and expectation of domestic violence, particularly intimate partner violence, and silence, shame, guilt, lack of social support, poor communication, parent-child relationships, financial dependence, and perseverance. These characteristics were found to be transmitted through psychosocial mechanisms within and across generations of refugee women. Many of these characteristics also function as risk factors operating at multiple levels, influencing the transmission of domestic violence within and across generations (Ehrensaft and Langhinrichsen-Rohling, 2020). The transmission primarily occurred among refugee women, with many refugee mothers from both countries transmitting these characteristics horizontally within the community, both consciously and unconsciously. Additionally, they transmitted these characteristics vertically to their adult daughters, including during their childhood. This study contributes to our understanding of how these complex dynamics play out within refugee communities, shedding light on the mechanisms through which intergenerational transmission of domestic violence occurs.

This study has found intriguing insights into the transmission of domestic violence, particularly regarding the normalisation of violence by men as naturally violent beings. Although men were not included in this study, fathers and men, whether consciously or unconsciously, transmitted the normalisation of male violence to their daughters. This normalisation occurs horizontally and vertically as refugee women witness violent behaviour by men in their homes, communities, and societies at large. Both types of transmission are further reinforced by

women's socialisation by their mothers or mother figures (vertically) and other women in their communities (horizontally).

Moreover, the integrated ecological model developed for this study proved instrumental in understanding the transmission of domestic violence. Drawing from social learning theory, attachment theory, and Heise's ecological model, this framework analysed concepts such as internalisation, reinforcement, observation, vicarious learning, re-enactment, avoidant attachment, and internal working models. Through this lens, the study identified complex and multidirectional pathways for the transmission of domestic violence across all four levels: i.e. ontogenic, microsystemic, exosystemic, and macrosystemic.

Refugee women in Durban represent a high-risk group for the co-occurrence of intimate partner violence, child maltreatment or neglect, and the intergenerational transmission of these behaviours. The findings reveal the influence of various risk factors and psychosocial mechanisms operating in complex ways, shaping the transmission of domestic violence from one generation of refugee women to the next and among refugee women within the same generation. These findings are discussed in detail within each respective ecological level.

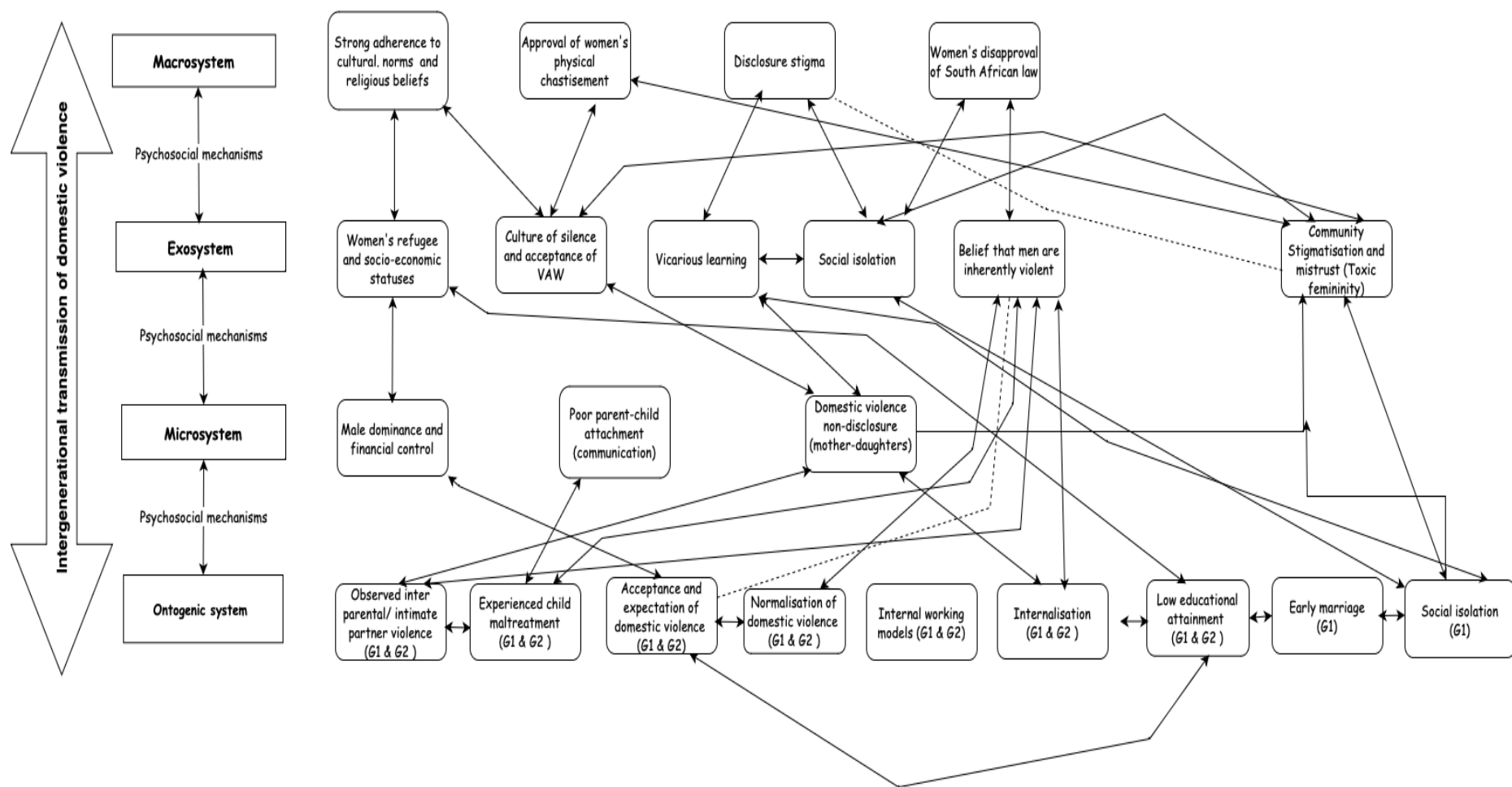


Figure 9: Risk factors and psychosocial mechanisms influencing the intergenerational transmission of domestic violence in refugee families based on conceptual framework

6.3.1 *Ontogenic system*

This study identifies several individual factors within the ontogenic system that contribute to the vulnerability of both generations of refugee women to domestic violence and its transmission from mothers (G1) to their daughters (G2), particularly intimate partner violence in adulthood. These risk factors, which are also characteristics transmitted both vertically and horizontally, include normalisation, expectation of intimate partner violence, and low educational attainment. Attitudinal acceptance was found to be transmitted horizontally in this study, whereas the risk factor of lack of social support saw the transmission of isolation and loneliness. These risk factors and characteristics are transmitted via various psychosocial mechanisms, including the internalisation of violent behaviours by men, silence, guilt, shame, and re-enactment (psychological), through socialisation in the family of origin and community (environmental).

This study highlights how individual experiences of violence and the witnessing of interparental and/or intimate partner violence, which are socially embedded within larger ecological systems, influence the transmission of domestic violence within and across refugee women communities. This happens through internal processes, where individuals unconsciously adopt various attitudes, values, beliefs, and ideas from others within their socio-cultural contexts (Bronfenbrenner, 1979; Fraiberg *et al.*, 1975; Salberg, 2019a; Uchida *et al.*, 2020).

The findings of the present study indicate that the aforementioned shared risk factors and characteristics are transmitted from refugee mothers to their adult daughters, resulting in many of the younger refugee women who were married or in romantic relationships becoming victims of intimate partner violence. For instance, many older refugee women reported low educational levels, which led to financial dependence on spouses later in life, resulting in their experiences of intimate partner violence. Significantly, in line with the social learning theory, older refugee women's acceptance, normalisation, and expectation of intimate partner violence and child maltreatment is reinforced by familial relationships and the communities in which they lived. This was informed by the societies in which they originated and stemmed from the social learning processes (Heise, 1998; Islam *et al.*, 2014; Shakoor *et al.*, 2022). Notably, low educational attainment in this study was found to be transmitted vertically from refugee mothers to their adult daughters who were married, through socialisation within the family of origin being the mechanism where this characteristic and risk factors were transmitted as a

result of gender norms. Previous studies have found that education (attainment) can be transmitted across generations (Dong *et al.*, 2019; Fleury and Gilles, 2018; Heineck and Riphahn, 2009; Martin, 2012)

In relation to intimate partner violence specifically, despite some older refugee women not witnessing intimate partner violence between their parents, this study found that intimate partner violence among refugee women was transmitted both horizontally and vertically between women. This occurred through observational learning of other refugee women's experiences of intimate partner violence within their respective refugee and combined communities²⁴, coupled with marriage coaching from their mothers and/or maternal figures. Refugee women's observations and the subsequent vicarious learnings are internalised and passed on to their daughters. These observed behaviours include victimhood and violent behaviours enacted by men towards women, which are thus internalised as attitudes, norms, and expectations of an intimate partner (Antle *et al.*, 2020; Erten and Keskin, 2020). Consequently, this resulted in refugee women in both generations re-enacting victimhood behaviours in their own romantic relationships (Paixão *et al.*, 2015).

Moreover, older refugee women's normalisation, expectation, and attitudinal acceptance of domestic violence (intimate partner violence and child maltreatment²⁵) was found to inform the transmission of isolation and loneliness as a consequence of a lack of social support available to both generations of refugee women. These two characteristics were transmitted via the mechanisms of internalisation, shame, silence, guilt, re-enactment, and socialisation within the family and community. Where social interactions and help-seeking behaviours related to experiences of domestic violence were discouraged, leading to shaming, silencing, and guilt-tripping the victims, this pattern was observed among refugee mothers and their daughters and among older refugee women, ultimately resulting in social isolation and loneliness (Augustijn, 2021; De Jong-Gierveld, Van Tilburg and Dykstra, 2006). These transmitted characteristics and risk factors align with existing research (Barnes *et al.*, 2022; Eriksson and Mazerole, 2021; Heise, 1998; Hsieh *et al.*, 2022; Islam *et al.*, 2014), which suggests that such vulnerabilities contribute to women's experiences of intimate partner violence, their perpetuation of child

²⁴ The word combined communities is used in this context to refer to the two communities' shared values, beliefs, attitudes, and proximity, as well as living in the same geographical locations within Durban.

²⁵ Child maltreatment was discussed broadly in Chapter 5 and its normalisation is highlighted again in the section on macrosystem.

maltreatment, and transmitting these behaviours, characteristics, and risk factors to subsequent generations.

It is worth noting that although social isolation and loneliness are interrelated, they are not the same. Augustijn (2021, p. 3) explains that loneliness “is a subjective feeling of distress that results from a cognitive discrepancy between a person’s actual and desired social relationships”. There are two types of loneliness: social loneliness, which in this study refers to the perceived absence of social support networks, and emotional loneliness, which refers to the lack of an intimate relationship with another person (Augustijn, 2021; De Jong-Gierveld, Van Tilburg and Dykstra, 2006). While social isolation refers to the absence of relationships with others, De Jong-Gierveld, Van Tilburg and Dykstra (2006) explain that although socially isolated individuals are not necessarily lonely, lonely people are also not necessarily socially isolated individuals. This study revealed that both generations of refugee women experienced both social isolation and feelings of loneliness. Many victims of domestic violence were found to be left alone by close family and friends to deal with their experiences of violence, including during childhood.

Furthermore, exposure to domestic violence profoundly impacted young refugee women’s normalisation of such violence, contributing to negative perceptions of relationships. Similar findings were found in a study by Neppl *et al.* (2019). This was largely because the lack of social networks was transmitted by their mothers through socialisation in the home, as well as the use of other mechanisms such as shame, guilt, and silence, which resulted in fear. This study found that younger refugee women’s experiences and observations of the consequences of disclosure of domestic violence, especially child maltreatment, resulted in avoidant attachment between them and their parents, particularly mothers, due to the shaming attached to disclosure. Shame is a negative emotion experienced by individuals when they fail to meet social standards (Orth *et al.*, 2010; Velotti, Ellison and Garofalo, 2014). When victims are made to feel ashamed for disclosing their violent and traumatic experiences, specifically those of sexual abuse or attempted sexual abuse. This response silences them by invalidating their experiences of violence, making them feel worthless and affecting their relationships with others and effectively isolating themselves (Barns *et al.*, 2022; Ford, 2001). Consequently, this can lead to internal working models shaped by avoidant attachment, particularly with their mothers, which lead younger refugee women to internalise violent behaviours as acceptable,

normal, and expected of men, reflecting both their personal experiences of attachment and broader social learning (Southern and Sullivan, 2021).

6.3.2 *Microsystem*

The interconnectedness of individual factors in the ontogenic system and relationship factors in the microsystem profoundly influences the transmission of domestic violence across generations among refugee women. The major risk factors within this system were found to be male dominance, poor communication in parent-child relationships, and refugee women's reluctance to disclose violence, with the latter two risk factors having been identified as characteristics that were transmitted from older refugee women's mothers. This was in addition to other characteristics, including the normalisation and expectation of intimate partner violence, financial dependency, and perseverance having been transmitted vertically from mothers to their adult daughters. These factors were transmitted via the mechanisms of internalisation of violent behaviours by men, shame, silence, re-enactment, guilt, fear and socialisation with mothers in the family. This study explains how both generations of refugee women's experiences of violence are not only shaped by their individual risk factors but are significantly increased through their relationships, particularly the subjective meanings derived from their interactions with their mothers, including older refugee women's interactions with their own mothers, which play a significant role in understanding their experiences of violence and the transmission of domestic violence victimhood from mothers to adult-daughters.

Central to the findings finding of the present study is the role of exposure to domestic violence in both childhood (interparental and/or intimate partner violence and child maltreatment) and adulthood (intimate partner violence), acting as a risk factor in the transmission of intimate partner violence victimhood from refugee mothers to their daughters (Ehrensaft and Cohen, 2012). This finding aligns with the principles of the social learning theory, suggesting that the observation and personal experiences of intimate partner violence by refugee women crucially inform their daughters' normalisation and experiences of intimate partner violence (Eriksson and Mazerolle, 2015; Islam *et al.*, 2014). The theory emphasises the process of re-enactment, where G2 women emulate the victim behaviours observed in their mothers, who are their primary socialising agents (Branje *et al.*, 2020; Islam *et al.*, 2014). Where the learned characteristic of victimhood such as silence, perseverance, shame, and internalisation of violent behaviours by men which subsequently leads to the normalisation of domestic violence that, is transmitted from one generation of refugee women to the next.

Furthermore, the study sheds light on intergenerational exposure to domestic violence, particularly highlighting the influence of male dominance and financial control within patriarchal family systems (Southern and Sullivan, 2021). Kanwal Aslam *et al.* (2015) posit that domestic violence victimhood across generations occurs in most societies because women have been encultured to accept that marital power and control belong to their husbands (see more in-depth discussion in exosystemic and macrosystemic factors). Such observations suggest that deeply ingrained power dynamics contribute to the internal normalisation of domestic violence and the transmission of domestic violence as a result of maintained hierarchical control over generations. Interestingly, while many older refugee women in this study did not fully grasp the link between male dominance, financial control, and domestic violence, some younger refugee women understood that male dominance and financial control are key risk factors that have influenced their own experiences of intimate partner violence which they normalised as key components of intimate relationships, similar to their mothers. Financial dependency is a key characteristic transmitted from their mothers to themselves through mother-daughter socialisation within the family. This finding contrasts the conclusions drawn by Leight (2021) whose research did not corroborate the presence of an intergenerational transmission of intimate partner violence linked to male dominance and control, as observed in women's childhood homes and their subsequent adult experiences of intimate partner violence.

Additionally, poor parent-child relationships and poor communication with both parents have contributed to an increased vulnerability to intimate partner violence among refugee women across the two generations (Goodman *et al.*, 2020). The latter is marked by an authoritarian parenting style with hierarchical power structures and limited communication. Poor communication by both older refugee women and their spouses negatively impacts their daughters' ability to form secure attachments, particularly influencing the development of trust in their parents. As mentioned in Chapter 5, one of the main consequences of exposure to domestic violence was avoidant attachment found in younger refugee women. Because of their insecure attachment to their parents, particularly mothers, communication was restricted, and younger refugee women in this study were found to lack the desire to seek reassurance and comfort from their parents (Ford, 2001). Especially after young refugee women disclosed experiences of child sexual abuse or attempted sexual abuse, this left them with feelings of shame and loneliness, as their traumatic experiences were either ignored or rejected by their mothers (Barnes *et al.*, 2022). Furthermore, the authoritarian parenting approach, characterised

by strict control and limited open dialogue, replicated by older refugee women based on their own upbringing, contributes to perpetuating a cycle of insecure-avoidant attachment with their daughters (Gonzalez Rodriguez, and Paine., 2022; Langevin, Marshall, and Kingsland., 2021). This is done through the processes of internal working models and internalisation by older refugee women in relation to observed behaviours in childhood. Alexander (2014) provides corroborative evidence for this notion, elucidating how individual internal working models significantly influence parenting styles. Older refugee women who have experienced child maltreatment and whose emotional needs remained unmet are likely to form internal working models that mirror their adverse experiences. These models, in turn, shape the manner in which older refugee women interact with their own children. This perspective underscores the profound impact of unmet emotional needs and maltreatment in childhood on subsequent generational parenting practices and interactions.

Moreover, poor communication also surfaced as older refugee women's reluctance to disclose their experiences of violence, including to their daughters, even if they were aware of what was happening. This ingrained reluctance for non-disclosure (silence) emerged as a significant interpersonal risk factor as well as a characteristic that was transmitted to younger refugee women, who, for those married or in romantic relationships, also reported having experienced intimate partner violence and did not disclose it. Several other studies have found similar outcomes with regard to women's reluctance to disclose abuse (Francis *et al.*, 2017; Madhani *et al.*, 2017; Rasool, 2015). This non-disclosure was driven by a deep-seated belief in the inherently violent nature of men (Copp *et al.*, 2019; Shinwari *et al.*, 2022, Takyi and Lamptey 2020). This finding underscores a complex interplay between the normalisation of intimate partner violence (domestic violence in general) and the deliberate silence around both generations of refugee women's experiences of abuse. These insights collectively underscore the nuanced and multifaceted nature of relationship risk factors as well as mechanisms that influence the transmission of domestic violence among refugee women.

6.3.3 Exosystem

This study identified that some core characteristics such as attitudinal acceptance and normalisation of intimate partner violence, financial dependency, silence, intimate partner violence, the lack of social networks, and perseverance that were transmitted in the ontogenic system and microsystem were also found to be transmitted in the exosystem. Three main community risk factors which contribute to the transmission of domestic violence within and

across generations of refugee women were identified in the present study. These risk factors included women's refugee and socio-economic status, widespread silence and acceptance of domestic violence, and toxic femininity.

Among the first generation of refugee women, a combination of factors such as childhood exposure to interparental and/or intimate partner violence, financial dependency on spouses, challenges in entering the South African workforce due to refugee status, low educational attainment or unrecognised qualifications, significantly contributed to unemployment (i.e. low socio-economic status) and subsequently increased their vulnerability and their experiences of intimate partner violence. These findings align with research by Haffejee and Maksudi (2020), El-Moslemany *et al.* (2022) and Njie-Carr *et al.* (2021) emphasising the multifaceted nature of domestic vulnerability among refugee populations. Some of the aforementioned risk factors were also characteristics that were found in younger refugee women.

The study found that core characteristics such as social isolation (through the lack of social networks), adherence to rigid gender norms emphasising family privacy (silence), and women's perseverance in the face of domestic violence were transmitted horizontally within refugee families. This was particularly evident among older refugee women, who used their attitudinal acceptance and normalisation of intimate partner violence to support one another (for the few who had social networks) or through reinforcement to re-enact victim behaviours marked by perseverance and silence. Studies by Nzokirishaka and Palamuleni (2020), and Tenkorang (2019) have highlighted the role of patriarchal gender norms in limiting women's autonomy, contributing to a culture of subservience and non-disclosure of abuse. Zhao *et al.* (2022) further explored how patriarchal family systems foster an environment where intergenerational acceptance and exposure to domestic violence facilitate its transmission. The reluctance to disclose domestic violence, upheld by community norms against interfering in private family matters as found in this study, enables the transmission of domestic violence in refugee families, as supported by findings from Gashaw *et al.* (2019), Ghosh (2011), Mason and Pulvirenti (2013); and Timshel *et al.* (2017).

Older refugee women's non-disclosure in this regard was also associated with their need to be socially considered ideal wives (i.e. good wives) who protect their family image (Sabri *et al.*, 2018). This is because both Burundian and Congolese societies are patriarchal societies where the prevailing culture within these societies paints the ideal wife as one who conceals the imperfections of her home (Angelucci and Heath, 2020; Manishatse, 2023; Mason and

Pulvirenti, 2013). Manishatse (2023) explains that in Kirundi (Burundian's official and Indigenous language), the word '*Umukenyenzi*' and its values are transmitted from one generation of women to the next, which means "the one who ties her loincloth on thorns and walks without flinching and without the outside world noticing her pain,". These values were found to be transmitted both vertically from refugee mothers to their adult daughters and horizontally within the first generation of refugee women (G1s) within the community by encouraging each other to remember their roles as mothers.

Furthermore, non-disclosure and perseverance were found in this study to be exacerbated by high levels of mistrust within both communities. Both generations of refugee women's reluctance to disclose experiences of abuse was due to vicarious learning that took place after women's observations of other refugee women's experiences of stigmatisation, ostracisation and shaming perpetuated by other refugees, including women in both communities (Sawrikar and Katz, 2017a; 2017b). This was particularly evident in cases of their daughters' sexual abuse as a measure to protect children from judgement and stigmatisation. Additionally, these older refugee women grapple with feelings of shame, self-blame, and perceived failure as mothers, emotions that are deeply entrenched in societal expectations of mothers as primary caregivers responsible for their children's safety (MacTavish, 2016). Meyer, Reeves, E. and Fitz-Gibbon (2021) further highlight how these feelings of self-blame and shame are exacerbated by social narratives that emphasise the mother's role in child protection.

Moreover, in addition to the aforementioned community factors and characteristics, refugee women's perseverance in the face of domestic violence, particularly intimate partner violence, was also found to be validated by comparing their situations with more severe cases within their community, inadvertently reinforcing an internalised acceptance and normalisation of intimate partner violence. Such comparisons further entrench the acceptance of rigid cultural norms that normalise and justify male VAWC. Younger refugee women also emphasised the importance of maintaining family privacy to protect their families' reputations, mirroring their mothers' concerns. The absence of community sanctions against domestic violence and prevailing norms that prioritise family privacy and normalise domestic violence significantly hinder young refugee women's willingness to disclose their experiences of domestic violence, particularly intimate partner violence. Such disclosures were perceived to tarnish their mothers' reputations. Additionally, younger refugee women who suffered sexual abuse in childhood and remained silent did so out of dependence on their family for survival, fearing that disclosure

could jeopardise their only support system in South Africa. Similar findings were found in a study by Näsman (2019). This fear underscores the complex dynamics influencing non-disclosure among young refugee women, where the protection of family image and personal dependency intersect, further complicating their experiences of domestic violence over the lifespan, with the potential to transmit some of these core characteristics to future generations.

A unique contribution of this study to the literature is the concept of toxic femininity within female social circles, which influences the transmission of silence, perseverance, lack of social networks, acceptance, normalisation, and expectation of intimate partner violence within the exosystem. Toxic femininity refers to women's adherence to repressive and rigid definitions of womanhood, marked by subservience to patriarchal gender norms that keep them and other women quiet, subservient, and submissive to the violence and domination of men (Jones, 2019; McCann, 2022; Sevens, 2023; Snider, 2018). Vaidyanathan (2021) suggests that by adhering to and propagating patriarchal norms through socialisation, women inadvertently reinforce these harmful cultural norms. These toxic traits by women have been found to play a role in women's experiences of intimate partner violence (Jones, 2019; Kelly *et al.*, 2020).

For the purpose of this study, the term toxic femininity is used to refer to internalised and dominant messages held by refugee women, suggesting that women cannot trust one another and should remain silent about their suffering. This is because when other women hear about their suffering, they become happy. Toxic femininity in this study has been found to be propelled by *schadenfreude*, a psychological concept described as people gaining pleasure over the misfortunes of others (Akbar, 2022; Akre, 2024; Greenier, 2021). Refugee women in both Burundian and Congolese communities as a group have created a toxic environment characterised by some refugee women exploiting others' vulnerabilities, leading to betrayal, judgement, stigmatisation, and social isolation following domestic violence disclosures. A consequence of rivalry between refugee women is aided by their perceived collective experiences of violence, which they have normalised. Thus, when other refugee women disclose their experiences of domestic violence, particularly intimate partner violence, other women within the community may feel pleasure from knowing that they are suffering the same or a worse fate than them.

Akre (2024) explains that *schadenfreude* occurs when there is an absence of empathy in people, leading them to dehumanise others and their violent experiences. Toxic femininity propelled by *schadenfreude* is a consequence of insecure attachment among older refugee women.

Although attachment patterns in older refugee women were not adequately established, these characteristics provide some evidence for insecure attachment. Baren's (2017) work supports this assumption, as her study found that individuals with insecure attachment had more *schadenfreude* towards others' suffering and felt a sense of competition. As a result of toxic femininity within the two communities, younger refugee women indicated that these toxic dynamics between women not only position refugee women as guardians of VAWC in their communities but also as contributors to its perpetuation. This exacerbates existing issues of insecure attachment, extending beyond the family unit to affect broader social trust (McCloskey, 2013). This observation contrasts sharply with research that primarily focuses on women's roles in perpetuating violence within the context of same-sex relationships (Lysova, 2016; Rollé *et al.*, 2018).

6.3.4 Macrosystem

This study found that some of the core characteristics that were transmitted in previous systems were also transmitted within the macrosystem, namely: intimate partner violence, child maltreatment, perseverance, silence, attitudinal acceptance, gender norms and normalisation of domestic violence. These characteristics were largely transmitted horizontally within older refugee women generations. Social risk factors, including adherence to cultural norms and religious beliefs, collectivist culture, and refugee women's rejection and opposition to South African policies (Finno-Velasquez *et al.*, 2021; Heise, 1998), contribute to this transmission. These risk factors and characteristics were transmitted via the psychosocial mechanism of socialisation within society and community and the re-enactment of behaviours by refugee women.

A significant societal risk factor for intergenerational transmission of both domestic violence (intimate partner violence and child maltreatment) and its attitudinal acceptance was the opposition and rejection by refugee women, especially those in the first generation, of South African legislation. Legislations that are in place to prohibit any forms of domestic violence and prosecute perpetrators of domestic violence. This rejection stems from a belief that such legislation places too much power on women and children, thereby undermining their societal values, which place men as the dominant gender in both Burundian and Congolese societies (Basse and Kwizera, 2019; United Kingdom: Home Office, 2017). Refugee women's rejection of these progressive and important laws is rooted in the societies from which they come, where women accept interpersonal violence and male entitlement and ownership of women (Alawode

et al., 2023; Heise, 1998; United Kingdom: Home Office, 2017; Sinha and Djankov, 2023). Additionally, refugee women (G1 participants) reject South African legislation largely because they come from countries where, for decades, no laws protected women from any form of GBV, including domestic violence. Although both Burundi and the DRC signed the Maputo Protocol, Burundi in 2003 and the DRC in 2008, neither country has ratified it (Solidarity for African Women's Rights (SOAWR), 2024; Amnesty International, 2023). For instance, in Burundi, where domestic violence is widespread, legislation against GBV was only introduced in 2016, primarily due to the government's discriminatory laws shaped by patriarchal norms (Amnesty International, 2023; SOAWR, 2024). Similarly, although the DRC has signed the Maputo Protocol, it has no specific laws prohibiting domestic violence. Instead, domestic violence is addressed under the general provisions of the Penal Code, which covers assault, battery, and rape (U.S. Department of Justice, 2022).

This study found that refugee families, particularly those in the first generation (both female and male, as reported by participants), tend to strongly adhere to established social norms. One of the key challenges of forced migration for these communities is the low levels of acculturation, with refugee women struggling to integrate into a society that holds different norms, beliefs, and legal frameworks, frameworks that actively challenge traditional male dominance and the acceptance of interpersonal VAWC (Al-Modallal *et al.*, 2015; Tiruneh *et al.*, 2018).

Additionally, the findings of this study reveal that older refugee women's disapproval of domestic violence laws in South Africa is deeply rooted in their religious beliefs, scriptural misinterpretations (both Muslim and Christian), and cultural values. These beliefs and values, which heavily emphasise traditional gender roles within marriage and the family, significantly influence women's attitudinal acceptance of domestic violence. Research indicates that such attitudinal acceptance of domestic violence is reinforced by religious beliefs and social norms that dictate community standards of behaviour and morality (Godrati *et al.*, 2019; Rasool, 2015; Takyi and Lampsey, 2020). Social norms have been defined by Cislighi, Kanji and Heise (2018) as rules of action that are shared by people in a society and group and define what is normal and acceptable behaviour for members of that group.

This study highlights the critical role of religious beliefs in shaping women's acceptance of domestic violence, portraying their experiences as divine trials with promises of heavenly rewards. Such interpretations contribute to a belief system where men are viewed as inherently

violent, a trait purportedly sanctioned by God. The entrenchment of patriarchal societal norms, supported by both misinterpreted religious teachings and cultural beliefs, places refugee women in subservient roles, thereby normalising domestic violence within families. This normalisation is further reinforced by the societal status bestowed upon married women, compelling them to endure abuse as a testament to their faith and marital commitment. The use of prayer as a coping mechanism, offering temporary emotional relief, similar to the findings from a study on Black Muslim women's reliance on prayer amidst domestic violence, was found by Oyewuwo (2020).

The attitudinal acceptance and normalisation of domestic violence within refugee women's societies of origin and their communities in South Africa were found to be transmitted horizontally, affecting both victims and perpetrators. This unconscious transmission can be understood in the context of colonialism's impact on the intergenerational transmission of domestic violence. Through analysis of data and literature, it becomes apparent that colonial legacies contribute to the perpetuation of attitudes and norms surrounding domestic violence within these communities. While not explicitly highlighted in this study, the intergenerational effects of colonisation are apparent in older refugee women's normalisation and acceptance of domestic violence. This normalisation and acceptance can be seen as a consequence of historical and systemic factors rooted in colonial legacies, which have influenced the current patriarchal societal attitudes and behaviours surrounding violence within these communities (Burnette, 2015; Freire, 2000; Meyer *et al.*, 2021).

This was evident when Aseela²⁶, a 45-year-old Burundian refugee woman from the FGD, explained:

"I mean our society, this our refugee society, there are a lot of things, it is just that we are very good at covering things, we cover a number of things no one must lie to you, in our homes, we should thank God, we are grateful that God gave the white man the ability to build walls, they did well."

²⁶ The researcher has added this quote into this portion of the discussion as it provides evidence for her analysis. This is the only quote she had added in this discussion as it was not an emergent theme but rather an important interpretation of the data grounded in previous and current literature.

The participant in this discussion emphasised a crucial point regarding the challenges faced by historically colonised women, a theme evident in both communities. It reflects a broader societal attitude where colonisers are often viewed as saviours who brought development and civilisation to regions such as Burundi and the DRC. However, this perspective overlooks the profound social, community, and familial harm (historical trauma) caused by colonisation. This historical trauma manifests today in various forms, including ongoing armed conflicts in the DRC and, more recently, in Burundi, and the prevalent domestic violence (Makangara, 2024; Basse and Kwizera, 2017). Aseela closed her statement by explaining that “..otherwise if we were living in the forest, where we lived openly, we would’ve run away from each other”, emphasising the conscious and deliberate silencing and subjugation (horizontally transmitted in the first generation) that is prevalent in the two societies, particularly with regard to refugee family’s adherence to non-disclosure. This is in addition to the tendency of people to distance themselves from others’ domestic problems. This implies the normalisation of domestic violence within homes and wider societies, as well as in their communities. Several authors have discussed the enduring influence of colonialism on the intergenerational transmission of domestic violence, particularly regarding patriarchal, religious, and knowledge systems in both communities (Burnette and Cannon, 2014; Kwan, 2015, Mertens *et al.*, 2022; Ouzgane and Morell, 2005; Rowlands, 2021).

Interestingly, social norms and religious beliefs and values held by refugee women in the first generation, although attempts were made to transmit them vertically to their daughters through socialisation within the community and family, did not succeed (see Chapter 7). Rather younger refugee women understood the misuse of religion and cultural beliefs in the justification of VAWC. These findings underscore the complex interplay between faith, socio-cultural norms, and the experiences of domestic violence among refugee women. Consequently, the residual effects of colonialism have had an impact on both internalised and relational processes for Burundian and DRC women intertwined in their religious beliefs, which have not only increased their vulnerability to violence but also influenced the transmission of victimhood and perpetration of violence across (older refugee women and those before them) and within older refugee women populations. All this is through mechanisms of internalisation, silence, shame and socialisation within families, communities, and societies of origin.

This study emphasises the influence of collectivist cultural values, a concept within the literature on the intergenerational effects of colonialism, which exacerbates domestic violence

in refugee communities (Masson and Smith, 2019). This risk factor was found to influence the transmission and normalisation of domestic violence, as well as silence and perseverance, through mechanisms such as the internalisation of violent behaviours by men, silence, shame, re-enactment, and socialisation within the family and community. Refugee victims of domestic violence are often discouraged from reporting abuse to authorities due to fear of negative repercussions for the perpetrator and the potential for community stigmatisation and isolation. Kim (2012) explains that collectivist cultures, where family dynamics and values play a significant role in shaping individual behaviour, influence the intergenerational transmission of victim behaviours by the mother as observed in the home by younger refugee women in childhood. These victim behaviours were enacted by a few younger refugee women in adulthood in their own intimate relationships (Hou, 2016). In contrast, horizontal transmission occurs within first-generation refugee women who re-enact victim behaviours observed within the same generation, aided by their observations/training in relation to being a wife and mother by their own mothers and/or mother figures. According to Goliaei *et al.* (2023), stigmatisation and social isolation are consequences of societal and community acceptance of domestic violence and establish expectations that discourage the disclosure of domestic violence, leading to adverse reactions against those who break their silence. This phenomenon is rooted in the socialisation of women to prioritise family interests, emphasising unity, continuity, and reputation over individual well-being (Akangbe Tomisin, 2020; Rasool, 2015). Such a framework persists even in the face of dissatisfaction or harm within the relationship, ‘she must persevere’, highlighting the significant cultural and societal value placed on maintaining appearances (Balice *et al.*, 2019; Rasool, 2015).

6.4 Conclusion

This chapter delved into the second theme generated from the data analysis: “Intergenerational transmission of domestic violence” and its accompanying subtheme. The intimate connections between multiple risk factors and psychosocial mechanisms of transmission found across the four levels within the ecological framework outlined in the conceptual framework are emphasised. These risk factors and mechanisms of transmission were found to contribute to the transmission of various characteristics, with core characteristics being the normalisation and expectation of domestic violence (particularly intimate partner violence), silence and perseverance transmitted from the generation of older refugee women to their adult daughters

(Juan *et al.*, 2020). Transmission of these characteristics also occurred within the same generation of refugee women.

The following chapter presents findings related to the theme, “G2 Potential protective factors” and its accompanying subthemes. This chapter will focus on the protective factors and psychosocial mechanisms that may contribute to the interruption of cycles of domestic violence among refugee women, based on the study’s findings and later grounded in previous and current literature.

CHAPTER 7: G2 POTENTIAL PROTECTIVE FACTORS

7.1 Introduction

The previous chapter delved into the second theme of this study and its accompanying subtheme, which addressed several research questions concerning the risk factors and psychosocial mechanisms influencing the transmission of domestic violence within and across refugee families. This chapter focuses on the third theme derived from the data analysis: “G2 potential protective factors”, along with its accompanying subthemes. The objective of this chapter is to elucidate some of the potential protective factors identified in the data, primarily within the second generation (G2). The protective factors operating at various levels within the integrated ecological model are highlighted to explore their potential to interrupt the intergenerational transmission of domestic violence among refugee women (Ehrensaft and Langhinrichsen-Rohling, 2020). Notably, the findings in this chapter are derived largely from data provided by young refugee women participants (G2) and one older woman (see Educational attainment

The aim of this chapter is to highlight potential protective factors identified in the study that could be used to conceptualise and develop evidence-based interventions (see Chapter 8). These potential protective factors offer new insights into predicting the likelihood of young refugee women breaking the cycles of intimate partner violence victimhood observed in their own intimate relationships (romantic or marital) and mitigating the perpetuation of child maltreatment with their own children, as experienced in their own childhoods. Similar to Chapters 5 and 6, this chapter is divided into two main sections. Part 1 provides an overview of the theme of protective factors, followed by an in-depth exploration of the subthemes, including ontogenic, microsystemic, exosystemic, and macrosystemic protective factors, categorised according to the ecological model (Heise, 1998). Because of the lack of evidence for psychosocial mechanisms, this chapter only discusses certain potential protective factors within the above-mentioned levels. Primarily derived from G2 data, this theme integrates these subthemes into the study’s conceptual framework. Part 2 then delves into a detailed discussion of findings in relation to the conceptual framework and existing literature.

7.2 Theme 3: The protective factors at multiple levels

This third and final theme of the study sheds light on potential protective factors identified by G2 participants, particularly those who were born or arrived in South Africa as babies, toddlers or young children²⁷ (see Annexure N). These potential protective factors could play a crucial role in preventing future experiences of intimate partner violence victimisation, as well as the perpetuation of child maltreatment with their own children. According to Ridings, Beasley and Silovsky (2017), protective factors are factors that mitigate the risk of domestic violence. The protective factors in this study are described as ‘potential’ because many of them are desires that younger refugee women in this study are hoping to achieve. Additionally, many of these potential protective factors are also widely cited in current literature on protective factors against domestic violence (particularly intimate partner violence) and its transmission across future generations (Genç *et al.*, 2018; Madigan *et al.*, 2019; Ridings *et al.*, 2017).

7.2.1 Ontogenic protective factors

Within the ontogenic system, two main potential individual protective factors against domestic violence that could prevent young refugee women’s experiences of intimate partner violence were identified within the ontogenic system (especially in those who did not report victimhood). These factors could also possibly interrupt the transmission of domestic violence from their generation (G2) to future generations and within the generation. These protective factors include the personal rejection of domestic violence and higher educational attainment. As previously stated in Chapter 6, these protective factors stem from childhood exposure to domestic violence. Below, a detailed analysis and interpretation of each characteristic within this system is conducted.

Rejection of domestic violence

Many G2 participants, particularly those who were unmarried, rejected socio-cultural norms and religious beliefs that normalise and perpetuate domestic violence. Many G2 participants indicated in Chapters 5 and 6 that they were exposed to domestic violence (specifically intimate partner violence) and consequently internalised it as a normal aspect of family life, with some even revealing that they expected it in their own relationships. This study still found that all of

²⁷ This includes children between the ages of 3-5

them held negative attitudes towards domestic violence, where they rejected all forms of domestic violence. This rejection stems from observing the pain and suffering endured by their mothers and other refugee women (G1) within their respective communities who adhere to rigid socio-cultural norms and misinterpreted religious beliefs, which made them susceptible to abuse. The G2 participants' rejection of domestic violence could be considered a protective factor as it demonstrates their rejection of this harmful practice, which they have been socialised to via intergenerational exposure and socialisation by their mothers. The quote below by Zuri (G2) explains this phenomenon well; Zuri reveals how young refugee women (G2) are being socialised to accept abuse as a normal part of being a woman, which she rejects.

"...they're raising us and they are telling us about that what woman is, what womanhood is about. I think you need to change some of that like some of those cultural comments and statements and views are very, it's very outdated yeah I think a lot of it also almost you're told oh no that's that being a woman you see you know you must be strong and you know you have to persevere you know marriage is hard. And you know yes of course life is hard but being abused, being hit is not something that you should endure that is not that should not be justified as saying that that is part of womanhood." (Zuri, DRC, age 20)

This socialisation, which resulted in Zuri's internalisation of violent behaviours by male partners as normal, led to her experiences of psychological and emotional abuse and digital intimate partner violence by her boyfriend. It is important to remember that many G1 participants did not discuss domestic violence with their daughters explicitly. However, some G1 participants explained that they only explain to their daughters that they should persevere in marriage, as the epitome of womanhood, or as others, such as Zuri's mother Candice explained, that Zuri and the other girls (G2) should wait and see what life in a relationship is really like.

"Ah, I don't talk to them about it much, but when they ask I tell them what my mother told me, that they must wait and see it for themselves, you are growing, you're a woman you will see it for yourselves." (Candice, DRC, age 36)

The strong rejection of domestic violence, particularly by G2 participants' opposition to their socialisation by their mothers, is detailed well in the quote below by Avril, who insists that

mothers need to give their daughters better advice and guidance in relation to domestic violence.

“They could give their daughter better advise honestly; they could lead by example as well. You know when you’re in an abusive relationship you have to leave because he’s never going to change, there is no way an abusive man is going to change, you know. So, by you putting yourself first, you are also teaching me as your daughter to put myself first if I was in that situation. Now I have a mom that stays in a relationship that’s like that then what am I supposed to do? What am I looking up to? That means that I should also stay because my mom stayed, it’s because of her kids, no she can’t leave her kids and stuff like that, you know I would obviously not mind if you put yourself first. Be honest with your kids don’t tell them that when a man disciplines you he is showing you love, no that’s lies no it’s just wrong.” (Avril, DRC, age 22)

Avril’s quote emphasises the belief, shared by all G2 participants, that prioritising personal well-being over marital status can prevent them from being able to endure abusive marriages like their mothers. Avril advocates for women to place their own well-being first, challenging the socio-cultural norms and acceptance of domestic violence. Avril also argued that leaving abusive partners not only protects the women themselves but also teaches their daughters about the unacceptability of spousal abuse, highlighting that abusive behaviour is unlikely to change. Avril notes that, despite some refugee mothers staying in abusive relationships for their children like her mother, she would have preferred her mother to leave her father for her own well-being, stating that equating abuse with love is harmful and fosters unhealthy romantic relationship perceptions among young women (G2) like herself.

Evidently, there was some contradiction between this finding, which is a protective factor, and findings in Chapter 6, which reveals that many G2 participants had normalised and expected intimate partner violence as the norm in relationships. However, Thompson (2024) explains that there are different possible ways to think about the same thing. Although G2 participants have normalised the occurrence of domestic violence, particularly in refugee homes within their communities, this does not necessarily mean that they consider it to be a good and acceptable practice. This is why many of them expressed a strong intention to change this socialisation pattern with their own children, especially their daughters, underscoring a shift

towards interrupting the transmission of domestic violence, especially characteristics such as normalisation, attitudinal acceptance, and expectation of intimate partner violence.

“I will teach her to stand up for herself, the moment a man hits her, haibo run away, because once it starts like, once it happens the first time and she leaves him (did not do anything about it), of course it will happen again, it will repeat itself, so once it happens, girl take your bags and leave. Take your bags pack them and leave, go. So, for me once a man hits you, I don’t care if it’s the second time but the first time you got to pack your bags... For my male child, uhm he mustn’t abuse women, respect women. Religion teaches us to respect women, uhm and some other uhm, these days sometimes some things teaches us to respect women.” (Ghaliya, Burundi, age 19)

This quote by Ghaliyah reveals how vicarious learning has informed G2 participants’ subjective understandings and the meanings they place on their exposure to domestic violence. This subsequently results in attitudinal changes that could be a protective factor, as these changes demonstrate their willingness to change narratives around domestic violence, which were found to be a risk factor for domestic violence and its intergenerational transmission in Chapter 6 (Vikander and Strand, 2023). These changes have the potential to interrupt the transmission of domestic violence within the second generation and across future generations if strengthened by other protective factors within this study.

Educational attainment

Compared to their mothers, this study found that G2 participants had higher levels of educational attainment. Of the 30 G2 participants, three ($n=3$) participants had dropped out of primary school, four ($n=4$) participants had dropped out of high school, six ($n=6$) participants were in their final year of high school; ten ($n=10$) participants had completed high school, and seven ($n=7$) participants were at a tertiary institution. The high school dropout rates in G2 participants were due to various factors, largely as a consequence of violence within their homes, as detailed by some G2 participants. This included substance use and subsequent behavioural issues, which negatively affected the educational outcomes of participants such as Wadida and Sanctifiée, who did not complete high school (referenced in Chapter 5). In contrast, others related their dropout to factors such as poverty or ill-health.

Although some G2 participants did not get the opportunity to continue with their education, their mothers desired their daughters to attain higher levels of education than they did and obtain professional degrees. This focus on education is the primary means of communication about domestic violence between G1 participants and their daughters. Participants believed that education acts as a deterrent to domestic violence by fostering independence and increasing the likelihood of their daughters being valued and respected by their future husbands. This is in contrast to the devaluation and disrespect they (G1s) currently face in their homes because of their low educational attainment. The G1 participants argue that education enables their daughters to escape potentially abusive marriages, leading to a happier life where being educated, employed, and financially independent affords them the autonomy to choose suitable life partners.

“I would advise them to not rush into marriage, they should study and focus on their futures. If they agree to it, I wouldn’t them to rush into marriage they should develop themselves first focus on their futures. There are men who before marriage will tell you that he’ll take care of you but once he marries you and you’re in his home he starts abusing you, but if you have your education, your own work, a man respects you, unlike those who do not have a future you don’t have an education, you’re completely dependent on him. There is a big difference especially in this our Swahili community there’s a big problem, you must focus on your education and develop yourself otherwise you’ll face the same changes we do. That’s what I will say.” (Lamees, Burundi, age 40)

“I teach them a lot, I tell them that in life, life is difficult. Like this one that just got a baby, don’t rush into relationships. Men are around they won’t disappear, you can choose to get one even if you’re 50, you’ll find one. Get your education, your future depends on it, it’s all based on your own hard work, even this little one. The 11-year-old, I tell her get your education, life your future depends on your education, if you have your education you’ll find a husband, you’ll find a job, but if you don’t study, and a man marries you, he knows that even if I decide to leave her she will have nowhere to run to, to find a job. Eeh, I tell them, I explain to them that married life isn’t something to rush into, yeah I tell them.” (Lujain, Burundi, age 39)

The aforementioned statements from Lamees and Lujain underline the importance of not rushing into marriage and focusing on personal development and education first. These narratives underscore the belief that education provides a pathway to financial independence, reducing vulnerability to abuse and increasing women's autonomy. The G1 participants thereby stress the crucial role of education in empowering their daughters, insisting on its importance for securing a better and more respected position in society and within future relationships.

Many G1 participants expressed regret over their daughters' missed educational opportunities, wishing they had pursued further studies.

"You know what although my daughter is already old enough and she's older one thing I wish was that that she had studied and that's why I'm pushing my younger one to make sure that she studies because although Islam permits a woman to sit at home and they let the husband provide for her. The problem is that many use that as an excuse to abuse women. Women are going through so much at the hands of their husbands. You'll find that sometimes women face so many difficulties, because you assume that when you get married things are gonna be roses and you're gonna be pampered and treated like a baby but when you get into a marriage, you realise that married life is really difficult. So, I really did want my child to study something. You sit down on your prayer mat and you're just grateful to God that you are alive and that you do not have any debt. because this other thing you know when you don't have money and you need things and you're completely dependent on someone some people take on debt to try and get what they need so if you sit down on your prayer mat and you do not have debt you will forget everything else when praying to God that you do not have debt and with prayer you need to be focused on God but unfortunately when you're in abusive home is just all looking thank God for is just all the little things so yeah."

(Shukriyah, Burundi, age 47)

Shukriyah's quote reflects these sentiments, highlighting her regret about her daughter's limited education and the broader implications for women who experience abuse, especially in terms of financial dependence and vulnerability. She further discussed the stark contrast between expectations of marital life and its harsh realities, emphasising the difficulties faced by women who, due to financial dependency and societal pressures, often endure abusive

relationships. Shukriyah points out the burden of debt as a significant issue for many uneducated, financially dependent refugee women who are victims of abuse, underscoring the critical importance of education and financial independence for women's autonomy and safety. Although attaining higher levels of education appears to be the desire of many G1 participants, many of their children had completed high school, and many were in tertiary education. Thus, higher levels of education may be a protective factor against potential experiences of intimate partner violence when they are in romantic or marital relationships.

7.2.2 *Microsystemic protective factors*

Within the microsystem, one key protective factor evident in this study was that all G2 participants desired better interpersonal relationships with their spouses and children. This was in contrast to the relationship that they observed between their parents and many of their personal relationships with their own mothers. The desire to have open communication about domestic violence and other issues surrounding their future children presented as a potential protective factor against the transmission of intimate partner violence from the second generation to future generations. This potential protective factor is indicative of the important role that positive parenting by mothers has in reducing the vulnerability of young women to intimate partner violence (Vikander and Strand, 2023).

Desired relationships with spouses and own children

Derived from personal observations of their mothers' experiences of abuse, many G2 participants learned vicariously about the negative consequences of unhealthy and harmful relationships between their parents. They also recognised how interparental partner violence made them vulnerable to maltreatment as children, negatively impacting their relationships with their parents, as discussed in Chapter 5. Aware of the severe implications of domestic violence, G2 participants expressed a strong desire for healthier relationships with their children (or future children for many of the G2 participants). Motivated by these observations, G2 participants revealed a strong desire to foster healthier relationships with their children, aiming to create a nurturing and open home environment that starkly contrasts their own upbringing.

"I want my kids to be open with me and the father as well so that when they have issues or when they encounter a problem they can be open and honest with me or us as their parents. Because you know what? Let's be honest there are times when

as a child you found yourself in situations where you needed to speak to someone and the first person you went to, was someone other than your parent and maybe going to your parents would have been the best thing for you to have done. But because of the way in which you guys were raised where you are not allowed or where you are not open with your parents, other more serious issues arose. As a parent you have to um carry yourself like a parent you have to be open, you have to create an environment where you are open enough for your children to come and tell you things when they need to the most. You can't always be serious you can't always be rigid in your ways it doesn't work out." (Intisar, Burundi, age 27)

The quote above emphasises the importance of open communication within the family, advocating for a parenting approach that encourages children to freely discuss their problems. This perspective underlines the necessity for parents to foster an environment of trust and openness, avoiding the rigidity that can lead to further issues. Such dialogues not only inform children's internal working models of intimate and familial relationships but also highlight the significance of communication in nurturing healthier, more securely attached relationships throughout their lives. Similarly, Wadida shared her personal resolve for a future relationship that is different from what she observed in her family in the quote below, where she describes her desire for a caring and supportive husband who values family and maintains a healthy relationship with her and their future daughter.

"Ah I really told myself, I always pray to God that I never have a husband my like stepdad or my dad. I always want a loving husband, a husband that cares about me. Knows family and supports his family, and a relationship with me and my daughter." (Wadida, Burundi, age 21)

These accounts stress the impact of vicarious reinforcement in shaping G2 participants' perceptions and beliefs of domestic violence and its consequences, motivating them to advocate for positive changes in their family dynamics. The G2 participants envision providing their children with a secure and happy home environment that encourages free communication and ensures their children feel loved and respected, starkly contrasting their familial experiences. By advocating for these protective factors, G2 participants may potentially interrupt the transmission of domestic violence from their generation to the next, fostering environments where secure attachments and healthy interparental relationships flourish, ultimately

contributing to the discontinuity of domestic violence across generations. These were aspirations for many of the G2 participants, including those who reported having been in violent intimate relationships, such as Abir, Mawiya, Ghusoun, and Zuri. However, other G2 participants did not delve into their relationship statuses or their nature. Intisar was the only participant who revealed that she had a good relationship with her husband. Her aspiration for a safe and non-violent home had become a reality. Intisar credits this achievement to the establishment of boundaries and mutual understanding that she initiated between herself and her husband.

“I even tell my husband that if I am wrong, please tell, don’t shout at me or even hold things in. Because we are both adults I want to be told in a respectful manner, because if he does that then I will hate him or I myself might even get to a point where I would also want to shout at him, so why get to the point where we do that to each other when we are adults...I’ve been married for over a year now and there has been absolutely no problems at all” (Intisar, Burundi, age 27)

The G2 participants’ rejection of domestic violence, particularly violent partners, sought instead relationships grounded in respect, understanding, and mutual support. Zeenat, from the DRC, outlines her criteria for a partner (similar to all G2 participants), underlining the importance of responsibility, family orientation, and a deep emotional connection:

“I think because of what I went through, I think someone who is definitely not violent, I cannot stand a violent man... So someone who’s responsible, because someone might be well off but not irresponsible they don’t see the need to take care of you or buy clothes for kids or things like that so someone who is responsible, someone who is family orientated you know. Someone who sees me as someone who’s way deeper than anything physical or you know. Like I’m like also like a friendship connection you know, so yeah those are the like main things.” (Zeenat, DRC, age 22)

Their shared vision for the future includes forming stronger, secure bonds with their children, especially their daughters, and choosing partners who contribute positively to a harmonious family dynamic. By desiring these supportive interpersonal familial structures, G2 participants might be able to interrupt the transmission of domestic violence within their own homes,

particularly the transmission of core characteristics identified in Chapter 6 that are associated with the transmission of domestic violence in refugee families.

Additionally, some G2 participants revealed the significance of religion in shaping family dynamics and addressing domestic violence. They advocate for partners who share their religious values, believing that a God-centred relationship can provide a stable and loving foundation for their families. Zuri passionately describes her vision for a harmonious home rooted in faith and mutual respect in the quote below:

“..it’s important to find a partner who loves me and I love him you know, a God-centred man, from a centred family...committed to building a family based off of that, where everyone plays a role...you all contribute to all help each other and yeah where there is a love of God and you know healthy and you also there’s stability.” (Zuri, DRC, age 20)

It is important to note that the study found that G2 participants understood that religious teachings are sometimes distorted to justify or perpetuate domestic violence. Some G2 participants revealed that there are discrepancies between true religious teachings and socio-cultural practices that are used to empower men at the expense of women. Ghaliyah explains this in the quote below from an Islamic perspective.

“I feel like we go more with cultural these days even though religion, Islam, Islam goes against domestic violence, woman abuse and all that but we just go with cultural. Coz, cultural is normally, normally uhm the man are more dominant so I feel dominance, that’s what mainly drives domestic violence in a home, yeah domestic violence. yeah, the father of the home, so everything is the father, decisions the father, yeah, because he is the father, the head of the home, its more cultural. Religious, its, I feel as if people were to aah okay, if Muslim refugees went with uhm aah religion more, I don’t think we would be facing so much domestic violence, coz it’s the fear of God...” (Ghaliyah, Burundi, age 19)

Many G1 participants use religion in addition to their cultural norms and the acceptance of domestic violence as reasons to remain in abusive marriages (as referenced in Chapter 6). The quotes above reveal a complex interplay between religion, culture, and domestic violence, where G2 participants recognise the potential of religion in fostering positive family environments. However, G2 participants critique the cultural (patriarchal) misinterpretation of

religious texts that contribute to domestic violence in refugee families. The desire for faith-aligned relationships with spouses reflects a broader hope for interrupting the transmission of domestic violence and building healthier domestic relationships for future generations.

7.2.3 Exosystemic protective factors

Within the exosystem, two potential protective factors against domestic violence, which could potentially interrupt the transmission of domestic violence from the second generation of refugee women to future generations, as well as within generations were identified. If these potential protective factors are realised within the two refugee communities, they may help prevent domestic violence that could be experienced by second-generation refugee women and interrupt its transmission to the next generation. The two potential protective factors identified within this system are namely: 1) Women-led sanctions of domestic violence and 2) Victim support systems and networks.

Women-led sanctions on domestic violence

One of the most important potential protective factors within the community that was advocated for by G2 participants was their desire for women to place sanctions against domestic violence. In the quote below, Zeenat emphasises the concept of women uniting to confront domestic violence, especially physical and sexual violence within homes.

“Uh, I would say just support each other...But why are you as a woman laughing about it? Why are you causing someone more pain then they’re already in, you know?... So, if they had a place that wasn’t judgement, because if we are going to talk about sexual violence we are going to talk about all these things, we need to be in an environment where we gonna feel safe...You hear that so and so has been beaten up, a group of women should go there, a lot of us when that happens it’s a group of men that come. Papa so and so and papa so and so and they will sit your dad down and be like yoh don’t do that and whatever, sometimes they need to see it from a woman that the women are mad having their sister come.” (Zeenat, DRC, age 22)

The participant points out that the current response to domestic violence, especially intimate partner violence, often involves men gathering to address the perpetrator, underscoring the need for women to provide support to each other and play a more active role in condemning

men's abusive behaviours. Zeenat advocates for creating judgement-free, safe spaces for discussions and support against sexual violence, highlighting the importance of women's solidarity in these situations. She suggests that when a woman is known to be suffering from domestic violence, a collective of women should intervene, a departure from the traditional male-dominated mediation process that currently exists in refugee communities.

Zeenat advocates for the creation of a strong sisterhood among refugee women, spanning both first and second generations in both communities. This network would serve as a vital support system for victims who lack familial or parental support in South Africa. This sisterhood should aim to assist the victims of domestic violence rather than perpetuating the norm of VAWC by men and the expectation for women to endure such treatment. The participant calls for an end to judgement among women, urging them to support each other in creating safe environments where victims can leave abusive marriages without facing stigma. This approach challenges the deeply ingrained cultural expectations of perseverance and endurance in the face of marital difficulties, advocating for a more supportive and empathetic community response to domestic violence.

“If he is not taking responsibility women must be like you, you need to step up your game and start helping our sister because she’s going through so much because she can’t do this on her own. If a marriage is hard, we need to create environments where a woman can leave, and she won’t be judged. Because a lot of us, our parents it’s all about (vumiliya) perseverance. In the Zulu’s perseverance (bekezela)...they need to stop judging each other and form a sisterhood and be supportive and yeah stop judging and create a safe space for each other.” (Zeenat, DRC, age 22)

This support network is closely linked to the second potential protective factor identified within this level, which is explored below.

Victim support social networks

Support networks are frequently identified as protective factors against domestic violence (Ridings *et al.*, 2017; Vikander and Strand, 2022; Yakubovich *et al.*, 2018). In this study, the significance attributed by G2 participants to having social support is regarded as a protective factor, capable of both reducing and potentially interrupting the transmission of domestic violence within this generation and across future generations of refugee women. In contrast to G1 participants, who expressed reluctance to seek support outside their immediate family or

religious circles, G2 participants from both countries emphasised the need for women to unite in support and advocacy against domestic violence. This approach is seen as a community-level intervention that could significantly contribute to preventing the perpetuation of domestic violence in refugee families.

“Yeah, there is a way we can help each other. You can sit and listen to someone’s problems and then you can maybe find a way in which you can help that person with the issues that they are going through. Because honestly, I highly recommend it when it comes to domestic violence, we need to understand that it causes major psychological problems to victims and that’s the truth. The way in which you are going to try and help them deal with the issues, especially the psychological aspect, we’re going to help give them strength and to overcome their mental state and become stronger to face the challenges that they are currently facing in their marriage.” (Intisar, Burundi, age 27)

“I feel like what they can do is, listen. Listening is very important, if someone has something to say just listen and trust, believe what the person is saying and then because there is always two sides to a story, there’s never one. If you listen to this person and you feel that this person is telling lies, go speak to the other person and then you will see what’s going on. But I feel like refugees always, always take one sided, they never ever listen to the other person, yeah.” (Wadida, Burundi, age 21)

In the above quote, Intisar highlights the power of communal support, suggesting that simply listening to someone’s problems and offering help can positively impact the victim’s psychological well-being and increase resilience against the challenges posed by domestic violence in marriage. While Wadida’s quote stresses the importance of listening and trusting as crucial first steps in understanding and addressing issues of domestic violence, she also strongly criticises the tendency of refugee community members (both men and women) to adopt a one-sided perspective without fully engaging with the complexities of the victims’ situations. The lack of social support outlined in Chapter 6 was reported by both generations and communities. In her interview, Kammla highlighted the absence of dedicated spaces where refugee women can seek refuge from abusive relationships, especially those who are financially dependent on their partners. She advocated for the establishment of shelters as crucial support

structures, enabling these women to share their experiences of abuse, receive professional guidance, and start the healing process from their traumatic pasts.

“I have always thought no maybe open a place that is for women, women who have been beaten up, women who have been on drugs and stuff like that because of what’s going on inside their home, you know sometimes your husband came home late, he came drunk, he was with his friends out drinking, you ask him where he is coming from but he don’t want to tell you that’s how you get beaten up you know. You stay in that relationship because you have no choice, you’re not independent, you have no choice you are dependent on the guy so you stay so as for me what, I will say is that, like know we need a place for women to have a place where they can talk and say what’s going on, take out what’s in your chest, this is what has been happening to me I can’t stay in this relationship, you know.” (Kammla, Burundi, age 18)

In the above quote, Kammla described such a place as a sanctuary for women who have suffered physical abuse, substance abuse, and other forms of domestic violence due to the volatile environments in their homes. She stressed the importance of having a safe space for women to express their struggles and seek help, underscoring the necessity of independence from abusive relationships and the empowerment that comes from community support and professional assistance.

Many G2 participants emphasised the crucial role of speaking out and reporting domestic violence incidents, pointing out that such actions enable victims to access professional counselling and support services. Highlighting the importance of addressing abuse openly, they noted that discussing these experiences could significantly mitigate the adverse effects of domestic violence on both the victims and their families.

“I think woman’s need to report what is happening, like report you need to report what is happening, you need to open yourself up like speak more about it. Check for a relative to talk about it maybe if you are shy to go to the police station, maybe you can leave your partner and find another one that will treat you well enough before the other one.” (Ninziza, Burundi, age 18)

“They must speak up, go seek counselling because a lot of them they just, you know when you’re just swallowing a lot of things it just builds up and you know it affects

you and your future generations. You are having kids like now you are living in the same but if you stop it, it won't carry on.” (Kaisa, DRC, age 22)

The quote from Ninziza stresses the necessity for women to report their situations, suggesting that disclosing abuse could lead to finding better support systems or safer relationships. Kaisa's quote underscores the importance of seeking counselling, warning against the dangers of internalising trauma and its potential to affect future generations. By breaking the cycles of silence, the impact of domestic violence could be significantly reduced.

Interestingly, Abir observed the absence of social support within her Congolese community, recognising the importance of such support for victims of intimate partner violence. In response, she and her friends established a non-profit organisation (NGO) providing a safe and empathetic space where individuals who experienced violence can seek help.

“we started an NGO but the NGO is just starting it's just starting now it's like just the tribal woman first so it's mostly the Babembe tribe and they're from actually from Congo and our aim is more to creating an awareness for the woman to make a community for the woman where they feel they feel free to come and talk to us about their problems... there is a lot of things that happen out there, there's a lot of ladies that we see outside that they are married but indoors actually not married. But they hold that prestige, they hold on so that the society looks at them as husband and wife as being married but inside I've already separated like two years three years ago. She lives her own life with her kids and her husband has another concubine somewhere else but at the end of it they come together in the house and they've decided okay the woman has actually as submitted to I'm just gonna be here so that I keep my honour outside so ladies can see that I'm still married.”
(Abir, DRC, age 27)

The quote above by the participant details some of the challenges that women experience in their marital homes, as well as the needs of refugee women from her community (including those from Burundi). It can be concluded that her decision to open this NGO stems from her own personal experiences of intimate partner violence due to her husband and the lack of social support that she experienced.

The perspectives of participants at this level underscore the critical role of creating a supportive, non-judgemental, and empathetic community environment where women can

openly discuss their experiences of violence and collaborate on strategies for mutual assistance (Rasool, 2015). This approach not only fosters a stronger sense of community among refugee women but also contributes to a broader effort to challenge and change the cultural norms that enable domestic violence (Rasool, 2015).

7.2.4 *Macrosystemic protective factors*

Within the macrosystem, two potential protective factors against domestic violence, which could potentially interrupt the transmission of domestic violence from the second generation of refugee women to future generations as well as within generations, were identified. These potential protective factors identified within this system are namely: 1) educational awareness and 2) social media programmes.

Educational awareness programmes

An important societal factor found to be a protective factor for some G2 participants was GBV programmes in South African schools run by the Department of Basic Education (DBE). These programmes carried out at school helped some G2 participants become aware of GBV in its different forms, particularly domestic violence. These programmes significantly enhanced the participants' understanding of domestic violence, contributing to a broader awareness at a younger age. These factors could potentially reduce experiences of domestic violence and interrupt its transmission across generations.

“Well at first, I never knew that that there was something called domestic violence until actually it was something that was happening at home but it’s not something that I was aware of which I was told at school then I was like I realised that so that was the domestic violence you know... I thought it was normal, come on I mean I mean we foreigners so yeah it’s normal I mean if your wife is wrong she can you know get into an altercation you know get physical it’s all good yeah until I realised that it’s not actually good” (Sanctifiée, DRC, age 21)

The quote from Sanctifiée highlights the role of the GBV programmes implemented by the DBE on refugee children's awareness of domestic violence. Through these programmes, children are educated to recognise that the violent behaviours prevalent in many refugee homes are forms of domestic violence, a subtype of VAWC/GBV, and should not be considered a normal aspect of domestic or family life. Increasing their acculturation, where refugee children

learn what socially acceptable interpersonal behaviours are, particularly within domestic settings. These programmes challenge the normalisation of such violence, fostering a more informed and protective environment for refugee children (G2) and their future generations.

Social media

An interesting macrosystemic protective factor identified within this level was that some G2 participants view social media, which increases awareness of the impacts of domestic violence and provides social support for victims of violence, as a potential protective factor. This subsequently affects some G2 participants' perceptions of domestic violence, which contrasts with their socialisation from their mothers and communities that normalise and accept domestic violence, particularly intimate partner violence. These changes in perceptions influence shifting attitudes, which can account for some of the G2 participants' rejection of domestic violence, which may interrupt the transmission of domestic violence in future generations. These G2 participants (some) highlighted how social media can raise awareness about domestic violence and serve as a means to mobilise support for refugee women and children who are victims of domestic violence, especially those who may not be aware of domestic violence or lack adequate support from their families or communities. This is particularly relevant given the high levels of social isolation, the risk of victim retraumatisation and stigmatisation, and the acceptance and normalisation of domestic violence by their families and communities.

“ I feel like people that’s one thing people can speak more about it to be more in this yeah other than that or maybe you can make something you don’t have to speak about it you can to create awareness in a very different way where you I don’t know through social media yeah where you can influence that’s I mean that’s another way of getting influence yeah but this generation I mean they find it easier it’s like the easier way. ” (Falak, Burundi, age 20)

“You can go to the police station and say he beat me up, they would just laugh at you and yeah that’s that, and then you move on and take it to social media people can see and actually support you through social media, but it’s just that they can’t do anything for you. So, I just feel like it’s just all the same throughout, no matter what culture you are its all the same. ” (Avril, DRC, age 22)

The above quotes by Avril and Falak explain the power of social media as a tool for visibility and support. While noting that the tool has its limitations, they highlight social media’s capacity

to connect victims with wider communities within South Africa, beyond the confines of their communities. Additionally, social media can also be used as an empowerment tool, particularly for second-generation refugee women living in South Africa.

“I think and like all those things have you know there I’m learning a lot and especially now like on TV and on social media people are talking about these things especially like as young people I think we’re becoming more vocal about it so I’m glad that there’s a change it’s different to like my parents or parents’ generation yeah where we’re more open what this things I just hope things change...” (Zuri, DRC, age 20)

Zuri, in the quote above, highlights how social media empowers victims of domestic violence, particularly younger refugee victims (G2), to find their voices and candidly discuss their abuse experiences. This is something they might not take part in, especially with their mothers or others within refugee communities. These communities often cling tightly to socio-cultural norms, beliefs, and religious misinterpretations that leave women and girls (boys included) highly susceptible to domestic violence. Social media, thus, provides a platform for victims to share their stories and seek support, challenging the silence imposed by traditional expectations.

7.3 Discussion

The findings of this study offer a unique contribution to literature by identifying protective factors that have the potential to prevent and interrupt the transmission of domestic violence from one generation of refugee women to the next. Specifically, it explores the potential protective factors that could prevent intimate partner violence victimisation among second-generation refugee women from Burundi and the DRC residing in Durban, South Africa. Moreover, these potential protective factors hold promise for preventing child maltreatment and childhood exposure to interparent violence within their own nuclear families. These insights primarily emanate from young refugee women who were either born in South Africa or arrived in the country as infants or young children.

The protective factors predominantly reported include participants’ attitudinal rejection of domestic violence, which consequently informed other protective factors such as personal aspirations for their families and communities. It was observed that if these protective factors are realised, they may prevent young refugee women from experiencing intimate partner

violence and shield their children from exposure to domestic violence. Therefore, the identified protective factors are termed ‘potential’ protective factors across the integrated ecological model. However, it is important to note that this study did not provide substantial evidence to confirm the protective nature of these factors in preventing domestic violence within the current generation. Furthermore, there was insufficient evidence to suggest the interruption of domestic violence transmission within this generation or future generations, as this was not the focus of the study. Nevertheless, the findings suggest that if these potential protective factors are actualised by the second generation (G2) of refugee women, they could potentially interrupt the transmission of domestic violence within the generation and to future generations (Ehrensaft and Langhinrichsen-Rohling, 2020).

These findings are discussed within each respective ecological level to provide a comprehensive understanding of their implications.

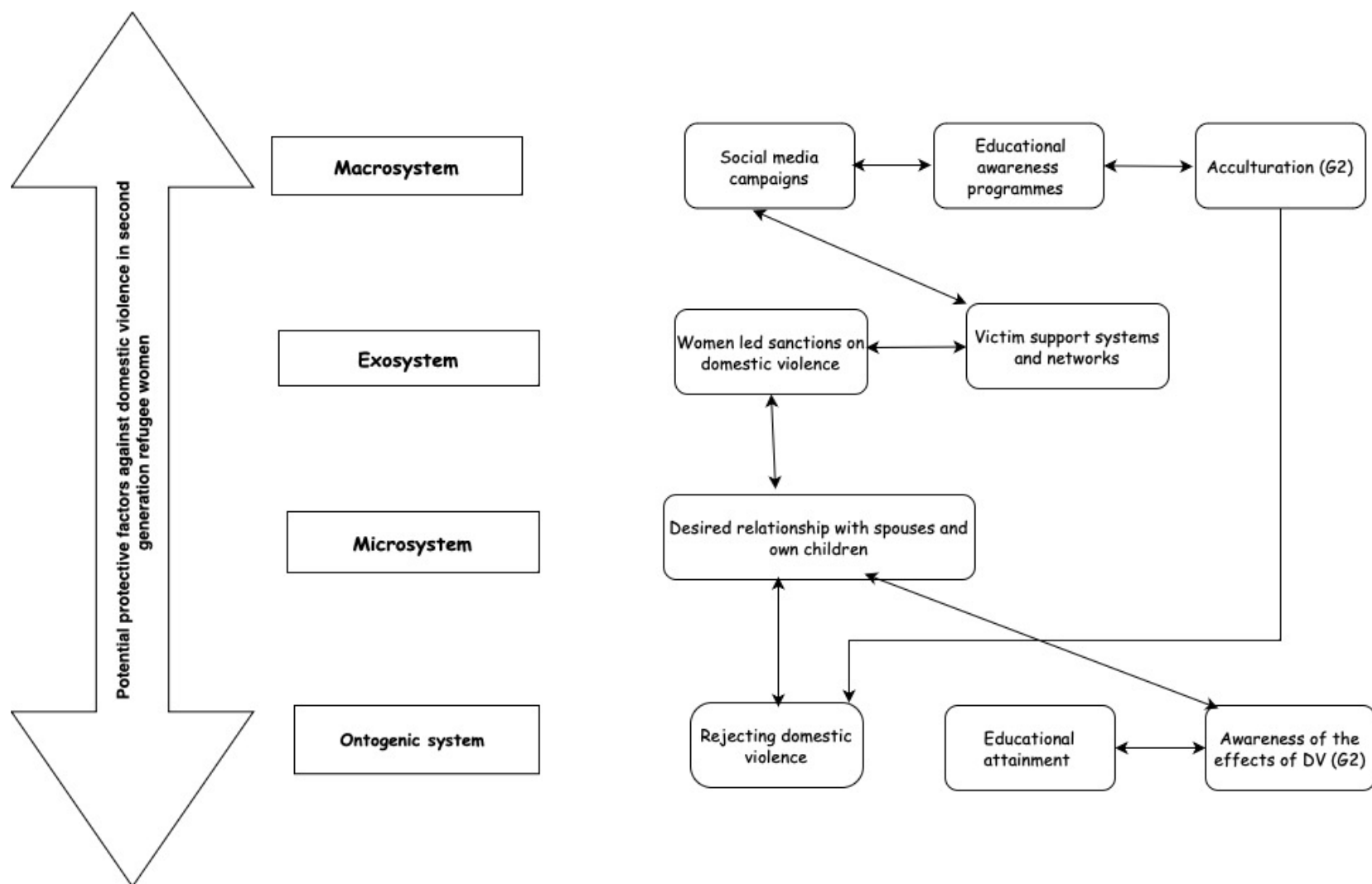


Figure 10: Protective factors associated with the discontinuity of domestic violence across generations in refugee families

7.3.1 *Ontogenic protective factors*

This study identified that within the ontogenic system, the primary protective factors potentially shielding second-generation refugee women from domestic violence, particularly intimate partner violence, revolve around their attitudinal rejection of such violence. The young refugee women examined in this study demonstrated a keen understanding of the consequences of domestic violence, often observed within their own households. Consequently, the younger participants developed a strong aversion to domestic violence (Copp *et al.*, 2019). This rejection, particularly of intimate partner violence, can be attributed to cognitive evaluations of the consequences of their mothers' or mother figures' victim behaviours, as described by the social learning theory (Bandura, 1973). Remarkably, this rejection persisted despite attempts by their mothers and other refugee women in their communities to socialise them into accepting intimate partner violence as a norm.

Additionally, the socialisation of young refugee women within the broader South African society, especially through educational awareness programmes, emerged as a significant factor contributing to the attitudinal rejection of domestic violence. Socialisation within the broader South African society is explained as the phenomenon of acculturation, which refers to the adaptation and assimilation of South African values and attitudes that unequivocally condemn all forms of domestic violence (Borrego, Ortiz-González and Gissandaner, 2019). Acculturation is comprehensively discussed within the section on macrosystem protective factors. Consistent with these findings, a study by Hanafi *et al.* (2022) revealed similar trends among young people in Malaysia. The study found that 50.4% of its 405 respondents expressed attitudinal rejection of intimate partner violence, while 58.8% rejected intimate partner violence behaviours.

Additionally, another potential protective factor within this level was the higher levels of educational attainment among younger refugee women compared to their mothers. Although a significant number of older refugee women did not achieve high levels of education, many expressed a desire for their daughters to attain higher education, believing it would shield them from domestic violence. It is noteworthy that while higher educational attainment is generally considered a protective factor by participants in both generations in the present and previous studies (Erten and Kerkin, 2020; Henke and Hsu, 2018; Okumu *et al.*, 2022; Zhou, Li and Su, 2021), the few participants who reported having attained high levels of education still disclosed experiencing intimate partner violence by their husbands, similar to women with lower levels

of education. This was attributed to the attitudinal acceptance, normalisation, and expectations of domestic violence by G1 participants, rendering many of them vulnerable. Weitzman (2018) elucidates that women with higher levels of education may paradoxically become vulnerable to experiencing intimate partner violence due to their attitudinal acceptance of such violence. Additionally, lack of economic independence also impacted their vulnerability to violence from their spouses, as educational attainment for refugees in South Africa did not benefit them but merely served as a marker of status rather than a pathway to employment (Weitzman, 2018).

However, this study suggests the protective potential education could offer to younger refugee women who have attained higher levels of education compared to their mothers. This is largely attributed to the acculturated nature of younger refugee women, especially those raised in South Africa, who have developed negative attitudes towards domestic violence, as explained in the preceding subsection. Higher levels of education, coupled with attitudinal rejection of domestic violence and other protective factors found within the higher levels of this integrated ecological model, such as a desire for healthy romantic relationships and women-led initiatives on domestic and social support, could prove instrumental in preventing intimate partner violence. While many of these potential protective factors at higher levels are assumptive, their combination might play a pivotal role in interrupting the transmission of domestic violence to future generations.

7.3.2 *Microsystemic protective factors*

At the microsystemic level, young refugee women emphasised their desire for healthier relationships with their intimate partners (or future partners for those not yet married or single) and children (or future children). This aspiration was largely shaped by their exposure to domestic violence during childhood in their respective homes. It is at this level where the significance of social support is first highlighted, with younger refugee women expressing a desire not only for better communication with their own children (or future children) but also to serve as a support system for them. Social support, as defined by Genç *et al.* (2018), encompasses the support individuals receive from their parents, family, and friends.

The desire of younger refugee women to provide social support to their children, particularly daughters, emerges as a potential protective factor that could shield them from becoming victims of violence in their own romantic relationships. Previous studies by Herrenkohl *et al.* (2013), Genç *et al.* (2018), and Raudino, Ferguson and Horwood (2013) have found similar results. Participants in this study expressed hope for improved relationships with their children,

which would be characterised by respect, empathy, trust, support, care, kindness, collaboration, open communication, and non-violent conflict resolution strategies (Genç *et al.*, 2018; Roffey, 2010; Tracy, Salo and Appleton, 2018). This study suggests that if younger refugee women's desire for stronger bonds with their children is realised, it will foster secure attachments in their children. Consequently, this will provide their children with access to a primary caregiver(s) who can act as a protective factor, particularly for daughters, against intimate partner violence later in life (East and Hokoda, 2015; Maas *et al.*, 2010; Liang, Williams and Siegel, 2006; Tracy *et al.*, 2018). Additionally, it will serve as a buffer against child maltreatment that they may experience from others (Conger *et al.*, 2013; Schofield, Conger and Conger, 2017; Tracy *et al.*, 2018; Thornberry *et al.*, 2013). The need for younger refugee women to cultivate closer relationships with their children, even for those anticipating future children, signifies a significant generational shift that has the potential to interrupt the cycle of domestic violence transmission to the next generation.

The desire by young refugee women for healthier relationships with their own children was closely linked with their desire for healthier relationships with their spouses or intimate partners. This connection stemmed from vicarious learning, rooted in participants' exposure to domestic violence, wherein they obtained insights into the effects of violence based on their mothers' experiences. This understanding extended to the link between their mothers' experiences and their own encounters with maltreatment and/or neglect from both parents, resulting in avoidant attachment. This phenomenon has been discussed by authors such as Adams *et al.* (2019), Brown *et al.* (2021), Jouriles *et al.* (2018), Lansford *et al.* (2014), and Renner (2021), as elaborated in Chapter 5. Haselschwerdt *et al.* (2021) revealed that young women aged 19 to 25 described their childhood exposure to domestic violence as influential in their aspirations for healthier romantic relationships. In this study, only one young refugee woman (Intisar) managed to achieve this in her marriage. Alexander (2014) provides insight into the desires of young refugee women for healthier romantic and parent-child relationships based on the attachment theory. She explains that individuals' ability to alter their mental representations of relationships with partners and children is achieved through the construction of meaningful narratives that process the negative effects of their experiences. This process enables them to form secure attachments in the future despite their childhood exposure to domestic violence.

Interestingly, the religious nature of refugee families in this study was found to have a protective effect in relation to young refugee women's rejection of domestic violence, particularly intimate partner violence, as a norm and a source of their desire for healthier family dynamics. This was evident as the participants observed how both men and women used religion to justify VAW, while their mothers accepted violence based on misinformed religious grounds. Research on the role of religion, particularly Christianity and Islam, in justifying domestic violence has been explored by various scholars (Alkhateeb, 1999, 2002; Alkhateeb, Ellis and Fortune, 2003; Aziz, Abdullah and Prasajo, 2020; Chavis and Hill, 2008; Fortune and Enger, 2005; Ghafournia, 2017; le Roux and Pertek, 2023; Preston, 2003). The aforementioned authors explain that religion has been instrumentally used by men to justify their perpetration of VAWG, while women use these religious interpretations to endure their suffering. Similar findings were found in this study (see section on religion).

7.3.3 *Exosystemic protective factors*

Within the exosystem, this study observed that younger refugee women's personal rejection of domestic violence as a norm translated into a desire for women across both generations and communities to denounce domestic violence. This desire emerged from their understanding of the detrimental effects of domestic violence on its victims. Younger refugee women expressed a wish for their mothers and other women within the two refugee communities to play an active role in assisting victims of domestic violence and to take stronger stands against men's violent behaviours, opposing their normalisation and acceptance of all forms of VAWC within the home. Unfortunately, this proactive stance is currently lacking among their mothers and other women in their communities. Furthermore, the younger refugees also advocate for dismantling the cultural emphasis on family privacy, which, as corroborated by this research and findings by Goliaei *et al.* (2023), increases the vulnerability of refugee women to domestic violence.

The absence of adequate social support among first-generation refugee women in the two communities has contributed to young refugee women's desire to establish safer and more empathetic spaces. These spaces, where women can openly share and seek help for their experiences of abuse, are considered crucial and serve as potential protective factors against domestic violence. In this study, it was observed that one participant actively engaged in advocacy work within her community, where her NGO provided a safe, secure, and empathic space for female victims of intimate partner violence. Research has demonstrated that such environments empower women to find the strength and resilience needed to leave abusive

situations and care for themselves and their children, as highlighted by Sabri *et al.* (2018). Dr Ungar, a renowned social worker and resilience expert, explains that the general understanding of resilience, where it is assumed that individuals, particularly children, develop resilience independently, is incorrect (Ungar, 2022). Instead, he explains that resilience is also developed from factors outside of ourselves, such as cultural and social resources, making resilience a socio-ecological construct (Collette and Ungar, 2020; Ungar, 2008, 2010, 2011). Dr Ungar defines resilience as follows:

“... in the context of exposure to significant adversity, resilience is both the capacity of individuals to navigate their way to the psychological, social, cultural, and physical resources that sustain their well-being, and their capacity individually and collectively to negotiate for these resources to be provided and experienced in culturally meaningful ways” (Ungar, 2010, p. 425).

Therefore, it is imperative for refugee women, particularly the younger generation who reject domestic violence as a norm and aspire to have healthier and stronger family dynamics within their own homes, to receive support from others around them to become resilient enough to truly achieve their aspirations. Therefore, as exemplified by Abir, young refugee women need to be strong enough to actively create the change that they hope to see in their communities.

7.3.4 *Macrosystemic protective factors*

This study identified educational awareness programmes at public schools and social media as potential protective factors within the macrosystem. These initiatives have significantly increased awareness of domestic violence (Buchanan, Borgkvist and Moulding, 2023) among younger refugee women, leading to their attitudinal rejection of domestic violence. As previously discussed, exposure to school-based awareness programmes commissioned by the DBE during their childhood made these younger refugee women aware of domestic violence and their human rights as enshrined in the South African constitution. These programmes also instilled key values and attitudes held by the larger South African society that condemn all forms of VAWC, including domestic violence.

The high level of awareness among younger refugee women, influenced by their Acculturation within the broader South African society, has played a vital role in shaping their understanding of domestic violence. This includes awareness of their rights as women, knowledge of available resources, and their attitudes towards addressing domestic violence (Ajduković *et al.*, 2021;

DBE, 2021; Villardón-Gallego *et al.*, 2023). Sabri *et al.* (2018) similarly found that acculturation acts as a protective factor for immigrant and refugee women, enabling them to be aware of resources available for victims of intimate partner violence and how to access them. Ungar (2022) argues that individuals cannot effectively become truly resilient if they are unaware of their human rights. This study found that young refugee women, in particular, were better able to reject domestic violence, especially intimate partner violence, because they recognised it as a serious human rights violation (Rapp *et al.*, 2012).

Furthermore, social media emerged as another potential protective factor against potential vulnerability to domestic violence within the macrosystem. This is because some refugees have recognised its power as an awareness and empowerment platform, providing a social network for victims of domestic violence in online communities. Participants' understanding of the usefulness of social media platforms aligns with findings from other research on victims of abuse, including studies by William *et al.* (2023) and Buchanan *et al.* (2023). Social media, which is particularly influential among the youth, is considered a formidable instrument in raising awareness, facilitating advocacy, and providing support to victims of violence (Miller and Demirbilek, 2023), emphasising its role in combating domestic violence. However, despite participants acknowledging the power of social media, none revealed their own use of social media platforms for social support regarding their own experiences of violence, including childhood experiences of violence.

7.4 Conclusion

In summary, this chapter explored the third theme identified through data analysis: “G2 potential protective factors”, along with its accompanying subthemes. This exploration uncovered specific protective factors inherent in younger refugee women that could potentially play a crucial role in preventing experiences of intimate partner violence in their romantic or marital relationships. Moreover, these potential protective factors could also contribute towards mitigating their children's (including future children for those who did not have children at the time of the data collection) experiences of child maltreatment and exposure to interparental violence.

These potential protective factors, interconnected across the integrated ecological model, encompassed younger refugee women's attitudinal rejection of domestic violence, higher educational attainment, desired healthier family dynamics, women-led sanctions on domestic

violence, community-based social support, and awareness and social networks fostered through educational awareness programmes and social media.

In the next chapter, the study will be concluded by summarising its main findings, discussing its implications and contributions, and acknowledging its limitations. Additionally, recommendations for future research, interventions, and policy are provided.

CHAPTER 8: CONCLUSION, LIMITATIONS, AND RECOMMENDATIONS

8.1 Introduction

The previous chapter examined the third theme of this study, which explored the interconnected potential protective factors operating at different levels within the integrated ecological model among young refugee women (G2). These factors could significantly impact domestic violence prevention in this generation and potentially interrupt its transmission to future generations.

This chapter offers a summary of the study's key findings, explains the study's implications, and demonstrates its contribution to existing knowledge. Additionally, the chapter presents the limitations of the study and provides recommendations for future research. Finally, the chapter concludes with a summary of the overall study.

8.2 Summary of findings

This section offers an overview of the three themes that emerged from this study, as detailed in Chapters 5, 6, and 7, respectively. This summary offers a broad understanding of the main concepts of this study. However, for a comprehensive understanding of these findings within their respective contexts, it is important to read the aforementioned chapters in detail.

- The theme, “Exposure to domestic violence, explored how refugee women from two different generations faced exposure to domestic violence”, including neglect and physical, financial, verbal, psychological, and sexual abuse. Many older refugee women (G1) experienced domestic violence, primarily from their mothers, during childhood, and experienced intimate partner violence in adulthood perpetrated by their husbands/partners. In comparison, many young refugee women (G2) reported exposure to domestic violence in the form of child maltreatment perpetrated during childhood by one or both parents or others. This also included their observations of interparental partner violence. The theme further confirmed the intergenerational transmission of domestic violence within refugee families, where many ever-married (i.e. divorced), some married or those young refugee women with previous/existing romantic relationships experienced a historical recurrence of violence mirroring their mothers’ abuse. Consequently, the effects of domestic violence exposure included significant

suffering among participants, particularly impacting parent-child relationships resulting in avoidant attachment between young refugee women and their parents, especially mothers.

- The theme, 'Intergenerational transmission of domestic violence,' revealed key risk factors across multiple levels, including exposure to domestic violence, lack of social support, refugee and socio-economic status, attitudinal acceptance, and gender norms. Additionally, psychosocial mechanisms such as socialisation, internalisation, shame, guilt, silence, re-enactment, and family of origin also influence the transmission of domestic violence within refugee families. The study identified characteristics such as attitudinal acceptance, expectation, and normalisation of violence, intimate partner violence, child maltreatment, poor communication, and poor parent-child relationships, as transmitted both vertically and horizontally across generations. Notably, attitudinal acceptance was predominantly observed in older refugee women. This mean that older refugee women were found to hold attitudes that readily accepted domestic violence. These risk factors and psychosocial mechanism were found to result in the perpetuation and transmission of domestic violence within refugee families and the two communities studied.
- The theme, “G2 Potential Protective Factors”, delineated the potential protective factors identified within the young refugee women, which could interrupt the transmission of domestic violence within this generation and across future generations. The attitudinal rejection of domestic violence emerged as a key potential protective factor capable of buffering young refugee women from intimate partner violence, interrupting its transmission. This rejection stemmed from their observation of the suffering endured by their mothers, prompting them to reject harmful practices normalised within their families and communities. All this is in addition to their desire to have healthier family dynamics and social support networks to help victims of domestic violence.

8.3 Implications and contribution to knowledge of findings

The significance of this study lies in its in-depth exploration of the intergenerational transmission of domestic violence within refugee families, particularly among refugee women in South Africa. It offers detailed insights into how domestic violence transmission occurs within the first generation of refugee women and extends to their adult daughters. By adopting

an intergenerational perspective, this study sheds light on the prevalence of domestic violence within refugee families, highlighting the co-occurrence of intimate partner violence and child maltreatment among refugees from Burundi and the DRC in Durban.

This study also revealed that women were not only victims of domestic violence but were also implicated as perpetrators of domestic violence, particularly in the form of child maltreatment and neglect. Refugee mothers in both communities were found to perpetuate domestic violence by accepting, normalising, and even expecting it, and deliberately socialising their daughters to internalise and re-enact their victim behaviours. The study elucidated how this transmission occurs within refugee women both horizontally and vertically, resulting in insecure-avoidant attachment between many refugee mothers and their adult daughters due to vertical transmission. Insecure attachment was also found in some young refugee women with both parents. These findings have significant implications for both practice and policy, as discussed in the recommendation section.

Therefore, this study contributes to existing contextual gaps in the literature on the intergenerational transmission of domestic violence. There remains a significant lack of understanding regarding domestic violence transmission within refugee families, particularly in South Africa. Internationally, research on intergenerational transmission in refugee populations, especially families, has focused on the transmission of trauma, mental health risks, and resilience (Atallah, 2017; Bezo and Maggi, 2015; Dalgaard and Montgomery, 2015; Denov *et al.*, 2019; Lünemann *et al.*, 2019; Ly, 2022; Maffini and Pham, 2016; Mak and Wieling, 2024; Rogers, 2021; Scharpf *et al.*, 2023; Xu, 2017). However, much of this literature has been conducted on refugee families residing in the global North, with the exception of studies by Atallah (2017) on Palestinian refugees in Israel and Scharpf *et al.* (2023) on Burundian refugee families in Tanzania. To the best of the researcher's knowledge, this study represents the first exploration of the intergenerational transmission of domestic violence in refugee families within the South African context.

This study offers a nuanced understanding of refugee women's experiences of domestic violence and its intergenerational effects, shedding light on how transmission occurs and the risk factors and mechanisms influencing transmission with and across generations. Additionally, the study identified potential protective factors (see Chapter 7), which emerged as 'desires' within the second generation. However, these protective factors have not been conclusively determined by this study to prevent domestic violence within a generation nor

interrupt the transmission of domestic violence in the next generation. Considerably, if many of these potential protective factors, particularly those within the ontogenic, micro, and exosystems, are actualised, then younger refugee women could potentially interrupt the transmission of domestic violence within their own generation and across the next generation.

The conceptual framework is the theoretical contribution of this study, which validated the theoretical assumptions of the four major theories used. This framework facilitated the understanding of refugee women's experiences of domestic violence and the transmission of such violence within and across two generations. Notably, concepts of the attachment theory shed light on attachment issues within refugee families, emphasising the importance of further studies on attachment within refugee families. Such studies could explore the intergenerational effects of refugee mothers' childhood experiences on their mother-child relationships. The study could also be extended to explore father-child relationships or other caregiver-child relationships in South Africa, as there is currently a lack of research on this phenomenon. This research could potentially be generalised to refugee caregivers and how they raise children. This study contributes towards addressing the gap in literature on the intergenerational aspects of mothering, particularly in relation to mothers' ACEs and their effects on mother-child relationships with the next generation (Brown, 2017; Dugmore in Brown, 2017). Although this study does not focus solely on attachment, it does address this gap by providing information on refugee women's exposure to ACEs and their experiences of intimate partner violence in adulthood and their relationships with their adult daughters.

8.4 Limitations of the study

Despite this study's significant implications and contributions, it was not without limitations, and several noteworthy constraints should be addressed. Because of the qualitative nature and the sample size of this study, findings cannot be generalised or transferred to the Burundian and DRC populations in other parts of South Africa, other refugee populations in Durban, or refugees in other parts of Africa. Additionally, findings are not representative of the majority of the Burundian and Congolese refugee populations in other parts of the world or Burundian and Congolese women populations currently living in these countries.

The sensitivity of the research topic presented a limitation regarding the willingness of some participants to disclose their experiences of domestic violence. This was particularly evident among G1 and some G2 participants in individual semi-structured interviews and FGDs. In

some instances, participants restrained their feedback, with one specific participant refusing to share anything. As discussed in Chapter 4, this reluctance can be attributed to socio-cultural norms around disclosure within both refugee communities, which are often closed-off. Consequently, some participants were hesitant to disclose their experiences or only shared what they deemed not damning, fearing recognition or that the information would get back to their partners or communities. Despite efforts to assure the participants of the researcher's ethical obligation to maintain confidentiality and anonymise all data, this barrier persisted.

Another limitation is that the study focuses solely on refugee women, specifically mothers and their adult daughters. While this approach allowed for an in-depth exploration of the subjective meanings attached to domestic violence based on their personal experiences and intergenerational consequences, it was inherently gender-specific, targeting women who were initially assumed to be victims only. However, the study revealed that women can also be perpetrators of domestic violence, particularly concerning child maltreatment. This gender-specific focus may have overlooked the perspectives and experiences of male refugees and their roles and experiences of domestic violence in refugee families.

Furthermore, the study's exclusive focus on African women from two conflict-affected countries was a limitation. This narrow scope overlooks the diverse experiences of women from other African countries residing in Durban as refugees, who may also be impacted by the intergenerational transmission of domestic violence. Additionally, the study does not account for other vulnerable African and marginalised populations, such as migrants, including those seeking economic opportunities, who reside in the city and may also be affected by similar dynamics of domestic violence transmission across generations.

Moreover, another limitation of this study is the absence of questions related to refugee women's experiences of domestic violence during the COVID-19 pandemic. Although mandatory COVID-19 measures like lockdowns were suspended at the time of data collection, studies recognized that the pandemic had inadvertently intensified the global crisis of domestic violence (Das, Das, and Mandal, 2020; Ertan et al., 2020; Leslie and Wilson, 2020; Lund, Manica, and Mânica, 2020; McCrary and Sanga, 2020; Rakubu and Olofinbiyi, 2022). According to Mahlangu and colleagues (2022), global lockdowns heightened the vulnerability of domestic violence victims, intensifying their experiences of violence. The authors argue that pandemics generally exacerbate VAWC. Lockdowns and mobility restrictions, though essential for public health during the COVID-19 pandemic, inadvertently created conditions

conducive to the proliferation of domestic violence (Rakubu and Olofinbiyi, 2022). Such confinement measures, especially during stringent lockdowns, critically limited potential escape routes for victims, who were mainly women and children, forcing them into prolonged proximity with their abusers (Mahlangu *et al.*, 2022; Thiel *et al.*, 2022). This omission could have yielded valuable insights into refugee families' experiences of domestic violence during South Africa's national lockdown. There is currently little research on this topic.

Lastly, the study focused solely on the psychosocial mechanisms of domestic violence and did not explore the genetic mechanisms of transmission to elucidate the transmission of domestic violence between refugee mothers and their adult daughters. Although recent research has delved into indirect (genetic) transmission (Corvo and Dutton, 2015; Margolin *et al.*, 2016; Moffitt and Kraus-Grawe in Ehrensaft and Langhinrichsen-Rohling, 2020), this was beyond the scope of this qualitative study. Studies on genetic transmission are typically longitudinal and quantitative in nature.

8.5 Recommendations

The recommendations provided are based on the limitations of this study. These recommendations are divided into three subsections: 1) directions for future research, 2) intervention recommendations, and 3) policy recommendations.

8.5.1 *Directions for future research*

First, it is recommended that this study be replicated in other major South African cities with significant populations of Burundian and Congolese refugees, such as Cape Town and Johannesburg. This would allow for an exploration of the intergenerational transmission of domestic violence in refugee families across different urban contexts. Additionally, the study could be extended to include both refugee and economic migrant populations from various African countries residing in these three major cities. Replicating the study in different locations may help validate the findings obtained in this study and provide a more comprehensive understanding of the phenomenon.

Secondly, future research on the intergenerational transmission of domestic violence should consider including both men (fathers and their adult sons) and women (mothers and adult daughters) from the same families. This would offer a more comprehensive understanding of the phenomenon by incorporating perspectives from both genders and exploring their experiences as both perpetrators and victims of domestic violence. To achieve this, a longitudinal convergent mixed-methods design based on the pragmatism paradigm would be appropriate. Such a design would allow for the simultaneous collection and integration of quantitative and qualitative data, enhancing the understanding of domestic violence transmission across two generations of refugees living in South Africa. Through this methodology, statistical data on the prevalence of domestic violence in this population can be gathered alongside an assessment of the mental health status of the participants. This longitudinal study should follow families over a period of 10 years to track the transmission or interruption of domestic violence from one generation to the next. To the best of the researcher's knowledge, this would be the first study of its kind in South Africa, which would also address the current gap in the literature regarding longitudinal mixed-methods studies exploring the intergenerational transmission of domestic violence in refugee families in this context.

Furthermore, future research efforts should focus specifically on refugee children's experiences of child maltreatment living in South Africa. This study suggests that there is a high prevalence of child maltreatment within Burundian and Congolese refugee communities. Future research, preferably quantitative, should focus on child maltreatment in refugee and migrant communities across South African cities. Further research will strengthen and verify the validity of the findings of this study.

Moreover, future research on refugee families should focus on improving the understanding of the risk factors and mechanisms of domestic violence transmission, as well as the protective factors, such as educational attainment, that can effectively interrupt the transmission of domestic violence. Findings need to be used to conceptualise and strengthen interventions on domestic violence in these two communities, particularly in the context of intergenerational transmission, based on the conceptual framework of this study. Intervention recommendations are provided in the next subsection, based on the findings of this study.

Finally, further research into educational attainment, which has been identified as a potential protective factor against domestic violence, should be conducted to assess its effectiveness in preventing violence among younger refugee women in South Africa. This inquiry could help elucidate the role of education in empowering refugee women to recognise, reject, resist, and ultimately break the cycle of domestic violence within their homes and communities.

8.5.2 *Intervention recommendation*

The identified potential protective factors across the four ecological levels have provided significant insights into the importance of evidence-based interventions. The intention of the recommendations provided is to conceptualise and develop an intervention grounded in cognitive-behavioural and religio-cultural sensitive techniques, which have been found to be effective in reducing violent and victim behaviours and increasing resilience within women (Kalkum and Istratii, 2023; Turhan and Yalzirari, 2021; Ungar, 2008, 2022). This intervention will be based on findings from this study, which identified the significant influence of religious beliefs and cultural norms on individual behaviours and attitudes about domestic violence. These factors make refugee women and their children particularly vulnerable to domestic violence. This programme will target refugee families, both youth and their parents. The intervention will be tailored to the characteristics and needs of the participants, based on their desires as identified through the potential protective factors identified in Chapter 7, as well as the risk factors identified in both generations in Chapter 6 (Babae *et al.*, 2021).

The aim of this intervention will be to increase awareness of the effects of domestic violence within the two refugee communities and create a more secure attachment style between refugee children and their parents. The development of religio-culturally sensitive programmes will aim to reduce domestic violence by potentially dismantling and changing socio-cultural beliefs and discourses that normalise domestic violence, and encouraging women to prioritise their well-being and prioritise disclosure (Kalkum and Istratii, 2023; Rasool, 2015).

8.5.3 Policy recommendation

One of the aims of this study was to use findings to inform policy recommendations aligned with the South African NSP-GBVF. This strategic plan focuses on all vulnerable populations residing in South Africa, including refugees and migrants (Department of Women, Youth and Persons with Disabilities, 2020). The aim of the NSP-GBVF is to highlight the vulnerability of vulnerable populations to acts of GBV, including domestic violence. However, as propitious as this strategic plan is, there is poor understanding of the severity as well as the risk and protective factors associated with domestic violence within the population.

The urgent policy recommendations provided below are thus suggested to help achieve some of the objectives of the NSP-GBVF.

- Awareness campaigns targeting refugees (men, women, youth and children) must also be initiated inside and outside refugee centres, where refugees are educated on their basic human rights within South Africa and state institutions. These campaigns need to highlight the significance of these basic human rights on the health and well-being of victims and families.
- Refugee-specific psychosocial support addressing traumas in South Africa should be provided to refugees. This will help the UNHCR re-evaluate current centres aiding refugees in South Africa and add additional centres. These should provide specialised psychosocial therapists who have experience in working with diverse populations, particularly from conflicted-affected African countries.

South Africa is a country with one of Africa's highest number of refugees, largely because of pull factors such as its economy (Mawire *et al.*, 2020). However, South Africa also has one of the highest rates of GBV, such as domestic violence. Several factors, including refugee status and institutional xenophobia, make refugees particularly vulnerable to GBV, particularly domestic violence. South Africa's NSP-GBVF was implemented to tackle GBVF, with a

strategy that focuses on vulnerable groups such as refugees to help combat GBVF in the country. This brief has highlighted some shortfalls in the strategy's ability to fulfil its objectives, particularly with regard to this extremely vulnerable population. Recommendations have been made to resolve these shortfalls, calling on key stakeholders to consider these recommendations.

8.6 Conclusion

This qualitative embedded single case study aimed to explore the intergenerational transmission of domestic violence in refugee families. The flexibility of this research design allowed the researcher to explore and understand the transmission of domestic violence based on the subjective meanings participants attributed to their personal experiences. This study made a concerted effort to offer an in-depth and thorough exploration of the risk factors and mechanisms involved in the domestic violence experiences of participants and the intergenerational transmission of domestic violence among two generations of refugee women. The study revealed the presence of intergenerational transmission of domestic violence among refugee women from Burundi and the DRC living in Durban, South Africa.

Furthermore, the conceptual framework of this study, which drew upon the theory of intergenerational transmission of violence and concepts from the social learning theory, attachment theory, and Heise's ecological model, guided the understanding of the study (Ainsworth *et al.*, 1978; Bandura, 1971, 1973; Bowlby, 1973, 1988, 2005; Ehrensaft and Langhinrichsen-Rohling, 2020; Heise, 1998). This conceptual framework facilitated the exploration of how domestic violence is transmitted within and across generations by helping understand the risk factors and psychosocial mechanisms of transmission across interconnected ecological levels that influence the transmission of domestic violence.

The findings from this study, in conjunction with existing literature, highlight its contribution to filling the current gaps in research on intergenerational domestic violence in refugee families, particularly concerning women in the South African context. Specifically, this study extends knowledge on the intergenerational transmission of domestic violence through the qualitative accounts of refugee women from families affected by domestic violence in Durban, South Africa.

While the study significantly contributes to existing literature, certain limitations were identified, and recommendations for future research directions within the South African context were provided. Furthermore, interventions based on the findings of this study have been proposed, which will hopefully be developed in the near future. The researcher is optimistic that the recommended research will be conducted and that evidence-based interventions will continue to be developed to assist these vulnerable and marginalised communities.

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ANNEXURE A: FOCUS GROUP GUIDE (MOTHERS)

1. Can you please tell me about yourself? Where are you from, how long have you lived in South Africa, your age, religious background, level of education, marital status and the number of children you have.

Tafadhali unaweza kuniambia kukuhusu? Unatoka wapi, umeishi Afrika Kusini kwa muda gani, umri wako, historia ya kidini, kiwango cha elimu, hali ya ndoa na idadi ya watoto uliozaa.

2. How would you describe your observations of family relationships in your refugee community here in Durban compared to what you observed growing up in your country?

Je, unaweza kuelezea vipi uchunguzi wako wa mahusiano ya kifamilia katika jumuiya yako ya wakimbizi hapa Durban ikilinganishwa na yale uliyoona ukikua katika nchi yako?

3. How did the civil war in your country affect family relations especially those within the home in relation to DV?

Vita vya wenyewe kwa wenyewe katika nchi yako viliathiri vipi mahusiano ya kifamilia hasa wale wa nyumbani kuhusiana na DV?

4. What are the cultural, religious and societal norms, attitudes and beliefs which may contribute to the perpetuation of DV in refugee homes in Durban?

Je, ni kanuni gani za kitamaduni, kidini na kijamii, mitazamo na imani ambazo zinaweza kuchangia kuendeleza DV katika makazi ya wakimbizi huko Durban?

5. What are the things that were/ are acceptable to talk about when it comes to one's family and what things are not acceptable? You may talk about how these beliefs about acceptability are re-enforced in your own homes, the family in which you grew up and even in the community in which you live.

Je, ni mambo gani ambayo yalikuwa/ yanakubalika kuzungumzia linapokuja suala la familia ya mtu na ni mambo gani hayakubaliki? Unaweza kuzungumzia jinsi imani

hizi kuhusu kukubalika zinavyosisitizwa tena katika nyumba zako, familia uliyokulia na hata katika jamii unayoishi.

6. What values, beliefs and attitudes about being a man, a woman and relationships would you like to pass on to your future generations?

Ni maadili, imani na mitazamo gani kuhusu kuwa mwanaume, mwanamke na mahusiano ungependa kuyapitisha kwa vizazi vyako vijavyo?

ANNEXURE B: FOCUS GROUP GUIDE (DAUGHTERS)

1. Can you please tell me about yourself? You can tell me about the country are you from, your age, religion, level of education, marital status (number of children), if you were born in South Africa or when you came to South African.

Tafadhali unaweza kuniambia kukuhusu? Unaweza kuniambia kuhusu nchi unatoka, umri wako, dini, kiwango cha elimu, hali ya ndoa (idadi ya watoto ikiwa inafaa), ikiwa ulizaliwa Afrika Kusini au ulipokuja Afrika Kusini.

2. How would you describe DV within refugee families in your community and your own home? You may talk about how you feel about it and to whom you talk to about your feelings.

Je, unaweza kuelezea DV ndani ya familia za wakimbizi katika jumuiya yako na nyumba yako mwenyewe? Unaweza kuzungumza juu ya jinsi unavyohisi kuhusu hilo na ni nani unazungumza naye kuhusu hisia zako.

3. Can you describe situations or times when its acceptable to talk about the DV in your homes and who you are allowed to talk about the violence to? You can talk about who decides on what is and who is acceptable and unacceptable for you to talk to.

Je, unaweza kuelezea hali au nyakati ambazo inakubalika kuzungumzia DV katika nyumba zako na ni nani unaruhusiwa kuzungumzia vurugu hizo? Unaweza kuzungumza juu ya nani anayeamua juu ya nini na ni nani anayekubalika na asiye kubalika kwako kuzungumza naye.

4. Can you describe what happens after violence has occurred, in relation to your family members interactions with each other?

Je, unaweza kueleza kinachotokea baada ya vurugu kutokea, kuhusiana na mwingiliano wa wanafamilia wako?

5. What are the cultural, religious and societal norms, attitudes and beliefs which may contribute to the perpetuation of DV in refugee homes in Durban? You can talk about how you feel about these norms, attitudes and beliefs.

Je, ni kanuni gani za kitamaduni, kidini na kijamii, mitazamo na imani ambazo zinaweza kuchangia kuendeleza DV katika makazi ya wakimbizi huko Durban? Unaweza kuzungumza juu ya jinsi unavyohisi kuhusu kanuni hizi, mitazamo na imani.

6. How would you describe your own values, beliefs, and attitudes about relationships, being a woman and man, that you would like to pass on to your future generations?

Je, unaweza kuelezea je maadili, imani na mitazamo yako kuhusu mahusiano, ukiwa mwanamke na mwanaume ambayo ungependa kuyarithisha vizazi vyako vijavyo?

ANNEXURE C: INDIVIDUAL SEMI-STRUCTURED INTERVIEW SCHEDULE (MOTHERS)

1. Can you please tell me about yourself? You can tell me about where you are from, how long you've been in South Africa, your age, religious background, level of education, marital status and the number of children you have.

Tafadhali unaweza kuniambia kukuhusu? Unaweza kuniambia kuhusu unatoka wapi, umekaa Afrika Kusini kwa muda gani, umri wako, historia ya kidini, kiwango cha elimu, hali ya ndoa na idadi ya watoto ulio nao.

2. How would you describe life growing up in your home? You may talk about the good memories that you have of your childhood as well as any memories of conflict that occurred that were towards your mother, even yourself and/or siblings that you might have been told to not tell anyone.

Je, unaweza kuelezea maisha ya kukua nyumbani kwenu? Unaweza kuzungumza juu ya kumbukumbu nzuri ulizo nazo za utoto wako pamoja na kumbukumbu zozote za migogoro ambayo ilitokea kwa mama yako, hata wewe mwenyewe na/au ndugu ambao unaweza kuwa umeambiwa usimwambie mtu yeyote.

3. Can you describe how witnessing DV affected your relationship with your parents, especially your mother? Has your relationship with your parents changed in anyway?

Je, unaweza kueleza jinsi kushuhudia DV kulivyoathiri uhusiano wako na wazazi wako, hasa mama yako? Je, uhusiano wako na wazazi wako umebadilika kwa vyovyote vile?

4. What did you learn from observing your mother's experiences of DV, especially about what it means to be a wife and mother? You can include how you see these traits in yourself today as a mother, especially about what is considered acceptable to talk about with outsiders.

Ulijifunza nini kwa kuchunguza uzoefu wa mama yako wa DV, hasa kuhusu maana ya kuwa mke na mama? Unaweza kujumuisha jinsi unavyoona sifa hizi ndani yako kama mama leo, haswa juu ya kile kinachokubalika kuongea na watu wa nje.

5. How do you think what you witnessed and/or experienced within your family growing up has affected, your own experiences of DV as a refugee woman in Durban?

Unafikiri kile ulichoshuhudia na/au uzoefu katika familia yako kukua kimeathiri vipi, uzoefu wako mwenyewe wa DV kama mwanamke mkimbizi huko Durban?

6. How do you communicate your own experiences of DV to your daughter? You can describe the things that have influenced the way in which you may be communicating your beliefs and knowledge about DV differently to her?

Je, unawasilianaje kuhusu uzoefu wako mwenyewe wa DV kwa binti yako? Unaweza kueleza mambo ambayo yameathiri jinsi ambavyo unaweza kuwa unawasiliana naye imani na ujuzi wako kuhusu DV kwa njia tofauti?

7. Please tell me who you now approach for help when you experience violence in your home. This may be family members, friends, religious leaders etc. You may explain if it is easy for you to access help as a refugee woman as well as if there are any barriers that exist that prevent you from seeking help.

Tafadhali niambie ni nani sasa unamkaribia kwa usaidizi unapokumbana na vurugu nyumbani kwako. Hawa wanaweza kuwa wanafamilia, marafiki, viongozi wa kidini n.k. Unaweza kueleza ikiwa ni rahisi kwako kupata usaidizi kama mwanamke mkimbizi na vile vile kama kuna vizuizi vyovyote vinavyokuzuia kutafuta msaada.

8. What beliefs, knowledge and values about motherhood and being a wife would you like for your daughter and future members of your family to continue with that you learned from your mother and other women in your family or community?

Je, ni imani gani, maarifa na maadili gani kuhusu uzazi na kuwa mke ungependa binti yako na watu wa baadaye wa familia yako waendeleo nayo uliyojifunza kutoka kwa mama yako na wanawake wengine katika familia au jamii yako?

ANNEXURE D: INDIVIDUAL SEMI-STRUCTURED INTERVIEW SCHEDULE (ADULT DAUGHTERS)

1. Can you please tell me about yourself? You can tell me about the country are you from, your age, religion, level of education, marital status (number of children if applicable), if you were born in South Africa or when you came to South Africa.

Tafadhali unaweza kuniambia kukuhusu? Unaweza kuniambia kuhusu nchi unatoka, umri wako, dini, kiwango cha elimu, hali ya ndoa (idadi ya watoto ikiwa inafaa), ikiwa ulizaliwa Afrika Kusini au ulipokuja Afrika Kusini.

2. How would you describe life growing up in your family as refugees in Durban? You can include violent events that occur within your home between your parents and other members of your family, and whether you are not allowed to talk about these issues within your home openly to others outside of your home.

Je, unaweza kuelezeaje maisha ya kukua katika familia yako kama wakimbizi huko Durban? Unaweza kujumuisha matukio ya vurugu yanayotokea ndani ya nyumba yako kati ya washiriki wa wazazi wako na wanafamilia wengine, na kama huruhusiwi kuzungumza kuhusu masuala haya ndani ya nyumba yako kwa uwazi kwa wengine nje ya nyumba yako.

3. What factors do you think makes refugee women like yourself and your mother, vulnerable to DV in Durban? You may include the types of violence that occur in refugee homes and whether there is silence around DV in your community, especially among women.

Je, ni mambo gani unafikiri yanawafanya wanawake wakimbizi kama wewe na mama, walio katika hatari ya DV huko Durban? Unaweza kujumuisha aina za unyanyasaji unaotokea katika nyumba za wakimbizi na kama kuna ukimya kuhusu DV katika jamii yako hasa miongoni mwa wanawake.

4. Please describe the type of relationship you have with your parents especially your relationship with your mother. What type of relationship you would want to have with your spouse and children especially your daughters?

Tafadhali eleza aina ya uhusiano ulio nao na wazazi wako hasa uhusiano wako na mama yako. Je, ungependa kuwa na uhusiano wa aina gani na mwenzi wako na watoto wako hasa binti zako?

5. How has your understanding of DV been influenced by observing the relationship between your parents? Please describe the type of home environment that you would want to have for your own family.

Je, uelewa wako wa DV umeathiriwa vipi kwa kutazama uhusiano kati ya wazazi wako? Tafadhali eleza aina ya mazingira ya nyumbani ambayo ungependa kuwa nayo kwa ajili ya familia yako mwenyewe.

6. How has the knowledge you have about DV also been influenced by social, religious and cultural beliefs and attitudes? You may discuss if there are any similarities or differences in the knowledge that you observe from your mother and that which you observe in others within the South African socio-cultural context.

Je, ujuzi ulio nao kuhusu DV pia umeathiriwa na imani na mitazamo ya kijamii na kitamaduni? Unaweza kujadili kama kuna mfanano wowote au tofauti katika maarifa ambayo unaona kutoka kwa mama yako na yale ambayo unaona kwa wengine ndani ya muktadha wa kijamii na kitamaduni wa Afrika Kusini.

7. Please explain what are your own personal beliefs are about DV?

Tafadhali eleza imani yako binafsi ni nini kuhusu DV?

8. What role do you think refugee women particularly mothers and grandmothers can play to prevent DV?

Je, unafikiri wanawake wakimbizi hasa akina mama na nyanya wanaweza kuchukua jukumu gani kuzuia DV?

ANNEXURE E: MOTHER CODES

Code	Excerpt	Code type
Substance abuse	“... he never stopped drinking. We usually fight over that because he doesn’t have any Muslim friends all his friends are Christians, so he continues drinking, that’s why we argue. When he comes back home drunk its either its very late or ... another thing that upsets me because I left my religion to join yours and I changed but now you’re not the one who hasn’t changed. You drink alcohol, you have no Muslim friends because if you had Muslim friends you wouldn’t be like this.” Reen “Grade 7, grade 8 a child starts smoking. I don’t understand if it’s the country, I don’t understand what is the problem. Different from what I witnessed back home, you see. Here things are messed up. Even the women here, they start smoking zola, they’re drinking like there is no tomorrow.” Inaya	Deductive
Stress and DV	“Aah, I think the main issue is life changes here in South Africa. You will find that someone has things that has confused them wherever they were, especially with a husband. He will come from work and he will come home and find that maybe starts shouting at you. Based on the things that he encountered at work. To a point that you find it difficult to understand him, you haven’t done anything to him, and you just find him shouting at you and if you’re not careful he can even slap you... Or maybe he calls you and you don’t hear him and then it becomes a problem. ‘I’ve been struggling outside but you woman you also want to stress me out’ and then you find that those things bring conflicts within the house and these things are things that we never grew up seeing our parents do.” Waqeefa “Someone might be struggling and they might see that life is confusing them, some of them take on that pressure, they put pressure on the family. Maybe life is so hard he can’t go outside and punch anyone, he can’t swear	Inductive

Code	Except	Code type
	someone outside, but when they come home, they use it like a violence on the family.” Inaya	
Home environment growing up	“Never, not even once. I never saw him telling my mom anything that would hurt her, I never saw my father and mother angry at each other, if it happened I’m not sure maybe after I was married but even with that that’s what I’m always telling my husband, that I have never saw my father say anything bad to my mother, or even show her that he was angry with her never not even once. I don’t know if it was because they never lived together everyday, maybe because he would maybe come home missing her but honestly I never grew up seeing such a thing.” Reen	deductive
Impact of DV	“That made me very tough, I am a very stern person even now people know me for being stern, because I would speak out. I use to keep quiet until I realised that for me to clear my heart if she would shout at me more than twice I would retaliate and shout back at her.” Iris “Yeah, so that’s what makes it difficult for our children to achieve their goals, because the foundation built by the parents isn’t stable.” Sikitu	Inductive (DRC)
Financials problems	“. I don’t know whether its because financially we are struggling or, sometimes I sit down and I just find myself crying because sometimes the things that he is doing to me, you tell him this and its that instead.” Candice “And then there was a point where he himself decided that you know what I do not want to work I am not going to work anymore I am going to sit at home and I’m going to pray and God is going to provide for me God is going to give me a job God is gonna find a source of sustenance for me and our family which I found to be extremely ridiculous... This was because we did not have food to eat, paying rent was extremely difficult and all this was because he didn’t want to work his security job anymore.” Maira	Deductive
	Psychological abuse: “Interviewer, when I say mental abuse, I mean, because there are people that do not understand mental abuse, I mean you live in your home without peace, your own husband refuses to give you peace of mind there	Inductive

Code	Excerpt	Code type
Experienced abuse in adulthood (sexual, physical, emotional, spiritual, verbal, financial)	are men out there that will not beat you, but the things that they do are even worse than that person who is physically abused. There are women, when you hear of their husbands, the man is always on his always on his phone. Can you imagine there are men out there your husband is talking to another woman in front of you, is there abuse worse than that?" Aseela	
	Emotional abuse: "It affected me mostly like for example how my husband comes home and he just starts shouting at me, it really hurts, I am also a person I have feelings" Malkiya	
	Financial abuse: "I never had peace at home, there was always something with him, nothing I did was good enough. If I had to go out and work whatever I brought back he would take by force... I mean I would have saved my money somewhere and he would just go and take it from there." Khuloud "Why would you tell a woman not work? Because you will not say that you're in bliss, for him to refuse you from working, you hear me. There aren't even any nice fancy jobs for us to do. What is going to work for an Ethiopian, standing the whole day, 24 its 12 hours you find yourself standing do you enjoy that job? But you find a man telling his wife don't work I will do anything. But when it comes to the things you need, he doesn't meet any of them. You will find a woman who is a stay-at-home wife, without lotion, she has been asking for lotion from today she will get it after one month." Aseela ": It is this thing of men abandoning their responsibilities and leaving them with their wives. Because what they do is difficult so what they now do because they see women are also helping them is that they give all their responsibilities to the women. Now, that is the main reason why there are many problems and conflicts here in South Africa as refugees. Especially Congolese men, they don't like working, the woman must go out to work, bring back food and we must all eat. When rent's due, he tells her mama bring the rent so that I can go and pay, and	

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	that is the main cause of divorce here in South Africa, it's because of them leaving all their responsibilities to women. Men are forgetting their responsibilities and leaving with women." Kinza "I worked I worked for very, very little short time but during work I was able to for full all my duties as his wife just so that I could show him that you know at I also need to work also need to be financially independent but he hated that like he didn't even pay for my children's creche I was the one that with the money that I earned I took my kids to creche and so that I was also able to go in and I would close work early so that I was able to go and fetch them after school I employed a maid" Maira Physical abuse: "we use to fight every day, to a point where he cracked my skull, I have a scar here, with stitches. He broke my skull in 2011 yeah. He cracked my skull, there was noise, all sorts of commotion, every day, until now, commotion and noise never stop." Lujain "The second thing is that he was physically abusive, he would beat me and even the children." Khuloud "Honestly, I will not lie to you there was a time when he beat me he actually beat me only once in our life here together in South Africa and when he did it was such a brutal painful beating. I actually compare it to when men or a person or people I beat him up trying to kill a snake to a point where they want to behead the snake it was gruesome very terrible experience. And it was one of those beatings that you didn't even expect I had just come into the house and I just felt something on my body he hit me with a those big wooden spoons that we used to make pap." Maira "Sometimes he hits you while the children sit and watch and you think to yourself, I never saw this back home, I never saw my parents physically fight" Candice Verbal abuse:	

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	“Dog, that is the main word that Swahili men like using, you are called a dog [giggles]. So, when you hear that you’re being called a dog you just keep quiet because it’s difficult to just sit and be called a dog, you will also want to make some sort of action but you know that you will cause more harm, so you just decide to let it go and ask God for patience. Because you need to have experience, just have patience. “ Lamees “My husband would shout at me in front of his kids in front of people who treated me in front of kids in front of people so things like that well very humiliating for me as a woman and especially since I had already children even bigger than those kids” Shukriya “I mean, it simply that he had started abusing me, he would swear at me, he would come home and the would just come home and start shouting, I can kick you out of my home, you must go back home. That was affecting me terribly especially when I heard that he would send me back.” Siham Sexual abuse: “Thirdly, he would want to have sex by force even when you were not happy and didn’t to.” Khuloud Spiritual abuse:	
No interference	“Or you cannot ask anything, and they will ask you you’re asking like who? Did I ask you to come and help me?” Badriya	Deductive
Financial dependency [sake of the children]	“Especially with the men there’s certain things that they can do for you now based on the financial standing, so you might find that your husband is not providing enough for you like but that’s really just because sometimes finances are really difficult and double study can do is just pay the rent and nothing else there after so you might think. Oh my God why isn’t this man buying me anything not even lotion but really it’s because life is difficult so it’s important for us to understand each other when it comes to finances within marriage umm.” Shukriya	

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	“Then we have no work but even with the fact that we don’t have work we it’s because we ourselves do not try to be proactive in finding work or creating our own work right so when I went is this it’s very easy for him to treat you anyhow that he wants to if he threatens that he wants to kick you out of the house then he can easily threaten you because he knows there’s nothing that you can do and that you will stay in the home because he is the one providing everything that you need... That’s why woman suffer because the woman does not have a source of income, she has no work she does not have family she doesn’t have school to back up she has absolutely nothing to her name except for him, that’s why he knows he can cheat on you, or abuse you because there is nothing you can do. Abuse is ramped here in South Africa so much so that some decide let me just return home. We also have no one to turn to when we’re in trouble because we are all scared of each other your problems are not safe with anyone.” Thurayyah	
Experienced and/or witnessed abuse in childhood (sexual, neglect, physical, emotional, spiritual, verbal)	“Yeah, I lived with my husband, yeah my husband arrived here first and then I came after him. I came here with two children, the third one I had here, when I gave birth to my third child, you know how men are, he started beating me. I said aah, I can’t continue living being beaten like an animal. Yeah, I said... you know he is the one who decided to leave.” Bilqis “Many times it was my father, he would shout and my mother and she would keep quiet and would just look at him, sometimes you would see that she had tears in her eyes.” Candice “I never liked it. Even when I grew up I saw how my mother and father would fight when they would meet each other on the street they would just start swearing at each other, even if they weren’t married anymore... Yeah, they would fight but it was what it was I was never happy about it, but I just had to get used to it. When parents are divorced you as a child don’t have any more choice.” Lamees	Inductive

Code	Excerpt	Code type
	“yeah, when her husband would come home, he would shout at her, there was always something there was nothing she ever did right.” Khuloud “She went through a lot, when she was pregnant with her last born her husband would come home beat her and then send her to sleep in a hole outside, she had to sleep there until morning until the alcohol leaves his system then she could return home. It was so bad that her last born was born they say she got pregnant under stress and throughout her time she was stressed.” Iris (story of her sister) “Since I was about 14,15 years old but the reason that made me not want to get married is what I saw in my sister’s house I saw what she went through at her home with her husband. What I witnessed was that my sister and her husband they were forever arguing, she would tell him something and he would just get angry at her and it’s just very violent in her home and he would have extra marital affairs and I was just like ah so this is marriage I don’t want this thing if this is marriage because this is too stressful for me I don’t want this.” Thurayyah “No, but what I would do because I was already older, I would go and tell my aunt to keep quiet because I didn’t want her to get beaten, so she would remain quiet because she could see the fear in me or she would tell me to go and do it so that the conflict stopped.” Malkiya	
Experiences of alloparenting	“aah, my life growing up was very difficult, hmm. I saw good things when my mother was still alive, but as soon as my mom died and my aunt who looked after me, I lived a very difficult life. I even left school because, I didn’t have anyone who could pay for my education... our Swahili families, once your mother dies, your uncles your aunts they don’t care. The one who cared about me was my aunt (mothers younger sister) she also died, that was it.” Lujain “: I lived really well, especially since she didn’t have many kids, she taught me well. She taught me that a child should behave, that we need to study,	Inductive

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	once you're old enough you'll have your own family and you'll raise your kids like this, she taught me very well. We were a Godly family, she taught me about God, housework, she would even advise me. I lived well, she never treated me badly, to a point where I never even thought of going back home." Malkiya "You know being raised by a mother and being raised by a family there is always a difference. There is always differences in the way in which one is treated, I lived a very terrible life, I was always neglected, I was beaten, thrown out [sobs] and even worse, I never got to know who my father was." Siham	
Child abuse of own children (by father or others in the home)	"He took an object and started beating up the child, her whole body was bruised and swollen. The following day she went to school, at school she couldn't sit properly on her chair. He beat her up a lot on her buttocks, her legs, here there, it was a very violent beating that she received. Can you imagine that still he never saw that he was in the wrong, hmm hmm, he did that and was still very arrogant... When I ran out my husband, assumed that I had gone out to seek help, so when he saw that he left the child. I didn't know what to do so I returned home, because I saw if I had to say anything we would get beaten. Especially, since I saw how he was in the moment it was as if he was possessed by the devil of his father was standing in his head. When I returned and he saw that I hadn't brought anyone with, he continued to beat her up." Inaya	Inductive
Child sexual abuse	"look if it was someone you were sharing the home with, you may call the police. But you know these our South African homes where you share a house with a man you know nothing about and he rapes your child then you're more likely to report him." Sikitu "That is happening a lot in our homes, I've heard about two to three such instances where people are talking about the issue, where a little girl was raped in her home. You find sometime the issue is the way in which people live in their homes. You find that someone decides to rent a big apartment	

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	and that apartment is difficult for them to pay off, so they decides to sub-let it and they sub-let to young men, we call them singles. So you find that these young men, but you find that he rapes a child and he rapes a small child. There is a young man who I hear until now he is in jail because of the same issue, but I must also say that we as parents are also participate when it comes to this problem.” Aseela	
Practicing observed behaviours	“Because if we are both hot-tempered it will lead to a physical altercation, yeah... I just want her to be a good mother yeah, she must just be a responsible mother. She must look after her children, she must take her responsibility of being a wife seriously, and she must not take on the responsibilities of a man, she must focus on her own. She must educate her children, because you know in life there are always ups and downs, so even in your relationship sometimes things are good sometimes things are not good, she must understand that and persevere. Yeah.” Kinza “Yes, I continued with what I was advised, because my husband is strict but because what I witnessed in my aunt’s house, my uncle would shout especially after he was drunk, my aunt would just remain quiet until he calmed down and then go back to sleep. Until the morning when he would wake up and apologises blaming it on the alcohol, I also continued like that. Even if I was the one at fault or not, I will remain quiet, only after when he’s calm then I will tell him that what he did was wrong, you cannot shout at me in front of kids, I am an adult and their mother, that’s not good. The children won’t see me as the one with issues but you because they see you are abusing me if I am wrong call me inside and tell me. But you scolding me in front of them is not good, they’ll hate you because you’re abusing me. That’s how I try to help him, but ey you know men for them to change is difficult for them to change.” Malkiya	Deductive
Education	“I was unable to continue with my education, I wanted to continue studying but no one wanted to educate me.” Lujain “I remember them well, we lived was a very difficult life, schooling was difficult, we used to be kicked out of school because of fees, yeah.” Bilqis	Deductive

Code	Except	Code type
	"I have never had an education my parents never educated me because they didn't have the means to educate me" Maira	
Social and cultural norms: Advice to young women about marriage	"No listen Inaya, the problem is that we are the ones who exacerbate these issues as refugee women. You know, why its is because when you are being beaten and you stay silent, you are supporting him to beat you up, so he will beat you again tomorrow and the following day. And on the day you (interviewer), come to me and you're much younger than me, you tell me aunty this is the challenge I am facing at home, instead of me advising you things that make sense, I will sit there and will tell you that you must sit there just persevere, we were also beaten up. That tells you that I was also beaten and that you must persevere, but if I sit there and tell you interviewer, because I speak a lot with my younger sisters. I tell them that when a man slaps you the first time never wait for the second one." Aseela "even with the married one, that's what I've taught her, your husband's phone don't tough it, don't try to control him, so see what's he's doing, where was he. No, you just focus on the things he does for you, he pays the rent, buys groceries, he does things within the home. I mean and your priority is to cook for him, to respect him, that's all. Because there is no such thing a man that is 100%, you won't find such a man" Lujain "in terms of being a wife for there to be how many in the home she is the wife must respect her husband as her husband the man of the house and he is her husband must respect her as a wife and the woman of the home... Secondly having groups being having too many friends that's one thing I hate I don't ever want to hear that. There are groups that help or friendships yeah that's what I mean by groups they have friendships that he can help build you develop you and their friendships they will destroy you these groups that can destroy you and that's why I never ever want to hear such." Yakoota "I tell my daughter that when she wants to get married, she needs to make sure that she marries a responsible man, one who knows and carries his	Deductive

Code	Except	Code type
	responsibilities. And if she is to help him, she must help him. With other things but not to help him carry his household duties, because when a woman starts helping her husband pay for things like rent or things like where he is the main person responsible for them, he starts withdrawing waiting for his wife to do it, even if you're able to do it, don't do it." Kinza "What I do tell her though is that she must understand that marriage is difficult there are ups and down in marriage and that not every day is gonna be the same all that is important is dialogue and forgiveness so those are the two main components of marriage. Because there's going to be a time where she will have said to hurt her husband and there's also gonna be a time where her husband was upset or hurt her and the main thing for them to do is to sit down and communicate have a dialogue talk about what's going on and forgive each other. because for me to be where I am today our marriage have been married for 30 years and every day hasn't been the same they are there times where there's happiness and there are times where there's hurt but it's all about having forgiveness and communicating would your significant other." Eléa	
Country comparison - new social norms	"The life here in South Africa and back home is very different and that's firstly the social life. And when we dig deeper into how people live their lives within their homes, I will not lie first we amongst ourselves we are afraid of each other. I live fearing Inaya, Waqeefa for is afraid of Hessa and Badriya is afraid of me and Waqeefa. Simply, because we have become so hateful towards each other just generally and you also find that the hate that South Africans have towards us, we also carry that, project it towards each other. That is one of the things that makes our lives very difficult, because you find that someone has a problem, but they are afraid to ask for help because their fellow refugee from home because they fear that instead of helping them they will do things to undermined them. But back home, the problems of your mother it becomes your mother's younger sister's problem, her older sister's problems, your paternal aunt's	Deductive

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	problems, they are your grandmother's problems, to the extent that they are your neighbours. To the point that a neighbour carries the problems of their neighbours to the extent that you're in disbelief. When there is a funeral back home, it becomes everyone's funeral. You find that someone comes to live at your home without anyone complaining or anything. However, here you find that people come to a funeral to have conversations, and tomorrow they will say why did they hold a funeral sitting, they should have instead left it because they kept feeding us chicken every day" Aseela "Yes, I tried to teach my children based on what I was taught but this country is very different. Because I cannot teach my child what I was never taught, I taught them that a boy and a girl can't be friends but a girl and girl can be friends if a boy and girl become friends it will just end up in scandal, there is no way unless you will be strong enough to resist what that boy tells, so I taught them. But the kids in this country its only God, you teach them something but when they go to school they are taught something else. But I teach them what I believe will help my children, if they don't listen I know I tried." Malkiya "The one thing that I see is contributing to this thing mostly, I'm so sorry about this is but I think it's to imitate. We come from back home and there are things that we were taught growing up, a person must live like this and must behave like this, a child must behave like this and must live this, a woman must be like this and must behave like this. But when we arrive here, we find things that are very different from what we were taught, so we start copying what we find here. For example, back home you could beat up a child to any point you deemed fit but here if you beat up a child they call the police for you, no my mother is abusing me... You hear, that is one of the things that makes our children very rebellious and not want to listen to us, and you as parent once you hear someone telling you they'll bring the police for you, you think must I go to jail because of one child leaving the others to suffer." Sikitu (explain the concept of child abuse) "And we had a lot of respect you know there's a difference between our generation and the generation of today we were taught to have respect for everyone not just family members but everyone that we met and came	

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	across but today's generation is completely different. We respected our parents are not just our parents but anyone that we came across it's very different to today's generation very different" Yakoota	
Country comparison- community safety	"South Africa, firstly, there is that sense of fear that we have, secondly, we live here with no peace here. You're afraid to let your child go out on the road because you're not sure if that child will return home alive. However, we grew up in such a way that you could go out of the house and come back without your mother even knowing that left the house. You just wake up and you're told pick so and so up, and you will find someone from a certain street seeing a child on the road from a particular street and that person sends the child and tells them you can take this to a certain someone, that corner is where they live. However, here that is not possible at all here in South Africa, we have no peace" Aseela	
Country comparison- Understanding of marriage in SA	"In South Africa it's the men who are leave. Yes, in South Africa if you have an argument between husband and wife in the house, if you argue to much. You find that it is the man that packs his bags and leaves, he leaves you in the house" Inaya "I commend women back home they had patience, they use to suffer but they had patience, they never had nice lives. Can you imagine a woman would go to the farm, return home with wood on the head and a baby on the back and she should prepare food for the household. The husband when he returns home with her and stretches his legs. Will you say what we go through here is bad no, when a man pulls her ears, she never fights back. There is a freedom here that they gave us, a man could beat and even shout at his wife, and she would never say anything. But here the women here do not know the value of men." Iris (victim blaming) "When we were growing up, we were taught that a woman must respect and obey that's how we grew up back home, but when we came to South Africa a woman comes first. Whatever she says, is what must happen so we can no longer continue with the teachings of back home, especially since we know that a woman has value, respect and comes first. You hear	Deductive

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	me, what must we do we must also change, because we are already in a new country where a woman comes first just like an example. So, the same goes for children, children are taught to respect and love their parents, but when you're here you find that its completely different. When you try to discipline a child when they're wrong, like I said earlier they call the police on you. So, we are trying to live with the situation that we find ourselves living in. South Africa getting married is easy and divorce is easy.” Sikitu “He just tells you that he'll run away, he'll run away from us and he will go. I have married you, but you came here with your children and this one is here now with her baby now, so better I just pack my things and leave.” Lujain	
DV country comparison	“To be honest, we lived well with my parents, I saw how my parents lived well together however, what I am seeing now with my own husband is different. I don't know what it is but it's very different maybe it's because it's here in South Africa or what else whether it's the lifestyle aah its different.” Candice “When it comes to DV especially when compared to back home, I think relationships back home are better, because firstly when we grew up we never knew what our parents rooms looked like, you would never even see your parents underwear because of the way the physical home structure was. However, here its difficult you find that your children are sleeping on the floor and you and your husband sleep on the bed right on top of your children. I mean you guys are constrained, you can't even have intimacy freely. Its difficult because of the conditions in which we find ourselves.” Lea “But one thing I have witnessed here in South Africa is that you back home, to be honest not everything was perfect because life throughout there are ups and downs. It's not to say that our mothers lived a life where they were always happy from the beginning until the end but there was a certain level of respect, when our mother's husbands wanted to scold her he would call her in doors. Someone will tell you that she was beaten by her husband and outsiders wouldn't understand how. When she leaves the house, it was older people who were	

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	knowledgeable and had these experiences were the ones who knew that this one had a problem. But, you will find that, firstly the way in which people live. You will find that you live in a one bedroom apartment, you have two to three kids one room. Where will he shout at you? He has to shout at you in that very same one room, in front of the kids, what image is he giving those kids. You know, I tell my children, my sisters and other women that I have lived with here in South Africa.” Aseela	
Barriers to justice	“You see we can’t report because you know where the problem lies, is that you find other women telling you oh your going to report your husband, aah oh my God, she’s reporting her husband. Eeh, you hear, they first build a sense of fear in you, eeh if you open a case for him he will have issues. They will show you that reporting a man is a big deal. They don’t care that he what he is doing to your body is a big deal, you’re being abused, physically, mentally everything.” Aseela “I just decided to leave it because, they had asked me to sign so that he could be jailed for six years but the Islamic scholars came and told me aah look this is the father of your children. You have children together, you can’t get him jailed for six years, that’s a very long time, forgive him. But in the court they said he must be arrested for six years... His uncle also and other people who heard that’s all.” Lujain “but today her it’s all the time and you find people telling you to go to the police and I think I must take my husband the father of my children to the police, and based on the advice from back home you see that its impossible, you just sit there because there is nowhere for you to go and you also have the heavy weight of these kids so you just decide sit there and accept it all.” Candice “But you know what with everything that he did with all the pain that he put me through that day I was so sore my body was swollen I was injured badly but I knew I couldn’t go to the hospital because of that we had to go to the hospital they would have arrested him or the social workers would have asked questions like who did this to you how did this happen and I didn’t want my husband to go to the to the police or be to be taken to jail.” Maira	Inductive

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Some reasons for staying	“You don’t know we know each other human beings are oh weird so you might say this to someone thinking that you can trust them by the way they leave your house they’re going to go and advertise your business or they might even advise you know that is impossible if your husband that’s not the type of marriage that you should be in you leave your husband and after you leave your husband you find yourself that it’s either the person goes now when you’re single and you’re out of your wedding marriage they go after your husband or they are the first ones to go and talk about you behind your back saying that you are stupid you left your home after such small things so that’s the problem. I can’t just leave my husband just like that and then find myself being punished by God I don’t in the like a later so that’s the one thing that is keeping me there.” Yakoota “If I am where I am today with your father, its not because I don’t know how to talk or because I am dumb but because I a mother and I gave birth to you guys and you are where you are today I had to persevere a lot, I saw a lot, and went through a lot too.” Malkiya “You will also find that women are being abused by their husbands but they have to think about the fact that they don’t have family here to run to, but if it was back home, they could easily run to family to help them. You find many women, staying in marriages just because they have to and they don’t have anyone to help them” Lea “They have all those kids, where will they go with all those kids, whatever he does you have to accept and work hard to raise those children, its difficult. He doesn’t pay rent, its problematic, problematic.” Naka “So, there are so many problems in our refugee marriages its very bad. It’s just that people are in marriages, and they don’t have anything else to do they have nowhere else to go and most of them it’s just because they are living these marriages, they’re staying in these marriages because of the kids yeah it’s very sad it’s very difficult where do we go?.. The problem is with us the woman firstly you find that a woman is not educated she’s	Deductive

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	gotten up to grade 6, grade 7. Then we have no work but even with the fact that we don't have work we it's because we ourselves do not try to be proactive in finding work or creating our own work right so when I went is this it's very easy for him to treat you anyhow that he wants to if he threatens that he wants to kick you out of the house then he can easily threaten you because he knows there's nothing that you can do and that you will stay in the home because he is the one providing everything that you need... That's why woman suffer because the woman does not have a source of income, she has no work she does not have family she doesn't have school to back up she has absolutely nothing to her name except for him, that's why he knows he can cheat on you, or abuse you because there is nothing you can do. Abuse is ramped here in South Africa so much so that some decide let me just return home. We also have no one to turn to when we're in trouble because we are all scared of each other your problems are not safe with anyone." Thurayyah "And you know what this takes me back to how when we got married and how a lot of women get married it's not that you want to stay in a marriage because you love the man or because the marriage that you are in is that good is that some people some of us think back to should I go home I'm going back into the same situation I'm going back into a worse off situation because there's a difference between being treated terribly by an outsider like a husband because you can't expect that much from them. However, when it comes to your parent that's something that a lot of women a lot of us think twice about when it comes to going back home so that's why we'd rather persevere in the marriages that we are in. Especially in relation to our age and our position in life because marriage is difficult we go through a lot of things there are so many people that are going through so many things we are going through as we grow." Shukriya	

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Cultural beliefs about divorce	“I wanted to return home I wasn’t gonna handle this and it was just too painful however I remembered what my mother had told me when it came to marriage so I didn’t leave because I remembered what my mother had told me.” Eléa “Yeah, yeah. I grew up being told divorce isn’t a good thing, you get married and then you get divorced and return home, that’s not a good thing at all, that’s why I said to myself, aah aah I must be strong here. I will not get a divorce.” Reen	Deductive
Religion and divorce	“Marriage is all about patience, I would never like it if my child must be in multiple marriages. You get married here, you leave him and move onto another man, or he marries and leaves his wife and marries someone else. Aah aah, no, when you marry once you will stay and if you get married once you stay. You’re the one who chose that person no one chose for you; you have to bear patience and persevere until death do you part. Because us Christians we are taught that death is the only thing that separates a marriage, there is no other reason to separate a marriage. Oh, it’s because he was with other women so I must leave him, aah aah, death. Us Christians once you’re married you have tied yourself to a rope, never should the thought that I will leave one day or that I will leave this woman. You stay like that until she dies, then you can remarry, or you can get remarried. That is what I teach my children, when you get married you stay.” Emmanuella “I went to a family friend who’s also a religious leader in our community and this man would always come home he knew problems greatly he actually came and broke off 2 Islamic divorces we call them talaq so he would listen to both our sides and then he would always pick up that I was telling the truth and what he would do is tear up the divorces that my husband would give me and then on the second divorce I told him no let him give him my divorce I want my divorce I cannot continue living in this situation give me my papers let me go and get them translated into English and make copies of them so that I can have them. Even tell you I did not get to divorce like how these other foreign refugee women get divorced the way they just pack up their things and go no I got divorced because my daughter was getting married my first daughter was getting married and he knew this and he hid it from me he hid the fact that my daughter was married	

Code	Except	Code type
	getting married that someone had asked for her hand in marriage and they had already spoken about how much he was gonna pay for her bride price and where and when the way marriage was going to be and didn't tell me he didn't tell me the fact that man's family was coming over to our home on a certain day so that they can come and finalise the handing over of my daughter's bride price that was me I had enough." Maira	
Female perpetrators	"There's this one house in particular home where fighting was the norm but it was mostly the woman the woman was very confrontational was very argumentative she was that the violent one we can say so they would fight to a point where the police were the only people that could separate them but the lady died a while back so yeah but we grew up seeing these things" Yakoota	
Toxic femininity	"my husband impregnated a woman, she was a tenant of ours. We had given her a room to stay in our house and then she stayed there and what happened was whenever my husband and I would go out to the two of us and when you would come back home he would beat me. But when we went out the three of us me him and that lady, he wouldn't beat me and there were times where if I went out he would stay behind with that woman or sometimes you would hear that he has come in from work or something but he wouldn't enter that room. He wouldn't come to see me he would stay with that woman for two or three hours and then come back into my room where I was with my kids and that's how he got her pregnant." Eléa "And the reality of what I do what I do is because people here honestly don't want to see goodness for someone else everyone wants to see someone the other person suffer if I'm suffering, I want to see you suffer as well so that's why even with my closest friends I don't even leave my house to go and tell them my problems." Thurayyah	Inductive
Infidelity	"I think refugee women have one major issues and that is that their husbands have extra marital affairs. They chase outside so much, they go	Inductive

Code	Except	Code type
	after local girls, these Zulu girls, that why I see a lot of them have issues in their marriages and that's why they get divorced... when your husband starts cheating on you, he has a wife and children, sometimes you find that those children don't have food to eat. He can't find food to pay for rent for two homes, he must pay for this one and that one, a local and again spare some for the children and his wife must also have clothes on her back. I think this is what causes divorces.” Reen “however you find that some men just have children out of wedlock with other women so they basically cheated on their wives, so these things have an impact.” Wajiha “Hmm, refugee women are the one's causing trouble in their own marriages, you find women married to good men but they go and cheat on their husbands, that I never saw growing up but it's very common here.” Iris (women also have affairs) “You will find that a man has a wife and he has a mistress, when he comes home to his wife, he starts using harsh words on her. So, this one day, I get a phone call and they tell me mama Q you're forever defending your brother, come see him. So, I decided let me not go there by myself and get embarrassed we got there, when the wife asked him, he immediately asked her. Who told you to touch my phone? Do I touch your phone? She was beaten, I told him you will have to beat the both of us up, this is too much, and this is taking advantage of someone, you must get found out and you must also beat her up. Such things do not happen, that's when the man became upset and left abruptly. The woman's face is already swollen, all because she asked him about messages. Why are you chatting with this woman? Are you not embarrassed is there something that you're missing from home? That was a mistake, she was beaten until, I stood up as a fellow woman and said no you will have to beat the both of us up here” Waqeefa	

Code	Excerpt	Code type
Powerlessness/ justification for violence	“Sometimes, I think its because I don’t have a job, I don’t have a job, he himself he doesn’t have a job.” Candice “my sister was very timid and reserved and on top of that she also lived with her in-laws so that is one of the major things that affected her experiences of violence. This is because when you live with your in-laws in a large family you find that there’s some people that will love you and some people they will hate you and their people that will find ways to make problems for you, you always found her stretching herself, you could see sometimes she was doing things right and sometimes she would do things that out of desperation just to protect herself. Yeah that is that is what happened with my sister. Oh what I learned from that was that I don’t want to live with my in-laws I don’t want to get in a position where I want to live with my in-laws because everyone leaves everything to you all the household responsibilities are left on you find that they are 30-40 people in the household in the in the compound and then they leave everything to you and it’s really stressful it’s stress.” Thurayyah “I didn’t know what to do so I returned home, because I saw if I had to say anything we would get beaten. Especially, since I saw how he was in the moment it was as if he was possessed by the devil of his father was standing in his head. When I returned and he saw that I hadn’t brought anyone with, he continued to beat her up... In my mind I was like hmm we will see; you beat her up the first time and I kept quiet but the second time round I will not allow it” Inaya “I am in this foreign country, he is taking advantage of me because he sees that I don’t have family or anything like that” Malkiya	Deductive
DV and mental health	“I won’t lie to you, my whole life even now as an adult I don’t know, I can’t see something and I say that this thing makes me very happy or in my life I don’t know what to tell you. There is nothing that can make me very happy yeah [tears up].” Bilqis	Inductive
Protecting father-child relationships	“I am careful not to cause hatred between a father and his children, so I also don’t say much to avoid that.” Lamees “Ah, I haven’t been able to do that. Firstly, there are things that when you speak to your child, it’s like you build hatred within them, I may sit down	Inductive

Code	Except	Code type
	and tell them about my experiences, but my children may harbour hatred within their hearts and think so this is what my mother went through or so this is what my father did to my mother. She may think about things that are no longer there, eeh. I haven't been able to sit down and tell my children about anything that I've gone through." Siham "personally don't tell anyone not even my own daughter I don't tell her because if I tell her I'm going to give her a headache and now I will also be building hatred within her towards my husband." Yakoota "As a parent one thing I no, is that children or see what's happening in their home in the house but one thing I've told myself is that I won't involve them I will not tell my children about my problems not going on in my house because I don't want them to hate their father. God knows why he gave you their child, their child to be your child and that man's child there's an objective that God had when he gave you the child so it is not right for me now to put things into my child they will make my child hate their father. It is not good as a woman to do things or to provoke hatred between a child and their father all you do is try your best to make sure that your child is not aware of what's going on even though sometimes they can see but don't involve them" Beulah "Um, I don't tell her, I know the type of person she is. I know she will take it personally and it's gonna hurt her and when she's hurt she's going to hate her father so I don't want that for her." Eléa	
Reasons behind DV silence	"But I also think that people stay because even if they don't want their problems to be known to people. People will gossip about her, there are people that you many go and open up to about your issues so that they may help you. They may actually help you, but later they go behind your back and they tell other people that they are the ones who helped you with the issues that you were going through, without me this, that and the other. And that's why many of us with rather suffer with our problems and we have a lot of problems that you may say that you want to talk about, but you're scared because you think about things and	Deductive

Code	Except	Code type
	go eeh if I tell Aseela she will go and tell someone else. And that's why many of us with rather suffer with our problems and we have a lot of problems that you may say that you want to talk about, but you're scared because you think about things and go eeh if I tell Aseela she will go and tell someone else. I will hear about it here and there, meanwhile you thought that what you had told was a secrete between the two of you, when you heard it somewhere else it hurts. And it will hurt worse than that problem that was hurting you, because that thing hurt you but you were the only one to have known about it, but then when you hear about it from someone else other than the person you had told, you feel as if your naked in front of people. You see we are afraid to tell people about our issues, they hurt us and are affecting us, but to open up to someone because they may help us find solutions to our problems and to guide us in such a way that we see are in a better position by the will of God, but we are afraid. You sit with your problems and they finish in you like a drip, why because you're afraid that if I tell Aseela she will tell Inaya. Aah me and Inaya are not close I will not feel good, so that why many people we die with our problems at heart. You are afraid to go and tell someone, but you also find that someone else will just say aah I don't care let me tell someone so that it comes out, there are people who don't care, you can talk badly about them or not. I for example I don't like people to know my problems. I don't like it, I want my issues to remain mine and mine alone, and if I tell you Aseela. Then know that I truly respect you, you're someone I hold close to my heart. So, for me to place such high levels of respect and value in and for you to go behind my back and you tell Hessa, it will hurt me even more than when I kept the issue to myself." Badriya "Ah, it also because I didn't know people firstly. Secondly, you might go to someone and you tell them but after they have helped you, or advised you they you find that they may even give you an option that you never expected. What option is that it is for example I'm coming to you and explain my issues with you but instead of tell me to correcting myself if I am wrong or even if he is the one	

Code	Except	Code type
	with the issues let's look for someone who can go and talk to him those are very few people who can tell you that. Most people tell you that there are a lot of men, why don't you just go and look for someone else, you're still a young woman, look for some who will suit you. And during that time, that was the main trend then, yes and that's why I didn't want to do that thing, and if I did that I would've found myself getting into bigger issues that I even had, but I thought even though it hurt. I am the type of person that as soon as I pray about what is happening I feel much better and God helped and that's how it reduced over time until it ended. That's why I never told anyone, because I thought if I tell someone I have no reassurance that, they will help me with the matter, maybe they may make it worse for me, hurt me even worse.” Siham “You don't know we know each other human beings are oh weird so you might say this to someone thinking that you can trust them by the way they leave your house they're going to go and advertise your business or they might even advise you know that is impossible if your husband that's not the type of marriage that you should be in you leave your husband and after you leave your husband you find yourself that it's either the person goes now when you're single and you're out of your wedding marriage they go after your husband or they are the first ones to go and talk about you behind your back saying that you are stupid you left your home after such small things so that's the problem.” Yakoota “So, there's not that confidentiality anymore privacy in our relationships with other people outside our own marriages so that's the way the problem is because then you can't trust anyone you tell this person your problems they go out and review your problems to other no confidentiality at all. But these our families are filled with many problems.” Thurayyah “one trait I see in myself is that I'm patient persevere and that when I go through things that are too much to handle, I would rather sit down, and I cry. I try and let it all out when I cry because there is no point in going and telling people because what happens with people is what you tell someone, they will go and tell someone else and then they will just reduce	

Code	Except	Code type
	the level of respect to those people and if it other people that they might have told will have for my husband.” Eléa	
Religion and DV	“all I tell my daughter is that she needs to persevere the Quran says God says in the Quran he is surely with those who are patient so that’s what I tell her that with everything that comes she but know that God is with her throughout and everything has a beginning and end. When things befall you it’s not that God hates you if he hated you he wouldn’t even give you this breath that he gives you to believe right so more than anything it’s just to understand that everything has a reason and especially within marriage you need to be patient and persevere through it all. Without perseverance in a marriage, you cannot last.” Yakoota “And as a couple and especially when it comes to Satan, Satan doesn’t want to see people married he doesn’t want to see people in peace and harmony so this way he tries to come in between two people that God has put together. So he always tries to bring in conflict into your marriage but as a woman who is the mother of your children and the woman within your home you must try every which way to make sure that you stabilise your household. So, if you have situations where you find that your husband gets angry and he raises his voice and he starts shouting you need to know at the back of your mind that you’re not I need to lower myself I need to humble myself so that he comes down and that things don’t get blown out of proportion. So that the conflict again and also that he can calm down. This especially if you got married without being forced you have to know that marriage is not gonna be easy so if you married him because you loved him and you are not forced you have to try especially hard to make sure that you succeed in this marriage...” Beulah “our religion oh, because there are other things that you find a person, like if you’re being physically abuse you will hear people telling you bear patience. The religion says this and that, you find that your made vulnerable to a lot of things.	Inductive

Code	Except	Code type
	Because you know what, like if had to listen to my husband, there are a number of things that he refused me to do. When I first arrived, when he says no I also followed, why because I respected my religion, you understand so, to be honest I can't our religion sometimes also contributes. Because it also depends on the man, because you might find that your man, doesn't think properly. When he is told to think no, a wife should be like this he believes that she should be like that. And this thing of saying, oh because Islam says a woman must not work, you shouldn't do anything, you find that someone people, he is using that without analysing the situation at home. Do you understand? You will find that because you are respectful of the religion, you respect him, you don't do certain things just because you respect him but the life that you guys have is becoming worse." Inaya	
Culture and DV	"Aah, what I can say is, I never grew up with my parents, when I was six years old my father died. After that my mother was chased from her in-laws house because in my culture if a man dies and he has brothers they can marry you. So, when she said no, I have 14 children and then I must go to another man who can trouble me she refused. So they, chased her out and they said that they will remain with the children, she was sent to her home, that's when they divided us." Iris "Like you cannot go home and tell them that my husband beat me up, if he wants to beat you up he can beat you and people outside will be able to see the signs of that, but you cannot say why he beat you" Bilqis	deductive
Perseverance/ Endurance	"Oh, before my mother died I would call her and tell her my problems and she would tell me that marriage is all about patience, you must try and persevere, that is jihad, if you pass that test then you would've won." Lamees "As a woman you should be patient with men, they are like children very reactive I tell women that they should have patient. I commend women back home they had patience, they use to suffer but they had patience, they never had nice lives. Can you imagine a woman would go to the farm, return home with wood on the head and a baby on the back and she should prepare food for the household. The husband when he returns home with her and stretches his legs. Will you say what	Inductive

Code	Except	Code type
	we go through here is bad no, when a man pulls her ears, she never fights back.” Iris “Yeah, I never got the chance to speak to my parents as an adult, I would speak to my elder sisters and brothers as an adult. They would advise me not to carry myself in certain ways, a young woman carries herself like this and that. They would tell me that I must respect my husband, I must persevere. They would tell me to persevere.” Bilqis “My mom told me that when you get married, He is testing your faith he is testing you perseverance... I passed on what my mum taught me and that to my daughter because I told my daughter you’re going to get married you are going to another family space for learn how to be a good wife have patience and persevere yeah marriage is not easy persevere throughout it all and you will be fine” Yakoota “Yes, I have spoken to my family, I have even taken the matter to our church and the pastor tells me to pray to God and the family tells me to persevere that’s the advice I am given.” Candice “To be honest, what I learned from observing her experiences was perseverance, to stay strong and to work hard. A woman should work, a woman doesn’t get tired, when God gives you children, hold on to your kids. Keep them in one household, look for work so that you can feed your children, don’t focus on a man at the time of struggle. That is a piece of advice my sister gave which I still hold today” Khuloud	
Young women’s refusal to marry	“that’s why most of them don’t want to get married.” Waqeefa “You know there are young girls when you tell them about marriage, they tell eeh eeh no and when you ask them why, they say its what they see from their friends, their parents. That is one problem that is prominent, and that’s why I say interviewer the best place to educate our children is in the home, because when a child witnesses violence between their parents, they believe that that’s what married life is all about. Meaning that mommy and daddy fighting is normal and that’s just a part of normal life, mommy being beaten is normal.” Aseela	

Code	Except	Code type
Regretting marriage	“I sit down and wish most times that I never got married, I should’ve stayed by myself.” Candice	Inductive
Teenage pregnancy	“I lived a very difficult life until I got pregnant, I had my baby and just continued living until I just continued living my life. I would say that, since 1999 I suffered greatly, I lived with boyfriends to help me raise my baby” Lujain “We was four girls you know she was scared maybe when you grow up you gonna go to make the mistake with the boys. So she tried to make us to see between if you if you going wrong the consequences you’re gonna get hmm so focus just teach us to stay away for the boys first.” Chinira “My older sister also got pregnant just before that but luckily for her, her baby’s father married her, so I just believe it was that fear.” Shukriya	Inductive
Male dominance and power [gender roles and justification for abuse]	“Even when you’re sick, you will stand up and go cook by yourself. Even if you were in the hospital and you were in drips, when you come back home you will have to make him pap.” Badriya “When we talk about domestic violence it’s in so many different ways that we don’t even understand them. Because that is to abuse someone, you might say, like some of us that gave birth by c-section, you will make pap with that wound, you will hold yourself to prevent any cold entering your body. Someone tells you he wants tea, you will stand up and make it for him, you can’t say no.” Aseela “overtime I realised that and if I think about it now I realise that this man didn’t want me to be empowered in any way shape or form. I forced myself to work I forced his hand for me for him to allow me to work I would sell on the streets but he would get very upset that I was working that I was earning money it got to a point where he didn’t even give me money to start up my business... So what I decided to do was get a loan from my neighbour... He’s six years older than me so everything that he did form the behaviours that he enacted while we were still in Congo this all just came down to me on that day that everything that this man was doing was intentional and his intention was never to help me or to be anywhere in life he just wanted to control me and do as he pleased with me to	Deductive

Code	Except	Code type
	a point where I wouldn't have anywhere to go or fall anything to fall back on." Maira	
Talking about DV (colour coded) • Selective communication • Cultural norms about communicating experiences of DV • Family reputation • Importance of talking	"Talking about your personal issues especially those within your home are not allowed. You know there are times where you tell someone your personal problems, but they won't give you good advice, they sometimes tell you how can you continue living with this man like this and they bring your long stories to the point where you see what they're telling you is true. But then you sit and think to yourself aah aah, today he is like this but tomorrow he may change and I may be able to change him. And I can also change, because the time I saw how my mother would mediate when couples had conflicts, they would come to her and she would give them advice. She never told them you must also leave, get a divorce do this, do that she would tell the women go back to your husbands and live with your husbands maintain your marriages. Things like that." Reen "My whole life I've never had a friend that I've gone to them to tell them that my husband has done this to me. Even when, we would have conflicts he would be the one going to tell on me. I don't know how to complain to people." Bilqis "It is very difficult for me to talk to people about what I went through. If someone hasn't asked me about what I was going through it was very difficult to just open up and talk about my experiences, they were just mine." Iris "There is a woman who came to me, she's from Burundi, when she arrived her husband use to tell her to take some tablets every time, they had sex. He would tell her to take them everyday but not to tell anyone about the tablets, she told me that she took them for about eight months, the man would make sure that she took the tablets before he left, in the afternoon	Deductive

Code	Except	Code type
	they would take them together, he told her not to tell anyone. That woman kept it secret for months, but then she took that bottle containing those tablets, she told her friend there is something I want to ask you but please keep it confidential for me, she asked her what are these tablets for? Her friend told her these tablets are for HIV, its people with HIV that use these tablets. She started to cry and scream, her husband was at work, he didn't know anything, she was inconsolable they had to call her husband when he came and asked what the problem was, she took out the tablets and told him so you're sick and you gave me HIV. That's why something are not to be kept secret, I came here as a guest and you gave me these tablets.” Prospère “And within homes there are problems that you can say it's a secret and others you can't remain silent because if you do it may get you killed, so you have to put it out in the open, in order to find help. I must instead take my issues to elder women they may be able to help me, because I must and there are others that are just easy. You know you can manage its fine things like that. Problems vary.” Lea “You know it's good to speak up especially if it's going to help you, but make sure that what you say at the end of the day it will not bring you problems.” Sikitu “With regards to myself, I never liked to hide my problems, because as women we all have problems in our homes and because everyone has problems in their homes, when you sit down with other women and you talk about your problems, others will also discuss theirs openly and you would advise each other. I honestly never hid my problems because I love talking, yeah.” Khuloud “I have tried to tell this elderly woman who is my senior here, she often tells me her own experiences as a married woman, and when I analyse it I	

Code	Except	Code type
	see that her problems are much worse then my own, so because she is wise she doesn't leave. And you yourself sit there and see how she's gone through all of this and has remained in her marriage throughout it all, she's raised all her children with him, and then she tells you that they have all gone through it." Candice "I think its because they are afraid of people laughing at them. And I don't think that's nice because, they don't find a solution to their problems, because with somethings if you remain silent, they may cause physical complications and you yourself are making yourself sick. But when you talk to people you feel liberated yeah." Kinza	
Normalisation of violence	"And when we come to the issue of abuse, people back home abuse is a normal thing, people have killed. Not so much like us who grew up in the city but mostly those who lived in the countryside. A man can beat up his wife to a point here he sets her alight." Aseela "Yeah, conflicts are normal they would occur in the home, like you know how we black people say that conflict between a man and his wife to fight is part of normal everyday life." Khuloud "He is beating her out of love... Yes, there is a slap out of love... It's when he beats you but a soft one just out of love" Emmanuella "However his elder brother came to him and told him like you know what this is not this is like situations back home people don't beat their wives up here if you have arguments or you have a problem you have to find amicable ways to solve your issues you cannot be beating up your wife it does not work in this country and then his brother had asked him to apologise to me he apologised but he apologised by force but you could see that he didn't want to apologise." Maira	Deductive
What it means to be a mother (for the sake of the children)	"I mean being a mother, the main quality is that you must be present to take care of your children, and to take care of your home. Making sure that you guide your children, from going astray, just to be there and control	

Code	Except	Code type
	them, so you see someone of us who grew up with stepmothers have a very big experience when it comes to telling your children that if they do this they will be on the right path and you can honestly tell them that today you're with me tomorrow you may not be with me, so you must behave like this so that you can get the opportunities to move further in life. Where you teach them that when they do this they'll be wrong and when they do this they'll be on the right path yeah... I can't say that, but when I got married that's when I saw hmm here, you know when you're married conflict never seizes but I said here I will make sure to give my children a good life. I will not just let a man defeat me and I must leave and let my children be raised by a stepmother you see. So even if I suffer, I will suffer but it is for the sake of my children, yeah that is what I learned. If I suffer, I will suffer because of my children, I don't want my children to be like how I their mother was when I was growing up with my. Stepmother, I never got the chance to grow up with my mother, so I thought it be best that my children are raised with their mother in the same home." Lamees "A mother is a very important person in the life of her children, even in the sense of being human. A mother is a someone who brings joy in the life of her children and when a child doesn't have a mother you have lost everything in life. Because the life that you will live when you're with your mother and the life you live without her is something very different, a mother is a very important aspect of her children's life. There are also women who are good to their children, and her children aren't always that great to their mothers, but a mother is a pillar of strength and support to all her children." Siham "I learned some think big I learned something very huge especially in terms of how a woman should carry herself. Because my mother focused on her children she focused on us and she wasn't involved in weird things. That taught me a lot because when I got married, this was my first marriage where I had my first child my first husband had left me. I had found myself in a situation where some people wanted to marry me as a second wife,	

Code	Except	Code type
	but based on what I had seen with my mother. I had refused to get married and be someone's second wife because it hurts for you to be someone's wife and for another woman to target your husband and decide that she wants to now be his second wife it hurts, and it causes a lot of problems that's why I refused to do that. It is something that I witnessed and observed and I had promised myself that I would never ever be a second wife to any man." Wajiha	
Seeking help from God	"I don't feel like talking to anyone because I don't want to give people a headache, I mean these are my issues let me just continue fighting, if it becomes too much I just sit on my prayer mat and pray to God to help me." Lamees "I would sit on my prayer mat and I would pray to God. That the situation that I was in that he helps me that I come out of that difficulty." Siham "But out of everything one thing I would say is the power of prayer one should be very prayerful when it comes to marriage because everything that happens within your marriage is not without its lessons without its purpose so I really do pray a lot because I learn a lot from that. Take my own experiences with my husband. So, whatever happens in my marriage or in life I pray and because of my prayer God places a barrier between me and whatever evil is within that situation that I face. And with every situation they are positive effects as well as negative effects that I learn from the situation that I face within my home. Yeah I just tell myself when things occur that you know what there's a reason why God brought this man in my life and why I am in his life." Beulah "I just keep quiet I just say to my prayer mat and I ask God for his assistance I also do the optional fast and I just keep praying that God makes things easy for me and I see it changes my mood and it also just gives me some sort of inner peace that's what I do that's all." Yakoota	

Code	Excerpt	Code type
	“What I did was I just prayed and I kept praying to God to give me strength” Eléa “So, that’s where I drew my strength from, from God and understood that God, God is the one that gave me these kids through his grace there are blessing to me so I also took that as if I should leave my kids and decide to go run away from my marriage then what would happen to my children the people of this world who would laugh at me and my children will become unruly so that’s why I stayed firm in my marriage and I stayed and I persevered throughout it all because I gave it and I left it all to God.” Zaylee	
Home environment: • With own parents/family • Current	“I didn’t live long with my parents but the time when I was there I saw a lot of things I saw. There were a lot of arguments between my parents but there’s arguments while largely because my father wanted to marry a second wife and my mother was very upset at that. Because when you look at our financial situation back home he wasn’t financially secure enough to even marry a second wife so that was one of the things that really upset my mother and caused a lot of the arguments between the two of them. However, they did remain together even with everything that was happening, so we just left it as it was and we just watched but that is what I witnessed.” Shukriya “When it comes to my parents, I won’t lie to you I don’t ever remember seeing my father shouting at my mother for them having any sort of argument or issues or conflict how I think I don’t know maybe it’s because I was too young to remember or to notice but I don’t say anything I don’t remember anything” Beulah “Life was hectic for me because I wasn’t raised by my mother, and I had to go live with my brother from the same blood and then I wasn’t treated well there. That’s why I said earlier that I was a sorrowful child I was constantly crying, I would want to eat meat or do something small and would be shouted at. Now, I compare that to the way in which I live with my children, I was never happy... I	Inductive

Code	Except	Code type
	had no value in the home just like you see a slave lives in the home, that's how I lived." Iris "I never not once witnessed my parents fight or argue my father was a very loving caring man he was never violent he was never violent man our house was a very peaceful home it was a blessed home which was such a beautiful place such a lovely environment to live in" Maira "Ah, my parents would shout in front of us, and when he was angry he would call her a side, but when we got older he would tell us you see what your mother has done, and we would tell our mother that what she was doing was wrong, but I never saw my parents shout at each other harshly in our presence aah aah." Kinza "Yeah, you know back home it does affect you, but it doesn't affect you that much because you are surrounded by family, you are surrounded by people will help you and support you hmm. So, you just get to a point where you think to yourself this is my parents life my mother and father you see what I'm saying? So, it's like you don't really see what's happening or it doesn't affect you that much it's just like you know it you just grow up not seeing your father around eeh, but it's like you just grow up seeing that this is a normal part of life because you've got everything, you have food, so you see." Wajiha "He just decided, if and when he decides to start a commotion he starts it. He may wake up and just, its because of my two elder daughters. They are not his, the two younger ones are his. So, when he decides to wake up in the morning with noise, your children things like that it's just a commotion, until today. Conflict, yeah...hmm, he doesn't beat them, its is just me there mother yeah. Its just that my younger daughter from the two, she fell pregnant and doesn't want her in the house with us. I mean even the day that she had a baby and she must return home to live with us caused a lot of conflict because he didn't want her" Lujain	

Code	Except	Code type
	“God helped me, He gave me a man who understood my pain. There are no perfect people, but if we were in good life then I know I would’ve been 100% complete. I got man who is respectful, understanding, he understands when he is wrong and is the first to apologise. Maybe if we were back home where we would’ve had a great life, I would’ve have been extremely happy, I don’t know how to say it but very happy.” Iris “I’m sickly I suffer from high blood pressure they don’t care about that I don’t understand why this man married me. I don’t know whether he married me because he wasn’t looking for a maid so that he could bring all his people to so that I could save them or if he was truly looking for a wife but I’m suffering it just gets her point where you just wish people could appreciate you could appreciate the work that you do and they don’t even thank you for the work that you do and they don’t. I’ve gotten to a point now that if someone looks at me and appreciates what I’ve done I thank God because I see that this person truly loved me who loves me but those other people everything is a problem they always looking for an issue they have nothing that have done is ever good enough for them and we had just been just sitting there quiet and just let them do as they please and he also adds fuel to the fire so yeah that’s that those are my experiences.” Shukriyah “yes I am married but he’s just like a husband that you just call for namesake you just say he’s your husband but he has no value he’s no qualities of her husband so I don’t even consider him as a husband he’s just give you the title of a husband. You know my dear it’s because the life I live as a married woman it’s very different to how other married women live and then if I keep talking, I’m gonna start crying but my life is very different it’s very very difficult. I survived because my daughter and my son that recently died were the only ones were the ones helping me, they	

Code	Except	Code type
	were the ones providing for me so otherwise I'm really suffering I'm facing a lot of problems." Yakoota	
Parent-child relationship • With parents/ caregivers	"I never had much love or affection for my mother, that's because I wasn't raised by her, I loved my father more, I began to know my mother later in life and that's when the love increase where I realised that this is my mother...most of my love was for my father because he was the one whom I was with, you see if you get sick it was him, if you needed something it was him who provided everything, and I mean everything. I wasn't very much with my mother, so that's why. I never got to experience my mother's love, like how other children grow up knowing what a mother's love is, eeh I never experienced that because I was with my father and my stepmother you see" Lamees "You know we was scared of him you know, when you don't see your father every day you don't know inside what when he get angry even if before he was just angry person when you get it back a bad report you get punishment." Chinira "What I learned from observing my mother was the injustices that are prominent within parenthood and I pray to God that I am not one of those mothers that will have children that they will love more than others... That is one of the biggest lesson I learned from watching and observing my mother that you cannot choose between children you have to be fair with all your children you have to be just and treat them all equally" Shukriya "I would tell my mother got to a point where I, I told my mother about what was happening in my marriage and he was so furious she was so angry about what was going through and she would ask me why am I still in this marriage because she didn't even call it a marriage she didn't believe in that this was a marriage because she would tell me that that is not marriage my dear marriage is to be appreciated to be shown love to be like you know she told me everything that was gonna be marriage and she would reminisce about her own relationship with my father and how other people are in their marriages. So what I was going through she did not believe that it was marriage she pushed she tried to advise	

Code	Except	Code type
	me the best that she could to leave this man but I was crazy in love was foolishly in love.” Maira	
With own children	“Live with your children in such a way that when they are wrong be kind, when things are good continue to guide them but don’t use force, do not harm them, that you want to undermine them, you guide them, and they will understand because you’re their parent. You guide them they will grow up understanding what you’re trying to teach them. And what they do is wrong, show them that it is wrong and why it is wrong and if what they do is right reinforce the good behaviour. Do not just live in such a way where just because you are the mother of the house that you treat them terribly or you want to show the person who married you that you have a voice and power over the children.” Siham	
Observed normalised behaviours (the nature of men)	“I just learned to be patient and not to be angry with everything your husband. Because that time when my father was angry he would put a lot of bad things on my mommy he would even put the bad things on my mommy’s family and his family say you see this woman I go out to look for money and I just asked her to look after the kids too much things so I guess the way she was quiet she didn’t just say yay this happened and this happened why don’t you just come and help me to look after these kids focus on herself and do for herself she was just quiet and just accept everything. She saved the mistake and she even asked for forgiveness and says that she will not do it again I am going to do better now. I am going to focus. So I just learned from that in my country they say their mistake of the man is right they don’t make mistake, so make the life better and to make life go and then to keep your life going. That is how it works.” Chinira “It honestly showed me that men are not good, but what we need to do as women is to be strong and that you will live in a marriage just for the sake of living because you are a woman. Yeah, but to say that you’re truly happy to say that you must be excited about your husband, because he is your	Deductive

Code	Except	Code type
	man, you find that that isn't there, because of what you grew up observing from childhood. When you realised from a young age that a man isn't someone who helps develop a woman.” Khuloud “Yeah, the one example is for a man who doesn't care nor have mercy, its not all of them but they're men who care for their wives and have mercy, when he sees that his wife is sick, he also sees that he is sick that is love. But there are those who have no mercy or compassion for his wife, you get sick or anything he doesn't think about you, all he wants is his needs to be met, make me porridge, do this and that for me. I mean if you have to say that you're sick, he complains that you're always saying that you're sick, or something like that and you find that he slaps you. That type of man who doesn't care, but if he had compassion, mercy and love he wouldn't do such a thing” Badriya “What I know based on my church teachings a man, if you refuse him once, twice, the third time he is human and if you refuse him his heart will turn away from you and for you to get him back it will be very hard. It's not that because he refused to give you money that you should prevent him. The nature of a man and woman are very different, I am able to stay a year even if I want it I won't be so enticed that I will just go to anyone, but with men you will hear today and tomorrow they had abstained but if it goes beyond that he makes sure to get it and if gets it from one who is better in bed than you the game is over. Even if you get to a point where you realise it, it may be difficult for him to come back 100%.” Iris “If you continue like this your eldest son will do the same to his wife and if I were to be disrespectful our daughters will also be disrespectful to their husband so let's do better. But now my daughters are seeing that when he shouts at me I just keep quiet and let him continue and only talk to him when he's calm and that's the behaviour that they will take, so I want them to observe better behaviour.” Malkiya**	

Code	Except	Code type
	“It is because why should I end it like that, you have to let it go, because people are different, there is a man who is wrong and has issues and cannot change. There are some who are very (inaudible word), there are many whom, I’ve heard about here that if you guys have a small argument and you report him to the police then that will be the end of the two of you. That’s why you find that some people cannot.” Inaya	
Mothers advice to daughters	“But I don’t talk to her about issues of marriage. I teach her about the importance of an education for her own life... But if she studies, it will help her move from a life of poverty, but about marriage no, she sees how we live with her father.” Iris (sometimes not talking about marriage and what goes own is a mothers way of helping their children focus on finishing their education) “I would advise them to not rush into marriage, they should study and focus on their futures. If they agree to it I wouldn’t them to rush into marriage they should develop themselves first focus on their futures. There are men who before marriage will tell you that he’ll take care of you but once he marries you and you’re in his home he starts abusing you, but if you have your education, your own work, a man respects you, unlike those who do not have a future you don’t have an education your completely dependent on him. There is a big difference especially in this our Swahili generation there’s a big problem, you must focus on your education and developing yourself otherwise you’ll face the same changes we do. That’s what I will say” Lamees “And apologise to him and try to show him they cannot angry with him,” Yakoota “The main thing that I teach her is that she has to be strong and to have perseverance in when it comes to things like marriage. I tell her to not rush into decisions especially rash decisions and to have perseverance that is one those are the things that I think she knows of me and she observes about me as a woman as a wife. So when you have a fight with your husband that now you just want to make rash decisions and then you want to leave or do things that are gonna cause issues in the in the future so that’s one thing I see that she’s observed with me and she watches umm	

Code	Except	Code type
	and another thing is to respect your husband that's something that I really do instil in in her that respecting your is vital." Thurayyah "I was very happy because I saw how when one was angry the other one would calm themselves, because for example when my mother knew she was the one who was wrong she wouldn't say much, and she would just let my father talk so that it didn't end up in a major argument. I learned a lot because it taught me that when I get married God willing, even when I am in the wrong I will not shout in front of my husband, or even when he is the one who has wronged us, I will wait for a time when we are in good terms to tell him that he had wrong me. Kinza "I have taught her to stay silent, do not tell anyone, don't tell many people your issues just keep quiet. This is because they will go and tell others... I teach her that she must be a quiet woman, shouldn't talk back, the same goes for the children. They must be quiet when they see things." Adette "I just prayed that my children will be wiser than me and that they won't allow themselves to just be treated the way I was treated and I will definitely always have an open door policy for my children when they want to come back home." Maira "I help them by waiting until their father finishes to shout at me and leaves the house. I know they saw everything, and I pull them close to tell them that you see what your dad did that's just how he is, don't worry about it he always shouts. I am just grateful that he shouts and then later once he's calm he comes to apologise, so I tell them that's how a man should be, because when a man is too calm and peaceful with his wife she starts taking advantage of him because she knows that I can talk when he talks"	
Impact of war on families	"The war brought with separation, divided families, that was one of the biggest impacts it had on us... You didn't know where your family members were, we lost each other, a mother didn't know where her children were, and children didn't know where their mother was. Only after a time then you'd hear that someone was seen somewhere here, or that the person died, some die, some disappeared you didn't know where people were... That war caused women and	Deductive

Code	Except	Code type
	children to be raped, people died, they will kill you father, your husband, your brother, your children. They take you and rape you; they rape your children and make you watch. All this caused us to separate, and most people didn't know where others were. We suffered a lot" Naka "Hutus and Tutsis, so this conflict was instigated by both groups, so the people who were killing each other, within the home you found that married couples some of them they killed each other. The husband killed the wife, or the wife killed the husband." Inaya "I would say that it contributed greatly to the incidents of domestic violence, like Inaya has just said, there are people who were from different ethnic groups, that caused a lot of problems because I know someone who was married here, her children let's say your brother denied your children because you got married to Hutu. He refused them completely; your brother denied them completely because you got married to a Hutu. He forces you to remain in that family because he doesn't want mixed breeds in his family. Firstly you are now left to fend for yourself because you do not have anyone to support you when you need help, because your family doesn't support you, and the your husband's side they treat you like a dog because you're from another ethnic group. So, you find that you are here in the middle, and you have no peace of mind your family doesn't want you because firstly you married a Hu...let's say you are a Tutsi you will find that the entire family disowns you. Now, in that family where you went and got married, they also don't want you because you're from another ethnic group. I mean all these things especially in our countries we have a lot of problems from Burundi to the DRC. You find that people have real problems, you find husband and wife leaving each other because of ethnicity, your brother refusing to recognise your child because of such things can you imagine. Someone kills their sister's child because they got married to another ethnic group." Aseela	

Code	Excerpt	Code type
Substance abuse	“But when I got to high school things started being tough, I started having bad friends and started doing drugs and stuff like that, I was never at home. I just felt like that use to help with the situation at home. Yeah, so, that’s how I grew up.” Wadida	Deductive
Mental health issues	“Yeah, but it also affects us, maybe we don’t know what’s in his head but he also doesn’t know what we’re going through but then we are like haibo why is he just giving up on us” Kaisa	Deductive
Understanding of DV by participants	“ Okay the way I have seen things is that people end up fighting and killing each other because you can’t just start domestic violence and think that it’s going to end there. You, know so some people start fighting, killing each other aah, that’s all.” Cyrie (misunderstanding) “Firstly, to talk about DV we need to understand the definition, it could be psychological abuse, physical, emotion... damage of property, harassment, yeah all that falls under DV” Arwa	Inductive
Normalisation of DV	“Aah, I feel like it happens in each home, majority homes but we don’t see it we don’t tend to analyse, we don’t tend to put it in our heads because we see it a normal thing we see it every day, like Arwa said we see it as a normal thing, so we don’t put	Deductive

Code	Excerpt	Code type
	it in our heads. Oh, this happened, or this happened, so we just take it like a normal thing, and we continue.” Ghaliyah	
Parent-child communication	“I can’t tell my parents that I love them, we just grew up like that you know. We never bye, have a good day that I love you, it’s never that so I can’t even say it know it’s just like so weird like you know, you love your parents like you just can’t say it. I can’t express it because we weren’t taught how to express it, yes, its always fighting. So, I just want to change that be different yeah.” Avril	Inductive

ANNEXURE F: ADULT DAUGHTER CODES

Talking about DV (colour coded) • Selective communication • Cultural norms about communicating experiences of DV • Family reputation • Reasons for remaining silent	“Yeah, that’s what we call bearing patience and persevering, that’s you do. Some abuse and ill-treatment you have to persevere. I am saying this as someone who is married, there are things that you may persevere with, but when you get to a stage when he is over doing it, then you have to tell your siblings, ey I am tired, things are like this and that. My husband is doing this terrible thing to me me, yeah things like that.” Fareeha “Sometimes, when it happened a lot, especially if you can’t handle it anymore, we would go to our aunt. My aunt would just calm us down and tell us that you know what there’s nothing that you can do or you just sit there and be patient and also try and focus for those of us that were in school my aunt would tell us to focus in school so that one day we can grow up and have good jobs so that we can help our mother out yes.” Mawiya “Yes, there is because one thing I have noticed about us refugees is that when something happens within the family they always keep it under the carpet. You must remain silent you can’t tell anyone, because once you start telling people and then you will look like you’re the bad one, even the people who are outside won’t even feel	Deductive

	sorry for you. They will be like you should have kept quiet because this is your family and this and that, all those the thing.” Wadida “No, you were not allowed to talk to anybody, you couldn’t talk to anybody, it was just like ah I don’t know, you can’t talk to anybody about it because at the moment when you talk to people about it and you’re embarrassing. At the end they call it embarrassing, you’re embarrassing your family, you’re embarrassing your mother you’re putting your mother in such a state where she is even embarrassed to walk on the streets, or they will disrespect your father. Because people outside they, don’t actually see him that what, so you can’t actually talk about it, there was no option as in talk about it, that wasn’t an option, right there.” Abir “Sometimes they won’t believe your words so she’s like I told her why can’t you go and report him she says if she tries to report him they might kick her out of the house so she doesn’t know where she after what she goes insane so when I was like if I were you in your place I would go and speak out because you would be helping other young women who are outdated cannot speak out so you be bold enough to go into because she’s like if I have to speak out they will get through they can throw me out of the house and I’ll have no way to sleep so I guys there’s one on my part that speaking out is the way it’s the only way to go.” Fridoline	

	“I’d say when the case maybe rape, another thing that would like hold the person to not speak out because of the communities we live in. People are so judgemental like let’s say for example I know this other girl that’s recently told her mom that she’s been raped for four years find that neighbour so now people in the society started saying like oh no she was just enjoying herself, how is she now speaking out after four years all these years where she didn’t speak out. You see all of this now will just affect even the victim more because they’ve already spoken out and now people are judging her you see?” Donatille “Some situations that are extremely difficult because the people that you are dependent of on most us are dependent on people so it’s difficult but it is something that you have to speak out about I believe, even though you might be scared.” Murelle	

Gender roles (male dominance and power)	“For the girls I think it’s the way they dress, when they like giving men’s attention to get abused or something, or maybe by the men’s they let the, wait the men’s get angry by hitting the ladies. Or maybe when she didn’t cook or she didn’t come early at home, what other ones, she refuses to listen to him. Or she wants to do anything, like she wants to do her own thing that’s when the man starts abusing her.” Ninziza “Well, you know as Africans it’s like they have this thing where men are at the head of the house and we are above men so they can do anything they want so now we have no say in anything because if we say something it’s not it’s not that value doesn’t have that value.” Dikla	Deductive
Parent-child relationship	“Oh yes, yes uh one thing also okay this is one of the one things with me and my parents we have this cool relationship” Falak	Deductive
Favouritism	“ In our house if there is an argument especially between the siblings there is no peace. Even to sit and eat on the same table the person would just take their plate and go eat somewhere else. It also hard because when like the parents also go and choose this child and then the mother will choose this child and then the father will take that child choose that child’s side. That will also bring a quarrel on the parents so like that house is just disrupted there’s no peace, there’s no harmony unless they get that one	Inductive

	person that would just take their courage and ego and put aside and go and say sorry.” Fridoline “ parents have this tendency of comparing their children’s other children success. um for example academically mostly academically. Instead of clapping for the fact that their kids are trying, they just compare them to other kids.” Donatille	
Understanding what a good relationship is	“You know, sometimes the child you need like that love from a parent. It’s not about paying rent and providing food and buy clothes. No, let’s not even talk about clothes, coz he doesn’t buy for us. The only time that he buy it’s like when its Eid and that’s it.” Husn	Inductive
Current home environment	“I think that 99% of domestic violence by our fathers his is excessive, this also includes our mothers....For example with myself our father works but he doesn’t know how the household runs he doesn’t know how we eat or if we eat he doesn’t know anything about us. I mean he doesn’t know anything at all, he works he goes to work, comes out of work he has money if he leaves in the morning he will come back at night. He isn’t even ashamed of the times he comes home at and will still demand to be fed. You will even hear that he went out and he has a mistress out and that mistress will go and praise him in front of people that he gives rent and provides everything for her. Meanwhile he doesn’t even give his kids 1 cent.” Mawiya	Inductive

	“Because he is that father that you know when he comes from work, the whole house disappeared like the people disappear, everybody runs away coz why he’s always coming in ready to insult people, to swear and everything.” Husn	
Observed barriers to leaving abuser	“Maybe because she had children with him that’s why, it was not easy for her to just leave him and to start a new life... Because they’re scared and they are not able to go to the police station and report like that and someone of them have no jobs, they have no family around them. So, it’s very difficult for them to report the domestic violence” Yumn “Because they already feel she’s already here, her life is better maybe going back will be like you know, with kids. The parents are struggling going back will be another headache for the parents so that’s why they would tell her to persevere, you know marriage that’s how it starts off maybe he will change.” Kaisa	deductive
Cultural understanding of a wife’s place	“it’s not really physical but its really hard for me to tell a person sorry see, maybe I make a mistake and then I will just stay there and just look at him and then. He is going to get angry and he won’t talk to me for the whole week so I speak to my mother and she just tells me try to speak to him and then say sorry.” Lubaba “So, when we go back home, even our culture it says the same about a man, he is the head of the family, he needs to be respected. A woman is sat down,	Deductive

	before she gets married and is told that when you get home respect your husband, you should fall asleep before your husband gets home. You must wait for him to get home, you guys eat and then you must fall off to sleep together. That is the law of our culture, I also think that it's the same with our religion, I am not sure. So, culturally a man needs to be and should be respected, aah what can I say. Like when he raises his voice and shouts at you, even in front of children, you cannot raise yours, you must remain silent, only later when he has calmed down then you go to him, he is the father of your children you have to tell him that what you did was wrong, you shouted at me in front of the children. No, not in front of the children you must start arguing and swearing at each other things like that. Even in Islam it's the same thing, you have to lower yourself, a woman is beneath a man, so its like that." Fareeha	
Attachment styles 1. Avoidant	" All I can say is that me and my father yeah we are close but not that close, yeah we are close but my mom is the type of person that doesn't really open up, like she doesn't really talk like those girls stuff, she doesn't tell you. But my father, we do talk sometimes yeah." Kammla "Uhm, with my mom we have a close relationship like we talk about anything but not everything. Like my relationships and all of that, certain stuff I don't tell her so, but we are close. We are close, but then we don't talk about everything because Congolese women have that [gestures]" Kaisa	Deductive

	“But we don’t have anything like personal, like I’m going through this, or you know. It’s very weird, because yeah, yeah, I remember when I got my period because I was really young, I didn’t tell my mom because I was so scared. I was so scared, I was like oh my Gosh, but then she found out, and she was very hurt by it our parents we don’t speak about personal stuff like that or like body stuff like things like that its very taboo. Obviously, I am not going to talk about sex and things like that obviously because of respect she’s my mom, but like normal woman stuff, like mom my back there’s this, we don’t do that because, its very weird to talk about things like that its very weird.” Zeenat “To be completely honest with you I don’t have a good relationship with my father I’m not close with him and even if he is my biological father, he raised us and he’s our father I don’t love him. There’s a sense of hate that I feel towards him because there is no way that I’m going to love the man who put my mother through so much a man who constantly beat my mother and made my mother cry in front of us there’s no way he doesn’t matter what he does for us but what he used to do to my mother that made me hate him because I saw it every day.” Mawiya “With my dad on the other hand I can’t say we have a good relationship because I can’t forget. Like, I don’t look up to my dad, I would never want to get married to a person like my dad and my dad is praised outside. You know, but at home I honestly didn’t like	

	his behaviour, but I would say he has improved over the years, but I feel like if he were to acknowledge the things that he did and how it actually affected his kids, coz I am not only speaking for myself, I am actually speaking for my siblings as well. We don't like being home, me being home actually, I don't like being home" Avril "Eish me and my mother, we don't have a relationship because I passed through a lot a lot and my mother's she was a strict mom all of my siblings we don't share that special bond with her especially me, especially me I don't share that special bond it's only started let's just say this year and I'm, I'm just trying I'm trying to get that relationship with her but we don't share this relationship... I feel like she, she's not understanding you know a mother you're supposed to understand your kids especially if it's a girl if you have a daughter, you're supposed to come close with her like you must make a move to show her that you were there for her and you feel her pain." Dikla	
Seeking support [parents or others]	"Nobody, nobody is there to hear anything even if they had to go and report to the police the fact that you are a refugee it's very hard for them to look into your case and resolve the matter and, and, and get justice know." Donatille "no we are very different because South Africans can easily go to the police when they're being abused and report the abuse to the police and then the	Deductive

	police will open court cases and they can the issue and to protect the women however amongst us refugees it is very different because we're just sitting in our homes and we just keep quiet and then we hope that we solve our own problems by ourselves." Ghusoun	
Perseverance	" I feel like another stage of like what she said when you persevere, when you persevere too much its goes to the extent not being able to speak about it. Because when you persevere you won't speak up, but if you don't persevere as much then you will speak up, when you persevere too much you won't see changes because you're just taking it as it is. So I think, perseverance is nice but sometimes too much perseverance isn't good" Arwa	Inductive
Religion vs culture	"Um it has a bad influence especially in religion and cultural, coz in cultural, its different from Western belief, in Western we are taught to be equal amongst each other. In cultural we taught that men should dominate us, so and in religion there are some, even in Bible uhm I mean in Christianity, Islam, Hindu its taught that men are more dominant than us woman, but in Western we are taught that we should be equal we should treat each other with respect in all sorts of way but when it comes to religion and cultural its all different." Kenene "Yeah, the first thing that I focused on was my culture, because my culture tells me that a man is a man no matter how he is, that is one of the main things that I stood by with everything that I was going through. I might	Inductive

	also say my religion (Islam) as well because I thought if I change him I will be rewarded by God. But that is one thing I learned is that if you see a person is impossible to change, don't force it if you force things bad things may occur" Tumbuka "I feel like we go more with cultural these days even though religion, Islam, Islam goes against domestic violence, woman abuse and all that but we just go with cultural. coz, cultural is normally, normally uhm the man are more dominant so I feel dominance, that's what mainly drives domestic violence in a home, yeah domestic violence. yeah, the father of the home, so everything is the father, decisions the father, yeah, because he is the father, the head of the home, its more cultural. Religious, its I feel as if people were to. aah okay, if Muslim refugees went with uhm aah religion more, I don't think we would be facing so much domestic violence, coz it's the fear of God. You gotta fear God first, so yeah." Ghaliyah	
Infidelity	"Maybe they would have issues like my stepfather is cheating on my mother and they will start having an argument in the house fighting." Yumn "...a lot of the husbands having extramarital affairs and they say men are providing for this side women paying rent providing food everything, but they are treating the wives absolutely terribly at home..." Mawiya	Inductive

Experiences of DV as a child: • Sexual abuse and/ harassment • Physical abuse • Child abandonment • Verbal abuse	“So once, this man, I don’t know where, my mom was not at home, because it was my dad’s house it was like, I’m coming to stay there, type of thing so he came there, he stole the key from the bathroom somehow and he was watching me bath. I was 10 then, my mom wasn’t home, it was just me and my brother and I knew it was wrong, because at school they said, you know, you just know. And I think that awareness is very important and I feel like it took me out when he touched me like, you’re not supposed to touch me like he didn’t touch me on my private parts but he touched me very aggressive and caressing me and I just knew that you know, that is wrong and you know. Sometimes, we need to balance culture, there is nothing wrong with culture because there are a lot of things that we respect and you know, a lot of things that culture teaches that are actually very good, but I feel like the extent where it becomes toxic is an issue, where it’s like respect yes but respect where its due, you can’t just be, you know a lot of us you know we let people do things to us that.. Sometimes, we need to balance culture, there is nothing wrong with culture because there are a lot of things that we respect and you know, a lot of things that culture teaches that are actually very good, but I feel like the extent where it becomes toxic is an issue, where it’s like respect yes but respect where its due, you can’t just be, you know a lot of us you know we let people do things to us that they aren’t	Inductive

	supposed to do, because we are scared or because we respect them and you know. Your adults you listen to them and but you know sometimes you need to, if they say things that are messed up, you need to, because we are listen we are told to listen blindly. When they take advantage of us we never speak about it, oh my Gosh he's an adult even if its not right and you know in your gut of guts that this is wrong, yeah.” Zeenat “And he also use to use me as in, he used to rape me whenever he felt like doing it, and so it was just tough everyday was a problem for me” Wadida “but there was a time where my father hit my brother and he's asthmatic my 22 year old brother. Uhm, but that time he was was like 12. I think he's asthmatic where he was really suffering with breathing after that and like my mother decided to like take the stuff and leave, and then” Husn “Ja, well my stepdad use to tell my mom stuff and then my mom would come home and would beat us up because she was like so in love with him and so she didn't hear anything that we would say and she would beat all of us up. He would also beat us up, like it was for example, we do something wrong he would beat us up and then when she comes she would beat us up. It wasn't that beating where it was like no I am teaching your child no, it was like a really bad beating. Sometimes he would use electrical	

	wires to beat us up, a charger, a screw stuff like that it was really bad. Like there was this one time he beat me up with that, you know that police thing that shocking thing that would... a taser he used to make me bath in cold water and would shock me with that before he beat me up.” Wadida “Uhm, it was different, and it was also difficult to cope with my mother, because ever since I was small my mother, left me when I was four years old and all, and I grew up with my grandparents and they took care of me. So, when I came here I, I found it very difficult because uhm, she didn’t treat me well like a child.” Yumn “I am the mother, where I am right now, at first I felt abandoned because she had her reasons to go, she explained them to me. I feel like a mother and a daughter, and a sister and an aunty to my younger brother. Being, in a household whereby I’m the only girl, one younger two older. You see, actually I could say I taught myself to be strong, I taught myself how to be independent, since I was 16” Mwamini “Yes, even us too. Instead of saying something nicely, he wants to say it out of anger so mxm all that haibo its really, psychologically its messed up in a way.” Kaisa	

	“you’re a prostitute, you’re this because your mom lets you, I wasn’t even dressed inappropriately, what were you doing looking at a child. I was 9, if I am home I am wearing a skirt and what were you thinking, and when you look back you’re like why were you looking at a 9 year old and sexualising them and telling them that you’re a prostitute, you’re nothing more than a piece of meat. Like for me what hurt was this was supposed to be this is your dad’s and you know in our culture that’s your father so this is my father per se, so that really damages relationships you have with men, or even your idea of marriage. It’s like I’m good on probably getting married.” Zeenat	
Witnessing DV in the home	“Yes, physical fighting and sometimes he used to say that he will throw my mother in the window, so I never liked being around them whenever they start fighting I will just go outside and wait until they are done and then I can come back in the house.” Yumn “...so when she went out she came back at about 12 in the midnight and we were not not allowed to be out after sunset, so when she came in my father was furious. He was like red, so he told her don’t come inside the house and he was like no I’m coming in and he was like if you come in then I am going to hit you and then from nowhere everything just burst and he was shouting and he was like I and going to hit you and she was like no you’re not and then the pots were raise and the pans where raised. And then we were in the middle of	Deductive

	everything and I thank God, my aunty was there so she was in the middle of everything, like she was like no you go to one room, she separated them but there was like a fight that like happened, there it has happened a lot but you don't actually get to see it unless there is like an outburst. It just happens in the room and she just comes out running, or she comes out crying and you know say you know I'm hurt, I'm ill or you just see that she's in bed she didn't get up that day, but this was actually the first time I saw it life, normally they don't disclose it in such a way." Abir	
Social media and violence - Awareness - Digital intimate partner violence	"I think and like all those things have you know there I'm learning a lot and especially now like on TV and on social media people are talking about these things especially like as young people I think we're becoming more vocal about it so I'm glad that there's a change there's different to like my parents or parents' generation yeah where we're more open what this things I just hope things change but yeah you see even now as like when you're dating how boys treat us and sometimes it's like you yeah and sometimes its just like yoh." (Zuri) "He's just like I don't like I don't feel comfortable when you see you talking to other boys at first it's like cute and it becomes very bad because they're like he's like you know this thing where you exchange like Instagram or Facebook passwords and then he's just going through and this is all why	deductive

	you talking to this boy why are you following that boy why is he commenting on your status and your pictures yeah it's scary because it's like you're controlling you know" Zuri	
Re-enactment of behaviours	"Um, when you grow up observing violence in the house you grow up with that mentality that this is how a man should treat a woman or this is how a woman treat a man. So, you grow up with this mentality and then once you have grown up you do the same thing because you believe that what you are doing is right. So, when especially when a man hits a woman and there is a young boy in the house, he grows up with the mentality that that's how a man should be have and that's how a man showcases that he is a man... Um, the type of message that it gives a young girls that its teaching her to take violence from a man without saying anything. It is teaching her that is how love is, its teaching her that that's how you should, for you to love your man you should let him hit you, let him violate you in various ways." Kenene "Yes, but even guys also if they saw that the fathers use to beat up their mothers, they also carry that behaviour forward where they also started abusing the wives or fathers who like start abusing their daughters, or father or father who like, I don't know what my dad. What type of relationship he had, but you know, I sometimes feel that maybe his father also used to come home, started insulting them and that's what he is also doing with us.	Deductive

	Coz that's what believe that that's why cause people to be like domestically violent..." Husn	
Suicidal idea/incidents	"All this, all this all I don't want to be the strict mom, that's my mom here did cause I passed through a lot and my mom was there, I was suffering but she couldn't see. The fact I almost commit suicide in front of her she couldn't see so it's like I wanna be that mother who understands my children first who understands their pain. This you know my children, what my children like what my children are up, to you know what my children need that's the type of mom that I'll be. Yes, I'm gonna be serious with them at the same time I need to maintain my seriousness and my good side." Dikla "yeah, my friend she passed away though, her parents they didn't actually, it was just like the same as mine, they never allowed her to you know and speak so then she just decided to commit suicide...: No, no its not that she can't speak up, its just that its that thing where you can't even speak up because no one will believe you. Coz, you're young, they treat you like you're a child, even when you speak, its of no use, they don't understand you and everything" Lubaba	Inductive
Learning about DV at school	"Umm so like in school that is like where I really learned a lot about like what, what is domestic violence like, what abuse is, how to identify it and all of that. So, school I think really informed my understanding of what	Inductive

	violence is but like I said I think my experiences are totally different, it's one thing to know something yeah but another thing in reality" (Zuri) "Well at first, I never knew that that there was something called domestic violence until actually it was something that was happening at home but it's not something that I was aware of which I was told at school then I was like I realised that so that was the domestic violence you know... I thought it was normal, come on I mean I mean we foreigners so yeah it's normal I mean if your wife is wrong she can you know get into an altercation you know get physical it's all good yeah until I realised that it's not actually good" Sanctifiée	
Teenage pregnancy	"It's always about what other people will say hmm remember it as a foreign girl like even when I got pregnant it's what other it's other people's opinion that mattered the most then actually what the mother is no. So basically in the foreign thing it's not about what you want to say that is right even though it is right people opinion matter umm." Sanctifiée "Our relationship was great he used to give me everything that I wanted he needs to come and fetch me from school uhm. We loved each other and then I made the mistake of falling pregnant but I was so scared of getting an abortion I actually found out I was pregnant when I was three months pregnant, but it didn't show that I was pregnant when I was 3 months	Inductive

	because I was bleeding. I only found out I was pregnant in last three months” Ghusoun	
Desired relationship with own children	“I need my daughter to tell me anything that she feels, anything that she wants I am going to be here for my daughter, I don’t want to push her away and have this, like what my mom and I had I don’t ever want that for her. Like she must be able to trust me and I must be able to trust her. She can tell me anything, like I don’t feel like physical and emotional abuse is okay, like if she wants to tell me something I am going to be here and I am going to listen to her before I attack her. I want us to have an understanding relationship.” Wadida “Um, with my kids I want to be able to be more open with them so that’s something that I want to start when they’re really still young, you know also express, be more expressive with them as well, you know” Avril	Deductive* (cognitive processes that have resulted in such decisions based on what they witnessed in the home)
Knowledge to be passed on	“I will teach her to stand up for herself, the moment a man hits her, haibo run away, because once it starts like, once it happens the first time and she leaves him, of course it will happen again, it will repeat itself, so once it happens, girl take your bags and leave. Take your bags pack them and leave, go. So for me once a man hits you, I don’t care if it’s the second time but the first time you got to pack your bags... For my male child, uhm he mustn’t abuse women, respect women. Religion teaches us to respect	Deductive*

	women, uhm and some other uhm, these days sometimes some things teaches us to respect women.” Ghaliyah. “ Um, I would like to have a peaceful home, even if I don’t have much I would like to have a home whereby I do everything in my power to provide for my children, I’ll do everything that I can to have that stable home, to teach my children the meaning of peace in the home, the meaning of how to create a home and um and to teach them what a home should be like and they should grow up knowing how to treat a woman or this is how you treat your daughter. And um a woman also know that this how I must also treat my husband or my partner in this type of way, and my son has to be taught in this type of way, yeah.” Kenene “They could give their daughter better advise honestly; they could lead by example as well. You know when you’re in an abusive relationship you have to because he’s never going to change, there is no way an abusive man is going to change, you know. So, by you putting yourself first, you are also teaching me as your daughter to put myself first if I was in that situation. Now I have a mom that stays in a relationship that’s like that then what am I supposed to do? What am I looking up to? That means that I should also stay because my mom stayed, it’s because of her kids, no she can’t leave her kids and stuff like that, you know I would obviously not mind if you put yourself first. Be honest with your kids don’t tell them that when a man	

	disciplines you he is showing you love, no that's lies no it's just wrong.” Avril “Things a parent can teach her children especially girls, first she has to teach them the way of God like praying, when they reached the age of getting involved into relationships like boys and girls the first thing is to tell them how to prevent themselves about sex. But also, they must have true love, through their they must respect each other, this will help them by the time they'll be grown when they become mother and father they truly living together, because when they're away from having sex even God will support them. This will help parents because of ensuring their children are disciplined. That's why for me if it is my children, first thing I'll tell them to start praying, then be in love with limit, no romance, but we still in love and obey God. One they've done so nothing can happen to them.” Phiona	
Desired relationship with spouses	“I think because of what I went through, I think someone who is definitely not violent, I cannot stand a violent man... So someone whose responsible, because someone might be well off but not irresponsible they don't see the need to take care of you or buy clothes for kids or things like that so someone who is responsible, someone who is family orientated you know. Someone who sees me as someone whose way deeper than anything physical or you know? Like I'm like also like a friendship connection you know, so yeah those are the like main things.” Zeenat	Inductive*

	“obviously he has to be in religion, [inaudible] I feel like communication, I feel like what may be big for me we should be able to have a good communication skill, a good one where he, same thing with my daughter like he should feel comfortable talking to me about anything if he finds any wrong within me he must speak up, even if it is the worst thing that I’ll have to hear, even if it hurts he must tell me, I don’t want this thing where he doesn’t want to tell me because I will hurt you, its so bad, I’d rather tell some, no come to me speak to me your boo you know I don’t mind, don’t go to other people. Oh my God okay he has to be good he needs to respect himself I feel like respect is another big thing because if you respect me obviously you know your boundaries.... He needs to love my family he used to love his own family he used to love his mom he used to love his dad he needs to love his mom because he loves mom doesn’t see he’s gonna love my mom he loves his family that he’s gonna love my family I need to see that proof if you love if you don’t love your family that means you won’t love mine and it’s a no.” Falak	
Desired home environment	“Like you know it mustn’t be like how I saw it when I was still in my mothers house, I want like whenever I see something they must be free to speak see. Like they want to do something, or they want freedom, they must let it out. Not like how it was, you can’t even say anything just freezing there in one corner.” Lubaba	Deductive

	“I want my kids to be open with me and the father as well so they read they do have issues or when they encounter a problem they can be open and honest with me us their parents. Because you know what let’s be honest there are times where as a child you find yourself in situations where you need someone to speak to and the first person you go to someone other than your parent and maybe going to your parents would have been the best think for you to have done but because of the way in which you guys were raised where you are not allowed or where you are not open with your parents that’s when issues arise. As a parent you have to um carry yourself like a parent you have to be open you have to create an environment where you are open enough for your children to come and tell you things when they need to you can’t always be serious you can’t always be rigid in your ways it doesn’t work out.” Intisar “In my house there must be a lot of love because where there’s love there’s everything if the house have no love then it won’t work you know they must be love then happiness is going to come that’s what I want.” Dikla	
Social beliefs/attitudes on DV (normalisation of DV)	“So we as women, we think that where can I go from here you can’t go anywhere society that forbids people from divorcing when you married especially as the foreigners society our society is very delicate and it says there is no divorce and if you are divorced you know there’s an outsider like you just you just I don’t know I don’t know what what’s the exact word	Deductive

	they can call you because at the end of the day when you are divorced you can't walk amongst ladies and be seen as a lady you are seen as something else in their eyes...So, I think we take it when a person is domestic when the person is violent to us because we are supposed to take it we were told to take it over centuries of time we are told to take it so there's no breaking the norm because if you break the norm you look like somebody that looked like somebody that's abnormal in the foreigners community" Abir "Many people believe that it is okay for a man to beat you. You must like, you must take in the pain no matter what." Yumn	
Women's roles in preventing DV	"yeah, there is a way we can help each other. You can sit and listen to someone problems and then you can maybe find a ways in which you can help that person out with the issues that they are going through because honestly we recommend when it comes to domestic violence we need to understand that it causes major psychological issues and that's the truth. The way in which you are going to try and help them deal with the issues that they have psychologically that's how you're going to help give them strength and to become strong to face the challenges that they are currently facing." Intisar "Um, they should teach their children the difference between a man loving you and a man being obsessed with you, always controlling you. We should always look for a way to teach and educate our daughters about what a man should do and what a man should not do. We shouldn't always stay in a	Inductive

	relationship all for the sake of um the family's reputation or what the community will say, because that's the, this relationship brings your death closer, or what if he kills you in the process of saying oh I will embarrass the family or the community will talk about me and stuff yeah" Kenene "...they're raising us and they telling us about that what woman he what womanhood is about I think you need to change some of that like some of those cultural comments and statements and views are very its very outdated yeah I think a lot of it also almost you're told oh no that's that being a woman you see you know you must be strong and you know you have to persevere you know marriage is hard. And you know yes of course life is hard but being abused being hit being thing is not something that you should endure that is not that should not be justified as saying that that is part of womanhood." Zuri	
Toxic femininity	"The first thing is that many of the women here is that they don't accept the financial standings of their husbands, the other thing is that they must not be people who like copying others. You know when in life when you reach age you need to understand that when you're in one position in life you cannot skip steps to be where you want to be or where others are, and that's the problem with 99.9% of our women. This is something that is extremely common with women in Durban they have a habit of copying other people each other they are very competitive they live a very competitive and life so it's things like that that actually get them into the	

	situations that they get into...the thing that you offered in life a man is working and is earning 1500 for example and in that 1500 it still has to pay rent he still has to provide for his family he still has to do so many things right but then you find that woman now will be demanding things unnecessarily she will want let's say 500 and for some fancy dress because there's an event going on and then she wants to compete with others or she wants to copy her friends who whose husbands might have a little bit more money than she has or defend herself is working so that's where you find a lot of the clicks occur because of such things because she herself forgets that she has her child or she has children and those children also need to be taken care of by their father but everything for her now is all about her and how she will be able to show off to her friends” Intisar “I know this lady who has been molested by her uncle but she has spoken to her aunt about it but African women have this tendency of protecting their marriage and not believing the young girl telling her to keep quiet making everything look like it's normal meanwhile it's not” Donatille “Next thing when the woman does vice versa Oh my God yeah you did that for the past I don't know how many years, this is something I'm telling you I've heard not even more than one woman I'm sitting in my house but I will hear all the stories, you know a story will trend verbally on WhatsApp and it will just trend there's like a whole Twitter out there and it will just	

	find you. Yeah so and so's mother, and you're like oh my God Mama so and so you too, she did that they left each other." Falak "This gossiping and things they do, these little fights here and there its very useless, and we need to be together as women and a lot of women in our culture do not stand together. They're the first ones to push you down. First ones before the men put you down they're the first ones to do it, they're like you saw that so and so's child they're da da da, but then their like I'm you're aunt, I am your mother, But what are you doing that's not representing how a mom should be." Zeenat	
Female perpetrators of violence	"Ah, I think our uncle was not supposed to let his kids to go with the stepmother. But went with the stepmother and then she got angry then she started hitting my uncle." Ninziza	
Social issues	"I think the last time you get to be treated differently you're always the different one whether in school, work everywhere imagine being a Muslim, being a black Muslim, being a black Muslim woman and a falling on top of that it's like too much, too much you know all that once you get the racism facing you every single week every corner." Falak	Deductive

ANNEXURE G: ETHICAL APPROVAL FORM



Department of Social Development

University of Cape Town Rondebosch 7701 South Africa

Phone: +27-21-650-3483

E-mail: taryn.powell@uct.ac.za

31 August 2022

Student: **Kassa Maksudi (BRKKAS001)**

Outcome: **ACCEPTED**

I am pleased to inform you that ethical clearance has been given by an Ethics Review Committee of the Faculty of Humanities for your study, *Intergenerational Transmission of Domestic Violence in Refugee Families in Durban, South Africa*. The reference number is SWK-REC-2022-SR008.

I wish you all the best for your study.

Signed by candidate

Yours sincerely

Mrs [Lauren Van Niekerk](#)

Senior Lecturer

Chair: Ethics Review Committee ERC07/202

ANNEXURE H: CONSENT FORM – INDIVIDUAL SEMI-STRUCTURED INTERVIEW



University of Cape Town Faculty of Humanities:

**Consent Form- Individual semi-structured
interview**

Title of research project:

Intergenerational transmission of domestic violence in refugee families in Durban, South Africa.

Names of principal researcher:

Kassa Maksudi

Department/research group address:

Department of Social Development

Telephone:

+27 638090039

Email:

brkkas001@myuct.ac.za

Name of participant: _____

Nature of the research:

The research is a qualitative embedded single case study that will utilise interview to explore how domestic violence is transmitted intergenerationally in refugee families from Burundi and the DRC among women. The interview will be audio-recorded with an audio recorder. The recordings will be transcribed and stored away safely, all measures to ensure confidentiality, anonymity and privacy will be taken.

Participant's involvement

What's involved: The participant is required to participate in an individual semi-structured interview and give honest feedback on the research topic. The interview will be conducted in person and take about 30 minutes to conduct. Please note that there are no right or wrong answers when answering questions.

Risks: The study is a medium-risk study; however, some questions that will be asked may trigger emotional or psychological distress. To prevent this from occurring, you will be asked to take a break and given the option to continue or withdraw with the study. If you choose to continue with the study, you free from having to answer any question that makes you uncomfortable or causes you any distress. If you choose to withdraw from the study, kindly know that there will be no consequence to yourself. You may withdraw from the study at any point. Should the study have unearthed deep psychological distress, arrangements with the Refugee Social Services will be made by the researcher for you to see a professional counsellor should you choose to seek counselling.

To ensure privacy and confidentiality please be advised that any data collected in this study will remain confidential, private, your real name will never be mentioned in the research report. No personally identifying information will be used that will reveal that you participated in this study. Should information surface that someone in your home is at risk of serious injury or their life is threatened, the researcher will inform you of her intention to break confidentiality, in order to protect the individual. However, she will have to get your permission to do so, before involving anyone outside of the study.

Benefits: The interview will be conducted on a voluntary basis and there will be no payment, monetary or otherwise, for participating in the research. However, food and travel reimbursement will be provided to all participants. This gesture is not to be taken as payment for participation in the research.

The researcher stands to gain from your participation in the research because the information you provide will contribute towards fulfilling her PhD requirements. Furthermore, the study findings may help in the development of evidence-based interventions and inform policies where issues of DV in the refugee community in Durban. Are concerned.

Costs: There will be no cost to participants. An amount of R150 will be provided to you as travel assistance.

COVID-19 protocols:

- Hand sanitisers will be provided for the participant and researcher to sanitise their hands as well as surfaces such as desks in the premises where the interview will take place. Hand sanitisers will be available at all times.
- If a bathroom break is taken by the researcher or participant, the sanitisation process will be repeated.
- Chairs and desks will be sanitised before and after use with a surface sanitiser.
- A distance of at least 1.5 metres will be kept between the researcher and participant at interviewee know where they are supposed to sit.
- The interviews will be held indoors, thusly all windows will remain open for adequate air circulation.
- Alcohol wipes will be made available for wiping of surfaces in the interview space and ablution facilities.

Eligibility criteria

Participants must meet the following eligibility criteria:

- Participants must be mother and daughter (by birth or through guardianship).
- All participants must have given voluntarily informed consent.
- Must both live in Durban.
- Relocation to South Africa must have been to seek refuge (refugee or asylum seeker).
- All participants must be between the ages of 18-65 and from Burundi or DRC.
- Participants may be married, single, or in intimate partner relationships.
- Participants may be employed, self-employed, unemployed, or studying (university, Technikon or other) - This is important in understanding whether employment status and educational levels are a risk factor for DV in addition to understanding transmission among refugee women from different demographics.
- All participants must have lived in South Africa for five (5) years or more.
- All participants must have witnessed and/or experienced DV.
- No participant must have experienced a severe traumatic DV event in the past three months, which led to injuries or hospitalisation.

Agreement:

- I agree to participate in this research project.
- I have read this consent form and the information it contains and had the opportunity to ask questions about them.
- I agree to my responses being used for education and research on condition my privacy is respected, subject to the following:
- I understand that my personal details may be included in the research / will be used in aggregate form only, so that I will not be personally identifiable.

- I understand that I am under no obligation to take part in this project.
- I understand I have the right to withdraw from this project at any stage.
- I understand that this research might be published in a research journal or book. In the case of dissertation research, the document will be available to readers in a university library in printed form, and possibly in electronic form as well.

Signature of Participant: _____

Name of Participant: _____

Signature of person who sought consent: _____

Name of person who sought consent: _____

Signature of principal researcher: _____

Date : _____

**ANNEXURE I: FOMU YA IDHINI – MAHOJIANO YA KIBINAFSI
YENYE MUUNDO WA NUSU (KISWAHILI)**



University of Cape Town Faculty of Humanities:

Fomu ya Idhini- Mahojiano ya kibinafsi yenye muundo wa nusu

(Kiswahili)

Jina la mradi wa utafiti:

Usambazaji kati ya vizazi wa unyanyasaji wa majumbani katika familia za wakimbizi huko Durban, Afrika Kusini.

Majina ya watafiti wakuu:

Kassa Maksudi

Anwani ya idara/kikundi cha utafiti:

Idara ya Maendeleo ya Jamii

Simu:

+27 638090039

Barua pepe:

brkkas001@myuct.ac.za

Jina la mshiriki: _____

Asili ya utafiti:

Utafiti huu ni utafiti kisa mmoja uliopachikwa wa ubora ambao utatumia mahojiano kuchunguza jinsi ukatili wa nyumbani inavyosambazwa kati ya vizazi katika familia za wakimbizi kutoka Burundi na DRC miongoni mwa wanawake. Mahojiano yatarekodiwa kupitia kinasa sauti. Rekodi zitanakiliwa na kuhifadhiwa kwa usalama, hatua zote za kuhakikisha usiri, kutokujulikana na ufuraha zitachukuliwa.

Ushiriki wa mshiriki

Nini kinahusika: Mshiriki anahitajika kushiriki katika mahojiano ya kibinafsi na kutoa maoni ya uaminifu juu ya mada ya utafiti. Mahojiano yatafanywa kwa kutumia Timu za Microsoft na kuchukua takriban dakika 30 kufanya. Tafadhali kumbuka kuwa hakuna majibu sahihi au yasiyo sahihi wakati wa kujibu maswali.

Hatari: Utafiti ni utafiti wa hatari ya wastani, hata hivyo, baadhi ya maswali ambayo yataulizwa yanaweza kusababisha dhiki ya kihisia au kisaikolojia. Ili kuzuia hili kutokea, utaombwa kuchukua mapumziko na kupewa chaguo la kuendelea au kujiondoa na utafiti. Ukichagua kuendelea na utafiti, hutalazimika kujibu swali lolote linalokukosesha raha au kukusababishia dhiki yoyote. Ukiamua kujiondoa kwenye utafiti, fahamu kuwa hakutakuwa na matokeo yoyote kwako. Unaweza kujiondoa kwenye utafiti wakati wowote. Iwapo utafiti umegundua dhiki kubwa ya kisaikolojia, mipango na Huduma za Kijamii za Wakimbizi itafanywa na mtafiti ili wewe kuonana na mshauri wa kitaalamu iwapo utachagua kutafuta ushauri nasaha.

Ili kuhakikisha faragha na usiri tafadhali fahamu kuwa data yoyote iliyokusanywa katika utafiti huu itasalia kuwa ya siri, ya faragha, jina lako halisi halitatajwa kamwe katika ripoti ya utafiti. Hakuna maelezo ya kibinafsi yatatumika ambayo yataonyesha kuwa ulishiriki katika utafiti huu.

Manufaa: Usaili utafanywa kwa hiari na hakutakuwa na malipo, fedha au vinginevyo, kwa kushiriki katika utafiti. Hata hivyo, malipo ya chakula na usafiri yatatolewa kwa washiriki wote. Ishara hii haipaswi kuchukuliwa kama malipo ya kushiriki katika utafiti.

Mtafiti atanufaika kutokana na ushiriki wako katika utafiti kwa sababu taarifa utakazotoa zitachangia katika kutimiza mahitaji yake ya Uzamivu. Zaidi ya hayo, matokeo ya utafiti yanaweza kusaidia katika uundaji wa uingiliaji kati unaotegemea ushahidi na kuarifu sera ambapo masuala ya DV katika jumuiya ya wakimbizi huko Durban. Wana wasiwasi.

Gharama: Hakutakuwa na gharama kwa washiriki. Kiasi cha R150 kitatolewa kwako kama usaidizi wa usafiri.

Itifaki za COVID-19:

- Vitakasa mikono vitatolewa kwa ajili ya mshiriki na msaidizi wa utafiti kusafisha mikono yao pamoja na nyuso kama vile madawati katika eneo ambako usaili utafanyika. Sanitiser za mikono zitapatikana kila wakati.
- Ikiwa mapumziko ya bafuni yatachukuliwa na msaidizi wa utafiti au mshiriki, mchakato wa usafi utarudiwa.
- Viti na madawati yatasafishwa kabla na baada ya kutumika kwa sanitiser ya uso.
- Umbali wa angalau mita 1.5 utawekwa kati ya msaidizi wa utafiti na mshiriki wakati wote. Mipaka ya mita 1.5 itawekwa kwa utepe mwekundu ili kuwasaidia mtafiti na mhojiwa kujua ni wapi wanatakiwa kukaa.
- Mahojiano yatafanyika ndani ya nyumba, hivyo madirisha yote yatabaki wazi kwa mzunguko wa kutosha wa hewa.
- Vifuta vya ulevi vitapatikana kwa ajili ya kupangusa nyuso katika nafasi ya mahojiano na vifaa vya udhu.

Vigezo vya kustahiki

Washiriki lazima watimize vigezo vifuatavyo vya kustahiki:

- Washiriki lazima wawe mama na binti (kwa kuzaliwa au kupitia ulezi).
- Washiriki wote lazima wawe wametoa kibali cha taarifa kwa hiari.
- Lazima wote waishi Durban.
- Uhamisho hadi Afrika Kusini lazima uwe kutafuta hifadhi (mkimbizi au mtafuta hifadhi).
- Washiriki wote lazima wawe na umri wa kati ya miaka 18-65 na kutoka Burundi au DRC.
- Washiriki wanaweza kuwa wamefunga ndoa, waseja, au katika uhusiano wa karibu wa wapenzi.
- Washiriki wanaweza kuajiriwa, kujiajiri, kukosa ajira, au kusoma (chuo kikuu, Technikon au nyingine) - Hii ni muhimu katika kuelewa kama hali ya ajira na viwango vya elimu ni sababu ya hatari kwa DV pamoja na kuelewa maambukizi miongoni mwa wanawake wakimbizi kutoka demografia tofauti..
- Washiriki wote lazima wawe wameishi Afrika Kusini kwa miaka mitano (5) au zaidi.

- Washiriki wote lazima wawe wameshuhudia na/au uzoefu wa DV.
- Hakuna mshiriki lazima awe amekumbana na tukio la kiwewe la DV katika muda wa miezi mitatu iliyopita, ambalo lilisababisha majeraha au kulazwa hospitalini.

Makubaliano:

- Ninakubali kushiriki katika mradi huu wa utafiti.
- Nimesoma fomu hii ya idhini na taarifa iliyomo na nimepata fursa ya kuuliza maswali kuzihusu.
- Ninakubali majibu yangu kutumika kwa elimu na utafiti kwa sharti ufaragha wangu uheshimiwe, kwa kuzingatia yafuatayo:
- Ninaelewa kuwa maelezo yangu ya kibinafsi yanaweza kujumuishwa katika utafiti/yatatumika katika fomu ya jumla pekee, ili nisitambulike.
- Ninaelewa kuwa sina wajibu wa kushiriki katika mradi huu.
- Ninaelewa kuwa nina haki ya kujiondoa kwenye mradi huu wakati wowote.
- Ninaelewa kuwa utafiti huu unaweza kuchapishwa katika jarida la utafiti au kitabu. Kwa upande wa utafiti wa tasnifu, waraka utapatikana kwa wasomaji katika maktaba ya chuo kikuu kwa njia iliyochapishwa, na ikiwezekana katika mfumo wa kielektroniki pia.

Sahihi ya Mshiriki: _____

Jina la Mshiriki: _____

Sahihi ya mtu aliyeomba idhini: _____

Jina la mtu ambaye aliomba idhini: _____

Saini ya mtafiti mkuu (Jina): _____

Tahrehe: _____

ANNEXURE J: CONSENT FORM – FOCUS GROUP DISCUSSION



University of Cape Town Faculty of Humanities

Consent Form- Focus group discussion

Title of research project:

Intergenerational transmission of domestic violence in refugee families in Durban, South Africa.

Names of principal researcher:

Kassa Maksudi

Department/research group address:

Department of Social Development

Telephone:

+27 638090039

Email:

brkkas001@myuct.ac.za

Name of participant:

Nature of the research:

The research is a qualitative embedded single case study that will utilise interview to explore how DV is transmitted intergenerationally in refugee families from Burundi and the DRC among women. The interview will be audio-recorded with an audio recorder. The recordings will be transcribed and stored away safely, all measures to ensure confidentiality, anonymity and privacy will be taken.

Participant's involvement

What's involved: You will be asked to avail yourself for a 30 to 45 minutes focus group discussion session with four (4) other participants, where the researcher will ask you prepared questions as well as follow up questions about the transmission of DV among women refugees within their homes. The focus group discussion will be scheduled at a time that is convenient for both you and your fellow participants.

Risks: The study is a medium-risk study, however, some questions that will be asked may trigger emotional or psychological distress. To prevent this from occurring, you will be asked to take a break and return to the group once you're in a better emotional state or to withdraw from the focus group discussion/entirely. If you choose to continue with the discussion after your break, you will be free to refuse answering any question that makes you uncomfortable or causes you any distress. If you choose to withdraw from the study, kindly know that there will be no consequence to yourself. You may withdraw from the study at any point. Should the study cause any serious emotional and/or psychological distress, arrangements with the Refugee Social Services will be made by the researcher for you to see a professional counsellor, by your permission.

To ensure privacy and confidentiality please be advised that any data collected in this study will remain confidential and private your real name will never be mentioned in the research report. Additionally, information shared in this group will remain between the researcher and fellow participants. No personally identifying information will be used that will reveal that you participated in this study ensuring anonymity. Your fellow group members principles are requested to adhere to the principle of confidentiality and will be instructed to keep all information shared in the session confidential and not discuss any information outside of the FGDs with non-group members. Should information surface that someone in your home is at risk of serious injury or their life is threatened, the researcher will inform you of her intention to break confidentiality, in order to protect the individual. However, she will have to get your permission to do so, before involving anyone outside of the study.

Benefits: The interview will be conducted on a voluntary basis and there will be no payment, monetary or otherwise, for participating in the research. However, food and travel reimbursement will be provided to all participants. This gesture is not to be taken as payment for participation in the research.

The researcher stands to gain from your participation in the research because the information you provide will contribute towards fulfilling her PhD requirements. Furthermore, the study findings may help in the development of evidence-based interventions and inform policies where issues of DV in the refugee community in Durban. Are concerned.

Costs: There will be no cost to participants. An amount of R150 will be provided to you as travel assistance and food will be provided for participants.

COVID-19 protocols:

Hand sanitisers will be provided to participants and researcher to sanitise their hands as well as surfaces such as desks in the premises where the interview will take place. Hand sanitisers will be available at all times.

If a bathroom break is taken by the researcher or participants, the sanitisation process will be repeated.

Chairs and desks will be sanitised before and after use with a surface sanitiser.

A distance of at least 1.5 metres will be kept between the researcher and each participant at all times. 1.5 metre demarcations will be made with red tape to help the researcher and the participants know where they are supposed to sit.

The focus group discussions will be held indoors, thusly all windows will remain open for adequate air circulation.

Alcohol wipes will be made available for wiping of surfaces in the interview space and ablution facilities.

Agreement:

- I agree to participate in this research project.
- I have read this consent form and the information it contains and had the opportunity to ask questions about them.
 - I agree to my responses being used for education and research on condition my privacy is respected, subject to the following:
- I understand that my personal details may be included in the research / will be used in aggregate form only, so that I will not be personally identifiable.
- I understand that I am under no obligation to take part in this project.
- I understand I have the right to withdraw from this project at any stage.
- I agree not to share any information discussed in the focus group session with anyone outside the focus group discussion session especially with non-group members.
- I understand that this research might be published in a research journal or book. In the case of dissertation research, the document will be available to readers in a university library in printed form, and possibly in electronic form as well.

Signature of Participant: _____

Name of Participant: _____

Signature of person who sought consent: _____

Name of person who sought consent: _____

Signature of principal researcher: a) (name) _____

Date: _____

ANNEXURE K: FOMU YA IDHINI – MAJADILIANO YA KIKUNDI LENGWA (KISWAHILI)



University of Cape Town Faculty of Humanities:

**Fomu ya Idhini- Majadiliano ya kikundi
Lengwa (Kiswahili)**

Jina la mradi wa utafiti:

Usambazaji kati ya vizazi wa unyanyasaji wa majumbani katika familia za wakimbizi huko Durban, Afrika Kusini.

Majina ya watafiti wakuu:

Kassa Maksudi

Anwani ya idara/kikundi cha utafiti:

Idara ya Maendeleo ya Jamii

Simu:

+27 638090039

Barua pepe:

brkkas001@myuct.ac.za

Jina la mshiriki:

Asili ya utafiti:

Utafiti huu ni utafiti kisa mmoja uliopachikwa wa ubora ambao utatumia mahojiano kuchunguza jinsi DV inavyosambazwa kati ya vizazi katika familia za wakimbizi kutoka Burundi na DRC miongoni mwa wanawake. Mahojiano yatarekodiwa kupitia kinasu sauti.

Rekodi zitanakiliwa na kuhifadhiwa kwa usalama, hatua zote za kuhakikisha usiri, kutokujulikana na ufaragha zitachukuliwa.

Ushiriki wa mshiriki:

Nini kinahusika: Utaombwa ujitolee kwa ajili ya kipindi cha majadiliano ya kikundi cha dakika 30-45 na washiriki wengine wanne (4), ambapo mtafiti atakuuliza maswali yaliyotayarishwa na pia kufuatilia maswali kuhusu maambukizi ya DV miongoni mwa wanawake. wakimbizi ndani ya nyumba zao. Majadiliano ya kikundi yatapangwa kwa wakati unaofaa kwako na washiriki wenzako.

Hatari: Utafiti ni utafiti wa hatari ya wastani, hata hivyo, baadhi ya maswali ambayo yataulizwa yanaweza kusababisha dhiki ya kihisia au kisaikolojia. Ili kuzuia hili kutokea, utaombwa kuchukua mapumziko na kurudi kwenye kikundi mara tu unapokuwa katika hali nzuri ya kihisia au kujiondoa kwenye majadiliano ya kikundi/kabisa. Ukichagua kuendelea na majadiliano baada ya mapumziko yako, utakuwa huru kukataa kujibu swali lolote ambalo linakufanya ukose raha au kukusababishia dhiki yoyote. Ukiamua kujiondoa kwenye utafiti, fahamu kuwa hakutakuwa na matokeo yoyote kwako. Unaweza kujiondoa kwenye utafiti wakati wowote. Iwapo utafiti utasababisha mfadhaiko mkubwa wa kihisia na/au kisaikolojia, mipango na Huduma za Kijamii za Wakimbizi itafanywa na mtafiti ili uone mshauri wa kitaalamu, kwa idhini yako.

Ili kuhakikisha faragha na usiri tafadhali fahamu kuwa data yoyote iliyokusanywa katika utafiti huu itasalia kuwa siri na ya faragha jina lako halisi halitatajwa kamwe katika ripoti ya utafiti. Zaidi ya hayo, taarifa zilizoshirikiwa katika kundi hili zitasalia kati ya mtafiti, msaidizi wa utafiti na washiriki wenzake. Hakuna maelezo ya kibinafsi yatatumika ambayo yatafichua kwamba ulishiriki katika utafiti huu na kuhakikisha kutokujulikana. Kanuni za wanakikundi wenzako wanaombwa kuzingatia kanuni ya usiri na wataelekezwa kuweka taarifa zote zinazotolewa kwenye kikao kwa usiri na kutojadili taarifa zozote nje ya kundi na wasio wanachama wa kikundi.

Manufaa: Usaili utafanywa kwa hiari na hakutakuwa na malipo, fedha au vinginevyo, kwa kushiriki katika utafiti. Hata hivyo, malipo ya chakula na usafiri yatatolewa kwa washiriki wote. Ishara hii haipaswi kuchukuliwa kama malipo ya kushiriki katika utafiti.

Mtafiti atanufaika kutokana na ushiriki wako katika utafiti kwa sababu taarifa utakazotoa zitachangia katika kutimiza mahitaji yake ya Uzamivu. Zaidi ya hayo, matokeo ya utafiti yanaweza kusaidia katika uundaji wa uingiliaji kati unaotegemea ushahidi na kuarifu sera ambapo masuala ya DV katika jumuiya ya wakimbizi huko Durban. Wana wasiwasi.

Gharama: Hakutakuwa na gharama kwa washiriki. Kiasi cha R150 kitatolewa kwako kwani usaidizi wa usafiri na chakula kitatolewa kwa washiriki.

Itifaki za COVID-19:

- Visafisha mikono vitatolewa kwa washiriki na wasaidizi wa utafiti ili kusafisha mikono yao pamoja na nyuso kama vile madawati katika eneo ambalo usaili utafanyika. Sanitiser za mikono zitapatikana kila wakati.
- Ikiwa mapumziko ya bafuni yatachukuliwa na msaidizi wa utafiti au washiriki, mchakato wa usafi utarudiwa.

- Washiriki watahitajika kuja wakiwa wamevaa vinyago vyake mwenyewe. Zaidi ya hayo, barakoa mbili za uso zinazoweza kutumika zitatolewa kwao ikiwa moja itaharibika. Vinyago vya uso vitawekwa kila wakati na wote katika chumba cha majadiliano.
- Viti na madawati yatasafishwa kabla na baada ya kutumika kwa sanitiser ya uso.
- Umbali wa angalau mita 1.5 utawekwa kati ya msaidizi wa utafiti na kila mshiriki wakati wote. Mipaka ya mita 1.5 itawekwa kwa utepe mwekundu ili kumsaidia mtafiti na washiriki kujua ni wapi wanatakiwa kukaa.
- Majadiliano ya vikundi yatafanyika ndani ya nyumba, hivyo madirisha yote yatabaki wazi kwa ajili ya mzunguko wa kutosha wa hewa.
- Vifuta vya ulevi vitapatikana kwa ajili ya kupangusa nyuso katika nafasi ya mahojiano na vifaa vya udhu.

Vigezo vya kustahiki

Washiriki lazima watimize vigezo vifuatavyo vya kustahiki:

- Washiriki lazima wawe mama na binti (kwa kuzaliwa au kupitia ulezi).
- Washiriki wote lazima wawe wametoa kibali cha taarifa kwa hiari.
- Lazima wote waishi Durban.
- Uhamisho hadi Afrika Kusini lazima uwe kutafuta hifadhi (mkimbizi au mtafuta hifadhi).
- Washiriki wote lazima wawe na umri wa kati ya miaka 18-65 na kutoka Burundi au DRC.
- Washiriki wanaweza kuwa wamefunga ndoa, waseja, au katika uhusiano wa karibu wa wapenzi.
- Washiriki wanaweza kuajiriwa, kujiajiri, kukosa ajira, au kusoma (chuo kikuu, Teknikon au nyingine) - Hii ni muhimu katika kuelewa kama hali ya ajira na viwango vya elimu ni sababu ya hatari kwa DV pamoja na kuelewa maambukizi miongoni mwa wanawake wakimbizi kutoka demografia tofauti..
- Washiriki wote lazima wawe wameishi Afrika Kusini kwa miaka mitano (5) au zaidi.
- Washiriki wote lazima wawe wameshuhudia na/au uzoefu wa DV.
- Hakuna mshiriki lazima awe amekumbana na tukio la kiwewe la DV katika muda wa miezi mitatu iliyopita, ambalo lilisababisha majeraha au kulazwa hospitalini.

Makubaliano

- Ninakubali kushiriki katika mradi huu wa utafiti.
- Nimesoma fomu hii ya idhini na taarifa iliyomo na nimepata fursa ya kuuliza maswali kuzihusu.
- Ninakubali majibu yangu kutumika kwa elimu na utafiti kwa sharti ufaragha wangu uheshimiwe, kwa kuzingatia yafuatayo:
- Ninaelewa kuwa maelezo yangu ya kibinafsi yanaweza kujumuishwa katika utafiti/yatatumika katika fomu ya jumla pekee, ili nisitambulike.
- Ninaelewa kuwa sina wajibu wa kushiriki katika mradi huu.
- Ninaelewa kuwa nina haki ya kujiondoa kwenye mradi huu wakati wowote.
- Ninakubali kutoshiriki habari yoyote iliyojadiliwa katika kikao cha kikundi na mtu yeyote nje ya kipindi cha majadiliano ya kikundi hasa na wasio wanachama wa kikundi.
- Ninaelewa kuwa utafiti huu unaweza kuchapishwa katika jarida la utafiti au kitabu. Kwa upande wa utafiti wa tasnifu, waraka utapatikana kwa wasomaji katika maktaba ya chuo kikuu kwa njia iliyochapishwa, na ikiwezekana katika mfumo wa kielektroniki pia.

Sahihi ya Mshiriki: _____

Jina la Mshiriki: _____

Sahihi ya mtu aliyeomba idhini: _____

Jina la mtu ambaye aliomba idhini : _____

Saini ya mtafiti mkuu: (Jina) _____

Tahrehe: _____

ANNEXURE L: TRANSCRIBER CONFIDENTIALITY AGREEMENT



Confidentiality Agreement

This agreement is
between:

Kassa Maksudi and

XX for the research project:

**Intergenerational transmission of domestic violence in refugee families in Durban,
South Africa.**

Summary of job description:

1. You will translate and transcribe selected interviews from Kiswahili to English as requested by the *researcher*.

I agree to:

2. keep all the research information shared with me confidential. I will not discuss or share ~~the~~ research information with anyone other than with the *researcher*.
3. keep all research information secure while it is in my possession.

4. return all research information to the *researcher* when I have completed the transcription tasks or upon request, whichever is earlier.
5. destroy all research information regarding this research project that is not returnable to the *researcher* after consulting with the *researcher*.
6. comply with the instructions of the *researcher* about requirements to physically and/or electronically secure records (including password protection, file/folder encryption, and/or use of secure electronic transfer of records through file sharing, use of virtual private networks, etc.).
7. not allow any personally identifiable information to which I have access to be accessible from outside research (unless specifically instructed otherwise in writing by the *researcher*).

Transcriber:

(Print Name)

(Signature)

(Date)

I agree to:

1. Provide detailed direction and instruction on my expectations for maintaining the confidentiality of research information so that **XX** can comply with the above terms.

Provide oversight and support to **XX** in ensuring confidentiality is maintained in accordance with the *Ethical Clearance for Research Involving Human Participants* consistent with the *Human Research Ethics Committee (HREC)* in the Social Development Department of the University of Cape Town as required by the Faculty of Humanities.

Researcher

(Print Name)

(Signature)

(Date)

ANNEXURE M: GATEKEEPER CONFIDENTIALITY AGREEMENT



Confidentiality agreement

This agreement is between: **Kassa Maksudi** and

XX for the project:

**Intergenerational transmission of domestic violence in refugee families in Durban,
South Africa.**

Summary of job description:

1. You will take the role of the gatekeeper in this study.
2. You will be responsible for identifying participants for the study based on the eligibility criteria that will be explained to you by the researcher.
3. You will make a list of all individuals who fit the eligibility criteria for the study and then make initial contact with potential participants.
4. You will forward a list of names and contact details of all individuals you have contacted with regards to the study and who have indicated their interest to partake in the study to the *researcher*.

I agree to:

5. keep all the names and contact details of participants confidential. I will not share the names any of the study's participants to anyone other than with the *researcher*.
6. not share the details of the study with anyone who does not fit the eligibility criteria for the study.

Gatekeeper:

(Print Name)

(Signature)

(Date)

I agree to:

1. Provide detailed direction and instruction on my expectations for maintaining the confidentiality of research information so that I (**XX**) can comply with the above terms. Provide oversight and support to **XX** in ensuring confidentiality is maintained in accordance with the *Ethical Clearance for Research Involving Human Participants* consistent with the *Human Research Ethics Committee (HREC)* in the Social Development Department of the University of Cape Town as required by the Faculty of Humanities.

Researcher

(Print Name)

(Signature)

(Date)

**ANNEXURE N: G2 PARTICIPANTS BORN OR THOSE WHO
ARRIVED IN SOUTH AFRICA AS INFANTS OR AS YOUNG
CHILDREN**

Name	Born or age arrived in South Africa
Zeenat (DRC)	Born
Avril (DRC)	One
Donatille (DRC)	Born
Fridoline (DRC)	Born
Kaisa (DRC)	Born
Kenene (DRC)	Three
Mwamini (Burundi)	Two months
Ghaliyah (Burundi)	Born
Basma (Burundi)	Born
Husn (Burundi)	Born
Wadida (Burundi)	Two
Tricia (Burundi)	Born
Ninziza (Burundi)	Born