The Role of Police Gender Desk in Fighting Gender-Based Violence in Tanzania, a Reflection from Dar es Salaam Region

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Abstract

The study assessed the role of the Police Gender Desk (PGD) in fighting gender-based violence (GBV) amidst increased cases of GBV in Dar es Salaam region, Tanzania. Both quantitative and qualitative techniques were used where survey, interview, focus group discussion, and documentary review were used as key data collection methods. A total of 70 respondents who are police officers working at PGD were surveyed. The key findings show that common dominating GBV cases that are reported at PGD include battering (22%), family/children neglect (21%),sexual harassment, and exploitation (17%), property grabbing (16%), manipulation and shameful acts (8%), economic exploitation (7%), psychological torture (5%), and femicide (2%). Moreover, the key challenges reported to face PGD in fighting GBV include; delays in reporting cases (22%), premature withdraw of cases (15%), difficulty in gathering evidence (12%), inadequate professional training (9%), reluctance of victims to open up (10%), limited robust equipment's (7%), lack of special rooms (8%) etc. The study recommends some improvement of the PGD by fulfilling all the highlighted challenges including provision of technical support and training, improving PGD infrastructure, learning and understanding gender norms that increase GBV, creating awareness among community members on the role of PGD, and fostering peace and justice when dealing with GBV cases for enhancing the sense of equality and community development in the country.

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1. Introduction

Violence refers to the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation (WHO, 2004; Ruso, 2019; UNFPA, 2022). Gender-based violence (GBV) is a particular form of violence that has been defined as violence that is committed against someone based on their gender identity, gender expression, or perceived gender (EIGE, 2017; Andarge et al., 2018; Cotter et al., 2019). Gender-based violence is recognized as a global human rights concern given its prevalence across developed and developing countries (Bradbury-Jones et al., 2019; Russo, 2019). Genderbased violence is the spectacle of epidemic proportions prevalent in many families, communities, societies, and cultures across the globe (Council of Europe, 2021). Many women and girls, and to a lesser degree men and boys, either directly experience or face the consequences of some form of gender-based violence in their lifetime. Violence is deeply rooted in the unequal power relations between women and men in societies (Wirtz et al., 2020; Kalumanga et al., 2020). Generally, GBV is extensive around the world; one in three women has experienced physical or sexual violence (WHO, 2021). Gruesome cases make headlines with frightening regularity; many more instances are never reported to anyone, forever hidden behind a wall of stigma and repressive social norms (Darak et al., 2017). Beyond their acute injuries, many victims suffer chronic pain, gynecological problems, substance abuse, HIV and other sexually transmitted diseases, and an increased risk of depression and suicide (CDC, 2021).

Women are considered 20% more likely than men to be victims of GBV (UNICEF, 2010). When looking at sexual violence, the prevalence rates of victimization of girls and women between 15 and 24 years of age increase to 50% (Conroy & Cotter, 2017). For instance, in Europe, one in five women in the European Union have experienced violence from a current or previous partner (UNHCR, 2021). In Australian National survey, 27% of 1,218 women aged 16–85 years, reported experiencing GBV (Rees et al., 2011). Findings from a Canadian survey of safety in public and private spaces indicated that women are twice as likely (32%) to experience unwanted sexual behavior in public spaces than men (Cotter et al., 2019). In the workplace, women are more likely (29% vs. 17%) to be the target of inappropriate sexual behavior, often experienced through sexual jokes, remarks, and innuendos (Cruz et al., 2011; EIGE, 2017). Women, 15 years and older, 30% of them are reported having been sexually assaulted outside of an intimate relationship and 26% reported experiences of physical assault in Canada (WHO, 2022). In countries across Asia and the Pacific, surveys indicate that between 11 and 64 percent of women have experienced physical and/or sexual violence at the hands of an intimate partner (UNFPA, 2018).

In Africa, the report by (UNICEF, 2023; SADC, 2023, and Amka Africa, 2019), vows to call for improved legislation, policies, and budgets to address gender-based violence because of the high GBV prevalence. The report shows that about 17 percent of girls and women in Southern Africa have experienced forced sex in their lifetime. In a Study in Ethiopia, amongst a sample of 1,330 female college students, 46% had experienced GBV during their college experiences (Arnold et al., 2008; UNFPA, 2018). A recent study in Uganda, Malawi, and Zambia reported that more than 80% and 94% of women surveyed respectively had experienced physical, sexual, or psychological violence at some point in their marriage/intimate relationship (CDC, 2021). Gender-based violence

is exacerbated by war and is increasingly a feature of conflicts. Widespread rape has been documented in the DRC, and Rwanda, leaving a legacy of violence long after peace treaties have been signed (WHO, 2022).

In Tanzania, 40% of all women aged 15-49 years have experienced physical violence, while 17% have experienced sexual violence. Of women aged 15-49, 44% have experienced either physical or sexual violence by an intimate partner (World Bank, 2022; UNFPA, 2022). While there has been increasing attention of the authorities to the issue of GBV in Tanzanian, with for example the adoption by governments of National Plans of Action (NPAs) to end violence against women and children. And the introduction of the police gender desks as a tool to fight GBV (UN, Women, 2021).

Police gender desks (PGD) are desks that are staffed by police officers who have received training on how to interview victims and investigate reports of gender-based violence (UN Women, 2021). Moreover, Dowling et al., (2018), and Rebecca, (2018) asserted that the onset of police gender desk arises from the onus to make sure there is a quick response and prevention of gender-related violations in most countries where women tend to be at higher risk of gender-based violence than their male counterparts. Police gender desks are operated by police who have been trained both male and female to deal with domestic violence cases. The Police under the desks have responsibilities to ensure that cases of gender-based violence are attended effectively and great support is provided to the victims (Namwese, 2014). The police gender desk is also expected to make information available for the victims and link them up with relevant stakeholders that can provide services related to GBV cases. Nevertheless, PGD has to play a major role in addressing cases with high levels of privacy and confidentiality (TAWLA, 2020).

2.0 Theoretical Review

2.1 Ecological Systems Theory

Bronfenbrenner's ecological systems theory (1997) was further developed by Lori L. Heise (1998) to explain the interplay of various risk drivers of GBV. The framework elucidates the interconnectedness of individual, relationship, community, and societal levels. The ecological model was introduced as a framework for understanding some of the key factors that contribute to women's and girls' risk of intimate partner violence, this also has been adapted to examine other types of violence to which women and girls are exposed.

Individual level: biological and personal history factors among both victims and perpetrators. At this level, the theory recognizes the history of maltreatment/violence. It's from this level where alcohol or drug misuse by a partner becomes a reason for being socially isolated from others including partner.

Relationship level: Proximal social relationships, most importantly those between intimate partners and within families, and those factors leading to separation or leaving (risks of femicide). It also recognizes the low of common—law or separated versus unmarried.

Community level: It is the context in which social relationships are embedded, including peer groups, schools, workplaces, and neighborhoods. The theory also at this level talks about tolerance

of violence and how gender and social inequality in the community exist with support from lack of services to support women's families and high level of employment.

Societal level: Larger societal factors that "create an acceptable climate for violence, reduce inhibitions against violence." The theory also recognizes social cultural norms that diminish the status of women and children and other marginalized groups. It also goes beyond to explain how social, economic, and health policies lead to poor living standards or socio-economic inequality without forgetting cultural norms that promote or glorify violence including physical punishment and lack of adequate legislation.

Relationship Level **Community Level** Societal Level Individual Level Poverty · Men's superiority Multiple partners Lack of social Education Relationship and dominance support over women satisfaction or Alcohol use Acceptance of marital conflict Employment Childhood history opportunities Arranged or forced violence of abuse or **Cultural Practices** marriages trauma (honor killings and virginity testing Laws and policies

Figure: 2.1 Ecological Theory for Gender Based Violence

Source: Adopted Model from WHO (2012)

3.0 Methodology

3.1 Study Area

This study was conducted in five Districts; Kinondoni, Kigamboni, Ilala, Temeke, and Ubungo of Dar es Salaam region. This region was selected because it has the highest concentration of people over 6 million and very high incidences of gender-based violence amidst numerous police gender desks at every district (National Bureau of Statistics, 2022)

3.2 Research Design

The study used descriptive research design as it enabled the researcher to provide more insight into police gender desks and gender-based violence. Moreover, descriptive research design is a type of research design that aims to obtain information and systematically describe a phenomenon, situation, or population. More specifically, the design helped to answer the what, when, and where questions.

3.3 Research Approach

This study used a mixed approach involving the use of both qualitative and quantitative data which was analyzed. This was due to the nature of the study which required both qualitative and quantitative data to gain a wider perspective on the role of police gender desks in combating Gender Based Violence.

3.4 Sample size of the study

The study used Yamane's (1967) formula to obtain the sample size for quantitative data collection. Using the Yamane (1967) formula, the minimum sample size was obtained to meet the intended objectives of the study.

$$n = \frac{N}{1 + N(e)^2}$$

N =the Total population, in this case 85

e = the degree of confidence interval (5% is the most recommended given the data accuracy requirement)

n =the sample size.

$$n = \frac{85}{1+85(0.05)^2}$$

$$n = \frac{85}{1+85(0.0025)}$$

$$=\frac{85}{1.2125^{\square}}=70$$

3.5 Sampling technique

Both probability and non-probability sampling techniques were used. Non-probability sampling employed purposive sampling where the study area was selected purposively because of the high GBV incidences reported (URT, 2021). Probability sampling employed simple random sampling techniques where police officers working under police gender desk were selected randomly.

3.6 Data Collection Methods

The study involved both primary and secondary data

3.6.1 Primary Data Collection Methods

3.6.1.1 Survey

Survey was conducted using questionnaires tool for data collection which comprised closed and open-ended questions. The questionnaires was administered to respondents (police officers) working under PGD.

3.6.1.2 In-depth Interview

The interview guide was used to collect data from key informants who have additional information on gender-based violence and who also know about how PGD works.

3.6.2 Secondary Data

Secondary data involves written documents or recorded materials for example: books, past papers journals a book of accounts, and any related documented data. This tool was used because it was instrumental in collecting vast related historical data which acted as guiding principles for GBV cases.

4.0 Results and Discussion

This section presents and discusses socio-demographic components of respondents which are sex, age, marital status, and education level. Also working experience of an individual was among the variable under assessment.

4.1 Social Demographic Characteristics of the Respondents

4.1.1 Sex of the Respondents

Results depicted in Table 4.1 show that the majority (58.6%) of the respondents are female whereas males constituted (41.4%). This implies that the police gender desk is under the administration of female officers. Having more female at gender desk gives an opportunity to victims to freely open up and share their challenges related to GBV as majority of the GBV victims are women (UN Women, 2021).

4.1.2 Age of Respondents

Findings as depicted from Table 4.1 indicate that a substantial number (45.7%) of the respondents were aged between 36-45 years followed by 27.1% of the respondents who were aged between 46-55 years while (22.9%) of them were aged between 26-35 years. Others including 2.9% of the respondents had ages ranging from 56-65 years, and 1.4% of them had the age ranges from 18-25

years. Findings imply that most of the police officers are adults who are deemed to be wise and competent in the dispensation of their duties related to gender based violence's.

4.1.3 Marital Status of the Respondents

Results as depicted in Table 4.1 show that the majorities (74.3%) of the respondents are married, (11.4%) are divorced, and (10.0%) are single whereas (4.3%) are widows. The above findings are indicative of the fact that most of the police officers are married this status gives them a better insight on GBV aspects since they also experience or witness such issues in their respective communities starting from their families where GBV is also initiated.

4.1.4 Education Level of the Respondents

Results as depicted from Table 4.1 indicate that majority (47.1%) of the respondents had certificate level of education. This justifies that most of the police officers working under police gender desk have certificate education which they attained after completion of secondary education. However, other respondents (31.5%) of them had a diploma education level followed by (17.1%) of the respondents with a bachelor's degree education level, and (4.3%) of them had postgraduate education.

4.1.5 Working Experience of Respondents

Working experience was also examined as one of the socio-demographic variable of the respondents. Results as shown in Table 4.1 reveal that the majority (55.7%) of the respondents have served for 6 to 12 years, (27.1%) have served for more than 12 years whereas (17.2%) have served for 1 to 6 years. The findings imply that most of respondents have considerably good years and therefore can be deemed to have amassed vast experience and exposure with regards to police desk aspects and GBV issues. Due to vast experience they have accurate and relevant opinions on counteracting issues related to GBV. Their gigantic experience also tells that respondents are familiar with most of the cases related to GBV cases prevailing in their surrounding communities.

Table 4.1: Social Demographic Characteristics of Respondents

| Sex of the respondent | | | | |
|----------------------------------|----|------|--|--|
| Male | 29 | 41.4 | | |
| Female | 41 | 58.6 | | |
| Age of the respondents | | | | |
| 18-25 | 1 | 1.4 | | |
| 26-35 | 16 | 22.9 | | |
| 36-45 | 32 | 45.7 | | |
| 46-55 | 19 | 27.1 | | |
| 56-65 | 2 | 2.9 | | |
| Above 65 | - | - | | |
| Marital status of the respondent | | | | |
| Single | 7 | 10.0 | | |

| Married | 52 | 74.3 | |
|---|----|------|--|
| Widow | 3 | 4.3 | |
| Divorced | 8 | 11.4 | |
| Education level of the respondents | | | |
| No Formal Education | - | - | |
| Primary Education | - | - | |
| Secondary Education | - | - | |
| Certificate education | 33 | 47.1 | |
| Diploma Education | 22 | 31.5 | |
| Bachelor Degree education | 12 | 17.1 | |
| Postgraduate education | 3 | 4.3 | |
| Working experience of the respondents | | | |
| Less than 6 years | 12 | 17.2 | |
| 6 to 12 years | 39 | 55.7 | |
| More than 12 years | 19 | 27.1 | |

Source: Survey Data, 2023

4.3 Common GBV Cases Attended at Police Gender Desk

Results as depicted in Figure 4.2 indicate common cases attended at PGD in the study area:-

4.3.1 Battering

Results as depicted from Figure 4.2 show that (24%) of the respondents identified battery as the leading GBV case in the study area. Every day women suffers from beatings and physical abuse. This position is also noted by Vigurs et al (2016) who argues that gender-based violence can include physical harm. Similar studies by Bwalya (2010) identified spouse battery as one of the common GBV acts in Zambia. However, the report by World Bank (2022), coined that physical gender violence is a major threat to global public health and poses significant barriers to the advancement of women's health. A current Afrobarometer report as given by Msafiri (2023) pointed out that 4 in 10 Tanzanian women have experienced physical violence, and 17% have suffered sexual violence. Only about half of survivors seek assistance. While 3 in 10 girls experience sexual violence before the age of 18, and more than 1 in 3 are married as minors. Nevertheless, UN Women (2021) assessment report on gender-based violence noted that the country's laws lack prohibitions against domestic violence and marital rape and that enforcement suffers from weak investigations, under-reporting, and corruption.

During an interview with one of the police officers commented that.

4.3.2 Family/Children Neglect

[&]quot;Almost every day we do receive GBV cases from women who are bitten by their husbands. Sometimes they are bitten by their boyfriends who are not even known to their parents or relatives"

Results as shown from Figure 4.2 shown that (21%) of the respondents contended that family/children neglect are common GBV cases mostly attended at PGD at the study area. The findings imply that parents deprive their children of their basic needs, such as the failure to provide adequate supervision, health care, clothing, or housing, as well as other physical, emotional, social, educational, and safety needs. Moreover, this position is also in line with (Ruso, 2019) who noted that sometimes, a parent might become physically or mentally unable to care for a child, such as in cases of serious illness or injury, or untreated depression or anxiety. Other times, alcohol or drug abuse may seriously impair judgment and the ability to keep a child safe.

4.3.3 Sexual Abuse, Harassment and Exploitation

Findings as depicted from Figure 4.2 show that (17%) of the respondents denoted that acts of sexual harassment, abuse and exploitation is among the GBV cases reported often at the PGD. This implies that the instances of sexual abuse, harassment and exploitation are still prevailing in the study area. This position is in line with Ndeje (2014) who asserted that gender-based violence can include sexual abuse and exploitation. The study also agrees with UN Women report (2021) which reported that sexual violence is referred to common gender based violence in developing countries. Moreover, this study also agrees with the European Union report of 2021 which acknowledged that in 2021 European Union GBV one stop Centers had received 6,246 GBV cases of which 4,499 cases (67.87%) were sexual violence cases.

Findings related to the Focus Group Discussion conducted at Temeke Municipal where respondents reported that.

Most of women don't tell anybody about the sexual violence they underwent and did not seek help from anybody due to the limited availability of formal services, financial constraints, empowerment and fear of stigma.

4.3.4 Property Grabbing

Findings as shown from Figure 4.2 indicate that (16%) of the respondents responded that that property grabbing is a common GBV case reported at PGD. Moreover, the study notes that some women are disenfranchised their rights to property by men who grab such properties and this position is also noted by Bwalya (2010) who identified property grabbing as one of the common GBV acts in Zambia. The situation is increasing especially in developing countries. A study conducted by UNDP, (2020) noticed that property grabbing is a symptom of deepening poverty in Africa, which reflects fundamental failures in rural development in the coming years. Findings correspond to the interview conducted at the Ministry of Home Affairs where a respondent said that

Property grabbing is a new form of gendered violence against women, threatening the security of women across the country. This is mostly done particularly to where men relatives tends to still women properties by force and sometimes it is resulted weakened customary practice and social safety nets that used to provide support to widowed women and their children. The situation has been costing some women lives, while other women have lost their shelter and source of livelihoods, and have become destitute. The

harassment and humiliation that often accompany property grabbing further strip women of their self- esteem, and affecting their ability to defend their rights.

4.3.5 Coercion, Manipulation and Shameful Acts

Coercion is forcing, or attempting to force, another person to engage in behaviours against their will by using threats, verbal insistence, manipulation, deception, cultural expectations or economic power. Findings as shown from Figure 4.2 shows that (8%) of the respondents reported that coercion, manipulation and shameful acts are among the mentioned GBV cases reported at PGD in the study area. This implies that subjecting women to shameful acts coupled with manipulations undermines efforts of fighting for women's rights. This is also highlighted by (Ferguson et al., 2004, and Vigurs et al., 2016) who propounded that common GBV cases include coercion and manipulation. However, Nyange et al., (2016) reported that intimate partner violence (IPV) is among the serious form of sexual coercion, and psychological abuse in most of developing countries. Findings were also supported by the interview conducted at Kinondoni District where respondents reported that.

Regrettably, sexual coercion is also a common reality in the lives of women and girls in Kinondoni Municipal. Women always are reported to be the victim of rape.

4.3.6 Economic Exploitation

Findings as shown in Figure 4.2 indicate that (7%) of the respondents denoted that economic exploitation is among the key GBV cases in Dar es Salaam and this implies that instances of women being used as tools for economic gain still looms despite the existence of PGD to curb such acts. This position is also shared by Darak et al., (2016) who notes that some of the common GBV cases incudes economic exploitation.

4.3.7 Psychological Torture

Findings from Figure 4.2 depicted that (5%) of the respondents mentioned psychological torture as among the GBV cases reported at PGD in the study area. This implies that GBV victims are psychologically tortured leading to trauma. Findings by Bonilla-Algovia (2020) coined that GBV is also associated with poor long-term mental health such as anxiety, depression and post-traumatic stress disorder (PTSD).

4.3.8 Femicide

According to Adarge et al., (2018) explained the term femicide as the killing of women and girls on account of their gender, perpetrated or tolerated by both private and public actors. It covers, inter alia, the murder of a woman as a result of intimate partner violence, the torture and misogynistic slaying of women, the killing of women and girls in the name of so-called honour and other harmful-practice-related killings. Findings as shown from Figure 4.2 show that (2%) of the respondents reported that femicide is also among of the less reported GBV cases. Woman and girls are the victims of femicide as there some cases where they have been reported to be killed by their partners. The targeted killing of women and girls in the context of armed conflict, and cases

of femicide connected with gangs, organized crime and trafficking. Some killings happened because of fearful neighbors who believed them to be witches, victims often being elderly women with some behavior or appearance perceived to be suspicious. Data from Legal and Human Rights Centre (LHRC) revealed that between 2005 and 2011, averages of 500 elderly people were killed due to suspicions that they were witches.

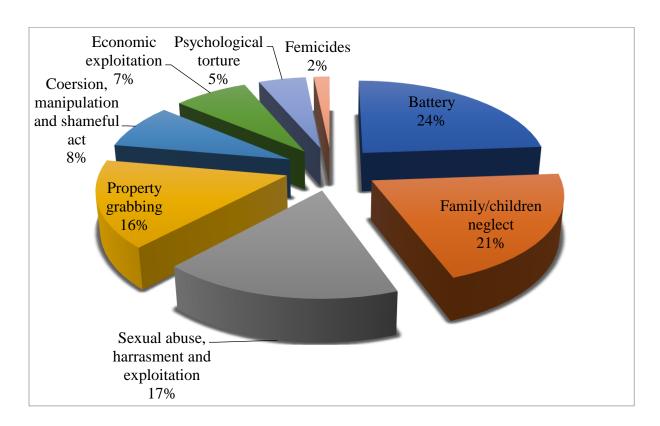


Figure 4.2: Common GBV Cases attended at Police Gender Desk

Source: Survey data, 2022

4.4 Challenges Facing Police Gender Desks in Countering GBV

The police officers provided their insights into the challenges facing police desks in countering GBV cases. Here are the challenges;

4.4.1 Delays in reporting gender-based violence cases

Results as reported in Figure 4.3 show that (22%) of the respondents asserted that delays in reporting GBV cases are a great challenge facing police offices to deal with GBV cases. Moreover, the study noted that in many cases the victims and society take very long time to alert police on cases of GBV which often are brought to police very late after the occurrence of acts rather than reporting to police early enough to allow police to have immediate investigation reports for solving the pertaining problem.

The above position is also shared by medical personnel at Temeke District who contended that:

"In many cases, the victims of gender-based violence come to the police too late, yet such cases would have been avoided if they would have reported the matter earlier to the authorities for immediate action"

The above findings imply that it is common practice for victims and the general society to witness GBV acts without reporting either to the local authorities or to the police for immediate action. Moreover, this study also agrees with Sikira et al., (2010) who showed that many GBV cases in Tanzania go unresolved because they are late reported.

4.4.2 Lack of adequate special rooms

Results from Figure 4.3 also show that 8% of the respondents responded that lack of adequate special rooms is a challenge, because without having special rooms for attending GBV cases it ultimately makes it difficult for interrogations between victims and perpetrators. Officers sometimes are forced to have the victims and offenders in the same room during interrogations, the situation which jeopardizes the whole process of investigations. According to the UNFPA (2018) report pointed out that in Kenya there is no one-stop center where GBV survivors are attended at one location despite the GBV cases being on the rise, this situation arise the challenge for police to effectively attend GBV cases. Gender desks are only located in police stations and hospitals with limited spaces for responsible officers to attend to the victims. Thus, for effective GBV fighting adequate special rooms are required.

4.4.3 Limited robust equipment

Results as presented in Figure 4.3 show that 7% of the police gender desks are constrained by a lack of robust equipment to effectively handle investigations, interrogations and process different cases of GBV which creates delays and other related inefficiencies. This implies that the officers are not given up-to-date high-tech gadgets and equipment which impedes their ability to exteriorly handle GBV cases with precision. Findings correspond to those by Musa et al., (2019) who asserted that an insufficient number of police officers, limited professional equipment and lack of budget to operate gender desk programs for building offices are among the challenging of gender desk in Tanzania.

4.4.4 Reluctance of victims to open-up

Results as shown in Figure 4.3 indicated that 10% of the respondents agreed that some of the victims for one reason or another fear and are not fully willing to open up and narrate the whole issue of GBV. The situation makes the investigation process lengthy and complex and hampers effectiveness of police gender desk to deal with GBV cases. This implies that some GBV victims for reasons best known to them do not freely tell the whole correct story about what happened and this creates time wastage in investigations and hardship in establishing the actual truth and facts about GBV cases.

The above findings agree with Nyage et al., (2017) who argued that social, cultural, poverty, and patriarchal system is a major causes of gender-based violence which affects much more women such as rape, assault, domestic violence, battering, and that some victims are reluctant to open up to the authorities. Therefore, it needs extra effort from the Government to advertise the gender desk extensively and add awareness community campaign on openness to report GBV cases.

4.4.5 Difficult in gathering evidence

Results as shown from Figure 4.3 show that 12% of the respondents agree that it is difficult to gather evidence owing to the complex nature of gender-based violence. Most of the GBV cases are marital issues which many societies consider as private matters. Establishing evidence is difficulty because most of the people do not want to give support to the investigators they handles GBV cases with high secrets. During interview with one of the officer at Kigamboni reported that. "It has been very difficult to establish evidences of GBV cases because people do not support police officers to gather required evidence for them to take action. Some of them hide evidence because they don't want to see victims who in on or another are their friends or relatives are reported to the police gender desk". The situation of establishing GBV cases requires clear evidence and if society don't support investigators it can be very difficult to fight GBV incidences in the community.

4.4.6 Low motivation

Results from Figure 4.3 show that 5% of the respondents argued that low allowances is also a challenge to fight GBV cases. This situation happens because some of the police officers deal with GBV cases while they are under hardship conditions which makes them fail to transact GBV cases effectively. Lack of enough budgets makes investigators not to have effective motivation to deal with GBV cases. Findings corresponds to findings by Mussa et al., (2019) who asserted that lack of enough budget creates less motivations among officers who deal with GBV cases.

4.4.7 Premature withdraw of cases by victims

Results as depicted in Figure 4.3 show that 15% of the respondents connote that victims who once reported cases of abuse turn around to unceremoniously demand police to drop the case due to personal reasons and this undermines effective service of justice and general police work. This implies that it's a noted practice by some victims who reported their case to the police turn back and demand their case to be dropped immediately and some of them deny that they were even forced to report their cases to police gender desk. During interview with one of the investigator at Ubungo District said that. "It has been very challenging to us when investigating GBV cases as it

gets to the point that some of our clients especially victims come back to withdraw their cases especially when the final judgment is close. This has been happening under the influence of their close friends, relatives and parents who sudden feel tender pity to the GBV perpetuators especially when it happens that are their relatives".

4.4.8 Undue interference

Results from Figure 4.3 show that 3% of the respondents presaged that there are undue inferences which is the challenge to the performance of GBV cases. Normally power from authorities including bosses, political figures, and family members interfere GBV cases. Results corresponds to ZAFELA report (2019) which reported that sometimes GBV victims are driven into decisions they don't agree by authorities e.g. bosses, spouses, political figures, and social leaders who in one or another are reported as perpetuators.

4.4.9 Inadequate professional training

Results as depicted in Figure 4.3 show that 9% of the respondents noted that most officers under the gender desk lack adequate professional training on GBV. This implies that there is no robust systematic and periodic program on GBV related courses for officers to keep updated for effective dispensation on GBV issues. Normally GBV cases are fueled by technology thus training especially on the current technology is essential in fighting GBV cases. Findings corresponds to that of Jassal, (2020) which pointed out that improved technology can help to effectively fight gender based violence's. Also the study by Kalumanga (2024) claimed that gender norms are the root causes for GBV cases to increase in communities. The study went further and pointed out that those patriarchy supported norms e.g. Female Genital Mutilations escalate the existence of GBV. Thus, special trainings are required in countering bad existing gender norms in societies.

4.4.10 Loss of confidence to Police Gender Desk

Results from Figure 4.3 show that 2% of the respondents asserted that some victims have lost confidence to police gender desk as a realistic tool to fight gander based violence. This implies that some people have lost faith to take their cases to the desk with an assumption that they don't get the real help they want. Findings are in agreement with Ndamukama, (2016), and Simmon et al., (2016) who reported that law enforcement agencies are not adequately facilitated to deal with gender-based violence cases because people take action when they encounter GBV cases and fail to report to the police who are commissioned to deal with GBV cases.

4.4.11 Fearing to report GBV cases to police.

Results from Figure 4.3 also show that 7% of the respondents indicates that fearing to report GBV cases to the police gender desk is a also a challenge. This challenge happens to the fact that there are community bad perceptions on fearing to attend to police and report any cases especially if it is a family based case, this notion has caused police officers to operate under high investigative mechanism because when they call people to attend at the police gender desk they feel shy and fear to attend. During interview with one of the key respondents at Temeke District reported that... "Community have bad notion with police, I have witnessed different cases where people feared to

attend at police station. Sometimes people might have some problems to report at the police but they fear with the notion that if relatives and community members know that you have reported them to police they will label you as bad man".

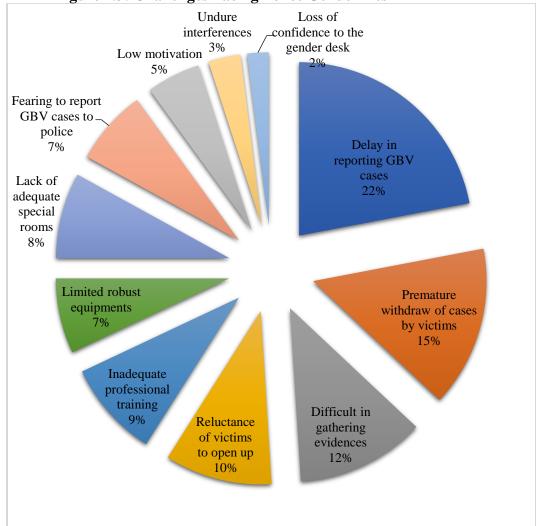


Figure 4.3: Challenges Facing Police Gender Desk

Source: Survey Data, 2022

5.0 Conclusion and Recommendations

The Police gender desk is a realistic tool to fight gender based violence prevailing in most of the communities in Tanzania. The most cases reported at PGD are: battery, family/children neglect,

sexual abuse, harassment, exploitation, property grabbing etc. However, common challenges facing PGD includes; delay in reporting GBV cases, premature withdraw of cases by victims, lack of support when gathering evidence, reluctance of victims to open up, limited robust equipment's, lack of special professional training among police officers, and budget etc. In order to make the PGD realistic and most effective to fight gender based violence's here are the recommendations:

- i) The government should increase support to the PGD by providing special relevant technical professional training to the police so that they gain the capacity to fight GBV in the globalized world perspectives.
- ii) Infrastructure should be well improved thus both victims and perpetrators can be listened to separately.
- iii) Cultural norms should be learned enough when dealing with GBV cases. Thus, the government and other stakeholders should work to fight gender norms especially those that contribute to GBV.
- iv) The community should be well capacitated for them to have the freedom to report any GBV cases at PGD thus; police officers should not be rude when attending people with GBV cases.
- v) For more effectiveness the PGD should increase rights and justice and minimize bias particularly when dealing with potential people who in one or another are GBV perpetuators.

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