

**SOCIO-ECONOMIC FACTORS AND GENDER BASED VIOLENCE (GBV) AMONG
YOUTH IN RUIRU SUB-COUNTY, KIAMBU COUNTY, KENYA**

MIRRIAM WAIRIMU KURIA

**A Thesis Presented to the Graduate School in Partial Fulfilment of the Requirements for
the Award of the Degree in Master of Arts in Gender and Development Studies of Egerton
University**


EGERTON UNIVERSITY

OCTOBER 2025

DECLARATION AND RECOMMENDATION

Declaration

This thesis is my original work and has not been presented in this university or any other for the award of a degree.

Signature: 


Date: 13/10/2025

Mirriam Wairimu Kuria

GME11/12014/17

Recommandation

This thesis has been submitted with our approval as university supervisors.

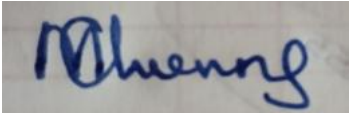
Signature: 

Date: 13/10/2025

Dr. Lilian Chesikaw

Institute of Women, Gender and Development Studies

Egerton University

Signature: 

Date: 13/10/2025

Dr. Mary Chepchieng

Department of Philosophy, History and Religious Studies

Egerton University

COPYRIGHT

© 2025 Mirriam Wairimu Kuria

All rights reserved. None of the content in this document should be copied, stored or transmitted in any form either electronically, mechanically, photocopies, recordings and otherwise without written permission to do so by the author or the university.

DEDICATION

I offer sincere thanks to God for prolonging the duration of strength, sagacity and persistence, which have borne me decisively through this scholarly endeavor. I dedicate this thesis, with deep affection, to my family and to my husband, Dr. Kuria Wanyoike, whose unwavering support and encouragement have been an indispensable pillar, as well as to my children, Jimmy and Sally, whose love, patience, and understanding have been my main source of inspiration and motivation; they remain my most treasured blessing in life.

ACKNOWLEDGEMENTS

I would like to express my warmest thanks to my academic supervisors, Dr. Lilian Chesikaw and Dr. Mary Chepchieng, who have provided invaluable support, insightful feedback and help during the process of the research in the form of guidance. Their advice, knowledge and support have contributed a lot in the quality of this research and the course that this study should take. The Institute of Women, Gender, and Development Studies, as well as the Egerton University, deserves my heartfelt gratitude as well since it offered an enabling and thought-provoking environment that enabled me to complete the work successfully. I equally appreciate all the departmental staffs who cooperated and helped so much at different times of the research. Collins Watiema is especially recognized based on the technical assistance that was offered at various stages of this thesis. His commitment and prompt assistance played a major role in helping him to solve main obstacles that he faced. Finally, I owe my family, career associates and friends a great deal of patience, understanding and unrelenting support during this academic journey. They have trusted me, and this belief has been my strength and motivational factor. This is not my milestone alone but that of the group that was with me all the way and carried with me good intentions and support.

ABSTRACT

The relationship between socio-economic factors and gender-based violence (GBV) among youth of Ruiru Sub - County, Kiambu County, Kenya was studied. Specifically, it discussed the impact of the income level, power dynamics in intimate relationships and the prevailing cultural norms in society on the occurrence of GBV. Guided through Social Learning Theory and Social Exchange Theory, a descriptive cross sectional design approach was followed. A total of 256 respondents were selected from an accessible population of 664 youths by use of stratified random sampling to achieve gender balance. Data collection was done from 244 completed questionnaires and 12 interview schedules. Quantitative data analysis was performed using the statistical analysis software (SPSS) and qualitative response was the analytically analyzed using (NVivo) software. The results showed that GBV among youth in Ruiru Sub -County is influenced by a complex interaction of economic, relationship and cultural factors. Financial instability, unemployment and economic dependency became identified as key factors contributing to the youth vulnerability to GBV. A significant positive correlation was developed between income levels and GBV vulnerability ($r= 0.71$, $p< 0.01$; $b= 0.376$, $p= 0.013$). Similarly, power imbalances ($p<.01$, $r=.79$; $p<.01$, $b= .418$, $p=.014$; Christy et al., 2009) and cultural norms ($p<.01$, $r=.69$; $p<.01$, $b=.301$, $p=.013$) were found to be significant predictors (Andiman and Andiman, 2001) in intimate relationships. Qualitative evidence further supported the extent of gender expectations, and economic dependency on how patriarchal dominance supports. The conclusion of the study was that GBV among youth is systemic and multidimensional and deeply rooted in socio - economic inequalities and traditional power hierarchies. It calls for integrated, gender responsive strategies, with all relevant stakeholders on government levels, civil society and community, for youth empowerment and challenging harmful socio-cultural norms.

TABLE OF CONTENTS

DECLARATION AND RECOMMENDATION	ii
COPYRIGHT	iii
DEDICATION	iv
ACKNOWLEDGEMENTS	v
ABSTRACT	vi
LIST OF TABLES	x
LIST OF FIGURES	xii
LIST OF ABBREVIATIONS AND ACRONYMS	xiii
CHAPTER ONE	1
INTRODUCTION	1
1.0 Introduction.....	1
1.1 Background to the Study	1
1.2 Statement of the Problem	3
1.3 Objectives	4
1.3.1 General Objective.....	4
1.3.2 Specific Objectives.....	4
1.4 Research Questions	5
1.5 Justification of the Study	5
1.6 Assumptions/Scope of the Study	6
1.7 Definition of Operational Terms	6
CHAPTER TWO	8
LITERATURE REVIEW	8
2.0 Introduction.....	8
2.1 Prevalence of Gender-Based Violence.....	8
2.2 Level of Income and Gender Based Violence.....	10
2.3 Power Imbalance Among Intimate Partners and Gender-Based Violence	11

2.4 Cultural Norms and Gender-Based Violence.....	12
2.5 Theoretical Framework.....	15
2.5.1 Social Learning Theory.....	15
2.5.2 Social Exchange Theory.....	16
CHAPTER THREE.....	20
RESEARCH METHODOLOGY.....	20
3.0 Introduction.....	20
3.1 Research Design.....	20
3.2 Study Area.....	20
3.3 Study Population.....	20
3.4 Determination of Sample Size.....	21
3.5 Sampling Techniques and Procedure.....	22
3.5.1 Stratified Random Sampling Procedure.....	22
3.5.2 Purposive Sampling.....	22
3.6 Instrumentation.....	23
3.6.1 Interview Schedule for Key Informants.....	23
3.6.2 Questionnaire for Youths.....	23
3.7 Pre-testing.....	24
3.7.1 Validity of Instruments.....	24
3.7.2 Reliability of the Instruments.....	24
3.8 Data Collection Procedures.....	25
3.9 Data Analysis.....	25
3.10 Ethical Concerns.....	25
CHAPTER FOUR.....	27
RESULTS AND DISCUSSIONS.....	27

4.0 Introduction.....	27
4.1 Reliability Analysis.....	27
4.2 Response Rate.....	27
4.3 Demographic Information.....	28
4.3.1 Demographic Information from the Questionnaires	28
4.3.2 Demographic Information from the Interview Schedules	36
4.4 Normality Test	39
4.5 Descriptive Analysis	41
4.5.1 Income Levels and Gender-Based Violence.....	41
4.5.2 Power Imbalance and Gender-Based Violence.....	42
4.5.3 Cultural Norms and Gender-Based Violence	43
4.6 Inferential Statistics	46
4.6.1 Correlation Analysis	46
4.6.2 Regression Analysis.....	47
4.6.2.1 Model Summary.....	47
4.6.2.2 Analysis of Variance (ANOVA).....	48
4.6.3 Coefficients	49
4.7 Discussion of the Findings.....	49
4.8 Thematic Analysis	51
4.8.1 Income Levels and Gender-Based Violence.....	53
4.8.2 Power Imbalance and Gender-Based Violence.....	54
4.8.3 Cultural Norms and Gender-Based Violence	56
CHAPTER FIVE	58
SUMMARY, CONCLUSIONS AND RECOMMENDATIONS	58

5.0 Introduction.....	58
5.1 Summary of Key Findings	58
5.2 Conclusions.....	59
5.3 Recommendations.....	60
5.4 Areas for Further Research	61
REFERENCES.....	62
APPENDICES	74
Appendix I: The Study Area Map.....	74
Appendix II: University Introductory Letter.....	76
Appendix III: Research Permit from NACOSTI	77
Appendix XI: Published Article Abstract	78

LIST OF TABLES

Table 1: Operationalization of the Study Variables.....	17
Table 2: Population of the Study.....	21
Table 3: Sampling Procedures and Sample Size.....	21
Table 4: Reliability Test Matrix.....	27
Table 5: Response Rate Matrix.....	28

Table 6: Interviewees Demographics.....	37
Table 7: Shapiro-Wilk Normality Test	39
Table 8: Income Levels and Gender-Based Violence.....	41
Table 9: Power Imbalance and Gender-Based Violence	42
Table 10: Cultural Norms and Gender-Based Violence	43
Table 11: Gender-Based Violence Prevalence.....	44
Table 12: Pearson Correlation Matrix.....	46
Table 13: Model Summary	48
Table 14: Analysis of Variance (ANOVA).....	48
Table 15: Coefficients	49
Table 16: NVivo Thematic Analysis Output	51

LIST OF FIGURES

Figure 1: GBV Data trend in Kenya (October 2020 to March 2021)	10
Figure 2: Conceptual Framework	19
Figure 3: Age Distribution.....	29
Figure 4: Relationship Durations.....	30
Figure 5: Gender Distribution.....	31
Figure 6: Occupation Distribution.....	31
Figure 7: Monthly Income Distribution.....	32
Figure 8: Location Distribution	33
Figure 9: Intimate Relationship Distribution.....	34
Figure 10: Relationship Distribution	35
Figure 11: Experienced GBV Distribution	36
Figure 12: Q-Q Plots.....	40

LIST OF ABBREVIATIONS AND ACRONYMS

AGYW	Violence against adolescent girls and young women
AYW	Adolescent girls and young women
CDCP	Centre for Disease Control and Prevention.
COVID-19	Corona Virus
DHS	Demographic and Health Survey
DNA	Deoxyribonucleic Acid
DoVP	Department of Violence Prevention
GBV	Gender Based Violence
HIV	Human Immunodeficiency Virus
IPV	Intimate Partner Violence
KDHS	Kenya Demographic and Health Survey
KNBS	Kenya National Bureau of Statistic
LMIC	Low- and Middle-Income Countries
SGBV	Sexual Gender Based Violence
SRGBV	School-Related Gender-Based Violence
SSA	Sub- Saharan Africa
SV	Sexual Violence
UN	United Nations
U. S	United States
VAC	Violence against Children
WHO	World Health Organisation

CHAPTER ONE

INTRODUCTION

1.0 Introduction

This chapter outlines the study's background, problem statement, research objectives, research questions, study justification, assumptions, scope and limitations, and operational definitions of terms.

1.1 Background to the Study

The World Health Organisation (WHO) defines gender-based violence (GBV) as follows: According to the Kenya Demographic and Health Survey (KDHS, 2022), gender-based violence is a cluster of acts of violence that can entail physical, sexual, economic or psychological harm or suffering to people, regardless of gender. It also covers threats of such acts, coercion and the arbitrary denial of personal freedom. This definition is further extended to violence committed by current or former spouses and intimate partners. GBV is a crucial public health and human rights problem, as it impacts on the dignity, autonomy, health, and security of survivors. Despite its prevalence, GBV remains hidden in the face of societal silence and perpetuated by societal cultural norms and beliefs which allow and/or normalise abusive behaviour within intimate relationships.

The recent global estimates by the World Health Organization (WHO, 2024) reveal that women around the world, one of every three, are victims of physical or sexual violence at least once in their lives, either the hands of an intimate partner or a different person. The number of such incidents in intimate relationships is quite significant, and over a third of homicide incidents against women is associated with violence committed by intimate partners. In addition, about 27 percent of women between 15 and 49 years in relationships have cited having been abused either physically and/or sexually by their partners. The studies also point to the fact that exposure to the conditions of crisis increases the threat of gender-based violence (GBV) and also intensifies the social and economic marginalization of women (Wenham et al., 2020).

The elimination of gender-based violence has been identified as a key ingredient in the sustainable development goals (SDGs) of the United Nation, especially gender equality and women empowerment (Muluneh et al., 2020). In countries where GBV is still present, the Government of Kenya (2025) has a National Taskforce on Gender-Based Violence and Femicide to provide a review and strengthening of national response mechanisms. The taskforce was tasked with conducting consultations across the country, mapping the GBV and femicide hotspots,

reviewing current legal and policy frameworks and recommended ways of strengthening systems of prevention, accountability and response.

In many developing nations, gender-based violence (GBV) is grossly underreported and it frequently happens out of cultural, social, and institutional barriers that prevent victims from seeking justice (Bradbury-Jones & Isham, 2021). In Kenya in particular, the situation is especially dire with Reuters estimating that 34 per cent of women have been victims of physical violence since the age of 15 while 13 per cent have been victims of sexual violence at least once in their lifetime (KNBS, 2022). Recent statistics reveal a disturbing rise in the number of GBV cases and there have been reported instances where more than 100 women have been murdered in gender-related incidences in the period 2023-2024 (Africanews, 2024). among young women in Nairobi said that they experienced intimate partner violence in relation-ships in 2024.

National records indicate that in 2021, Kenya was able to register a total of 8,149 cases of sexual and gender-based violence (SGBV) with 92% of the victims being women and 8% of the victims being men. However, these numbers most probably underestimate the actual extent of the problem as many cases go unreported for fear, social stigma, isolation and lack of institutional support leave the victims vulnerable for recurring abuse. GBV occurs in various arenas - families, workplaces, schools and the public domain - involving perpetrators at various points at the end of the continuum, including family members, partners, acquaintances and strangers. The phenomenon defies social, economic, political and cultural boundaries, thus it is a challenge in all parts of society.

Data from the Kenya Demographic and Health Survey (2022) further hints on the extent of the problem as it shows that 16,926 women were recorded as victims of physical violence nationally or 2,088 women were reported in Nairobi County alone. Approximately 15.8 percent of the participants mentioned that they often or sometimes experienced acts of violence (Wanjala, 2023). The situation seemed worse in Kiambu County which had the highest 1,091 cases of the victims having been abused. 17.9 percent of the respondents in the county said that they were being abused regularly or occasionally. County level statistics indicate that 17.7 percent of women in Kiambu experience violence of some sort, of which 21.8 percent is in the context of marriage. Emotional abuse made up 82 percent, physical violence 26 percent and sexual violence 36 percent. 82 percent of survivors experienced more than one form of abuse at the same time.

With the emergence of digital technology, there has been a new and alarming aspect of gender-based violence (GBV) particularly among the young women. In the recent coursework on social issues we have read a report by UN Women (2024) demonstrating that around 39 percent of university students themselves have encountered some kind of on-line harassment or abuse based on gender discrimination. The evolution of GBV in the digital age this change brings out as a critical issue the need to adopt multi-layered, multi-pronged initiatives that address the online and offline acts of violence.

Kiambu County is one of the 47 devolved units of governance in Kenya, which is located in Central Kenya. The 2019 Kenya Population and Housing Census showed that the population of the county was 2,417,735. Out of the fifteen (15) sub-counties, Ruiru is the most populated with a population of 371,111 people. The high rate of population increase in Ruiru has put much pressure on the existing social and economic resources, which have contributed to the circumstances that can increase the probability of GBV, particularly among the youths.

It is on this background that the current research is expected to explore the correlation between socio-economic elements and gender-based violence among youth in Ruiru Sub-County, Kiambu County in Kenya. The study aims to address existing knowledge gaps that we are witnessing in the existing literature and offer practical suggestions to the policy makers and universities.

1.2 Statement of the Problem

Gender-Based Violence (GBV) is a severe violation of human rights and still an important public health and protection issue. It disproportionately affects women and girls and is linked to far-reaching effects in the health of the body, mind, sex and reproductive. Survivors are usually at a higher risk of infection from HIV and other sexually transmitted infections, especially in a high prevalence scenario. Beyond immediate harm, GBV causes long-term damage to people's bodies, leaves them with psychological trauma, and results in fatalities in extreme cases, thus forcing survivors and their families to suffer for months while battling for emotional and social well-being.

Despite laudable efforts by the Government of Kenya to overcome GBV by enacting oppression laws that criminalize abuse and require state institutions to provide medical aid, legal support and psychosocial counsel and protection to the victims, the issue remains prevalent. In Kiambu County an official record for the year 2022 shows about 17.7 percent of people in the

county have been subjected to gender-based violence of one form or another with the youth population being the greatest target demographic. Reports by Associated press (2023) reported that there is a great rise in GBV incidents in the country, which is seen to be due to the economic hardship, unemployment, and the rise of social instability in the youth.

In Ruiru Sub-County, it appears to be a growing reality that young people are becoming increasingly susceptible to GBV, owing to several interconnected issues such as income discrepancies, inequality in power relations within intimate partnerships, and constant cultural norms enforcing gender inequality. However, the ways in which these socio-economic dynamics contribute to the prevalence of GBV in the region are far from understood. While national level frameworks and initiatives (such as taskforces and policy reforms) have been launched to address GBV, they do not take into consideration the local socio-economic realities that contribute to vulnerability, especially among the youth.

Despite extensive documentation of GBV incidents occurring in Kenya, there still a paucity of empirical research investigating the relationship between socio-economic factors such as income levels, power imbalances among communities and cultural beliefs, and the occurrence of GBV in a community. This knowledge gap highlights the importance of having evidence-based understanding of knowledge which can help guide more specific interventions. Therefore, in the present study a relationship between socio-economic factors and gender based violence among youth in Ruiru Sub-County is sought. By recognizing the root causes and how significant they are to each other, the research, in turn, is intended to help design effective and locally based interventions and policy measures that will ensure safety, empowerment and well-being of young people in that environment.

1.3 Objectives

1.3.1 General Objective

The aim of this study was to investigate the relationship between socio-economic factors and GBV among the youth in Ruiru sub-county Kiambu County in Kenya.

1.3.2 Specific Objectives

This study was anchored on the following specific research objectives:

- i. To examine the influence of income levels on GBV among the youth in Ruiru sub-county.

- ii. To assess how power imbalance among intimate partners relates to GBV among the youth in Ruiru Sub County.
- iii. To examine how cultural norms contribute to GBV among the youth in Ruiru sub-county.

1.4 Research Questions

This study was guided by the following corresponding research questions:

- i. How do income levels influence GBV among the youth in Ruiru sub-county?
- ii. How does power imbalance among intimate partners relate to GBV among the youth in Ruiru Sub County?
- iii. How do cultural norms contribute to GBV among the youth in Ruiru sub-county?

1.5 Justification of the Study

The current body of knowledge shows some gaps in the understanding of the role that socio-economic conditions play in shaping the prevalence of gender-based violence (GBV) among young people in the Ruiru Sub-County. Although several studies and surveys have been carried out on GBV within Kiambu County, very few have specifically focused on the youth population, despite the fact that they are evidently prone to facing such violence. According to the Kenya Demographic and Health Survey (KDHS, 2022), Ruiru Sub-County contains the largest population of Kiambu County, estimated at 371,111, which approximately 78 per cent is the young people. In recent years, the county has appeared quite a number of times in the national report because of a frightening increase in GBV cases including physical assault cases and the cases of femicide against youth. These cases have been closely associated with high unemployment rates, economic hardships and substance abuse all of which increase vulnerability to gender based violence in this demographic. Moreover, the growing number of reported GBV cases and the severity of some cases signal an urgent need for empirical research into the underlying socio-economic issues influencing violent behavior within this age group. In Kenya, the Government has established national-level initiatives and policies, strategies and laws to address GBV. However, there is limited, if any, localized studies examining how socio-economic variables drive GBV among youth in highly populated sub-counties like Ruiru.

The need for this study is highlighted by the growing levels and severity of gender-based violence among the youth, and the scarcity of evidence-based interventions addressing the underlying socio-economic drivers of gender-based violence. This study is expected to contribute significantly to the current body of knowledge by taking insights to serial development and

implementation of both county and national gender policies with a view to addressing youth-specific vulnerabilities and needs. Additionally, the results will serve as a basis for strengthening a collaboration between the county institutions, the national government, the civil society organizations and the private sector entities in designing proactive strategies for youth on gender-based violence prevention, mitigation and the efficient response to gender-based violence in Kiambu County and elsewhere..

1.6 Assumptions/Scope of the Study

The study was based on the following assumptions:

- i. The participants provided truthful, comprehensive, and correct information regarding relationships between socio-economic factors and GBV.
- ii. It was assumed that all the questionnaires distributed would be filled and returned in a timely manner to ensure adequate data coverage.
- iii. The sampled research locations remain accessible and safe to allow smooth collection of data.
- iv. The research methodology used was suitable for capturing valid, credible, and comprehensive data appropriate to the study objectives.

1.7 Definition of Operational Terms

Cultural Refers to Ethnicity of the respondents and their way of life.

Background:

Domestic Violence: Any act of violence within the home that causes harm or suffering to individuals, including threats, coercion or deprivation of liberty.

Education: Process of acquiring knowledge/skills, formally/informally.

Education Level: Categories of education attained: no formal education, primary, secondary and post-secondary.

Gender-Based Violence: Violence arising from unequal power relationships between men and women.

Gender: Socio-cultural differences between men and women, influencing roles and responsibilities.

Income Level: Financial returns in the past year, categorized as 0-10,000, 10,001-50,000, 50,001-100,00 and 100,001 and above (in Kenyan Shillings).

Intimate Partner Violence:	Violence between intimate partners, including physical, sexual or psychological harm.
Mental Health Status:	State of a person's mind, classified based on personal history or clinical diagnosis.
Personality Type:	A person's traits, either; Type-A (competitive, aggressive) or Type-B (relaxed, patient).
Prevalence of Gender-Based Domestic Violence:	The number of reported cases of gender-based domestic violence, categorized as low, moderate or high prevalence.
Psychological Wounds of Violence:	Emotional and mental pain caused by violence.
Socio-Economic Background:	A person's social and economic experiences (education and income).
Survivor:	One affected by physical, social, psychological or economical violence
Youth:	A person aged between 18 and 35 years (Constitution of Kenya, 2010).

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This part will examine the literature regarding the relationship of gender based violence among juveniles and socioeconomic factors. Specifically, the relations between intimate partner relations and youth gender based violence, the role that cultural norms play in gender based violence and the role played by the economic level in causing the juvenile gender based violence in Ruiru Sub County. It bridges the gap between the conceptual framework, theoretical framework and justification of the investigation.

2.1 Prevalence of Gender-Based Violence

Gender-based violence (GBV) is recognized as a significant problem worldwide with a significant impact on human rights and general health (Javed & Chattu, 2021). Recent statistics show that more than 60 million stateless and forcibly displaced women and girls in the world are at high risk of gender-based violence (GBV), which highlights how humanitarian crises and displacement contribute to the severity of this public health and human rights challenge (United Nations, 2024). GBV is very high in Sub-Saharan Africa. Beyene et al. (2019) state that Ethiopia has the highest rate of GBV in the sub-Saharan region (67.7). The forms of GBV can be numerous, and they may be economic, psychological, sexual, and physical abuse, as defined by UN Women (2023). It is closely related to unfair power relations, the dominance of men in the decision-making process, rigid gender roles, and negative social norms that limit the autonomy of women and their bargaining power (UN Women, 2023; World Bank, 2022). Carlson (2019) states that it is easier to perpetrate GBV when violence against women and girls is condoned at the communal level. These behaviors are also supported by national or subnational laws and regulations, including those that seek to protect women and girls (Bhattacharjee et al., 2020).

The United Nations estimates that as of 2023, more than 30% of women aged 15 yrs of age or older have at some point in their lives been subjected to physical abuse. Females aged 15 to 24 who have ever been in a relationship with a partner state that they have been mistreated by their boyfriend 29% of the time. Combined intimate relationship and non-partner violence is prevalent in the WHO European Region (27 percent) and the African Region (46 percent) (UN, 2023). A report published in 2022 by the UN Children's Fund Kenya Country Office DoVP, the

Kenya National Bureau of Statistics, the National Centre for Injury Prevention and Control, and the U.S. Centres for Disease Control and Prevention noted that violence against children and young women is a significant issue in Kenya: 32 and 66% of girls aged 18 to 24 reported that they had experienced at least one incident of sexual or physical violence before they were 18 (Olson et al., 2022). Eleven and 49 percent of girls aged 13-17 years said they had been the victim of physical or sexual abuse within the last 12 months. Besides acquaintances, classmates, strangers, and family members, there were also boyfriends and girlfriends who sexually assaulted them (Stermac et al., 2019). Girls, boys, teenagers and women are likely to fail to use birth control, become pregnant unwillingly, undergo unsafe abortions, have STDs, and deliver underweight children when exposed to violence. They are also more likely to self-harm, abuse drugs and alcohol, and become a victim of violence in adulthood (Temmerman, 2020).

According to the Kenya Demographic and health survey (KDHS, 2022), 34 per cent of women and girls and 13 per cent of boys and men between the ages of 15 and 49 have been victimized by physical or sexual violence since the age of 15. The survey further revealed that, nationally 16,926 women were physically assaulted with Nairobi contributing 2088 of these incidences. Among the victims, 15.8 percent of them have frequently or occasionally experienced violence (Wanjala, 2023). In Kiambu County, which had the second highest number of victims recording 1,091, around 17.9 percent of the respondents said they were often or sometimes subjected to violence. These numbers have shown great concern about the existence of gender-based violence in the County. County government data shows that 17.7 percent of women experienced some form of violence, 21.8 percent of which were married. The most common type of abuse according to neighbours was emotional violence (82%), sexual violence (36%) and physical violence (26%),

some victims faced more than one form of abuse at the same time.

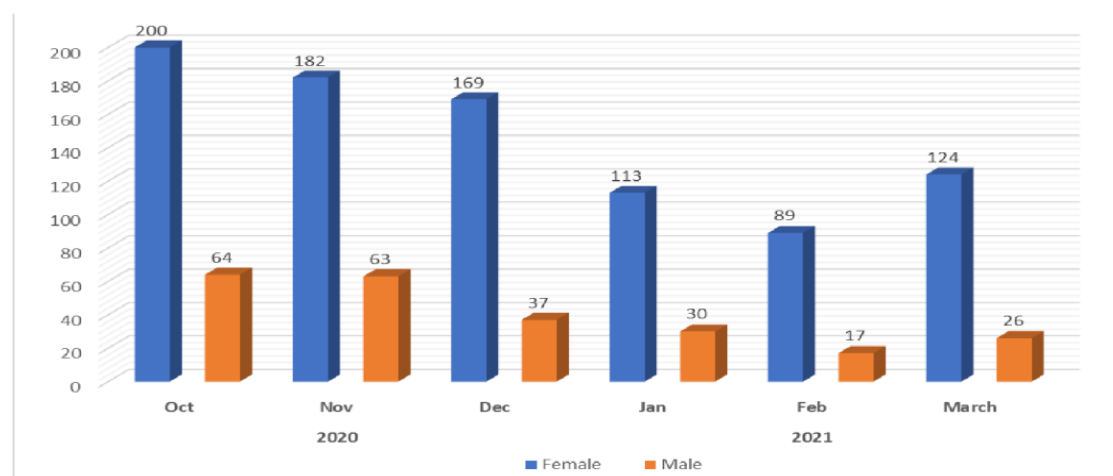


Figure 1: GBV Data trend in Kenya (October 2020 to March 2021)

2.2 Level of Income and Gender Based Violence

In certain LMICs, one out of every two women is the victim of gender-based violence (GBV) (WHO, 2021). This is especially so with girls and women. When people are poor or do not occupy a high socioeconomic status, violence of partners against women is more prevalent in high-income contexts and low- and middle-income nations (LMIC) (Vyas and Watts, 2019).

The review of published data on LMIC revealed that women who had durable items were less likely to have been physically or sexually abused within the last 12 months. This protective effect was found in fifteen out of the sixteen settings that were studied. In order to demonstrate that family income is not necessarily protective, it was applicable only in eight cases (Vyas & Watts, 2009). The initial theories, including the family stress theory, suggest that males mistreat their wives and other female partners because of the stress that exists in living in poverty (Vyas & Jansen, 2018). Stress associated with poverty is worsened in societies where males are supposed to be the main breadwinners. Men who cannot find a job or have limited great career opportunities can become anxious and hopeless (Vyas and Jansen, 2018). This may lead to a crisis of masculine identity.

In some LMICs, including Tanzania, men who view themselves as disadvantaged economically have redefined masculinity to mean excessive drinking and association with women, both of which have been found to greatly contribute to the increased risk of violence against women (Jansen et al., 2016). In other terms, there are aspects of women empowerment (capital assets ownership, economic independence, and education) that have been linked to a reduced risk

(Peterman et al., 2017). Since they know that reporting the abuse will affect their earning negatively, violence perpetrators may be targeting women who are financially dependent on their abusers. That is, reporting abuse can lead to the loss of resources or help. The fact that people do not speak out because they are concerned about what will become of their money will allow GBV to continue.

The role of women in alleviating family financial pressure within the poverty context can be achieved through financial contribution of women. But the opposing argument of this is the relative resource theory which argues that because it erodes the gender norms established over a long time, economic (e.g. job or income) or status (e.g. education levels) differences that place women at an advantage over males increase the vulnerability of a woman to violence (Atkinson et al., 2005). Thus, women can be in danger when their husband or male partner is employed but they are not, particularly when such an unequal status contributes to the inferiority complex of men (Makama, 2013). Therefore, this study will establish the influence of the economic levels on gender based violence among the youths in the County.

2.3 Power Imbalance Among Intimate Partners and Gender-Based Violence

Violence against women, young people, and girls is a global public health and human right issue that affects millions of women (WHO, 2017). The World Health Organization (2017) admits that approximately one-third of women all over the world have ever been physically or sexually abused by a partner or non-partner. Although the effects of GBV on the physical, mental, and social health of women, youth, and girls have been relatively well-documented, the prevalence of this issue is so high that its health consequences have not been reduced (WHO, 2013; Wado et al., 2021). To illustrate, sexual violence, poverty, social norms associated with marriage, gender inequality, and detrimental traditional practices with unequal power relations remain the primary causes of high HIV infection rates among young women in sub-Saharan Africa (SSA), and young women are disproportionately affected (Wado et al., 2021).

Decker et al. (2018) note that women and girls who are mistreated are more susceptible to repeated abuse and have a harder time getting help. Adolescent girls and young women (AYW) are especially likely to be at the mercy of exploitation, particularly if they are married young or to much older husbands or partners, and this leaves them powerless in their own relationships (Brown et al., 2022). The 2021 WHO Violence Against Women Survey found that around 30 percent of girls (aged 15-19 years old) across the world experienced physical or sexual abuse in their lifetime.

Similarly, a study, conducted on Demographic and Health Survey (DHS) data from 30 developing countries revealed that 28 percent of teenagers (15-19 years) and 29 percent of young women (20-24 years) reported having been physically or sexually abused by a partner (Decker et al., 2015).

Further, the WHO (2021) research showed a range in the rate of intimate partner violence (IPV) ranging from 15 to 71 percent for lifetime, and 4-54 percent for the 12-month period. Emotional abuse was reported by between 20 and 75 percent. Another survey conducted by WHO (2018) indicated 31.6% of females between 20-24 years and 29.4% of females between 15-19 years of age experienced abuse in an intimate relationship in their lifetime. Shannon et al. (2015) report Sub-Saharan Africa to have the highest prevalence of IPV of 65.64 percent.

Many studies examining the causes of IPV have utilized the ecological model that states that the vulnerability of individuals to IPV occurs on several different levels (individual, interpersonal, community, and societal) (Smith et al., 2014). This framework draws attention to the complex dynamics of the drivers of violence against women and young people.

According to Benebo et al. (2018), the primary factors contributing to the prevalence of GBV in SSA are socioeconomic inequality and cultural beliefs like men domination over women. A systematic study has found that age, the age gap between the individual and the partner, and educational attainment are individual risk factors of GBV (Semahegn et al., 2019). Moreover, national and local factors that lead to violence in SSA are numerous. Ahinkorah et al. (2018) state that poverty and violence among young women are closely connected, and poor households and societies are more vulnerable. Low education, exposure to violence at a young age, unequal power distribution in intimate relationships, and attitudes and norms that condone violence and gender inequality further increase the risks of experiencing IPV and sexual violence (Smith et al., 2014).

2.4 Cultural Norms and Gender-Based Violence

Njeze et al. (2020) claim that cultures bring pride, resiliency, belonging, overlapping identities, and a sense of community. Cultural identities consist of the past of a people, such as customs, tribulations, achievements, and conquests (Njeze et al., 2020). Nevertheless, culture is used to justify gender violence and inequality by referring to traditions and concepts of the way women and girls should be treated (Djamba & Kimuna, 2015). Njogu et al. (2013) say that our movement is here to fight back in case the culture dictates the arenas where gender roles and power are created. Similar to personal DNA, cultural DNA evolves with every generation and numerous traditions and clarifications have a time to expire (Njogu & Orchardson-Mazrui, 2013).

Advocates, theorists, researchers, and practitioners discuss intimate partner violence as a part and contributor to a larger gender system (Jewke et al., 2015). The injustice that puts males in a dominant position over women is supported and perpetuated by the unequal distribution of resources, norms of society, institutional processes, social contacts, patterns of behavior, and ingrained identities and beliefs (Jewkes et al., 2015). These factors influence many levels, such as social, community, individual, and interactional levels in the contexts such as intimate relationships, the workplace, and families. Gender-based violence perpetrators are linked to various attributes of the gender system, such as relationships, norms, beliefs, and behaviors (Risman, 2018).

males committing acts of violence are conditioned by socially constructed conceptions of masculinity, or expectations and perceptions regarding what males ought to do or have. As an example, such roles and qualities as power, toughness, control, and sexual dominance (which can be expressed through violence) are frequently part of the masculinity ideology (McCarthy et al., 2018). Social norms related to IPV can include descriptive norms, including the perceptions of what other people do (including opinions on the prevalence of gender-based violence among young people in the community or among peers) and injunctive norms, including the opinions on whether or not other people support IPV (Cislaghi and Heise, 2018). Moreover, Cislaghi and Heise (2018) indicated that at the interpersonal level, the unequal power in relationships is imposed, which can be the control of the daily household decision-making, restriction of the autonomy of a partner, his/her aspirations, and access to social and economic resources, as well as violence or the threat thereof. As stated by Bicchieri (2015), the attitudes, beliefs, and behaviors of individuals, i.e. whether a man defends physical violence against his wife or how much he follows masculine norms and roles, are the defining factors of whether he will commit violence against a partner. Examples of structural gender inequities that reinforce gender-based violence in the interplay of multi-tiered gender system are legal frameworks and policies that do not acknowledge forced sexual relations in the context of marriage as rape or impose the burden of proof on the victims of domestic violence, but this is not the primary concern of this paper (Jewke et al., 2015).

Childhood exposure to violence, gang affiliation, drug use, low socioeconomic status, and unemployment are other risk factors of gender-based violence that can strengthen and support the pathways between gender-inequitable norms, perceptions, practices, and relationships and IPV (McCarthy et al., 2018). These factors can directly influence the likelihood of the perpetration of

IPV or can affect other gender-related variables (Cislaghi & Heise, 2018). As an example, in a situation where jobs are scarce, men might struggle to meet the masculine expectation of being the provider, and thus they have few options when it comes to expressing their masculinity, other than through the application of violence on their female partners and other men (Fulu et al., 2017). Living in a household with violence, where aggressiveness is being displayed, can also be a normalization of violence, where negative masculinity norms are being reinforced and IPV continues across generations (Jewkes et al., 2015). McCarth et al. (2018) report that the connection between the factors of the gender system and gender-based violence is well-grounded. The gender beliefs that are not equitable, lax attitudes on violence against women, and controlling relationships practices are also noted to be significant risk factors of male perpetration of violence in recent large-scale surveys such as the UN Multi-Country Study on Men and Violence and the International Men and Gender Equality Survey (Fleming et al., 2015). Specifically, the UN study that involved more than 10,000 men in six Asian and Pacific countries found that the two most connected factors to the perpetration of both physical and sexual gender-based violence were the control of behaviors and unequal gender attitudes (McCarthy et al., 2018). To regulate behaviors, the values of proportions of IPV perpetration differed between 6.7 and 10.5% per country, whereas the values of proportion of gender-inequitable views were between 20.4 and 23.4% (Fulu et al., 2017).

The components of the gender system emerged as the central component of the gender-based violence prevention efforts because of its ability to facilitate and promote violence in numerous ways (Jewkes et al., 2015). However, in contrast to some studies that have demonstrated the association between gender-based violence and gender-inequitable norms, beliefs, behaviors, or relationships, other studies have not (McCarthy et al., 2018). The fact that there are very many hypothesized pathways is one of the limitations to understanding this association because the definition and measurement of these constructs of gender inequality vary. This has led to a partial comprehension of the variables and scales that explain the most in the prediction of perpetration of violence (Fulu et al., 2017). In practice, the fact that theories of change that justify the design of interventions can also be more explicit about which aspects of the gender system, i.e., gender-unjust norms, perceptions, relationships, or practices, are most directly related to gender perpetration and which social levels, i.e., the community, interpersonal (family, peer, or intimate/sexual relationships), or individual, are most relevant to these constructs (Cislaghi and

Heise, 2018). It is possible to target program content, platforms, and reach and decide on which scales may be best suited to measuring the effectiveness of gender-based violence prevention programs and to identify which particular scales are most related to gender-based violence perpetration with a better understanding of how gender inequitable norms, views, relations, and practices have been measured (Jewkes et al., 2015). This study was meant to establish the influence of cultural norms on gender-based violence in young people in the Kiambu County in the Ruiru Sub County.

2.5 Theoretical Framework

Social Learning Theory and the Social Exchange Theory inform this study.

2.5.1 Social Learning Theory

Human beings have learned to do anything. Humans get to learn through observing the actions of other people and by theorizing about what will happen to our actions (Kendal, 2018). Children tend to copy the behavior of the people they have observed. The Social Learning Theory therefore views the use of violence as a coping strategy which is learnt through observation or experience exchange. Besides, modeling is instrumental in the instruction of aggressive behaviors (Akers and Jennings, 2019). Also, the concept asserts that when an individual is reinforced to be violent, he/she is likely to do it again. The cycle of violence is one of the elements of the social learning theory (Widom and Wilson, 2015). This component suggests that children exposed to or observing violence in their family of origin during their development are prone to adding violence to their behavior repertoire as adults as either perpetrators or victims. Past studies have provided evidence that there is a correlation between childhood violence experiences and violent acts that are perpetrated as an adult in intimate relationships. Another study by Haj-Yahia et al. (2021) studies and explains the relationship between the exposure or observation of violence in their families of origin and marital violence. The results demonstrated that individuals who observed or were exposed to violence and aggressiveness in the family members in their birth family were more prone to either become the victim or be the perpetrator of violence in their current relationships with intimate partners. In the study, it is also observed that the basic concepts of Social Learning Theory, imitation, observational learning, and the intergenerational cycle of violence have been applied to understand the actual reasons behind gbv within the home settings.

2.5.2 Social Exchange Theory

The Social Exchange Theory has been applied to various academic publications explaining the complex mechanisms that underline intimate partner violence (Cropanzano et al., 2017). In that regard, the theory argues that the principle of costs-benefits affects child abuse and intimate relationship violence. Citizens are ready to be violent when the rewards surpass the disadvantages (Stafford and Kuiper, 2021). Exchange theorists believe that it is fulfilling to penalize an individual who has done you wrong (Homans, 1967). Having been assaulted, the victims can respond with excessive forms of violence, which could be attributed to the concept of sweet revenge. The advantage of using violence is the achievement of domination and control over another (Stafford and Kuiper, 2021). The costs of violence used by the abusers are reduced due to the privacy of the family, the lack of willingness of social institutions and agencies to intervene in the intimate relationships, despite the laws that mandate reporting of child abuse and mandatory arrests of partner violence, and the low risk of the alternative intervention (Cropanzano et al., 2017). Besides, the fact that the society tolerates violence as an expression and a tool enhances the possible gains of using violence with the most significant gains being the social and interpersonal control and power.

The interrelation between the Social Learning Theory and the Social Exchange Theory adds value to the analytical framework of the study by exploring the how and why of gender-based domestic violence. The Social Learning Theory is the theory that focuses on the role of early socialization and environmental factors in the explanation of the learning and reinforcement of violent behavior through modeling and observation. Moreover, inequality of power, the perceived gains, and lack of proper accountability and deterrents are just but few of the contextual and logical factors that explain why violence remains as elaborated by the social exchange theory. Combined, these theories can give a holistic view that can incorporate the behavioral learning and sociostructural factors that can further augment our knowledge on why and why domestic violence occurs in IPR. This dual-theoretical approach is justified by the more detailed explanation of gendered DV that can be given, considering the individual learning processes, as well as the larger socio-cultural and relational context within which these behaviors are lived. 2.6 Conceptual Structure.

The conceptual framework presents three primary research areas, which include socioeconomic factors, types and prevalence of GBV (IV) and intervening variables. The understanding of such notions is further elaborated as follows:

Table 1: Operationalization of the Study Variables

Type of Variable	Variable	Operational Definition / Indicators	Measurement / Data Source
Independent Variables	Income Level	Employment status (employed, unemployed, self-employed); household income level (categorized as low, middle, high based on national thresholds); financial dependency (extent of reliance on partner or others for basic needs).	Structured questionnaire; household income records.
	Power Imbalance in Intimate Relationships	Decision-making power (who makes key household and financial decisions); access to and control over resources (ownership of assets, financial autonomy); conflict resolution patterns (who initiates and dominates conflict resolution).	Structured interviews; Likert-scale survey items.
	Cultural Norms	Gender role expectations (beliefs about men's and women's roles); social acceptance of GBV (degree of community tolerance toward violence); traditional beliefs on relationships (beliefs justifying male dominance or control).	Attitudinal survey; focus group discussions.
Dependent Variable	Gender-Based Violence (GBV)	Prevalence of GBV cases (percentage of respondents reporting GBV incidents); types of GBV experienced (physical, emotional, sexual,	Survey questionnaire; police or NGO records.

Intervening Variables	Community and Institutional Factors	<p>economic, etc.); reporting and intervention rates (proportion of cases reported to authorities or organizations).</p> <p>Community sensitization on GBV (frequency and reach of awareness campaigns); training of service providers on GBV (extent of professional training in health, police, and social services); access to economic empowerment opportunities (availability of programs promoting financial independence); presence and enforcement of government policies and laws on GBV.</p>	<p>Review of policy documents; key informant interviews; NGO records.</p>
------------------------------	--	--	---

Table 1 summarizes how study variables were defined, measured, and categorized for analysis.

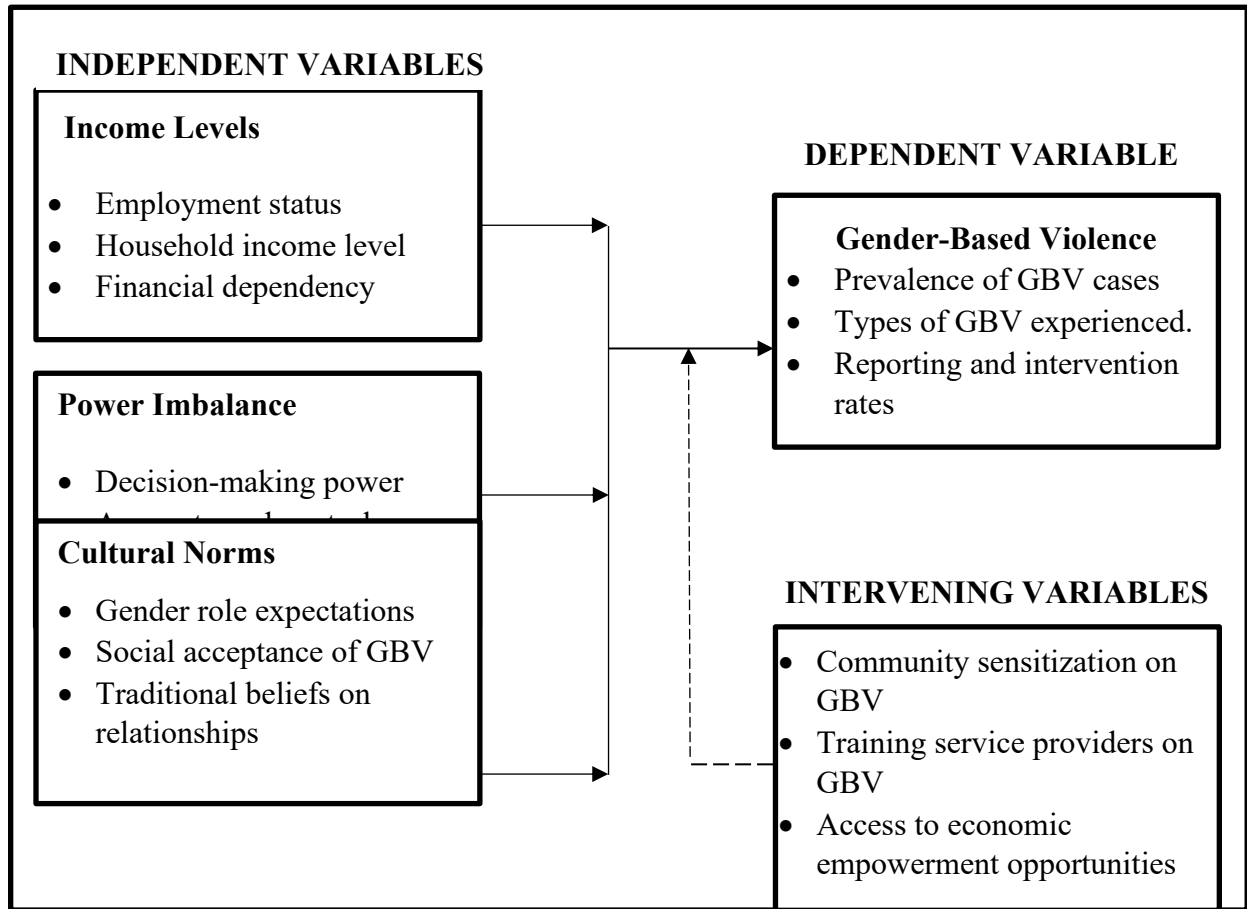


Figure 2: Conceptual Framework

CHAPTER THREE

RESEARCH METHODOLOGY

3.0 Introduction

Research design, the area of the study, the study population, how a sample size is calculated, the sampling methods and procedures, the instrumentation, pre-testing, data collecting methods, data analysis and ethical considerations are discussed here.

3.1 Research Design

Kothari (2011) refers to a study design as a framework that helps in collecting, measuring and analyzing information. For this research, a descriptive cross-sectional design will be applied since it facilitates the data collection of qualitative and quantitative which will enable the research to obtain the research objectives for the study to voice out lender recorded design. This design helps to look at a phenomenon at one point in time, which is a snapshot of the issue under investigation. By using the descriptive approach, the researcher will be able to interpret existing data and generations results and derive insights from this data that can help in providing understanding and possible solutions. The design is suitable since the study aims at providing a detailed and systematic description of the factors that influence adoption of automated revenue systems.

3.2 Study Area

Ruiru Sub County in the Kiambu County was the study area. The number of government and civil society activities and projects on GBV is many and that is why this Sub County was selected. This research is particularly ideal in the subcounty because 78 percent of the population is young, besides the culture being cosmopolitan. Moreover, it is readily available and directly pertinent to the interest of the researcher, which makes it ideal to the study (Singleton et al., 1993).

3.3 Study Population

This consisted of men and women aged 18 to 35 years and living in the Kiambu County, Ruiru Sub-County. The population that is accessible is comprised of people living in the Ruiru Sub County of the Kiambu County.

Table 2: Population of the Study

Administrative wards	Targeted youths (n)	Accessible youths (n)
Kahawa Wendani ward	186	112
Mwiki ward	231	119
Gitothua ward	223	131
Biashara ward	244	128
Kiuu ward	282	153
Totals	1,166	664

From Table 2, the sub-county has one thousand one hundred and sixty-six (1,166) youth in Ruiru Sub County. Six hundred and sixty-four (664) youths who were accessible in Ruiru Sub County were sampled to participate in the study.

3.4 Determination of Sample Size

The research will use an online sample size calculator to figure out the proper sample of the 664 accessible youth. The confidence level of the calculation, margin of error calculation, and the population proportion will be entered as 95%, 5%, and 50%. Using these parameters, a total of 268 respondents will be targeted; that is, 244 respondents will fill questionnaires and 24 key informants will be interviewed. The inclusion of 24 key informants (representing 10% of the sample) is an attempt to compensate for any non-response or unwillingness to participate in order to ensure the reliability of the data obtained. The sample will be proportionate among all the sub-groups and Table 3 will cover the sampling procedures and the corresponding sample sizes for each survey category of the respondents.

Table 3: Sampling Procedures and Sample Size

Category	Study Population (N)	Sample Size (n)	Sampling Technique	Data Collection Method
Accessible youth respondents	598	244	Simple random sampling	Questionnaire

Category	Study Population (N)	Sample Size (n)	Sampling Technique	Data Collection Method
Multi-sectoral service providers for GBV survivors (Health = 3; Security = 2; Psychosocial support = 4; Legal actors = 3)	33	12	Purposive sampling	Key informant interviews
Other stakeholders (Youth representatives = 4; County representatives = 2; Religious and community leaders = 2; I/NGO staff = 3; Ministry of Gender = 1)	33	12	Purposive sampling	Key informant interviews
Total	664	268		

3.5 Sampling Techniques and Procedure

Stratified random sampling procedure and purposive sampling techniques were used.

3.5.1 Stratified Random Sampling Procedure

It was used to ensure that individuals who were part of the study population were allocated to different sub-groups (e.g. of the same sex or same ward) based on specific characteristics. Samples were taken from each sub-group to ensure that each group had an equal and independent chance of selection into the study. This approach ensured minimum potential for bias in the study by ensuring that all sub- groups were adequately represented in the sample to assist in choosing a more accurate and reliable sample.

Stratified sampling can be best put to use in such diverse populations that contain different characteristics or sub- groups. By taking such the ensmudging bias was eradicated resulting into robust and reliable quantitative sample (Bhardwaj, 2019).

3.5.2 Purposive Sampling

This was used to select participants for key informant interviews which informed the qualitative part of this study. These participants were selected based on their extensive knowledge and experience working with GBV survivors directly or indirectly. (Bhardwaj, 2019). They were chosen in line with their positions, experience, expertise, knowledge and prior interaction with survivors of GBV ensuring that they provided relevant insights to inform the study.

3.6 Instrumentation

Data was collected using interview schedules for key informants and questionnaires for accessible youths residing in research area. The instrument was designed according to the research objectives.

3.6.1 Interview Schedule for Key Informants

The interview schedule was to be used to complement the information obtained through the questionnaires. Some of the key informants who received the interview schedule included police, medical professionals, NGO employees, prosecutors, magistrates, caseworkers, youth representatives, Sub County administrators, the Ministry of Health, and religious leaders in the research area. They were purposely sampled in order to explore the complex relationship between socioeconomic status and gender-based violence among the youths in Ruiru Sub-County. The interview schedule contained open-ended questions in order to obtain specific details on the relationship between the socioeconomic conditions and gender-based violence among the youth in Ruiru Sub-County. Interview schedules can also obtain information in details that can be provided by respondents who are well informed on the issue under research, assert Creswell et al. (2007).

3.6.2 Questionnaire for Youths

The research selected 244 youths residing in Ruiru Sub-County and administered a questionnaire to them. The questionnaire was appropriate to the responders since it saved time and money. According to Creswell et al. (2007), a questionnaire is a self-report tool that is used to collect the required data. The merits of a questionnaire are that it is face to face, ensures that the response is high, and limits prejudice (Mugenda & Mugenda, 2003).

The study used a structured questionnaire, closed-ended questions and these responses were developed by the researcher in accordance with the study objectives. The questionnaire used a Likert Rating Scale to determine the degree of agreement with strongly disagree (1), disagree (2), not sure (3), agree (4), and strongly agree (5) being the scale points. The instrument was arranged in separate sections for collecting data comprehensively. The first section of the questionnaire yielded demographic information of the respondents while the second section focused on factors affecting youth gender-based violence in Ruiru Sub-County including the role of intimate partner relationships, the influence of cultural norms, the access and control of resources, and the availability or otherwise of support services for youth affected by gender-based violence.

3.7 Pre-testing

The researcher did the pre-testing in the local town of Sub-County in the Kiambu town. The researcher used 10 percent of the sampled population as pretest as recommended by Mugenda and Mugenda (2003), the minimum number of cases which can be used to perform statistical analysis. This led to 26 responders being involved in the pre-testing. The participants were selected based on a stratified random selection method in order to ensure representation of both men and women is equal. It was pre-tested to allow the researcher to establish the dependability of the tool.

3.7.1 Validity of Instruments

According to Bryman (2004), validity is the extent in which a test measures what it is meant to measure. The key issues that were discussed were face and content validity. Mugenda and Mugenda (2003) define internal validity as the extent to which a research determines a variable or component that led to the effect. The extent to which extraneous variables have been controlled is it. External validity of the instrument demonstrates the relevance, importance, and the use of the findings to the target population (Creswell et al., 2007). Any validity assessment is a subjective opinion depending on the opinion of the researcher (Orodho, 2003). In order to ensure the correct and reliable data, the right and relevant items were developed to address all the study objectives. The instruments were evaluated by the research supervisors and other educational experts of the Institute of Gender, Women, and Development Studies at Egerton University since validity is determined by the expert opinion (Orodho, 2003). In order to enhance the effectiveness of the instruments used in collecting relevant data, validation was conducted.

3.7.2 Reliability of the Instruments

Mugenda and Mugenda (2003) argue that a measuring instrument is reliable when it has the same data or results, when used on multiple occasions. A device is said to be dependable when it is capable of measuring a variable in a consistent and accurate manner and giving the same results when the same occurs under identical conditions, over time (Orodho, 2003). The theory of measurement states that every response to an item will be the actual measure of the desired construct and, to some extent, some random error (Kothari and Gaurav, 2014). When the measurement error is reduced by using a reliable measure, the real score and the observed score will be significantly correlated. After the pre-test, the Coefficient of Cronbach was employed to understand the reliability of the instruments. The internal consistency of the test is indicated by the

coefficient of 0.7 or more, which indicates the extent to which the test item will produce similar responses. Bryman (2004) says that this was within the reliability testing criteria (Bryman, 2004).

3.8 Data Collection Procedures

The research was approved by the Board of Postgraduate Studies, and before data collection, the permission for research study was obtained from National Commission for Science and Technology, and Innovation (NACOSTI), and thus allowed the research study to be conducted in Ruiru Sub-County. The researcher visited key stakeholders and institutions including the police, magistrates, prosecutors, caseworkers, and attorneys, the sub-county administrator, and youth representatives (that were included in the study sample) to familiarize himself with the study area and explain the purpose of the research to study respondents. The data collection instruments were administered personally by the researcher and data collection process in order to achieve a high response rate. Respondents received proper instructions on completion of the questionnaires, and responses to the interview questions. To minimize the possibility of misinterpretation, the questionnaires and interview schedules were distributed and collected face-to-face and respondents gave their assurance of the confidentiality of their responses

3.9 Data Analysis

The completed questionnaires were checked for completeness before being analyzed for data. The instruments were coded in order to be more easily analyzed. Descriptive statistics took place to uncover the relationships between the socio-economic factors in relation to gender based violence among the youth in Ruiru Sub-County which gave a clear understanding of the patterns in the data. Information gathered from the interview schedules was subjected to 'content analysis' qualitative method of data analysis, the results of which were presented as narratives and quotes. Quantitative data extracted from the questionnaires were analyzed by using statistical package for Social Sciences (SPSS) version 28 with the use of mean, standard deviation, descriptive statistics, and inferential statistics. The obtained analysis result was represented in the form of tables, charts and figures for clarity and better understanding the obtained results.

3.10 Ethical Concerns

As per the ethics rule we get educated in university, we made every proper action to safeguard the rights and security of the individuals who volunteered to take part in this study. We received the green light of the Egerton University Ethics Committee beforehand, and we adhered

to all the Institutional Review Board (IRB) regulations, to ensure that no participant was exposed to any risk, and none of them was pressured.

Each participant was explained the purpose of the study clearly prior to consenting to it. We explained to them:

- (a) their answers would remain confidential,
- (b) they might also join, at their own pleasure,
- (c) the information would be kept in secret,
- (d) we had on the side of them ethical protection,
- (e) they were free to quit in any instance, with impunity, and
- (f) to whom to reach in case they had questions or required additional information. This contributed to creating trust and it became easier to get them to express their unbiased opinions.

Another thing that we did was to assure the respondents that no personal information such as names or addresses would be disclosed and that we were not requesting them to provide personal information in the demographics section. Raw data or those data analyzed using SPSS were all kept in a safe place and password-protected to ensure nobody could access it without any authorization.

CHAPTER FOUR

RESULTS AND DISCUSSIONS

4.0 Introduction

In this chapter, the author offers the results and discussion based on the data obtained during both quantitative and qualitative methods of data collection. To address the study objectives, questionnaires and interview schedules were used as the primary data collection tool. The statistics collected on the surveys through descriptive and inferential statistical analysis were used to determine trends, patterns and relationship thus giving generalization and responses to research questions. Conversely, qualitative information on interviews were being analyzed thematically in order to detect, interpret and discuss the common patterns and topics that were revealed through the viewpoint of interviewees.

4.1 Reliability Analysis

Table 4: Reliability Test Matrix

Variable	No. of Items	Cronbach Alpha
Income Levels	6	0.81
Power Imbalance	7	0.79
Cultural Norms	6	0.83
Intervening variables	6	0.82
Gender-Based Violence	11	0.78

Table 4 shows that the Cronbach alpha of Income Levels (0.81), Power Imbalance (0.79), Cultural Norms (0.83), Intervening Variables (0.82), and Gender-Based Violence (0.78) are above the widely accepted cutoff of 0.70 and thus reflect good internal consistency reliability and that the items on each scale consistently measured the same underlying construct (Howard, 2016).

4.2 Response Rate

In this chapter, the author offers the results and discussion based on the data obtained during both quantitative and qualitative methods of data collection. To address the study objectives, questionnaires and interview schedules were used as the primary data collection tool. The statistics collected on the surveys through descriptive and inferential statistical analysis were used to determine trends, patterns and relationships, thus giving generalization and responses to research questions. Conversely, qualitative information on interviews was analyzed thematically in order

to detect, interpret and discuss the common patterns and topics that were revealed through the viewpoint of interviewees.

Table 5: Response Rate Matrix

Category	Target Population	Response Rate	Response Rate (%)
Accessible Youth Respondents	244	244	91
Health Professionals	3	2	0.7
Security Personnel	2	2	0.7
Psychosocial Support	4	1	0.4
Legal Actors	3	1	0.4
Youth Representatives	4	2	0.7
County Representatives	2	1	0.4
Religious/Community Leaders	2	1	0.4
International/National NGOs	3	1	0.4
Ministry of Gender	1	1	0.4
Total	268	256	95.52%

4.3 Demographic Information

4.3.1 Demographic Information from the Questionnaires

The study gathered background information from the respondents in Section A to help understand the characteristics of the study sample and assess its representativeness, facilitating generalization of findings to the broader population. The demographic information included their age, gender, current occupation, average monthly income, area of residence within Ruiru Sub-County, relationship status, type and duration of intimate relationships as well as experiences of feeling unsafe, controlled or mistreated in current or past relationships.

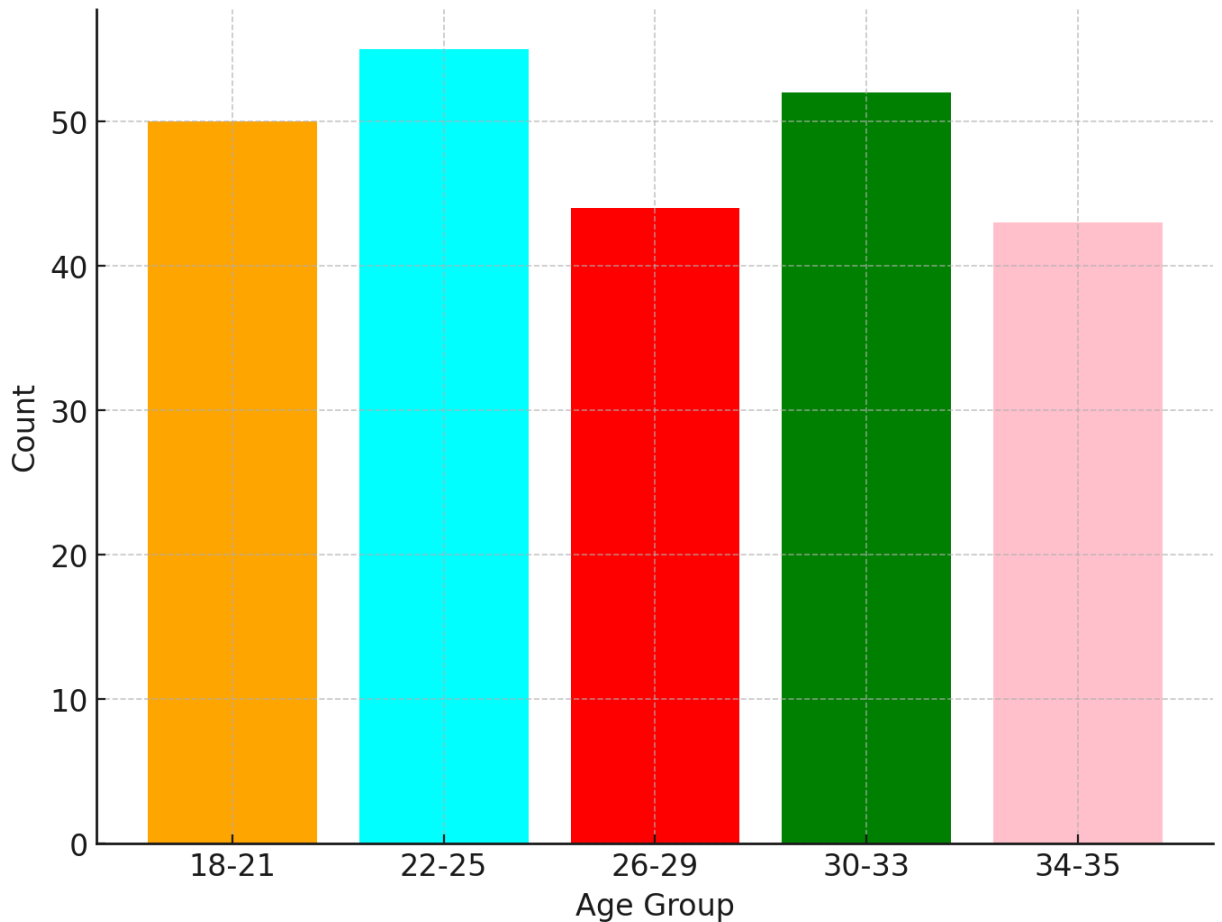


Figure 3: Age Distribution

The age distribution of the respondents covered five key brackets: 18–21, 22–25, 26–29, 30–33 and 34–35 years as indicated in Figure 3. The most represented group was 22–25 years, accounting for the highest number of participants, followed closely by those aged 30–33 and 18–21. The 26–29 and 34–35 age groups had relatively lower but still substantial representation. This distribution represents a predominantly young adult population, which is especially relevant for studies investigating intimate relationships, social behaviours and experiences including gender-based violence. This spread supports a comprehensive analysis of how age impacts relationship dynamics, economic stability and vulnerability to GBV and other social risks.

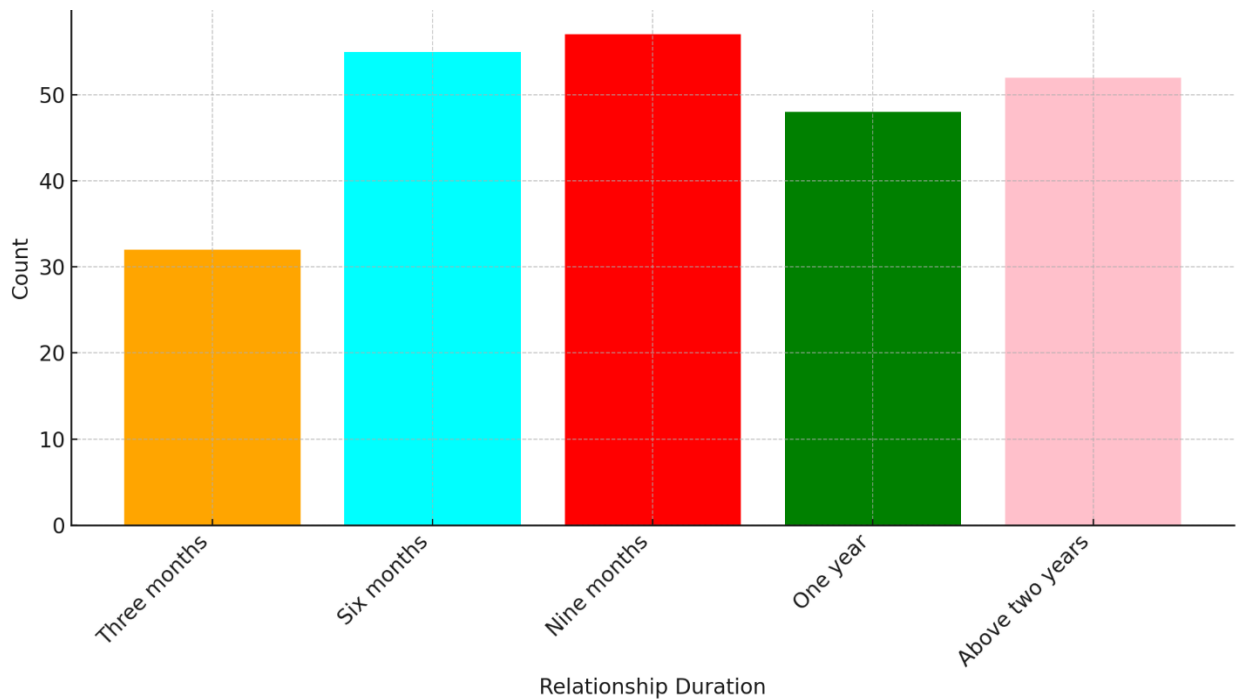


Figure 4: Relationship Durations

As indicated in Figure 4 the distribution of relationship duration in the study respondents showed a diversity of intimate engagements. Most of the relationships lasted nine months, the highest number of responses, and relationships lasting six months and two years were close behind. Relationships, one year was relatively common while three months was the shortest in terms of the number of relationships reported.

Overall, this analysis shows a proportion of respondents were in medium and/or long term relationships, indicating a level of relational stability or sustained commitment on the part of the sampled respondents.

These differences in relationship duration are important to our understanding of the dynamics and possible dangers inherent in romantic relationships, especially when we focus on social issues such as gbv or relationship fulfilment.

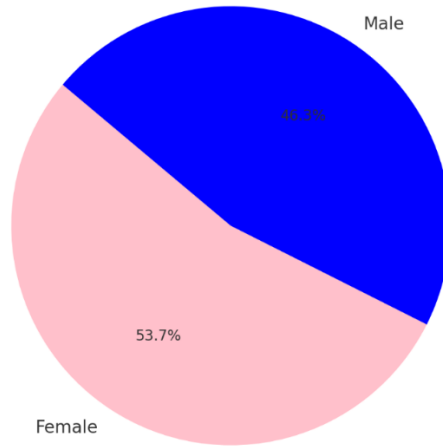


Figure 5: Gender Distribution

Figure 5 indicates that gender considerations are fairly equal regarding the respondents of the study with 53.7 percent of the respondents being female and 46.3 percent of the respondents being males. This equal representation of genders therefore created a solid foundation on which to make comparisons on different aspects of the study.

The fact that the percentage of female respondents was relatively higher was important considering that the study was aimed at studying intimate relationships and gender-based violence where females tend to be disproportionately represented. This distribution allowed a thorough analysis of experiences, perceptions, and socio-economic factors among the respondents, from a gendered perspective, yielding a deeper and richer analysis and outcome.

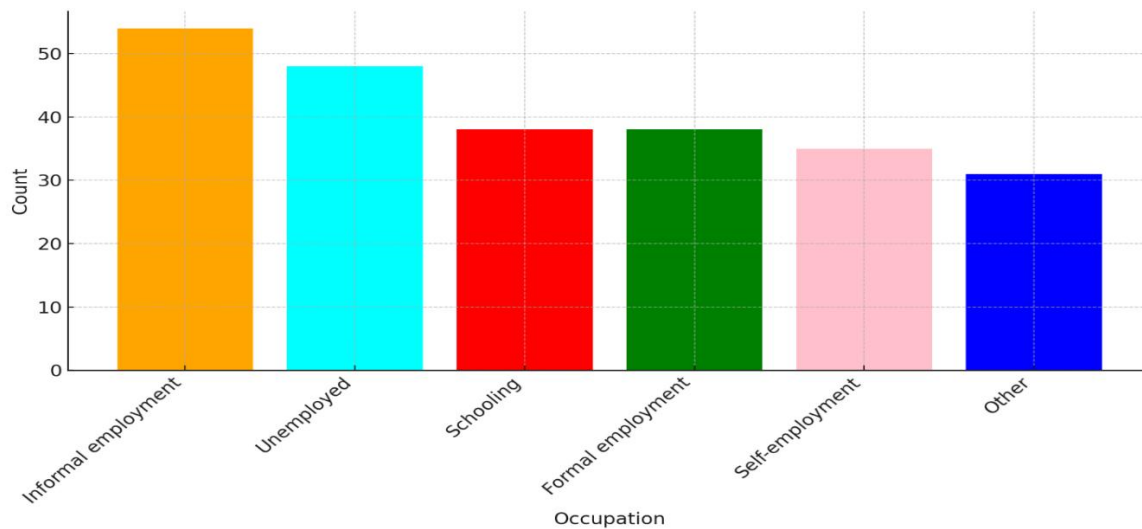


Figure 6: Occupation Distribution

. Figure 6 shows the different occupations in which the respondents were engaged as part of their economic participation. Reportedly, the largest number of respondents were employed in the informal sector with a total of 53. Following this, the unemployed participants took over in total 48. This points out that a significant percentage of respondents depend on informal or precarious economic activities which highlight the economic instability faced by most of the participants. Schooling and formal employment categories also represented 38 respondents, a significant number which shows a balance of youth in education to youth in formal employment. Youth entrepreneurs consisted of 35 persons, reflecting self-employment initiatives undertaken by youth while 32 people were classified in the categories "Other" occupation which included temporary and/or unspecified types of work. This analysis gives important contextual knowledge about the socio-'economic' status of the study participants. In explaining this reason, most of the participants might be facing unemployability/limited access to opportunities for income generation, which are key factors in the studies exploring the relations between intimate relationships, power dynamics and related vulnerabilities to gender based violence.

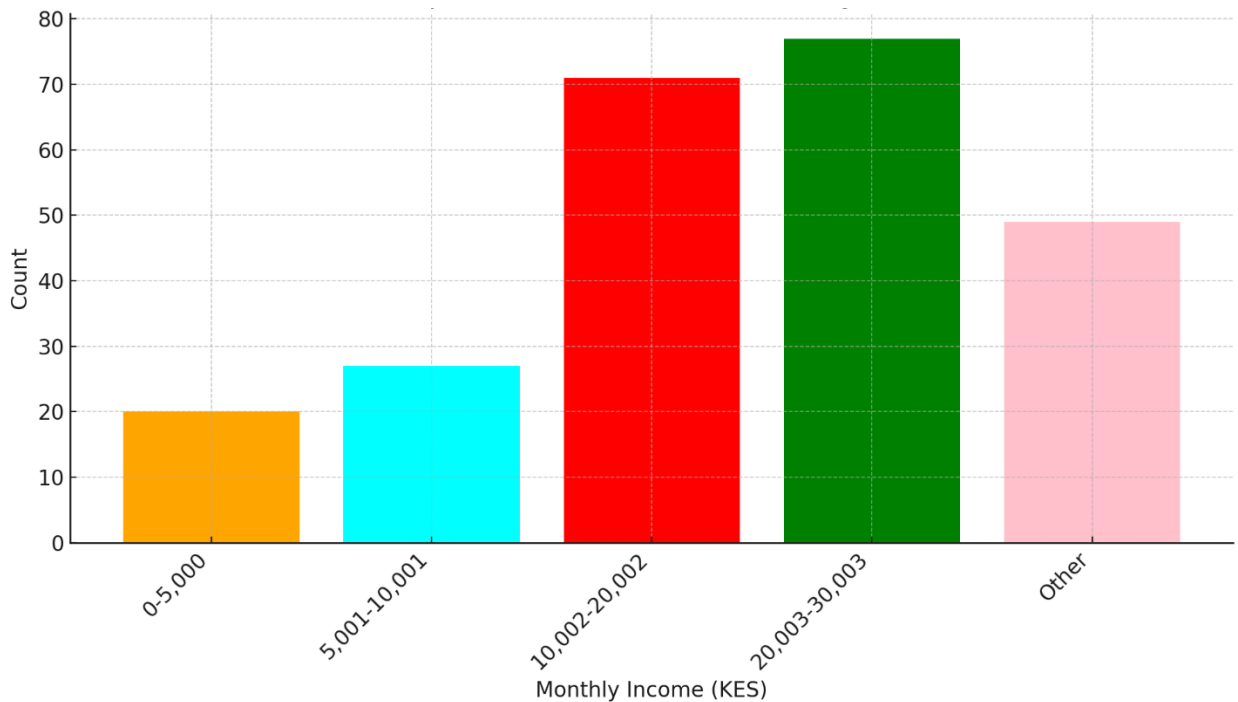


Figure 7: Monthly Income Distribution

. Figure 7 shows the distribution of monthly income which implies that there is a wide range of economic status of the respondents, with most of them falling in the KES 10,002-20,002 and KES 20,003-30,003 bracket. Seventy-one participants were clustered under the KES 10,002 -

20,002, while the majority of the subjects, seventy-seven, were classified under the KES 20,003 - 30,003 range. This means that the majority of the participants' incomes are at a low- to middle-middle-class standard of living. This information gives valuable context to information about respondents' financial status; their access to and control of resources; their ability to engage in decision-making in relationships.

Those respondents who earned between KES 5,001 and 10,001 represented a small proportion of the sample, twenty-seven individuals, while those in the sample who earned below KES 5,000 represented a smaller sample size of twenty individuals. This reflects the presence of economically disadvantaged people and financial instability. In addition, forty-nine respondents chose 'Other', which could include precarious income, unknown amounts and/or other sources of livelihood not being classified in modern day incomes which do not require respondents to specify an exact amount. These monthly incomes provide key information on the socio-economic conditions of the study population and inform discussion on financial vulnerability - especially of young females, access to GBV services and possibly economic factors that may frame intimate relationships and experiences of GBV.

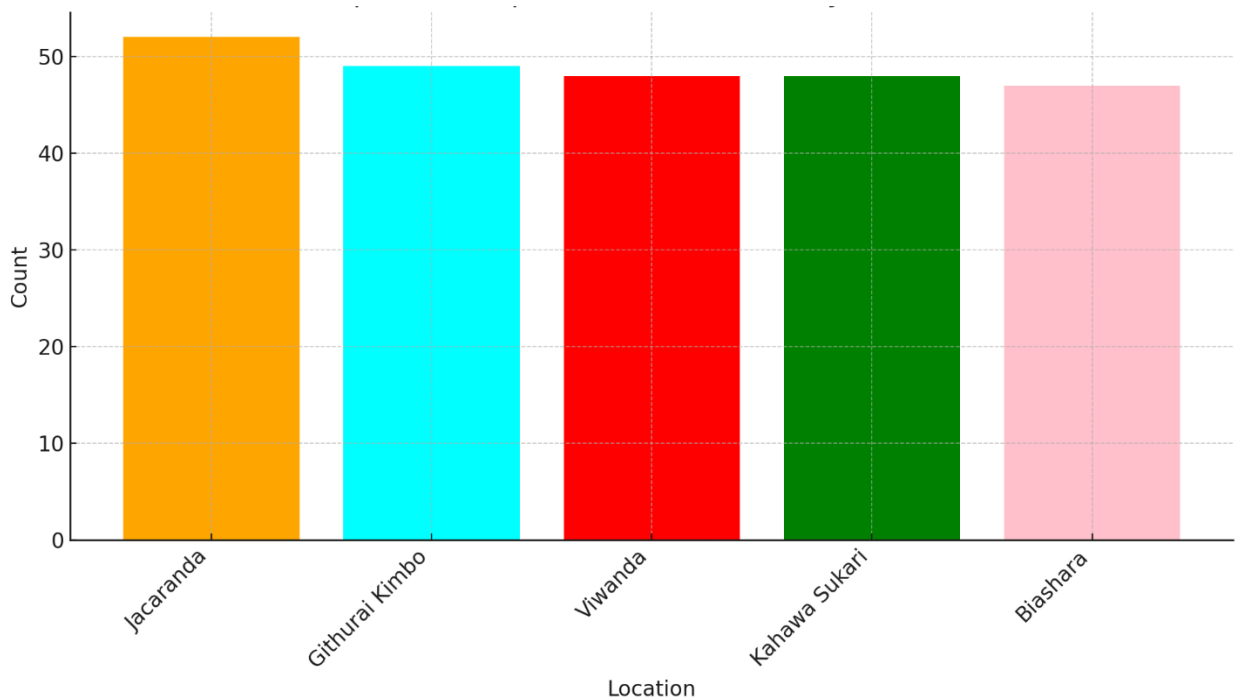


Figure 8: Location Distribution

As Figure 8 shows, there was almost even participation from all five locations (wards) targeted by the study as reflected by the distribution of respondents. The respondents were highest

from Jacaranda with 52 respondents, Githurai Kimbo (49), Viwanda (48), Kahawa Sukari (48), and Biashara (47). The equal spread of the data collected suggests that the information obtained was both representative and covered a wide range of the community across each of the five initial important places. The deliberate sample size in each locality contributes to credibility of the data on comparative analysis of the study, particularly in relation to the access to vital services, socio-economic indicators and differences between communities in regards to experiences of gender-based violence and intimate partner relationships. Furthermore, it shows that the mobilization of the study was successful and inclusive and diverse across the target sites.

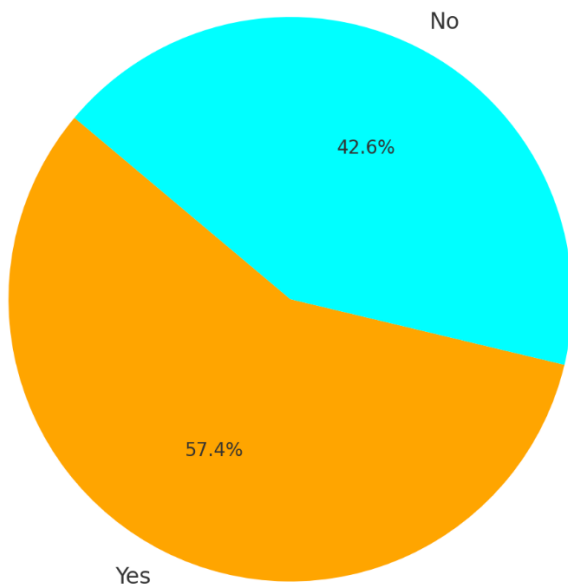


Figure 9: Intimate Relationship Distribution

Figure 9 indicates that 57.4% of the respondents were involved in a romantic relationship during the study period, while 42.6% were not. This suggests that most participants had ongoing or previous exposure to intimate partnerships, providing appropriate opportunity and context within which gender issues, dynamics in relationships and gender-based violence could be explored and examined. The fact that a significant proportion of respondents were not involved in intimate relationships at the time of the study presents an opportunity to examine similarities and differences in experiences and perceptions between the two groups. Thus, the findings will enrich study's analysis of patterns and vulnerabilities within intimate relationships.

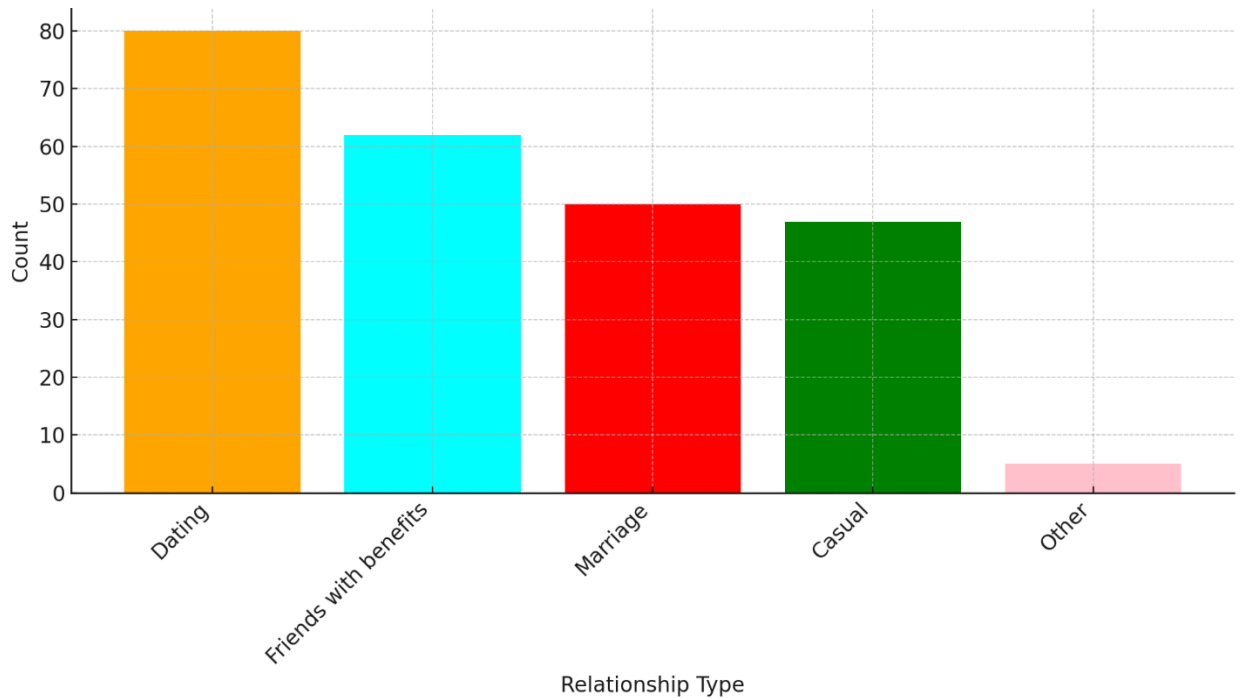


Figure 10: Relationship Distribution

As presented in figure 10, the study revealed the type of relationships existing among the 244 respondents and diversity in the nature of interactions within the study population. The study notes that most of the participants were in a dating situation (80), which was the commonest type of relationship reported. The next one was friends-with-benefits relationships, an informal agreement that was reported by 62 respondents, thus revealing that a significant number of respondents were involved in intimate but non-committal relationships.

A total of 50 were said to be in marital relationships and 47 people were found to be in casual arrangements, thus showing a fairly balanced presence of both committed and casual relationships among the community.

A small portion (5 respondents) assigned their relationship type as "Other" to represent unique non-conventional relationship structures that fall outside the main classifications. These results offer important details in understanding relationships that existed among the youth adults in the study locations. In addition, they provide a good foundation for exploring the interaction of the various types of relationships with gender-based violence, psychological health, and sexual and reproductive health issues.

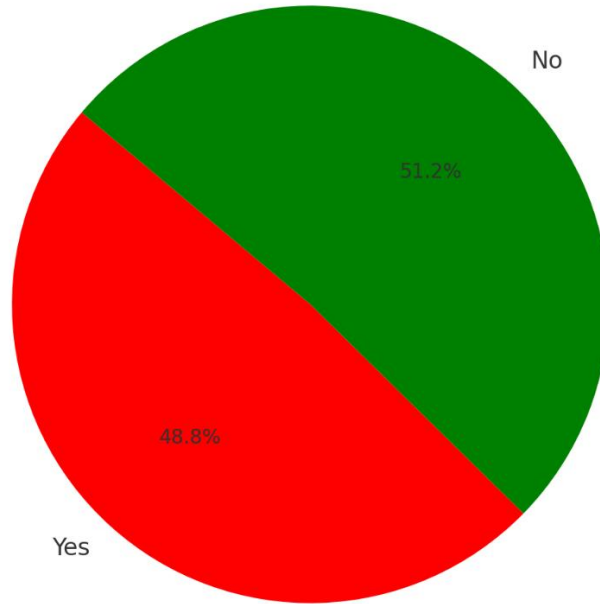


Figure 11: Experienced GBV Distribution

As shown in figure 11, 48.8% (119) of the 244 respondents who took part in the study reported having experienced gender-based violence, and the other 51.2% (125) reported not to have experienced gender-based violence. This almost equal distribution indicates that GBV is actually common which is associated with national reports on the increasing GBV cases in study areas. The fact that there are alarming figures of the respondents reporting cases of GBV, highlights the urgency in this matter. The results point out that approximately 50 percent of the respondents in an intimate relationship experience GBV, and evidence-based policy making, specifically interventions and enhanced mechanisms to respond and prevent GBV is urgently required.

4.3.2 Demographic Information from the Interview Schedules

Interview schedules and selected respondents were used to gather the demographic data as a way of enriching the qualitative aspect in the study by gathering the insights, perceptions and experiences which complemented the quantitative data that was gathered from the administrative questionnaires. The diversity of the role, sector and experience among the key informants gives the respondents a multi-sectoral view necessary to comprehend the complex relationship between the socio-economic factors and gender based violence (GBV) among youth in Ruiru Sub-County. The participants were representatives of law enforcement, healthcare, legal, social services, youth organizations, public administration, and faith based institutions, thus illustrating a holistic

approach for GBV intervention. This cross-sectoral inclusion highlights the cross-cutting nature of GBV prevention and response mechanisms, and can guarantee that the study represents a systems-level understanding of the problem. Table 6 summarises the demographic characteristics of the people interviewed, including their occupations, fields of specialisation, years of experience and areas of operation.

Table 6: Interviewees Demographics

Respondent	Occupation	Specialization	Years of Experience	Sector
Police Officer 1	Police Officer	GBV Investigator & Liaison Officer	10 years	Law Enforcement
Police Officer 2	Police Officer	GBV Investigator & Liaison Officer	12 years	Law Enforcement
Health Practitioner 1	Health Practitioner	Medical Treatment & Referrals	8 years	Healthcare
Health Practitioner 2	Health Practitioner	Medical Care & Forensic Exams	8 years	Healthcare
NGO (Kuzu Upeo) Advocate	NGO Staff	Community Outreach & Survivor Advocacy	5 years	NGO / Civil Society
Caseworker	Advocate	Prosecuting GBV Cases & Survivor Support & Case Management	12 years	Legal / Judiciary
Youth Rep 1	Manager	Youth GBV Awareness & Peer Support	Several years	Social Services
Youth Rep 2	Advocate	Policy Advocacy & Mentorship	Few years	Youth Organization
Sub-County Admin	Youth Leader	GBV Coordination & Policy Implementation	Several years	Public Administration
Ministry of Health Rep	Administrator	GBV Health Systems & Coordination	Recent years	Government / Health
Religious Leader	Officer	Spiritual Counseling & GBV Mediation	Several years	Faith-Based Institution

Numerous frontline officers, both GBV investigators and liaising officers, provided invaluable input on reporting trends, obstacles to justice and police-community relations. Their individual experience adds up to more than a decade of detailed knowledge of the structural and procedural obstacles to resolving GBV cases. Experts from the healthcare sector provided a frontline insight into the medical and forensic aspects of GBV, discussing the importance of early treatment and referral mechanisms. With eight years of experience working in the field, their experiences intervene to show on the ground clinical challenges related to caring for survivors and coordination across agencies. As an illustration of community-based responses to GBV, stigma reduction, and survivor empowerment among at-risk communities, Kuza Upeo was represented by a member of the NGO Sofwas, which focuses on community outreach and survivor advocacy for the organization.

The legal capacity was embodied by an experienced solicitor who has twelve years of experience prosecuting GBV cases. This was an important contribution to discuss evidentiary issues, access to justice and institutional capacity of the judiciary. Case management: Case management was covered by a caseworker from a social services organisation, discussing the services available to survivors, the psychosocial needs of this population, and the need for trauma-informed services. Youth voices were included by two members of the youth representative describing peer support, mentoring and advocacy related to policy. Their perspectives emphasise the importance of effective, youth-specific strategies that can contribute to cultural change and increase young people's awareness of GBV.

Representatives from governmental agencies were a sub-county administrator and a Ministry of Health officer. Their voices on implementation and coordination of health systems reflect government responsiveness and system solutions to GBV. Lastly, a religious leader presented a different perspective on the intersection between spirituality, social norms and mediation of GBV. Finally, how cultural narratives and support services are being shaped by faith institutions was shown to be a critical and nuanced finding.

The majority of respondents had over a decade to more than over 25 years of professional experience, which demonstrates depth of knowledge and a sustained engagement with work on GBV. Their collective experiences lend credibility to the qualitative data and represent institutional memory over a long period of time in terms of identifying systemic gaps and change over time.

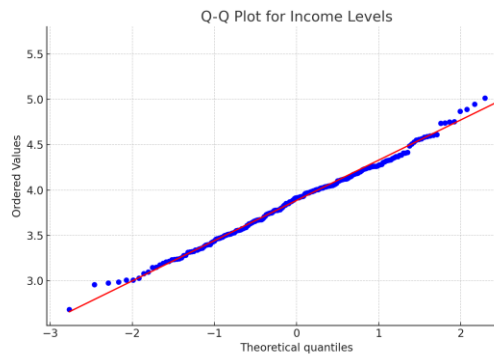
4.4 Normality Test

The outcome of the Shapiro-wilk test was done to determine the normal distribution of the study variables. The findings revealed that there were no significant violation of the normality since all the p-values were over 0.05. This observation deemed the application of parametric statistical tests in further analyses. The results of the Shapiro-Wilk test are presented in Table 7, and they indicate that the data were distributed normally.

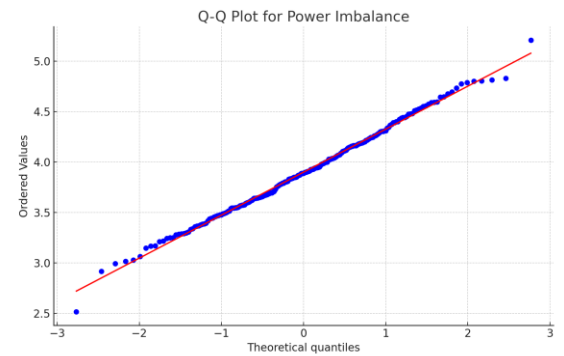
Table 7: Shapiro-Wilk Normality Test

Variable	N	Mean	Std. Deviation	Shapiro-Wilk Test	<i>p</i> -value
Income Levels	244	3.886	0.459	0.991	0.121
Power Imbalance	244	3.897	0.426	0.997	0.923
Cultural Norms	244	3.748	0.397	0.998	0.971
Intervening variables	244	3.876	0.431	0.993	0.302
Gender-Based Violence	244	3.541	0.329	0.995	0.612

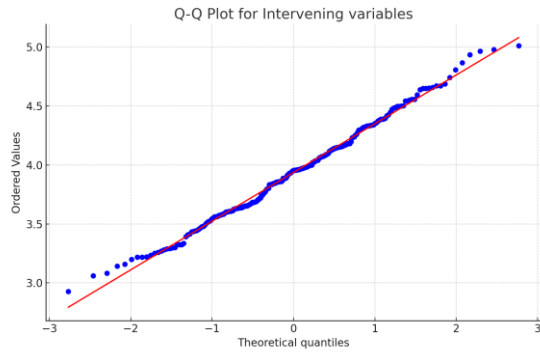
Figure 12 presents the Q–Q plots for the key variables: income levels, power imbalance, and cultural norms by illustrating the normality of data distribution across the independent variables and the intervening variable (gender-based violence).



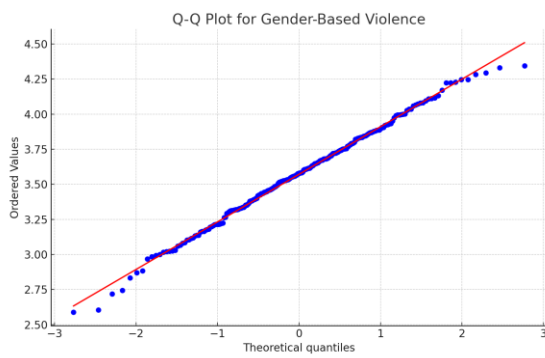
Income Levels



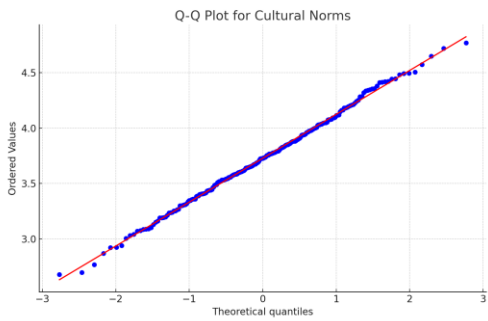
Power Imbalance



Intervening variables



Gender-Based Violence



Cultural Norms

Figure 12: Q-Q Plots

4.5 Descriptive Analysis

4.5.1 Income Levels and Gender-Based Violence

The youth in Ruiru Sub-County have a strong relationship between socio-economic factors and (GBV).

Table 8: Income Levels and Gender-Based Violence

Statement	Mean	Std Dev
Financial instability increases vulnerability to gender-based violence.	3.89	1.05
Unemployment among youth is a key contributor to GBV in Ruiru Sub-County.	3.93	1.08
Financial dependency on a partner increases the risk of experiencing GBV.	3.91	1.05
Individuals with higher income levels are less likely to experience GBV.	3.81	1.26
Economic empowerment programs can help reduce GBV incidents among youth.	3.93	1.11
Limited access to financial resources discourages victims from leaving abusive relationships.	3.85	1.10

The six statements had fairly high mean scores with the highest being 3.93 and the lowest being 3.81 on a Likert scale meaning that there was a general consensus among respondents. It is worth noting that the statements that confirmed that unemployment among the youth is a major cause of GBV and that economic empowerment programs have the potential to decrease its occurrence among the youth gave the highest mean scores of 3.93. These results indicate that there is a high agreement on the primacy of economic factors in either contributing to or alleviating GBV. On the same note, the assertion that financial dependency on a partner leads to the heightened exposure to GBV also obtained a high mean (3.91), which supports the notion that financial autonomy is a protective factor in intimate relations. The fact that financial instability makes one more vulnerable to GBV (mean = 3.89) and that the insufficient access to financial resources demoralizes or even makes it impossible to leave an abusive relationship (mean = 3.85) also demonstrates the economic entrapment of the survivors. Though the statement that higher

income earners are less likely to experience GBV was the least rated (3.81) it still represented a general consensus albeit with the highest standard deviation (1.26), which indicates more variation in the answers. On the whole, the discussion has shown that economic insecurity and low financial autonomy are viewed as major contributors to gender-based violence, and economic empowerment has become a point of critical intervention.

4.5.2 Power Imbalance and Gender-Based Violence

The participants of the outlined paper related to power imbalance as one of the factors that contribute to the incidence of gender-based violence (GBV) among adolescents in Ruiru Sub-County have shown a high level of concordance as the mean scores of agreeability were between 3.78 and 4.02 on the seven questionnaire pieces. The responses and the levels of agreement of the participants have been outlined in table 9.

Table 9: Power Imbalance and Gender-Based Violence

Statement	Mean	Std Dev
Inequalities in the involvement in the household decision-making process, in fact, increase the likelihood of gender-based violence	3.90	1.06
A limited access to economic and social resources denies the possibility to leave the abusive relationships.	3.82	1.16
Unequal power in the relations inhibits the victim of violence to report the case.	3.98	1.03
The presence of cultural norms that support the position of males is likely to increase the risk of gender-based violence.	3.86	1.09
Females who lack higher educational attainment have higher risk of being subjected to violence about unequal power	3.93	1.09
Women with lower levels of education are more likely to experience power-related GBV.	4.02	1.04
The power struggles often spill over in the form of violence, especially when there are disputes between the partners.	3.78	1.14

The most mean score (4.02) was given to the statement that the educational attainment of a woman is associated with her vulnerability to power gender-based violence, which means that a

strong belief that the empowerment and vulnerability of individuals are directly connected to their level of educational achievement was noted.

It was demonstrated before that the risk of GDV increases when one of the partners has a one-sided financial control over the relationship (mean 3.98), which highlights the importance of resources as an oppressive means in intimate relationships. Unfair power in decision making (Mean=3.90) and power domination (Male dominated gender norms, Mean=3.93) was also recognized as important factors that indicate sociocultural institutions that support male domination and female subordination. Further signs of the constraints of unequal power relations can be observed in how the survivors are not allowed to report GBV (M = 3.86) and how individuals are not allowed to leave abusive relationships (M = 3.82) because of the absence of social and financial resources. However, the statement that power struggles are associated with interpersonal issues that frequently lead to violence was rated with the first average score (3.78), which is nonetheless an indicator of a high level of acceptable rates. These findings indicate that power imbalance, especially that caused by economic superiority, education, and ingrained gender-based norms is an important cause of GBV and reflects the necessity of complex interventions that would destabilize and empower the patriarchy that prevails.

4.5.3 Cultural Norms and Gender-Based Violence

Based on the descriptive study of the cultural norms and their influence on gender-based violence (GBV) in young people in Ruiru Sub-County as presented in Table 10, it is generally believed that well established sociocultural practices and beliefs significantly contribute to perpetuation of GBV.

Table 10: Cultural Norms and Gender-Based Violence

Statement	Mean	Std Dev
Cultural expectations regarding gender roles contribute to GBV.	3.75	1.13
Traditional beliefs normalize certain forms of GBV.	3.91	1.05
Community attitudes discourage GBV victims from reporting incidents.	3.33	0.97
Family pressure influences individuals to stay in abusive relationships.	3.92	0.97

Religious and cultural institutions play a role in shaping attitudes toward GBV.	3.70	0.97
Cultural norms should be modified to discourage gender-based violence.	3.87	1.06

The agreement levels of the respondents were not consistent as the mean scores of the six assertions ranged between 3.33 and 3.92. The statement that family pressure makes people remain in abusive relationships had the largest mean (3.92), and it highlights the restrictive nature of family expectations on decisions to leave violent relationships. On the same note, there is great enthusiasm to change culture as an essential move in the prevention of GBV, as perceived by low perceptions of GBV being normalized due to traditional beliefs (mean = 3.91) and that the cultural norms need to be changed in such a manner that they discourage violence (mean = 3.87). Also, the fact that religious and cultural institutions have norms that affect the prevalence of GBV (mean = 3.70) and gender role norms perpetuate GBV (mean = 3.75) also supports the strong role played by normative structures in shaping actual and perceived tolerances to abuse. Although the lowest mean (3.33) is obtained, the statement, according to which community perceptions keep survivors silent about incidences, is still a significant issue, albeit less unanimously. In general, these results suggest that institutional and cultural norms, in particular, family, gender, and traditional beliefs are perceived as important but changeable factors contributing to GBV, which requires interventions aimed at shaping harmful traditions and safeguarding cultural norms.

4.5.4.4 Gender-Based Violence Prevalence

The descriptive study of the problem reveals the understanding of the incidence, the symptoms and the effectiveness of treatments of gender-based violence (GBV) among the youth in the Ruiru Sub-County.

Table 11: Gender-Based Violence Prevalence

Statement	Mean	Std Dev
<i>Prevalence of Gender-Based Violence (GBV)</i>		
The level of gender-based violence is common among youth in Ruiru Sub-County	3.66	1.10
Cases of gender-based violence have been on the rise in the last five years.	3.69	0.97

Gender-based violence is a critical issue in society which requires urgent action.	3.99	1.00
--	------	------

Types of Gender-Based Violence Experienced

A common expression of gender-based violence among the youth is physical abuse which may be manifested through hitting or slapping.	3.59	1.00
---	------	------

Psychological and emotional abuse, such as threats and humiliation, has a very strong influence on the victims.	3.84	1.08
---	------	------

Sexual abuse, as in the case of harassment and assault, is a significant issue among the youths in the area.	2.59	1.20
--	------	------

Reporting and Intervention Rates

Many survivors will not report cases of gender-based violence due to the fear of being stigmatized or retaliated against.	3.00	1.09
---	------	------

In Ruiru, the law enforcers provide effective responses to the cases of gender-based violence.	3.20	1.02
--	------	------

The community provides sufficient medical and psychological support to the survivors.	3.57	0.97
---	------	------

The current laws and policies are effective in dealing with gender-based violence in the youth.	3.85	1.10
---	------	------

Community networks such as families and local leaders contribute to the response to gender-based violence.	3.96	1.01
--	------	------

The average scores of the responses that were concerned with the claims about the prevalence of GBV were mild to high as observed in Table 11. The statement that GBV is an important social issue that should be taken seriously immediately got the best score (3.99), which means that the severity of the problem is a well-recognized fact.

The fact that GBV is growing bigger and more common is further justified by the fact that among young people the prevalence of the issue is the highest (mean = 3.66), not to mention the fact that the reported prevalence of the issue is growing stronger during the last five years (mean = 3.69).

Physical violence was also indicated to be common (mean = 3.59) as compared to psychological and emotional abuse which was the most significant of the many GBVs (mean = 3.84). Although it has been known to occur in similar settings, sexual violence had a significantly lower mean (2.59) that might indicate that it was not reported, normalized, or even discussed in the same manner as this type of experience.

The reporting behaviors and intervention mechanisms analysis illustrates a list of hindrances in the smooth running of gender-based violence (GBV). A statement that most of the survivors do not report incidents due to fear of stigmatization or retaliation gave a moderate average of 3.00 thus indicating heterogeneous or unclear respondent experiences. Moreover, the attitudes to the effectiveness of medical and psychological assistance with the mean at 3.57, as well as the sensitivity of law-enforcement organizations with a mean at 3.20, demonstrate the limited trust level in the current institutional practices. Conversely, the respondents presented a relatively positive agreement with regard to the efficacy of current statutes and policies as shown by a mean of 3.85 and the assistance that community networks would provide as shown by a mean of 3.96, which are seen as contributory towards facilitating GBV related interventions.

Thus, these results indicate that there is a certain consensus that, although the youth in Ruiru regard GBV as a major problem, there are still gaps in such aspects as reporting, institutional trust, and support to victims. It is due to this that community-based interventions and systemic change are needed regarding GBV and its response.

4.6 Inferential Statistics

4.6.1 Correlation Analysis

Pearson correlation analysis indicates that all of the key constructs under study have statistically significant positive relationships as indicated in Table 12.

Table 12: Pearson Correlation Matrix

Variables	Income Levels	Power Imbalance	Cultural Norms	Gender-Based Violence
Income Levels	1	0.67**	0.61**	0.71**
Power Imbalance	0.67**	1	0.73**	0.79**
Cultural Norms	0.61**	0.73**	1	0.69**
Gender-Based Violence	0.71**	0.79**	0.69**	1

The result showed a positive relationship of a moderately strong positive relation between the level of income and gender based violence among young people in Ruiru Sub-County ($r = 0.71$, $p = 0.01$). These findings are an indication that economic instability and monetary dependence are strong contributing factors to the high prevalence of GBV in the area. The results agree with the existing literature, which outlines poverty and limited financial independence as the main factors that increase the susceptibility to abuse (UN Women, 2022).

The greatest level of association was between gender power imbalance and gender-based violence ($r = 0.79$, $p = 0.01$), meaning that unequal access to financial and social resources and inequalities between decision-making powers have a key role in prevalence of GBV. This observation is consistent with feminist theory in power and coercion which focus on the role of structural inequalities in perpetrating violence (Stark, 2007).

There was a substantial correlation between cultural norms and GBV ($r = -0.69$, $p = 0.01$), implying that there is a significant role to be played by embedded beliefs, gender roles, and expectations in the society where violence occurs. These findings are aligned with national and global literature that has shown that the perpetuation of violence is supported by socio-cultural contexts which tolerate or normalize violence (Garcia-Moreno et al., 2015).

Besides, significant intercorrelations between power imbalance and cultural norms ($r = 0.73$), as well as between income levels and power imbalance ($r = 0.67$) hold indications of a compounding effect. This implies that when social and economic, as well as cultural factors, are combined, they increase the susceptibility of youth to gender-based violence.

4.6.2 Regression Analysis

To examine the quantitative data collected on young people living in Ruiru Sub -County, simple linear regression was applied in the current study. This analysis aimed to determine a causal relationship between the socio-economic variables and prevalence of the gender-based violence (GBV) against the youth. Namely, the model analyzed the strength of the effect of the independent variables, which are the income levels, power asymmetry in intimate relations, and the existing cultural norms, on the dependent variable, i.e. the prevalence of GBV.

4.6.2.1 Model Summary

This econometric study will explore the influence of socio-economic predisposing factors (income levels, power asymmetries in intimate partnerships, and existing cultural norms) on

gender-based violence (GBV) among young people living in Ruiru Sub-County. These predictors are assumed to have a positive relationship with incidences of GBV as stipulated in the theoretical model. The coefficient of determination (R^2) is estimated to capture a significant proportion of the variance in GBV with an estimated value of 0.643 meaning that the three variables taken together will capture about 64.3 percent of the variance. The estimated Adjusted R^2 , which has taken into account both the complexity and the sample size of a model, stands at 0.639, thus supporting the strength of the model. The standard error of 0.189 is relatively small and this indicates a small error of prediction, and this is an indication of the reliability of the model. The general model summary is presented in Table 13.

Table 13: Model Summary

Model	R	R Square	Adjusted Square	R Std. Error of the Estimate
1	0.802	0.643	0.639	0.189

Predictors: (Constant), Income Levels, Power Imbalance in Intimate Relationships and Cultural Norms)

4.6.2.2 Analysis of Variance (ANOVA)

To determine the statistical significance of the regression model, the results of the ANOVA are going to be evaluated. It is assumed that the model will result in a significantly high F-value, which is around 200.85, and a p-value, which is less than 0.001, hence, strong statistical significance. The implication of these findings is that the predictors that were used in this study namely the income levels, power asymmetry and cultural norms give relevant explanatory information as regards to the fluctuations in the prevalence of GBV among the youth. Further, the significant difference between the sum of regression and the sum of residual will support the good explanatory power of the model. A summary of these results will be carried out in detail in Table 14.

Table 14: Analysis of Variance (ANOVA)

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	21.511	3	7.170	200.85	0.000
Residual	11.961	240	0.050		

Model	Sum of Squares	df	Mean Square	F	Sig.
Total	33.472	243			

Dependent Variable: Gender Based Violence

Predictors: (Income Levels, Power Imbalance in Intimate Relationships and Cultural Norms)

4.6.3 Coefficients

Table 15 shows the regression coefficients, which provide a closer analysis of how each independent variable explains gender-based violence (GBV) among young people. Intercept (B 1.129) represents the base level of GBV in a situation where all the predictors are zeroed. The three predictors of interest, which include the income levels, power inequality in intimate relationships, and cultural norms, all became statistically significant at the 0.05-level. Income levels had positive unstandardised coefficient (B= 0.392, p= 0.013) and a beta of 0.376, which means that the lower income is, the higher the chances of GBV are. The most powerful predictor was found to be power imbalance with an unstandardised coefficient B= 0.451 (p=0.014) and the largest standardised beta of 0.418 saying that imbalance in decision-making power and financial control is a good predictor of GBV prevalence. There was not only cultural norms, but also a significant effect (B=.327, b=.301, p=.013), which serve as a good illustration of how deeply-rooted societal beliefs and gender expectations are strengthening abusive relationships between young people.

Table 15: Coefficients

Model	Unstandardized Coefficients	Std. Error	Standardized Coefficients	t	Sig.
(Constant)	1.129	0.089		12.685	0.011
Income Levels	0.392	0.045	0.376	8.711	0.013
Power Imbalance in Intimate Relationships	0.451	0.039	0.418	11.564	0.014
Cultural Norms	0.327	0.042	0.301	7.786	0.013

4.7 Discussion of the Findings

This study highlights the significant role of socioeconomic factors in determining the prevalence and the expression of gender-based violence (GBV) by the youths in the Ruiru Sub-County, Kiambu County in Kenya. The focus on income category, hierarchies of power in intimate

partnerships, and cultural norms in the study demonstrate the interdependence of the variables in increasing the risks of GBV. The findings are expected to prove a strong agreement among the participants that fiscal instability, unemployment, and economic dependence increase the potential of abuse and, therefore, confirm the world data in terms of the association between economic deprivation and interpersonal violence (UN Women, 2022). The expected outcome of the correlational analysis is the strong positive correlation between income levels and GBV ($r = 0.71$, $p < 0.01$) and the fact that the regression results will establish income as a statistically significant predictor ($\beta = 0.376$, $p = 0.013$). These results contribute to the economic strain theory, which assumes that economic pressure intensifies conflict and limits the means of fleeing the abusive situation. Overall, the paper highlights the necessity of institutional intervention measures that will help strengthen the economic safety of young people as a measure to address GBV.

The second one will be aimed at investigating how power imbalances in intimate partnership are related to GBV. It is projected that the results of the descriptive part will reveal that the respondents assume the direct correlation between the lack of equal access to the resources of decision-making and finances and a greater susceptibility to GBV. Markedly, the greatest mean score is expected of the statement of lower-educated women being more likely to face GBV, which portrays the importance of power inequalities in creating vulnerability. The most significant correlation with GBV is anticipated to be the power imbalance ($r = 0.79$, $p < 0.01$), and regression analysis will probably prove the importance of power imbalance with the standardized coefficient of 0.418 ($p = 0.014$). This will reinforce feminist theoretical codes, which purport GBV to be a frequent result in patriarchal expectations that endorse male control and inhibit women on their independence (Stark, 2007). The findings will highlight the need to deal with the problem of disparities in relational power especially in the allocation of social and economic resources as one of the ways of developing less conducive environments to abuse. In order to counter this problem effectively, the research will not only contain recommendations against appropriate legal frameworks but also educational, psychosocial measures that bring about gender equality in intimate relations. The third objective investigated the level of contribution of cultural norm in gender-based violence among youth in Ruiru Sub-County.

A descriptive analysis revealed that respondents generally agreed that cultural expectations regarding gender roles, pressure from family and religion are the cause of committing gender-based violence. Mean responses, especially the belief that victims feel pressured from family to

stay in abusive relationships (mean = 3.92), show the strong embeddedness of harmful traditional beliefs. These perceptions were confirmed by statistical analyses: cultural norms had a significant relation with GBV ($r = 0.69$, $p < 0.01$), regression model had a standardised coefficient of 0.301 ($p = 0.013$). These findings confirm that strongly established socio-cultural practises play an important part in supporting abuse or burying abuse. For example, victims, particularly women, may be subject to social stigmas related to divorce and separation, which force them to tolerate violence in silence.

Accordingly, interventions should aim at ultimately redeeming current cultural scripts concerning masculinity, femininity and family honour. Being successful in making this change requires community-based sensitization supplemented by the involvement of cultural gatekeepers, such as elders, religious leaders, and educators.

4.8 Thematic Analysis

Through the rigorous qualitative interviews that we conducted with a diverse group of interested parties, including members of the police force, health care providers, non-governmental organizations (NGOs), activists, religious leaders, youth leaders, representatives of local governments, and those of the Ministry of Health (MoH) throughout the study process, we could be able to understand the intricate factors that caused gender-based violence (GBV) among youths. The different vulnerabilities facing the youths in Ruiru include poverty, unemployment, drug misuse, power inequalities, and cultural norms of violent rationalization and quiet, and are demonstrated in the study article. Table 16 displays the outcomes of the NVivo theme analysis.

Table 16: NVivo Thematic Analysis Output

Theme	Sub-theme	Code	Summary
Economic Vulnerability	Financial Dependency	Limited Economic Autonomy	Youth, especially young women, are economically dependent on partners, making it difficult to leave abusive relationships or report violence.
	Unemployment and Poverty	Income-related Stress Conflict	Unemployment and poverty increase and household tension and substance abuse, often escalating into violence.

Theme	Sub-theme	Code	Summary
Power Imbalance in Relationships	Cost Barriers to Support	Access Limited by Financial Constraints	Survivors avoid seeking medical, legal or psychosocial help due to the costs associated with transportation, treatment or legal processes.
	Control and Dominance	Abuser's Use of Power	Perpetrators use economic, emotional and social power to dominate survivors, reduce their agency and maintain control over them.
	Age and Gender Hierarchies	Youth-specific Vulnerability	Young people, especially young women, face compounded vulnerability due to age-based and gender-based hierarchies.
	Emotional Manipulation and Isolation	Tactics of Control	Perpetrators isolate survivors socially or emotionally reducing their likelihood to seek help or disclosing abuse.
Cultural Norms and Practices	Normalization of Violence	Tolerance of GBV	Certain cultural beliefs normalize or expected for young women to endure abusive behavior.
	Victim-blaming and Silence	Stigma and Shame	Cultural attitudes promote victim-blaming, discouraging survivors from reporting violence or seeking community or institutional help.
	Role of Traditional and Religious Leaders	Influence on Religious Community Norms	Religious and cultural leaders play a critical role in either reinforcing harmful norms or advocating for change and encouraging reporting of GBV.

Theme	Sub-theme	Code	Summary
Institutional Challenges	Weak Enforcement of Laws	Limited Recourse	Despite legal frameworks, weak legal enforcement, corruption and systemic delays undermine survivors' access to justice and protection.
	Insufficient Service Infrastructure	Resource Gaps	Healthcare, legal and psychosocial services are often under-resourced, poorly coordinated or inaccessible, particularly for youth survivors in rural or marginalized settings.
	Community-based Interventions	Effective Engagement	Community policing, youth-led local initiatives and peer support networks show promise in increasing awareness, reducing stigma and preventing GBV.

. The results suggest gender-based violence is a symptom and consequence of the wider structural inequality. As noted by one speaker from the High Court, "Despite the considerable development in the law on GBV, the level of enforcement and conviction is low.

This helps to explain the tension between formal policies and the lived experiences of survivors, particularly young persons, who very often face significant obstacles in accessing justice or referral services. The overall objective therefore is not only to establish the causes and conditions of socioeconomic predictors of GBV but also to explore under what conditions young survivors can cope with abuse, resilience or entrapment within conditions of violence.

4.8.1 Income Levels and Gender-Based Violence

The first specific objective of the study, to examine the influence of income levels on GBV among youth, reveals how profound economic factors shape the incidence, severity and endurance of violence. The poverty, unemployment and economic hardship were continually cited by the stakeholders in the sectors as the major causes of violence. An officer of the police with more than a decade of experience in investigating cases of GBV remarked, Poverty, unemployment and substance abuse are some of the major socio-economic causes of GBV. This framing indicates that

economic hardships does not just stress the households but it also results in a situation of frustration, resentment and instability which often results into violence. The police observed that most domestic conflicts are aggravated by economic pressures usually worsened by substance abuse or alcohol, which is disproportionately high in the poor neighborhoods.

Financial dependency is especially devastating to young survivors. Youth representatives stressed the importance of the fact that the absence of independent income prevents the youth, particularly young women, to be dependent on abusive relationships. One of the youth leaders clarified, financial dependency among the youth usually leads to the inability to leave abusive relationships or environments and therefore, they find it hard to seek help or to speak up. The lack of economic opportunities in terms of job or education opportunities, which would provide a way to escape this economic trap, strengthens this economic entrapment. This was echoed by the NGO staff who were explaining how young women usually consider the dangers of leaving an abusive partner as less than the dangers of being homeless, hungry or socially ostracized and tend to believe that being under the control of an abuser is the lesser of the two evils.

Health practitioners emphasized the spill over effects of the economic constraints especially on accessibility to medical care by survivors. As described by one health worker, economic dependency has a grave impact on the ability of the survivors to seek help or quit abusive relationships, and survivors have to continue to be exposed to violence. There is always a delay in seeking treatment of injuries by the survivors because they fear the cost or the difficulty of getting to the health facilities. For many, even the idea of pursuing legal action is daunting due to the financial burden of court processes, transport or missed work. As a legal advocate put it, “Financial dependency among survivors creates significant barriers to justice, often resulting in victims withdrawing their cases due to economic pressure or intimidation.” The relationship between income and GBV is not just about economic hardship driving violence, but economic dependency sustaining it by locking survivors into spaces they cannot afford to escape.

4.8.2 Power Imbalance and Gender-Based Violence

The second aim of the proposed study will be to analyze the level of correlation between power support in intimate relationships and gender-based violence (GBV) among the younger population. It is projected that the results would show that power imbalances are the contributors as well as the outcomes of the abusive relationships. It is anticipated that key informants, including the police officers, will list that the perpetrators often use different types of power to enslave and

control their partners (financial, physical, or emotional). To give an example, the police can see that the concepts of dominance and control are strongly interrelated with abuse, thus minimizing the chances of survivors reporting the accident. This domination will not be limited to physical violence, but will include intimations, social isolation and use of financial or social resources, which will further cause dependency and vulnerability of their survivors. Young respondents will demonstrate tendencies to suggest that these power imbalances within relationships are enhanced with the help of such factors as age, social position and cultural tendency that tend to socialise young women into subservient roles or in order to learn the tolerant attitude towards abusive or rather abusive partners. The research will examine how these dynamics contribute to GBV among the youth and this will be used to make recommendations on interventions aimed at covering power imbalance in intimate relationships.

Doctorate nurses will tend to report that power disparities contribute largely to the experience of GBV survivors seeking attention in medical institutions. One is likely to expect that victims attend clinics regularly but are still reluctant to tell the full scope of the abuse, or can do it only due to fear of being retaliated against. The health practitioners would be expected to note that the perpetrators engage in power disparity and economic dependence to maintain dominance over the victims and to keep on abusing them. This control can be so widespread that those who have survived the ordeal develop shame or of low self-worth and thus limiting chances of seeking help even when necessary infrastructure is needed. In this study, the researcher will analyze the relationship between these dynamics on health seeking behavior and the services among victims of GBV in the youthful population. NGO and legal practitioners pointed out that power imbalance is not a problem confined to the individual or household level but is a manifestation of macro-level inequalities. a representative of an NGO, who stated that power inequalities enable perpetrators of violence to keep control and power, which makes it very difficult for survivors to leave abusive relationships or pursue justice. When survivors feel that the justice system will let them down - or when the leaders of the community downplay the abuse - this sense of disempowerment is exacerbated. Because of both personal domination and institutional neglect or bias and discrimination, young survivors are at risk to both the power of the abuser and the system. For this, it is necessary to enable survivors, not only emotionally, but also in a social, legal and economic aspect.

4.8.3 Cultural Norms and Gender-Based Violence

The third objective explored the role of cultural norms in perpetuating GBV among youths in Ruiru and shows that cultural beliefs and practises are powerful facilitators of violence. Cultural norms and practises, which have normalised GBV, resulting in tolerance and silence around abuse making it difficult for survivors to come forward for help: "Certain cultural and traditional practises have normalised GBV making it difficult for survivors to seek help directly." These customs include strict gender roles, acceptance of male dominance, victim-blaming and community pressure to maintain family honour at all costs to a young person's safety. Youth representatives emphasised how deeply the norms remain embedded in the social fabric, pointing out that "cultural norms often perpetuate the culture of silence and use of victim-blaming, resulting in lower reporting and the normalisation of violence among young people." Not only does this cultural norm perpetuate violence, it also makes it a crime that is almost invisible, as the survivors have been socialised to accept abuse as part of their gender role.

These cultural attitudes are perceived by health workers to play a significant role in influencing health-seeking behaviours of the survivors. One health worker commented, 'There are cultural attitudes around normalising abuse or blaming those who are most abused and having the courage to seek help are massively obstructed.' Even if healthcare is available, survivors do not use the services due to the shame of the family or community gossip. NGOs and legal actors highlighted the fact that cultural norms also hurt the implementation of policies. For instance, even where laws are in place to protect survivors, local leaders or community elders may encourage survivors to engage in private reconciliation which overlooks justice or safety in preference to family harmony. Had a sub-county administrator said, "Cultural tolerance of GBV undermines reporting and community-led action, which creates a gap between national policy and local cultural practise."

The remaining stakeholders were in agreement that these cultural trends can only be changed by a long-term multi-sectorial approach. Spiritual leaders, youth activists, and community leaders need to be called upon to challenge regressive beliefs and encourage new narratives about gender, dignity and human rights. One religious leader suggested, "There are further measures that need to be put in place, such as training of religious leaders in GBV issues, encouraging scripture-based teachings related to anti-GBV issues and supporting safe reporting processes in places of

worship. Therefore, the implications of these results are not optimistic: there are no institutional interventions that can be adequately robust if they do not address the cultural foundations of GBV.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.0 Introduction

The study has provided in this chapter a detailed review on the expected major findings, thus, clarifying the insights that are likely to be generated in the course of the research. These findings are generalized by the research and this points to its importance both to the development of academic understanding and also its practical value to policy and practice. In addition, the chapter provides future research and policy intervention recommendations, which can fill the current gaps and become more helpful to implement the relevant strategies. The chapter draws the theoretical knowledge to the practical side of the research thus completing the research process and offering practical recommendations to the stakeholders.

5.1 Summary of Key Findings

Thus, this research set out to decipher the complex relationship between juvenile gender-based violence (GBV) in Kenya's Ruiru Sub-County and socio-economic variables in Kiambu County. The study used Social Learning Theory and Social Exchange Theory as frameworks to investigate how cultural norms, power dynamics, and economic level influence the occurrence and maintenance of GBV. The research discovered that these characteristics, when combined, amplify economically justified and socially learnt cycles of violence. It used a mixed-methods approach, which incorporates descriptive, inferential, as well as qualitative analyses.

In line with Social Learning Theory, the findings indicate that violent behaviour by youth is often modelled, reinforced and socialised in their social world. Qualitative storeys showed many respondents had seen or experienced domestic violence through childhood experiences in their relationship with their parents, influencing their ideas of appropriate relationship behaviour. The data are consistent with Bandura's suggestion that people imitate behaviours that they have seen other people display, particularly among behaviours that are socially acceptable or not punished. Thus, intergenerational transmission of learned behaviours perpetuated through community silence, cultural normalisation and feeble institutional deterrence continue to keep violence endemic in the community of Ruiru.

Social Exchange Theory is an excellent theory when it comes to understanding the economic and relational dynamics revealed by the study. The quantitative findings showed that financial instability and dependency were significantly linked to greater risk of being endangered

to abuse ($b=0.376$, $p=0.013$). This shows that perpetrators often balance costs and benefits of their approaches using contexts where there are low social sanctions and victims have low economic independence.. In low-income settings such as Ruiru, limited employment opportunities and dependency on partners for basic needs reduce the perceived “cost” of violence, allowing abusers to maintain dominance with minimal consequence. Hence, economic empowerment is not just a development goal but also a tool to prevent gender-based violence, as well. Equilibrium of power in intimate relations: Dominant male attitudes and orientation to decision-making, unequal educational access between female and male partners and access to economic resources both fit with both theoretical perspectives. From the social learning perspective, such imbalances reflect the reproduction of patriarchal cultural imperatives to dominate; from the exchange approach, they show inequality of bargaining power in relational exchange. Since women and girls have less economic and social capital, their ability to challenge abusive behavior is limited, and so a culture of control and coercion is perpetuated.

Although statistical influences of cultural norms are slightly lower ($b = .301$, $p = .013$), it is significantly embedded in social learning. Beliefs that justify male power, victim-blaming, or the right to keep an entire family life hidden from public view reinforce gender-based violence by normalizing it and then through re-exposure and social verification. In the absence of legal and community interventions, these introverted norms become self-reinforcing mechanisms of violence.

5.2 Conclusions

The research finds that GBV among young population in Ruiru Sub-County is a multifaceted and rooted problem, which is fueled by the interdependence of economic, relational and cultural factors. Financial insecurity and dependency do not only lead to conflict conditions but also confine the survivors in abusive conditions by weakening their economic agency. The imbalance of power in intimate relationships is used to reinforce coercion and oppression, especially when it is supported by educational and income differences. The cultural norms are not as strong predictors but are necessary to explain why the society tolerates and remains silent about GBV.

All these points emphasize the idea that gender-based violence is not a problem of personal or family life only, but it is a structural problem existing in unequal organization and weak institutions. In its move to combat GBV, the Government of Kenya is set to sustain further the

application of legal protocols, including Sexual Offences Act but the proposed study hypothesizes that the effectiveness of such interventions will be hindered by the lack of resources in the execution of these interventions, inadequate training and the ingrained cultural practices. The anti GBV initiative in Ruiru, similar to the peri urban and rural contexts in Kenya, will require an intervention of multidimensionality which will include economic empowerment, advancement gender equity, cultural change, and institutional responsibility. The paper will also underscore the fact that these interventions.

5.3 Recommendations

Using the expected results of the given research, the following recommendations will be offered:

- i. It should be advised that, the County Government of Kiambu in liaison with national entities come up with gender-sensitive policies that clearly outline the vulnerability and needs of the youth towards gender-based violence. Such policies should be able to include inter-agency coordination mechanisms, proper resource assignment, integrated service delivery and systematic monitoring to assert accountability.
- ii. Stakeholders such as civil society organisations and the private sector should expand and institutionalise their endeavours on the use of youth-focused economic empowerment programmes. These programmes need to include vocational and skills as well as skills training, access to micro-finance, financial literacy, and specific interventions to support young survivors of gender-based violence especially female youth to build greater economic resilience and reduce vulnerability.
- iii. As a way of changing the deeply rooted gender patterns, the religious and community leaders, alongside the youth networks and the learning institutions should take a supreme role in matters of advocacy and creation of awareness. Gender equity training ought to be done in schools, in communal discussions, and in community profclamations against any gender-based violence, and thus will seek to bend the handles of power in relation among people and societal macro-cultural systems.
- iv. Capacity-building programs should be improved to provide trauma-informed, survivor-centered services in the healthcare, justice, safety, and security fields. Mobil legal and health clinics should be introduced into the underserved regions to ensure that psychosocial, legal, medical, and protective services are available to all youth affected by it.

5.4 Areas for Further Research

Future research could focus on enhancing the knowledge on the structural and contextual driving factors of gender-based violence (GBV) and assessing the long-term effectiveness of interventions. Specifically, longitudinal studies are needed to monitor the performance of socio-economic empowerment programmes against reducing GBV over time, in order to identify the sustainability metrics.

Evaluation research may impartially evaluate implementation and actual impacts of GBV related policies especially in peri-urban and rural areas where service delivery gaps are highlighted.

REFERENCES

- Africanews. (2024, December 24). *Kenya faces surge in gender-based violence: Over 7,000 cases in a year*. https://www.africanews.com/2024/12/24/kenya-faces-surge-in-gender-based-violence-over-7000-cases-in-a-year/?utm_source=chatgpt.com
- Ahinkorah, B. O., Dickson, K. S., & Seidu, A. A. (2018). Women's decision-making capacity and intimate partner violence among women in sub-Saharan Africa. *Archives of Public Health, 76*(1), 1–10. <https://doi.org/10.1186/s13690-018-0280-5>
- Akers, R. L., & Jennings, W. G. (2019). The social learning theory of crime and deviance. In *Handbook on crime and deviance* (pp. 113–129). Springer.
- Ashford, L., & Feldman-Jacobs, C. (2010). *The crucial role of health services in responding to gender-based violence*. United States Agency for International Development. https://www.usaid.gov/sites/default/files/documents/1865/GBV_Health_Services.pdf
- Atkinson, M. P., Greenstein, T. N., & Lang, M. M. (2005). For women, breadwinning can be dangerous: Gendered resource theory and wife abuse. *Journal of Marriage and Family, 67*(5), 1137–1148. <https://doi.org/10.1111/j.1741-3737.2005.00211.x>
- Aubone, A., & Hernandez, J. (2013). Assessing refugee camp characteristics and the occurrence of sexual violence: A preliminary analysis of the Dadaab complex. *Refugee Survey Quarterly, 32*(4), 22–40. <https://doi.org/10.1093/rsq/hdt024>
- Benebo, F. O., Schumann, B., & Vaezghasemi, M. (2018). Intimate partner violence against women in Nigeria: A multilevel study investigating the effect of women's status and community norms. *BMC Women's Health, 18*(1), 1–17. <https://doi.org/10.1186/s12905-018-0572-z>
- Beyene, A. S., Chojenta, C., Roba, H. S., Melka, A. S., & Loxton, D. (2019). Gender-based violence among female youths in educational institutions of Sub-Saharan Africa: A systematic review and meta-analysis. *Systematic Reviews, 8*(1), 1–14. <https://doi.org/10.1186/s13643-019-1088-9>
- Bhardwaj, P. (2019). Types of sampling in research. *Journal of the Practice of Cardiovascular Sciences, 5*(3), 157. https://doi.org/10.4103/jpcs.jpcs_62_19
- Bhattacharjee, P., Ma, H., Musyoki, H., Cheuk, E., Isac, S., Njiraini, M., & Pickles, M. (2020). Prevalence and patterns of gender-based violence across adolescent girls and young women in Mombasa, Kenya. *BMC Women's Health, 20*(1), 1–11.

- <https://doi.org/10.1186/s12905-020-01025-0>
- Bourgault, S., Peterman, A., & O'Donnell, M. (2021). *Violence against women and children during COVID-19—one year on and 100 papers in*. Center for Global Development. <https://www.cgdev.org/publication/violence-against-women-and-children-during-covid-19>
- Bradbury-Jones, C., & Isham, L. (Eds.). (2021). *Understanding gender-based violence: An essential textbook for nurses, healthcare professionals and social workers*. Springer International Publishing.
- Brown, D., Meinhart, M., Poulton, C., & Stark, L. (2022). The economic burden of intimate partner violence in Colombia: Estimated health costs among females aged 13–24. *Journal of Interpersonal Violence*. <https://doi.org/10.1177/08862605221104531>
- Bryman, A. (2004). *Social research methods* (4th ed.). Oxford University Press.
- Capasso, A., DiClemente, R. J., & Wingood, G. M. (2019). Pregnancy coercion as a risk factor for HIV and other sexually transmitted infections among young African American women. *Journal of Acquired Immune Deficiency Syndromes*, 82(2), S155–S162. <https://doi.org/10.1097/QAI.0000000000001935>
- Carlson, M. D. (2015). *Individual and contextual determinants of gender-based violence in the Democratic Republic of Congo and the role of armed conflict: A multilevel analysis* [Doctoral dissertation, Tulane University]. <https://digitallibrary.tulane.edu/>
- Chepuka, L., Taegtmeier, M., Chorwe-Sungani, G., Mambulasa, J., Chirwa, E., & Tolhurst, R. (2014). Perceptions of the mental health impact of intimate partner violence and health service responses in Malawi. *Global Health Action*, 7(1), 24816. <https://doi.org/10.3402/gha.v7.24816>
- Cislaghi, B., & Heise, L. (2018). Theory and practice of social norms interventions: Eight common pitfalls. *Globalization and Health*, 14(1), 1–10. <https://doi.org/10.1186/s12992-018-0345-3>
- Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches* (4th ed.). Sage.
- Creswell, J. W., Hanson, W. E., Plano Clark, V. L., & Morales, A. (2007). Qualitative research design: Selection and implementation. *The Counseling Psychologist*, 35(2), 236–264. <https://doi.org/10.1177/0011000006287390>

- Cropanzano, R., Anthony, E. L., Daniels, S. R., & Hall, A. V. (2017). Social exchange theory: A critical review with theoretical remedies. *Academy of Management Annals*, *11*(1), 479–516. <https://doi.org/10.5465/annals.2015.0094>
- Decker, M. R., Latimore, A. D., Yasutake, S., Haviland, M., Ahmed, S., Blum, R. W., Sonenstein, F., & Astone, N. M. (2015). Gender-based violence against adolescent and young adult women in low- and middle-income countries. *Journal of Adolescent Health*, *56*(2), 188–196. <https://doi.org/10.1016/j.jadohealth.2014.09.003>
- Decker, M. R., Bevilacqua, K., Wood, S. N., Ngare, G. W., Thiongo, M., Byrne, M. E., & Gichangi, P. (2022). Gender-based violence during COVID-19 among adolescent girls and young women in Nairobi, Kenya: A mixed-methods prospective study over 18 months. *BMJ Global Health*, *7*(2), e007807. <https://doi.org/10.1136/bmjgh-2021-007807>
- Decker, M. R., Wood, S. N., Thiongo, M., Byrne, M. E., Devoto, B., Morgan, R., & Gichangi, P. (2021). Gendered health, economic, social, and safety impacts of COVID-19 on adolescents and young adults in Nairobi, Kenya. *PLOS ONE*, *16*(11), e0259583. <https://doi.org/10.1371/journal.pone.0259583>
- Djamba, Y. K., & Kimuna, S. R. (Eds.). (2015). *Gender-based violence: Perspectives from Africa, the Middle East and India*. Springer.
- Dworkin, E. R., Menon, S. V., Bystrynski, J., & Allen, N. E. (2017). Sexual assault victimization and psychopathology: A review and meta-analysis. *Clinical Psychology Review*, *56*, 65–81. <https://doi.org/10.1016/j.cpr.2017.06.002>
- Egger, D., Miguel, E., Warren, S. S., Shenoy, A., Collins, E., Karlan, D., ... Vernot, C. (2021). Falling living standards during the COVID-19 crisis: Quantitative evidence from nine developing countries. *Science Advances*, *7*(6), eabe0997. <https://doi.org/10.1126/sciadv.abe0997>
- Fleming, P. J., McCleary-Sills, J., Morton, M., Levto, R., Heilman, B., & Barker, G. (2015). Risk factors for men's lifetime perpetration of physical violence against intimate partners: Results from the international men and gender equality survey (IMAGES) in eight countries. *PLOS ONE*, *10*(3), e0118639. <https://doi.org/10.1371/journal.pone.0118639>

- Formson, C., & Hilhorst, T. (2016). *The many faces of transactional sex: Women's agency, livelihoods and risk factors in humanitarian contexts: A literature review* (SLRC Working Paper 41). Secure Livelihoods Research Consortium.
<https://www.securelivelihoods.org/publication/the-many-faces-of-transactional-sex/>
- Fulu, E., Jewkes, R., Roselli, T., & Garcia-Moreno, C. (2013). Prevalence of and factors associated with male perpetration of intimate partner violence: Findings from the UN Multi-country Cross-sectional Study on Men and Violence in Asia and the Pacific. *The Lancet Global Health*, 1(4), e187–e207. [https://doi.org/10.1016/S2214-109X\(13\)70074-3](https://doi.org/10.1016/S2214-109X(13)70074-3)
- Fulu, E., Miedema, S., Roselli, T., McCook, S., Chan, K. L., Haardörfer, R., & Johnson, S. (2017). Pathways between childhood trauma, intimate partner violence and harsh parenting: Findings from the UN Multi-country Study on Men and Violence in Asia and the Pacific. *The Lancet Global Health*, 5(5), e512–e522.
[https://doi.org/10.1016/S2214-109X\(17\)30103-1](https://doi.org/10.1016/S2214-109X(17)30103-1)
- Garcia-Moreno, C., Jansen, H. A., Ellsberg, M., Heise, L., & Watts, C. H. (2006). Prevalence of intimate partner violence: Findings from the WHO Multi-country Study on Women's Health and Domestic Violence. *The Lancet*, 368(9543), 1260–1269.
[https://doi.org/10.1016/S0140-6736\(06\)69523-8](https://doi.org/10.1016/S0140-6736(06)69523-8)
- García-Moreno, C., Pallitto, C., Devries, K., Stöckl, H., Watts, C., & Abrahams, N. (2013). *Global and regional estimates of violence against women: Prevalence and health effects of intimate partner violence and non-partner sexual violence*. World Health Organization.
<https://www.who.int/publications/i/item/9789241564625>
- Goldner, V., Penn, P., Sheinberg, M., & Walker, G. (2013). Love and violence: Gender paradoxes in volatile attachments. In V. Goldner, P. Penn, M. Sheinberg, & G. Walker (Eds.), *Love and violence: Gender paradoxes in volatile attachments* (pp. 575–601). Routledge.
- Government of Kenya. (2025, January 26). *Government forms taskforce on gender-based violence and femicide to strengthen national response*.
https://www.standardmedia.co.ke/national/article/2001509374/former-deputy-cj-baraza-to-head-42-member-taskforce-on-femicide?utm_source=chatgpt.com
- Haj-Yahia, M. M., Sousa, C. A., & Lugassi, R. (2021). The relationship between exposure to violence in the family of origin during childhood, psychological distress, and perpetrating

- violence in intimate relationships among male university students. *Journal of Interpersonal Violence*, 36(15–16), NP8347–NP8372. <https://doi.org/10.1177/0886260519853407>
- Handa, S., Halpern, C. T., Pettifor, A., & Thirumurthy, H. (2014). The government of Kenya's cash transfer program reduces the risk of sexual debut among young people aged 15–25. *PLOS ONE*, 9(1), e85473. <https://doi.org/10.1371/journal.pone.0085473>
- Izugbara, C., Muthuri, S., Muuo, S., Egesa, C., Franchi, G., McAlpine, A., ... Hossain, M. (2020). 'They say our work is not halal': Experiences and challenges of refugee community workers involved in gender-based violence prevention and care in Dadaab, Kenya. *Journal of Refugee Studies*, 33(3), 521–536. <https://doi.org/10.1093/jrs/fez059>
- Jansen, H. A., Nguyen, T. V. N., & Hoang, T. A. (2016). Exploring risk factors associated with intimate partner violence in Vietnam: Results from a cross-sectional national survey. *International Journal of Public Health*, 61(8), 923–934. <https://doi.org/10.1007/s00038-016-0845-0>
- Javed, S., & Chattu, V. K. (2021). Patriarchy at the helm of gender-based violence during COVID-19. *AIMS Public Health*, 8(1), 32–42. <https://doi.org/10.3934/publichealth.2021003>
- Jeffrey, N. (2019). *Men's (normalized) sexual violence against intimate partners* (Doctoral dissertation, University of Guelph). <https://atrium.lib.uoguelph.ca/xmlui/handle/10214/17640>
- Jewkes, R., Flood, M., & Lang, J. (2015). From work with men and boys to changes of social norms and reduction of inequities in gender relations: A conceptual shift in prevention of violence against women and girls. *The Lancet*, 385(9977), 1580–1589. [https://doi.org/10.1016/S0140-6736\(14\)61683-4](https://doi.org/10.1016/S0140-6736(14)61683-4)
- Jones, N., Guglielmi, S., Małachowska, A., Hamad, B. A., Yadete, W., Hamad, S. A., & Alabbadi, T. (2021). 'Some got married, others don't want to attend school as they are involved in income-generation': Adolescent experiences following COVID-19 lockdowns in low- and middle-income countries. *Gender and Adolescence: Global Evidence*. <https://www.gage.odi.org>
- Kabiru, C. W., Mumah, J. N., Maina, B. W., & Abuya, B. A. (2018). Violence victimisation and aspirations–expectations disjunction among adolescent girls in urban Kenya. *International Journal of Adolescence and Youth*, 23(3), 281–290. <https://doi.org/10.1080/02673843.2017.1342153>

- Karim, Q. A., & Baxter, C. (2016). The dual burden of gender-based violence and HIV in adolescent girls and young women in South Africa: Guest editorial. *South African Medical Journal*, 106(12), 1151–1153. <https://doi.org/10.7196/SAMJ.2016.v106i12.11225>
- Kato-Wallace, J., Barker, G., Garg, A., Feliz, N., Levack, A., Ports, K., & Miller, E. (2019). Adapting a global gender-transformative violence prevention program for the US community-based setting for work with young men. *Global Social Welfare*, 6(2), 121–130. <https://doi.org/10.1007/s40609-019-00151-8>
- Kendal, R. L., Boogert, N. J., Rendell, L., Laland, K. N., Webster, M., & Jones, P. L. (2018). Social learning strategies: Bridge-building between fields. *Trends in Cognitive Sciences*, 22(7), 651–665. <https://doi.org/10.1016/j.tics.2018.04.003>
- Kenya National Bureau of Statistics. (2022). *Demographic and Health Survey 2022: Gender-based violence findings*. Government of Kenya
- Kenya News Agency. (2024, June 12). *Report flags intimate partner violence as most common abuse*. https://www.kenyanews.go.ke/report-flags-intimate-partner-violence-as-most-common-abuse/?utm_source=chatgpt.com
- Kothari, C. R. (2011). *Research methodology: Methods and techniques* (2nd ed.). India: New Age International.
- Krejcie, R. V., & Morgan, D. W. (1970). Determining sample size for research activities. *Educational and Psychological Measurement*, 30(3), 607–610. <https://doi.org/10.1177/001316447003000308>
- Laisser, R. M., Nyström, L., Lugina, H. I., & Emmelin, M. (2011). Community perceptions of intimate partner violence: A qualitative study from urban Tanzania. *BMC Women's Health*, 11(1), 13. <https://doi.org/10.1186/1472-6874-11-13>
- Lopez-Ekra, S., Aghazarm, C., Kötter, H., & Mollard, B. (2011). The impact of remittances on gender roles and opportunities for children in recipient families: Research from the International Organization for Migration. *Gender & Development*, 19(1), 69–80. <https://doi.org/10.1080/13552074.2011.554954>
- Magambo, E., & Nyamwesa, A. (2022). Gender gap in asset ownership: Tanzania state of play. *Journal of Research*, 3(3), 351–361. <https://doi.org/10.26437/ajar.03.2022.23>
- Makama, G. A. (2013). Patriarchy and gender inequality in Nigeria: The way forward. *European Scientific Journal*, 9(17), 115–133. <https://doi.org/10.19044/esj.2013.v9n17p%25p>

- McCarthy, K. J., Mehta, R., & Haberland, N. A. (2018). Gender, power and violence: A systematic review of measures and their association with male perpetration of IPV. *PLoS ONE*, *13*(11), e0207091. <https://doi.org/10.1371/journal.pone.0207091>
- McCleary-Sills, J., Namy, S., Nyoni, J., Rweyemamu, D., Salvatory, A., & Steven, E. (2016). Stigma, shame and women's limited agency in help-seeking for intimate partner violence. *Global Public Health*, *11*(1–2), 224–235. <https://doi.org/10.1080/17441692.2015.1014094>
- Mingude, A. B., & Dejene, T. M. (2021). Prevalence and associated factors of gender-based violence among Baso high school female students, 2020. *Reproductive Health*, *18*(1), 1–11. <https://doi.org/10.1186/s12978-020-01061-1>
- Mugenda, O. M., & Mugenda, A. G. (2003). *Research methods: Quantitative and qualitative approaches*. African Centre for Technology Studies.
- Muluneh, M. D., Stulz, V., Francis, L., & Agho, K. (2020). Gender-based violence against women in Sub-Saharan Africa: A systematic review and meta-analysis of cross-sectional studies. *International Journal of Environmental Research and Public Health*, *17*(3), 903. <https://doi.org/10.3390/ijerph17030903>
- Murray, S., & Achieng, A. (2011). *Gender-based violence assessment, Hagadera Refugee Camp, Dadaab, Kenya*. International Rescue Committee (IRC).
- Mutai, K. B. (2000). *How to write quality research proposals* (1st ed.). Thellery Publications.
- Njeze, C., Bird-Naytowhow, K., Pearl, T., & Hatala, A. R. (2020). Intersectionality of resilience: A strengths-based case study approach with Indigenous youth in an urban Canadian context. *Qualitative Health Research*, *30*(13), 2001–2018. <https://doi.org/10.1177/1049732320932485>
- Njogu, K., & Orchardson-Mazrui, E. (2013). Gender inequality and women's rights in the Great Lakes: Can culture contribute to women's empowerment? UNICEF. <https://www.unicef.org>
- Olson, R. M., Macias-Konstantopoulos, W., Muchai, R., Johnson, K., Mishori, R., & Nelson, B. (2022). Development and validation of a data quality index for forensic documentation of sexual and gender-based violence in Kenya. *PLOS ONE*, *17*(1), e0262297. <https://doi.org/10.1371/journal.pone.0262297>
- Orindi, B. O., Maina, B. W., Muuo, S. W., Birdthistle, I., Carter, D. J., Floyd, S., & Ziraba, A. (2020). Experiences of violence among adolescent girls and young women in Nairobi's

- informal settlements prior to scale-up of the DREAMS Partnership: Prevalence, severity and predictors. *PLOS ONE*, *15*(4), e0231737.
<https://doi.org/10.1371/journal.pone.0231737>
- Orodho, A. J. (2003). *Essentials of educational and social science research methods*. Mazola Publishers.
- Palermo, T., Bleck, J., & Peterman, A. (2014). Tip of the iceberg: Reporting and gender-based violence in developing countries. *American Journal of Epidemiology*, *179*(5), 602–612.
<https://doi.org/10.1093/aje/kwt295>
- Pereda, N., & Díaz-Faes, D. A. (2020). Family violence against children in the wake of COVID-19 pandemic: A review of current perspectives and risk factors. *Child and Adolescent Psychiatry and Mental Health*, *14*(1), 1–7. <https://doi.org/10.1186/s13034-020-00347-1>
- Peterman, A., Pereira, A., Bleck, J., Palermo, T. M., & Yount, K. M. (2017). Women’s individual asset ownership and experience of intimate partner violence: Evidence from 28 international surveys. *American Journal of Public Health*, *107*(5), 747–755.
<https://doi.org/10.2105/AJPH.2017.303694>
- Pinchoff, J., Austrian, K., Rajshekhar, N., Abuya, T., Kangwana, B., Ochako, R., ... Ngo, T. D. (2021). Gendered economic, social, and health effects of the COVID-19 pandemic and mitigation policies in Kenya: Evidence from a prospective cohort survey in Nairobi informal settlements. *BMJ Open*, *11*(3), e042749.
<https://doi.org/10.1136/bmjopen-2020-042749>
- Reis, A., Sperandei, S., de Carvalho, P. G. C., Pinheiro, T. F., de Moura, F. D., Gomez, J. L., ... Veras, M. A. (2021). A cross-sectional study of mental health and suicidality among trans women in São Paulo, Brazil. *BMC Psychiatry*, *21*(1), 1–13.
<https://doi.org/10.1186/s12888-021-03155-2>
- Republic of Kenya. (1963). *Constitution of Kenya* (No. 69). Government Printer.
- Republic of Kenya. (2022). *Kenya demographic and health survey*. Government Printer.
- Risman, B. J. (2018). Gender as a social structure. In J. S. Chafetz (Ed.), *Handbook of the sociology of gender* (pp. 19–43). Springer, Cham. https://doi.org/10.1007/978-3-319-76316-3_2
- Roesch, E., Amin, A., Gupta, J., & García-Moreno, C. (2020). Violence against women during COVID-19 pandemic restrictions. *BMJ*, *369*, m1712.
<https://doi.org/10.1136/bmj.m1712>

- Semahegn, A., Torpey, K., Manu, A., Assefa, N., Tesfaye, G., & Ankomah, A. (2019). Are interventions focused on gender norms effective in preventing domestic violence against women in low- and lower-middle-income countries? A systematic review and meta-analysis. *Reproductive Health, 16*(1), 1–31. <https://doi.org/10.1186/s12978-019-0798-4>
- Shannon, K., Leiter, K., Phaladze, N., Hlanze, Z., Tsai, A. C., Heisler, M., ... Weiser, S. D. (2012). Gender inequity norms are associated with increased male-perpetrated rape and sexual risks for HIV infection in Botswana and Swaziland. *PLOS ONE, 7*(1), e28739. <https://doi.org/10.1371/journal.pone.0028739>
- Singleton, R., Straits, B. C., & Straits, M. M. (1993). *Approaches to social research*. Oxford University Press.
- Smith Slep, A. M., Foran, H. M., & Heyman, R. E. (2014). An ecological model of intimate partner violence perpetration at different levels of severity. *Journal of Family Psychology, 28*(4), 470–480. <https://doi.org/10.1037/fam0000018>
- Squire, C., & Cottrell, S. (2017). Domestic violence in pregnancy. In *The social context of birth* (pp. 107–123). Routledge.
- Stafford, L., & Kuiper, K. (2021). Social exchange theories: Calculating the rewards and costs of personal relationships. In *Engaging theories in interpersonal communication* (pp. 379–390). Routledge.
- Stermac, L., Bance, S., Cripps, J., & Horowitz, S. (2018). Sexual coercion and women's education: A pilot study. *Violence and Gender, 5*(2), 110–118. <https://doi.org/10.1089/vio.2017.0036>
- Stoica, D. (2020). The violence against women during the COVID-19 pandemics. *Postmodernism Problems, 10*(3), 277–291.
- Taft, A., Wilson, I., Laslett, A. M., & Kuntsche, S. (2019). Pathways to responding and preventing alcohol-related violence against women: Why a gendered approach matters. *Australian and New Zealand Journal of Public Health, 43*(6), 516–518. <https://doi.org/10.1111/1753-6405.12932>
- Temmerman, M. (2015). Research priorities to address violence against women and girls. *The Lancet, 385*(9978), e38–e40. [https://doi.org/10.1016/S0140-6736\(14\)61722-5](https://doi.org/10.1016/S0140-6736(14)61722-5)
- Temmerman, M., Ogbe, E., Manguro, G., Khandwalla, I., Thiongo, M., Mandaliya, K. N., ... Gichangi, P. (2019). The gender-based violence and recovery centre at Coast Provincial

- General Hospital, Mombasa, Kenya: An integrated care model for survivors of sexual violence. *PLOS Medicine*, 16(8), e1002886. <https://doi.org/10.1371/journal.pmed.1002886>
- Tkach, K., Ahn, J., Gonzalez, N. V., Xu, Z., & Zhang, Y. (2016). The effects of school-related gender-based violence on academic performance: Evidence from Botswana, Ghana and South Africa. *International Journal of Educational Development*, 49, 262–274. <https://doi.org/10.1016/j.ijedudev.2016.04.007>
- United Nations Children’s Fund Kenya Country Office, National Center for Injury Prevention and Control, U.S. Centers for Disease Control and Prevention, & Kenya National Bureau of Statistics. (2012). *Violence against children in Kenya: Findings from a 2010 national survey — Summary report on the prevalence of sexual, physical and emotional violence, context of sexual violence and health and behavioural consequences of violence experienced in childhood*. https://www.togetherforgirls.org/wp-content/uploads/2017/09/2010_Kenya_Findingsfrom-a-Violence-Against-Children-Survey.pdf
- United Nations. (2024). *Millions of women and girls forced to flee face high risk of gender-based violence*. <https://www.ungeneva.org/en/news-media/news/2024/11/100817/millions-women-and-girls-forced-flee-face-high-risk-gender-based>
- UN Women. (2013). *Joint Evaluation of Joint Programmes on Gender Equality in the United Nations System: Kenya Joint Program on Gender Equality and Women’s Empowerment*. https://www.unfpa.org/sites/default/files/admin-resource/JGP_Kenya_CaseStudy.pdf
- UN Women. (2024). *Technology-facilitated gender-based violence among young adults in tertiary institutions in Nairobi: A rapid assessment report*. https://www.unwomen.org/sites/default/files/2024-09/b30_report_kenya_en.pdf?utm_source=chatgpt.com
- Vyas, S. (2018). Maintaining respect: Men, masculinities, and domestic violence against women in sights from informal sector workers in Tanzania. *International Journal of Gender Studies in Developing Societies*, 2(4), 1–11. <https://doi.org/10.1504/IJGDS.2018.095617>
- Vyas, S., & Jansen, H. A. (2018). Unequal power relations and partner violence against women in Tanzania: A cross-sectional analysis. *BMC Women's Health*, 18(1), 1–12. <https://doi.org/10.1186/s12905-018-0560-3>

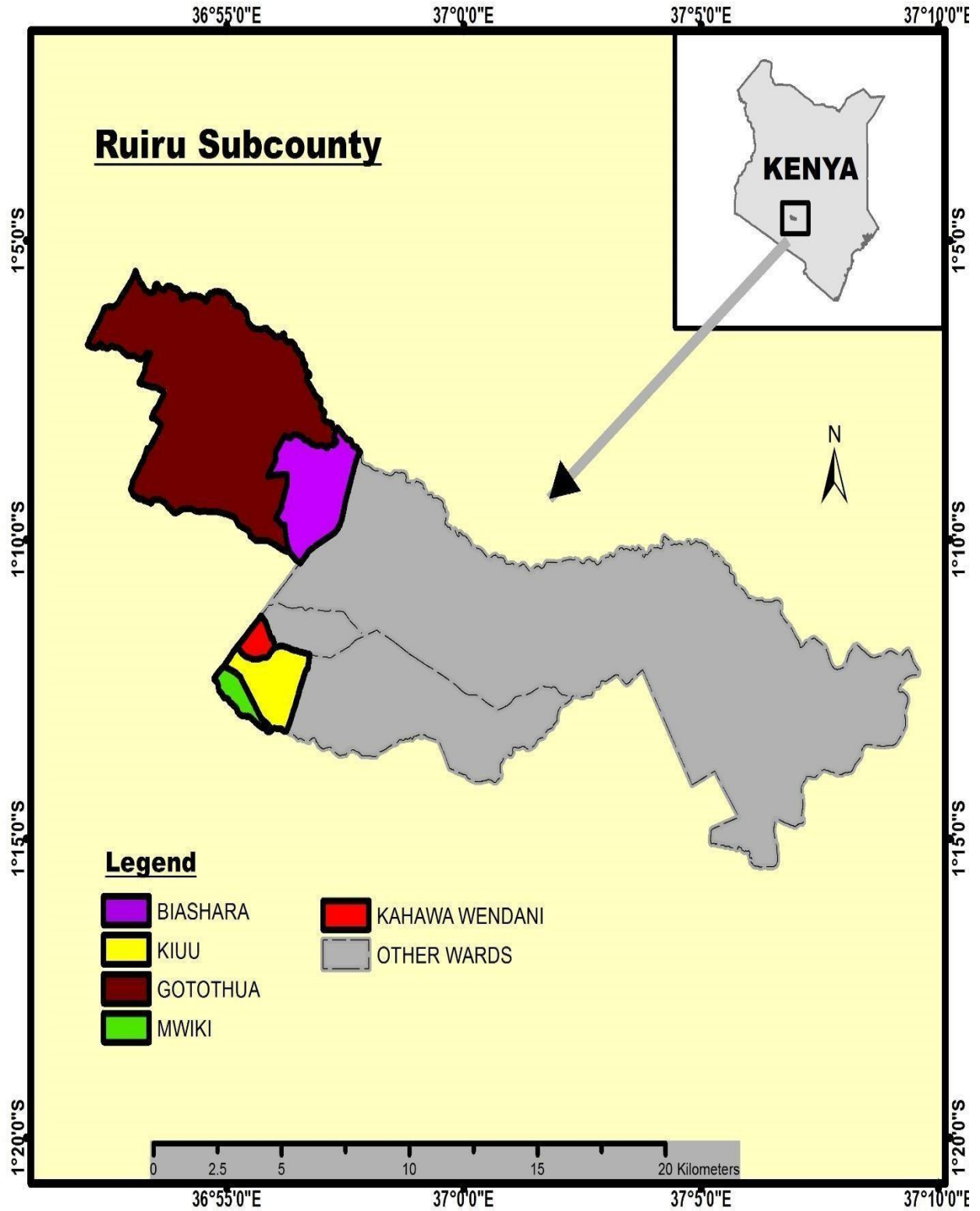
- Vyas, S., & Watts, C. (2009). How does economic empowerment affect women's risk of intimate partner violence in low- and middle-income countries? A systematic review of published evidence. *Journal of International Development*, 21(5), 577–602. <https://doi.org/10.1002/jid.1500>
- Wado, Y. D., Mutua, M. K., Mohiddin, A., Ijadunola, M. Y., Faye, C., Coll, C. V., ... Kabiru, C. W. (2021). Intimate partner violence against adolescents and young women in Sub-Saharan Africa: Who is most vulnerable? *Reproductive Health*, 18(1), 1–13. <https://doi.org/10.1186/s12978-021-01202-6>
- Wenham, C., Smith, J., & Morgan, R. (2020). COVID-19: The gendered impacts of the outbreak. *The Lancet*, 395(10227), 846–848. [https://doi.org/10.1016/S0140-6736\(20\)30526-2](https://doi.org/10.1016/S0140-6736(20)30526-2)
- Widom, C. S., & Wilson, H. W. (2015). Intergenerational transmission of violence. *Violence and Mental Health*, 27–45.
- World Health Organization. (2010). *Inter-agency field manual on reproductive health in humanitarian settings: 2010 revision for field review*. Geneva: World Health Organization. <https://www.who.int/publications/i/item/9789241548163>
- World Health Organization. (2013a). *Global and regional estimates of violence against women: Prevalence and health effects of intimate partner violence and non-partner sexual violence*. Geneva: World Health Organization. <https://www.who.int/publications/i/item/9789241564625>
- World Health Organization. (2013b). *Responding to intimate partner violence and sexual violence against women: WHO clinical and policy guidelines*. Geneva: World Health Organization. <https://www.who.int/publications/i/item/9789241548590>
- World Health Organization. (2017). *Leading the realization of human rights to health and through health: Report of the high-level working group on the health and human rights of women, children and adolescents*. Geneva: World Health Organization. <https://www.who.int/publications/i/item/9789241513230>
- World Health Organization. (2021). *Violence against women prevalence estimates, 2018: Global, regional and national prevalence estimates for intimate partner violence against women and global and regional prevalence estimates for non-partner sexual violence*. Geneva: World Health Organization. <https://www.who.int/publications/i/item/9789240022256>

World Health Organization. (2024). *Key facts on violence against women*. Geneva: World Health Organization. <https://www.who.int/news-room/fact-sheets/detail/violence-against-women>

Yount, K. M., Krause, K. H., & Miedema, S. S. (2017). Preventing gender-based violence victimization in adolescent girls in lower-income countries: Systematic review of reviews. *Social Science & Medicine*, 192, 1–13. <https://doi.org/10.1016/j.socscimed.2017.08.031>

APPENDICES

Appendix I: The Study Area Map



Source: Egerton University, Geography department.

Appendix II: University Introductory Letter

EGERTON
Tel. Pilot: 254-51-2217620
254-51-2217877
254-51-2217631
Dir. line/Fax: 254-51-2217847
Cell Phone



UNIVERSITY
P.O. Box 536 - 20115
Egerton, Njoro, Kenya
Email: bpgs@egerton.ac.ke
www.egerton.ac.ke

OFFICE OF THE DIRECTOR GRADUATE SCHOOL

Ref:GM11/12014/17..... Date:.....1st April, 2025

The Director General
National Commission for Science Technology and Innovation,
P. O. Box 30623-00100
NAIROBI.

Dear Sir,

RE: REQUEST FOR RESEARCH PERMIT – MS. MIRRIAM WAIRIMU KURIA REG. NO. GM11/12014/17

This is to introduce and confirm to you that the above named student is in the Department of Women, Gender & Development Studies, Faculty of Arts, Egerton University.

She is a bona-fide registered M.A student in this University. Her research topic is **“Nexus between Social-Economic Factors and Gender based Violence Among Youth in Ruiru Sub-County, Kiambu County, Kenya.”**

She is at the stage of collecting field data. Please issue her with a research permit to enable her undertake the studies.

Your kind assistance to her will be highly appreciated.

Yours faithfully,




Prof. Charles M. M'Erumba, Ph.D
DIRECTOR, DIRECTORATE OF POSTGRADUATE STUDIES
CMM/mm

“Transforming Lives Through Quality Education”

Appendix III: Research Permit from NACOSTI

NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY AND INNOVATION
REPUBLIC OF KENYA
Ref No: 111955
Date of Issue: 08/April/2025

RESEARCH LICENSE




This is to Certify that **Ms. MIRRIAM WAIRIMU KURIA of Egerton University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Kiambu on the topic: NEXUS BETWEEN SOCIO-ECONOMIC FACTORS AND GENDER BASED VIOLENCE AMONG YOUTH IN RUIRU SUB-COUNTY, KIAMBU COUNTY, KENYA for the period ending : 08/April/2026.**

License No: NACOSTI/P/25/418101

111955
Applicant Identification Number

Director General
NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY & INNOVATION

Verification QR Code



NOTE: This is a computer generated License. To verify the authenticity of this document, Scan the QR Code using QR scanner application.

See overleaf for conditions

Nexus between Power Imbalance Among Intimate Partners and Gender Based Violence Among Youth in Ruiru Sub-County, Kiambu County, Kenya

Miriam Wairimu Kuria¹; Lilian Chesikaw²; Mary Chepchieng³

^{1,2,3}Institute of Gender, Women and Development Studies, Egerton University

Publication Date: 2025/08/19

Abstract: The study sought to examine the relationship between power imbalance among intimate partners and gender-based violence (GBV) among the youth in Ruiru Sub-County, Kiambu County, Kenya. The study's literature includes a review of multiple related literature consistent with the research topic by exploring different perspectives on power imbalance factors contributing to GBV among the youth in different contexts. The study was guided by the Social Learning Theory and complemented by the Social Exchange Theory. The study employed a descriptive cross-sectional study design. The targeted population was 1,166 youths while the accessible population was 664. A sample size of 268 respondents was obtained through a stratified random sampling procedure ensuring that both male and female participants were appropriately represented in the study. Validity of the instruments was determined by experts from the Institute of Gender, Women and Development Studies. The study adhered to ethical considerations in all study processes. Primary data collection was done using interview schedules for 12 respondents and closed-ended questionnaires for 244 respondents totalling to 256. The collected data was analysed quantitatively and qualitatively using statistical methods and thematic analysis respectively. The quantitative data was analysed using Statistical Packages for Social Sciences (SPSS) version 27 through correlations and regression. The qualitative data was analysed using NVivo through thematic analysis. The study reveals that gender-based violence (GBV) among youth in Ruiru Sub-County is shaped by power imbalance among intimate partners. Quantitative statistics revealed standardised regression coefficient ($\beta=0.418$, $p=0.014$) and a robust correlation ($r=0.79$, $p<0.01$), highlighting how disparities in decision-making authority, access and financial control lead to strained relationship dynamics. These findings were supported by qualitative findings illustrating how gender expectations and economic dependency encourage patriarchal dominance. The study concludes that GBV in this peri-urban context is not merely a personal or household issue but a systemic phenomenon that is rooted in power imbalances and institutional fragility. Based on the findings, the study recommends that the County Government of Kiambu in collaboration with national agencies needs to develop and enforce gender-responsive policies promoting inter-agency coordination and resource allocation; civil society Organisations and the private sector expand youth-centred economic empowerment programs including vocational training, microfinance, financial literacy and targeted support for GBV survivors; religious and community leaders partner with youth networks and educational institutions need to lead transformative campaigns challenging gender norms through education, community dialogues and public declarations; also, healthcare and justice sectors need to strengthen their capacity in trauma-informed, survivor-centred care, deploying mobile legal and health clinics to underserved areas to ensure equitable psychosocial, legal and medical services. Future research needs to explore how cultural norms and economic insecurity structurally contribute to GBV among youth, assess the long-term impact of empowerment interventions through longitudinal studies and evaluate the effectiveness of GBV policies in culturally diverse and economically disadvantaged settings.

Keywords: Gender-Based Violence, Power Imbalance, Intimate Partners and Youth Vulnerability.

How to Cite: Miriam Wairimu Kuria; Lilian Chesikaw; Mary Chepchieng (2025) Nexus between Power Imbalance Among Intimate Partners and Gender Based Violence Among Youth in Ruiru Sub-County, Kiambu County, Kenya. *International Journal of Innovative Science and Research Technology*, 10(8), 620-629. <https://doi.org/10.38124/ijisrt/25aug174>