Coping Strategies Adopted by Intimate Partner Violence Survivors: A Comprehensive Analysis in Dar es Salaam, Tanzania

Godlove Barikiel Matemba[1]
Elizabeth Lulu Genda[2]
Moses January Ndunguru[3]

[1]godlove.matemba@ticd.ac.tz/godmatemba@gmail.com
[2]elgenda@mzumbe.ac.tz/elizabeth.genda@mu.ac.tz
[3]mjndunguru@mzumbe.ac.tz/moses.ndunguru@mu.ac.tz

[1]https://orcid.org/0009-0002-9019-5851
[2]https://orcid.org/0009-0007-7875-6421
[3]https://orcid.org/0009-0001-3034-4870

[1]Tengeru Institute of Community Development (TICD), [2,3]Mzumbe University, [1,2,3]Tanzania

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ABSTRACT

Globally, 27% of ever-married women have experienced intimate partner violence at some point in their lives. In Tanzania, intimate partner violence is also an alarmingly prevalent problem affecting 39% of ever-married women aged 15–49 at some point in their lifetime. In the Dar es Salaam region, reports show increasing intimate partner homicides and divorce cases. This study, guided by Resilience Theory, analysed the coping strategies intimate partner survivors use to manage violent experiences at the household level in the Dar es Salaam region, Tanzania. Using a cross-sectional mixed-methods approach, data were collected through questionnaires, in-depth interviews, and focus group discussions. Quantitative data from 280 systematically sampled survivors were analyzed using descriptive statistics, while qualitative data from two religious leaders, nine social welfare officials, and 34 intimate survivors were thematically analyzed. The findings revealed that separation (30%), escape avoidance (25%), and problem-solving (18%) were considered as effective coping strategies, while fighting back (15%) and self-control (12%) were regarded as unproductive ones. This challenges conventional ideas that equate resilience with confrontation or emotional suppression. Based on the findings, the study recommends prioritizing survivor-informed coping strategies and adopting inclusive, multi-sectorial, and tailored support interventions that involve the government, religious leaders, and non-governmental organizations.

Keywords: Coping Strategies, Intimate Partner Violence, Resilience Theory, Survivors, Tanzania

I. INTRODUCTION

Intimate partner violence is a critical human rights violation and a significant public health and development issue. Globally, 27% of ever-married and cohabiting women have experienced intimate partner violence at some point in their lives (World Health Organisation [WHO], 2021; United Nations High Commissioner for Refugees [UNHCR], 2020). In the United States, approximately 41% of female intimate partner violence survivors have experienced physical injury in their lifetime compared to 14% of male survivors (Centers for Disease Control and Prevention [CDC], 2019), whereby 1 in 4 females and 1 in 7 men reported being a victim of physical violence by an intimate partner.

Sub-Saharan Africa has the highest incidence of intimate partner violence globally at 33%, with various forms of physical, emotional, economic, and sexual violence being common (WHO, 2021). The region faces a high level of intimate partner violence, with Malawi being the leading 73. 2% incidence due to cultural beliefs that support male sexual aggression (Kapiga et al., 2019). Other nations also exhibit alarmingly high rates, including the Gambia (61%), South Africa (55.5%), and Ghana (30%) (Adhena et al., 2020; Chilanga et al., 2020; Nyato et al., 2019).

In East Africa, intimate partner violence prevalence is estimated at 32.6% affecting nearly half of women and girls aged 15 to 49 (Kebede et al., 2022; Tanzania Demographic and Health Survey (TDHS), 2016; Kenya Demographic and Health Survey, 2015). Tanzania's intimate partner violence prevalence is 39%, higher than the global average (Chadambuka, 2020; NBS, 2022). The National Bureau of Statistics [NBS] (2022) revealed that four out of ten ever-married and cohabiting couples are reportedly committing a high number of intimate partner violence incidents in the mainland. Although national strategies such as the National Plan of Action to End Violence Against Women and Children (NPA-VAWC) exist to combat gender-based violence, the incidences of intimate partner violence persist (Magesa & Kadege, 2016; Abiona & Koppensteiner, 2018; Abramsky et al., 2019).

Studies in other low and middle-income countries show that intimate partner violence negatively affects women's ability to generate and control economic resources. Research in Uganda and South Africa, for example, links intimate partner violence to reduced labour force participation, income, and restricted access to productive assets among women (Vyas & Watts, 2009; Duvvury et al., 2013).

Despite the well-documented consequences of intimate partner violence, there is limited empirical evidence in Tanzania regarding the coping strategies survivors adopt. This research gap hinders the development of effective context-sensitive interventions and may worsen outcomes such as increased divorce and intimate partner homicides. Therefore, this study aims to explore the coping strategies of intimate partner violence survivors to inform a better support system.

1.1 Statement of the Problem

Despite global, regional, and national efforts to combat intimate partner violence, intimate partner violence remains a pervasive issue in Tanzania, with a prevalence rate of 39% significantly higher than the global average. This problem is particularly acute in the Dar es Salaam region, which has seen an alarming increase in intimate partner homicides and divorce cases, as highlighted by recent reports (WHO, 2021; Njoji, 2021; Sauwa, 2022; NBS, 2022).

Although government policies and NGOs' initiatives exist, they have not fully mitigated the problem. Survivors face several lasting consequences, including physical injuries, psychological trauma, exposure to Human Immunodeficiency Virus (HIV), homicides, and long-term health risks (Chadambuka, 2022; Güler et al., 2024; Mengo, 2016). Furthermore, there is a notable gap in research on the effective coping strategies that survivors in Tanzania adopt to manage their violent experience.

This study explores the coping mechanisms of intimate partner violence survivors. The findings provided crucial insights to inform more effective, context-specific interventions and support systems, ultimately helping to reduce the severe outcomes of intimate partner violence and its devastating impact on families and children.

II. LITERATURE REVIEW

2.1 Theoretical Review

2.1.1 Resilience Theory

Resilience theory, proposed by Garmezy in 1991, provides a framework for understanding how intimate partner survivors in Dar es Salaam recover from adversity. The theory highlights important factors such as individual (self-regulations, optimism), family (e.g., emotional support), and external (e.g., community resources, legal instruments) that foster resilience. The theory also suggests variables characterise individuals' help-seeking behaviour, including positive self-esteem, hardness, strong coping skills, and a sense of coherence, as well as self-efficacy, risk-taking, a low fear of failure, determination, perseverance, and a high tolerance for uncertainty. This theory is directly applicable to the study's focus on coping strategies, as it underscores how survivors can leverage resilience to mitigate the impact of intimate partner violence and enhance household well-being.

2.2 Empirical Review

Global and regional studies highlight diverse coping strategies adopted by intimate partner violence survivors, shaped by cultural and social contexts, which are relevant to understanding survivors' responses in Dar es Salaam. In Thailand, survivors often remain silent due to socio stigma but seek support from family, police, or religious groups when violence intensifies (Thananowan et al., 2021). Despair and suicide were also identified in Thai women when survivors ran out of strategies to manage their violent experiences.

In Vietnam, emotional control and help-seeking from family or friends are common; meanwhile, stigma around divorce discourages leaving abuse (Herrero-Arias et al., 2021). In African settings, such as Nigeria and South Africa, survivors employ help-seeking (from family, healthcare, or police), emotional regulation, problem avoidance, and spiritual coping, such as prayers, substance abuse, and retaliation in coping with violence (Akinbode & Carter, 2025; Pertek, 2022; Sere et al., 2021; Okonkwo et al., 2024). In Zimbabwe, patriarchal norms lead survivors to accept abuse or rely on faith-based coping (Chadambuka, 2022).

Asimire (2022) studied strategies employed by intimate partner violence survivors to deal with such violence in Kenya. The study in Kenya revealed that survivors use silence to prevent escalation, seek advice from social figures, or report to authorities, although financial and logistical barriers limit help–seeking.

In Tanzania, a study in Mwanza found women using engagement strategies (eg, active opposition, help-seeking) for economic and emotional violence, and disengagement strategies (e.g., silence) for sexual violence to maintain peace (Dwarumpudi, 2022). In Dar es Salaam, men survivors employ counselling, religious services, substance abuse, or divorce (Athuman, 2023). These findings highlight a research gap in comprehensive coping strategies for both genders in Dar es Salaam, which this study aims to address to inform the development of tailored interventions.

III. METHODOLOGY

3.1 Research Design

This cross-sectional study integrates quantitative and qualitative methods to explore intimate partner violence coping strategies in depth. Qualitative approaches (interviews, focus group discussions) complement quantitative surveys to capture detailed survivor experience (Saunders et. al., 2012).

3.2 Location of the Study

The study purposively focused on the Dar es Salaam region for several compelling reasons, including a significant number of reported cases regarding intimate partner violence, such as spousal homicides, which regularly highlight increased divorce cases apart from increased broken marriages (Sauwa, 2022; Njoji, 2021; NBS, 2022; TDHS, 2016). Similarly, as the country's largest region and a major commercial and industrial hub, it boasts a substantial population of 5,383,728, accounting for 8.7% of the country's total population, comprising individuals from diverse backgrounds across the country (NBS, 2022). The mixed population groups and cultures from all regions and ethnic groups of Tanzania profoundly influence the residents' behavior, lifestyle, and household socio-economic dynamics. Kinondoni, Temeke, and Ilala municipalities were selected as the oldest municipalities with extensive records of past intimate partner violence experiences, due to their high population density and significant socio-economic and cultural diversity (NBS, 2022).

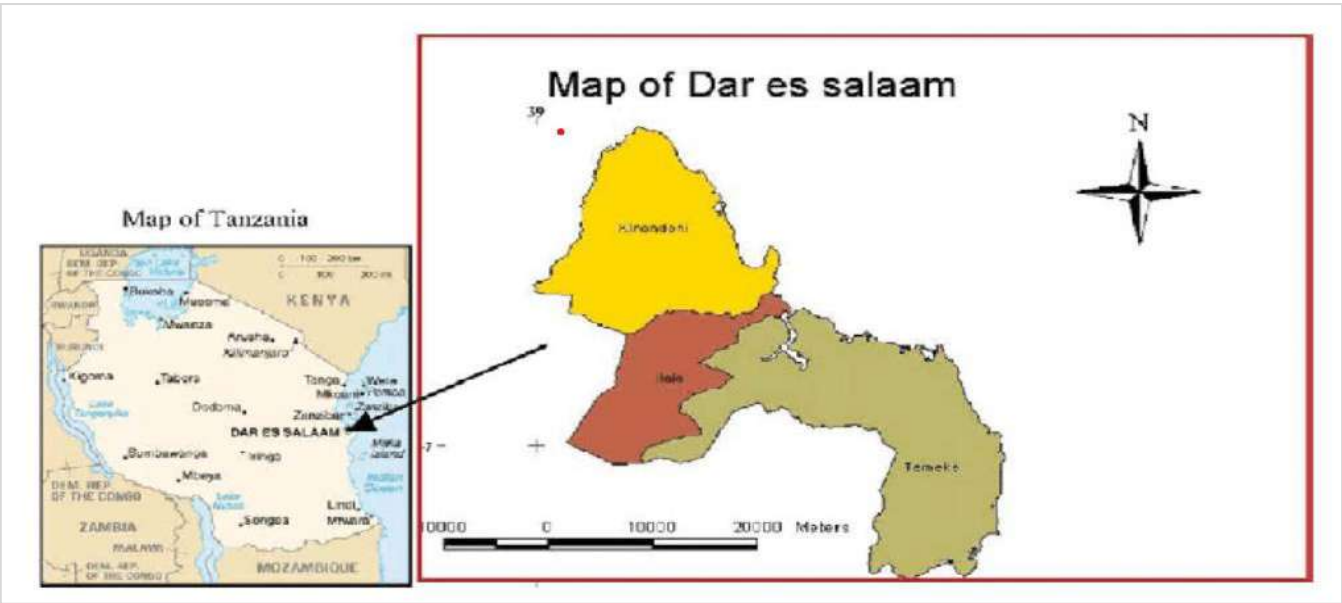

Figure 1

A Map of Dar es Salaam Region Showing the Study Areas – Kinondoni, Ilala, and Temeke municipalities.

3.3 Study Population

The target population of this study comprises ever-married and cohabiting intimate partners in Dar es Salaam, frequently reported as victims of spousal violence (Njoji, 2021; NBS, 2022). Inclusion criteria include those who experienced intimate partner violence, while those without such experiences are excluded. Key informants (social welfare officers, religious leaders, social workers) provide qualitative insights.

3.4 Sampling Technique and Sample Size Determination

3.4.1 Sampling Techniques

A multistage sampling technique was employed, whereby the Dar es Salaam region, specifically the municipalities of Kinondoni, Temeke, and Ilala, were purposefully selected. Wards, namely Bunju, Vingunguti, and Mbagala, were then chosen via a lottery. Systematic random sampling identified 280 survivors at the social welfare departments. Snowball and convenience sampling selected 34 intimate survivors for qualitative data, and purposive sampling identified 11 key informants (three social welfare officers, six social workers working with two religious leaders).

3.4.2 Sample Size

Using Taro Yamane's formula (Yamane, 1967) with 933 registered intimate partner violence cases seeking help across the social welfare departments at the time of data collection, and a 5%margin of error,

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

n=933/(1+933*0.0025)

n=933/3.3325

n=280 respondents

3.5 Data Collection Tools

This study employed face-to-face interviews, focus group discussions, and survey methods of data collection to gather information from the respective intimate partner survivors. For quantitative data, the questionnaire with both closed and open-ended questions was administered to intimate partner survivors. Moreover, in-depth semi-structured interviews were conducted for qualitative data from intimate partner survivors and the key informants to support the survivors' responses.

3.6 Treatment of Data Tools

3.6.1 Validity

Experts reviewed data collection tools for relevance and clarity. Content validity was tested with 30 intimate partner survivors during the 16 Days of Activism against Gender-Based Violence campaign, and research assistants were trained to ensure tool appropriateness.

3.6.2 Reliability

Tools were pretested with similar intimate partner violence survivors, with revisions based on feedback to ensure accurate data collection. Operational terms were clarified for respondents.

3.7 Data Analysis and Presentation

Quantitative data were analyzed using descriptive statistics in IBM SPSS version 20, and the results are presented in frequency and percentage tables. Qualitative data underwent deductive thematic analysis using NVivo 14.

3.8 Logical and Ethical Considerations

Research permits were obtained from Mzumbe University, where the researcher studied, and the Dar es Salaam regional administrative secretary. Informed consent was obtained from the survivors, with privacy and confidentiality ensured through the use of self-administered questionnaires and the storage of anonymized data for confidentiality purposes.

IV. FINDINGS & DISCUSSION

4.1 Coping Strategies Employed by Intimate Partner Violence Survivors

Understanding how survivors cope with intimate partner violence is crucial for developing effective support systems and interventions. Coping strategies, the cognitive and behavioural efforts used to manage stressors, play a pivotal role in mediating the impact of intimate partner violence. The reported Chi-square value of 92.6202*** (p=0.000), as in Table 1, indicates a statistically significant association, demonstrating that survivors' choice of coping strategies is strongly influenced by their underlying motives. Moreover, a p-value of 0.000 indicates that the observed distribution is unlikely to be due to random chance.

The data in Table 1 shows that distancing (separation) is the most frequently used coping strategy with 84 (30%) responses. This strategy is particularly prevalent among those who cited "for the sake of my children" (46 out of 84), indicating a protective motivation. On the other hand, escape avoidance and problem-solving approaches were commonly used, primarily to avoid queries (34 out of 70 for escape avoidance) and to protect children (26 out of 50 for problem-solving), respectively. In contrast, confronting (fighting back) and self-controlling (emotional regulation) were the least used strategies. This suggests that confrontation is not the preferred approach due to fear of escalation or cultural constraints. Emotional regulation is also not a preferred strategy, as survivors feel it hinders their ability to seek help and report cases to the responsible authorities.

These findings carry significant implications for designing interventions and support programs for individuals experiencing violence. Since most survivors prioritize emotional safety, family protection, and conflict avoidance, support systems should be tailored to reinforce peaceful coping mechanisms while also addressing underlying power dynamics and psychological burdens. Programs should consider socio-cultural norms and provide safe spaces and dialogue platforms that can strengthen problem-solving and emotional self-regulation strategies, reducing the stigma around separation or escape as valid coping mechanisms.

Table 1

Mostly Applied Coping Strategies

Coping strategies are primarily employed in violent situations, and there are valid reasons to prefer this approach.								
Coping strategies are mainly applied when in a violent situation.	Reasons for a strategy preferred (in frequency)							
	For children's sake	For accumulated wealth	I do not like to be oppressed	I fight back for my rights	I do not like queries	Total	Percentage	Chi-Square
Confronting (fighting back)	8	14	6	7	7	42	15	
Distancing (separation)	46	8	16	3	11	84	30	
Problem solving (convene a talk/discussion for peace seeking)	26	2	5	0	17	50	18	
Self-controlling (emotional regulation/take it easy)	8	2	1	3	20	34	12	92.6202***
Escape avoidance (running away for a while)	16	2	14	4	34	70	25	
Total	104	28	42	17	89	280	100	

Note: ***implies significance at 1%

4.1.1 Fighting Back Coping Strategy

The survey revealed that 42 (15%) of 280 intimate partner violence survivors used violence as a form of retaliation against their intimate partners, which explains the reported injuries and/or death among couples who choose to confront rather than use peaceful means. An in-depth interview provided deeper insight, as one survivor explained.

> *How can I remain silent when I could fight back? This is no longer a colonized error where you are beaten and forced to stay quiet*. Another survivor added, *"There was nothing special he possessed that I could not fight back; I could not see being oppressed by a man. He has his income, and I have mine too."*

These narratives suggest that women survivors, particularly those with income or economic power, are more likely to fight back against their male perpetrators. The findings revealed that women who contributed wealth or tangible properties to their households are inclined to retaliate when they are victimized. A survivor reported, "I cannot agree; seeing the house and furniture we invested in together were just simply taken by a man whom we married with nothing possessed."

These findings align with Focus Group Discussions (FGDs), where participants expressed that the accumulation and investment, particularly by women, often contribute to conflict. "No one is ready to fight back for children; as children, they are there to stay. What matters are the assets, brother, until we divide them or we settle the violence," a participant stated.

The findings indicate that both men and women survivors are confronting each other, with women fighting back for their rights, seeking equality, and recognising their income as a key factor. This aligns with the research by Fanslow et al. (2015), which found that 261 (31%) women reported fighting back once or twice, while 278 (33%) reported fighting back more than twice. This underscores the prevalence of men's dominance and the culture of silence surrounding family matters and women's violations in both developed and developing countries.

The narratives imply that economic independence, particularly for women, fosters a sense of personal autonomy and resilience. This suggests that women who are economically independent or have contributed to wealth accumulation are less tolerant of harm and more inclined to confront their partners. These findings align with previous research by Afrin (2024), which suggests that empowered women, beyond individual earnings and education, collaborate with their husbands to provide advice, foster income-generating ventures, and oversee family resources. Therefore, they cannot simply tolerate violent experiences. These findings contrast with previous research (Fanslow et al., 2015; Telfar, 2022), which pointed out that women were motivated to fight back due to self-defence, with the severity of the violence, fear, and the defence of children, among other reasons.

Analysing these findings through a gender lens revealed that women's increased control over household resources and greater bargaining power can challenge male dominance, triggering intimate partner violence. Similarly, researchers frequently identify increased public exposure and mobility among women as intimate partner violence triggering factors regardless of their place of residence or level of education (Afrin, 2024).

Table 1 shows that most survivors who fought back did so to protect their accumulated wealth, while others did so for their children's rights. The presence of accumulated wealth or assets, particularly when women invest significantly more than men, makes fighting back during intimate partner violence inevitable. However, due to its negative consequences, such as severe physical injuries and/or death, the findings deem the fighting back strategy unproductive.

4.1.2 Separation Coping Strategy

The survey found that 84 (30%) of 280 couples supported separation as a coping strategy to manage violence after a period of marriage or cohabitation. The study's findings indicate that while legally married couples employed different strategies to maintain their relationships, cohabiting couples opted for separation. This finding aligns with prior research, which suggests that cohabiting couples are more likely to separate than those in legally married relationships, as they have not made the same commitment to each other as married couples (Douglas, 2024). A KIIs' narrator stated, "We used to file more cases involving cohabiting couples than those involving legally married couples." An in-depth interview with an intimate partner violence survivor provided further context,

> *We have cohabited for some years now, but I found it better to live with my two children in this single room. I had nowhere to go, as his parents are living in villages, and I cannot go to religious leaders, as we are neither legally married nor known to church elders.*

The survey shows that 46 out of 84 respondents chose separation for their children's sake, as they could not be away from them and had to continue caring for them. This concurs with in-depth interviews where respondents say,

"…as my God lives, I cannot tolerate seeing my children, and I am insulted every day with neither food, school bus fare, nor love. I decided to rent this single room to stay with my children and struggle harder for their happiness instead".

Another intimate partner violence survivor aptly remarked;

> *Let him take everything but not my little angel; I had better die for her, struggling to feed and raise her. Let her eat what I am eating and sleep where I am sleeping, rather than staying with such an idiot who slapped and insulted me; I can employ myself while living with my little angel anyway*.

These narratives suggest that cohabiting couples are more likely to separate than reconcile or seek help from responsible authorities. Moreover, cohabiting couples lack support from religious and legal systems, making separation their best option.

One key informant responded,

> *'Sometimes they had better quit and live their lives, as they might be killed. However, the issue arises when men agree to provide a stipend, but within a week or two, they disappear entirely and cannot be reached through their designated contacts.*

Another KII remarked, "Separation is the best option, as after some time or years, they may decide to live together, and marital life goes well rather than fighting back, which results in loss of lives or parts of the body".

Table 1 shows that some survivors chose separation due to their desire to care for their children, their distaste for oppression, and their aversion to household queries. These results indicate that spouses prioritized separation to maintain a peaceful life with their children, even in the face of challenging situations. An in-depth interview revealed that a complex living index sometimes prompted a survivor to engage in sex work to care for her two children after separating. The discussion revealed that most survivors opted for separation as a safer strategy.

A different scenario reveals that a woman was unable to pay her daughter's school fees, resulting in the student staying home for a week. This aligns with Anh & Huong's (2023) findings, which suggest that during a separation, children experience distress from daily demands, which lead to radicalization. As a result, they may join terror groups during their teenage years to earn a decent living. A complex living index hurts separated spouses, particularly women, as social norms limit their roles in promoting family loyalty and unity.

The findings revealed that some of these single parents, particularly women, face significant consequences. Due to unstable income-generating activities, it becomes increasingly difficult to provide for their young ones in terms of health-related issues, daily meals, school necessities, and decent housing conditions. This corroborates studies by Anh & Huong (2023) that separation is a step preceding divorce; thus, it disrupts the normal flow of finances and financial management within families, interfering with survivors' everyday lives, especially when their earnings are insufficient to cover expenses.

Furthermore, social stigma, along with cultural norms, influences the adoption of separation coping strategies more than fighting back or seeking divorce. Through a gender lens, the findings revealed that women survivors easily opt for separation as a means of freedom, to rethink their marital lives, and find another partner to overcome living difficulties. The findings revealed that single parents, especially teen parents, often lack the maturity, financial stability, and emotional resilience to navigate the complexities of raising children, particularly in the context of separation, which aligns with Anh & Huong (2023).

4.1.3 Escape Avoidance Coping Strategy

According to the survey, 70 (25%) of 280 intimate partner violence survivors agreed with temporarily fleeing the perpetrators to promote peace. Table 1 shows that 34 of 70 intimate partner survivors employed escape avoidance because they dislike queries, 16 opted for the same strategy for the sake of their children, and 14 mentioned disliking oppression. This strategy prevents physical harm and social and psychological torture. One respondent expressed in an in-depth interview, "I prefer to run away when things worsen and return later, rather than confiding my family's problems to friends or relatives, as they cannot provide any assistance".

Another survivor said,

> *Brother, there is nothing to lose by running away. Sometimes, marital lives can be very challenging, but nothing is impossible. We typically settle things when he cools down. Even though he used to be home for a very short time, I ran away for a while for the sake of peace and my children as well.*

This narrative implies that, despite being termed a temporary solution, running away is the best coping strategy, as it allows perpetrators to calm down and postpone their harmful intentions. Both women and men employed this strategy to maintain peace.

In one of the FGDs, some men explained how they employed the coping strategy by escaping the bitter, insulting words (psychological harm) from their female counterparts by going around and getting back late. Findings revealed that not all men falling into substance abuse intended to; some did so as a result of escape avoidance, and decided to forget the pains encountered at home.

Consequently, the findings imply that both men and women preferred this strategy to maintain peace, as it is a cost-effective alternative to waiting for the other partner to calm down. In-depth interviews revealed that women tend to escape avoidance by leaving the house or visiting a nearby friend for a short period before returning. Conversely, men tend to engage in alcohol consumption, visit gang groups for betting or pool table games, and return home late. These findings reveal the cultural norms of masculinity, which dictate that men can return home at any time or be fully drunk, while women experience the opposite situation.

Both men and women employ escape avoidance. In this passive coping strategy, survivors of intimate partner violence temporarily attempt to leave the situation to allow emotions to cool down and restore peace. This strategy enables survivors to prevent immediate physical or psychological harm. Studies by Shah et al. (2024) and Giff et al. (2014) show that survivors of intimate partner violence frequently resort to avoidance or distancing to avert additional violence or emotional harm, viewing intimate partner violence as a personal issue best addressed at home. The findings of the present study align with those of Shah et al. (2024) in India, which showed that survivors' entrenched fear of disclosure overshadowed the challenges they faced in accessing informal and formal support from professionals and available institutions. These challenges included a lack of transportation, financial means, childcare, and general awareness, which could potentially cause reputational damage for survivors, their natal family, and children, or worsen the perpetration of intimate partner violence.

Additionally, in the study area, societal norms surrounding muscularity favour men's escape avoidance coping strategies. The findings revealed that while women prioritise family units in their escape avoidance strategies, such as leaving home and seeking refuge with friends or neighbours, men tend to escape to places like bars, gang groups, or gambling venues, or engage in social withdrawal. Findings align with Gezinski et al. (2021) that the use of drugs and/or alcohol abuse by intimate partner survivors serves as an immediate and accessible coping strategy.

When analyzed through the lens of gender norms and cultural expectations, such escape avoidance coping strategies show that men feel entitled to self-soothe through alcohol and gambling because traditional masculine roles discourage seeking help. This supports the study by Radcliffe et al. (2021), which claims that women might choose to leave a dangerous situation without resorting to drugs, while men often avoid problems in ways that align with cultural values of toughness and self-reliance. They frequently turn to drugs—mainly heroin and crack, sometimes with alcohol—to cope with stress.

In escape avoidance, men seem to have more freedom to act without judgment. At the same time, women face greater social pressure to remain silent and endure the violent situation for the sake of family integrity, family loyalty, and privacy. Without discussion on the violent situation among intimate partners, the root causes of the conflict remain unaddressed. Thus, escape avoidance raises significant questions about its long-term efficacy and the broader implications for the survivors' well-being and relationships. To transform temporary escape avoidance into more sustainable solutions, the survivor should probe for the root cause of the problem and seek understanding to maintain a smooth marital life once the other spouse has cooled down.

4.1.4 Problem-Solving Coping Strategy

The problem-solving strategy was supported by 50 (18%) of 280 intimate partner survivors, as seen in Table 1, usually for their children's sake and to avoid queries. One survivor candidly reflected on this approach, stating,

> *I prefer to address issues head-on; therefore, I seek guidance from elders or our street executive officer to identify any mistakes, seek forgiveness, and move forward".* Additionally, another survivor said, *"when we are called for a meeting, they usually see I am right; just men dominance syndrome affect men, but with elders, nothing is wrong; he sometimes kneels to request forgiveness, and life goes on.*

Similarly, one of the KIIs stated, "By calling both of them together, we can have a friendly conversation and determine who is at fault. Knowing the root cause of the problem, we advise them and reach a good ending—shaking hands and going back home".

These findings imply that approaching intimate partner violence with a problem-solving mindset demonstrates incredible strength and resilience. While navigating intimate partner violence, it is important to prioritize safety strategies by seeking external support where necessary. Moreover, survivors from in-depth interviews revealed that problem-solving is the most effective strategy, as it involves not only resolving immediate violence or conflict but also maintaining long-term relationships and communal harmony.

The findings are consistent with Zonp et al. (2022), who highlighted that with problem-solving coping, survivors who employed formal strategies such as counselling services, calling the police, or seeking help from organisations and authorities, were more likely to be free of violence compared to those who did not receive professional support.

The present study's findings suggest that adopting a problem-solving mindset when navigating intimate partner violence can demonstrate significant strength and resilience. Survivors reported that they prefer this strategy as it emphasizes the critical role of dialogue and understanding the root causes of violence in achieving a favorable resolution; it is therefore considered a more effective coping strategy (Han et al., 2022). According to studies, survivors who employ problem-solving coping in seeking social support to deal with victimisation perceive it as a positive and beneficial approach, and react more positively than those who use avoidance (Karugahe & Lamber, 2021; Mahetta, 2021). The studies aptly assert that problem-solving coping strategies have proven to be more beneficial to the survivors in the long run, as they actively address the problem rather than making themselves feel better emotionally.

Finally, findings revealed that problem-solving coping strategies for intimate partner violence provide a culturally appropriate means of conflict resolution that incorporates community values and collective wisdom. While beneficial in certain circumstances, the strategy emphasizes the importance of balancing reconciliation with safety, making external assistance a vital component of the overall strategy for resolving intimate partner abuse (Crann & Barata, 2016). However, through a gender lens, the findings reveal that, in such masculine societies, women survivors were the most frequent initiators and beneficiaries of problem-solving coping strategies, as men appeared to have neither the time to seek a solution nor consensus while in violence.

4.1.5 Self-Control Coping Strategy

Regarding self-control, the findings indicate that 34 (12%) of 280 intimate partner survivors used this strategy primarily due to their aversion to questions and their desire to keep family matters confidential. From the in-depth interview, survivors have this to say:

> *I had better keep quiet; I know some of the survivors exposed their issues to relatives and social workers, but what they obtained was more than shame, and they kept on experiencing violence at home; moreover, some of them ended up in a state of separation.*

Another survivor said, "To whom should I take my family affairs? Who is more secure: religious leaders or social workers? I know a social worker who has stopped living with her husband due to the same issue".

The findings imply that intimate partner violence affects not just ordinary people but also leaders. Survivors expect their leaders to be the best examples, especially in marital affairs, due to the sensitivity of the matter. This agrees with a social worker who stated, "I also live with my children; we have been separated for some years".

Participants in the Focus Group Discussions (FGDs) confirmed that some intimate partner violence survivors used to remain silent despite experiencing sexual or physical violence. One participant from the FGD said,

> *Some survivors are experiencing physical harassment and other forced sex, but they keep quiet. I know one of my friends cried to me one day, and when I asked her what was wrong, she said she had been raped despite being a month postpartum*.

A religious leader further reinforced that some couples or survivors used to keep quiet about the violence they encountered, and when things got hot, they committed suicide. The religious leader once said,

> "*The problem is that they fear coming to religious leaders because they cohabitate, which denies them some rights. Survivors should confide in close friends, relatives, or religious leaders, as we are trained to handle such situations effectively*".

The statement highlights the significant concern of the survivor, who fears that disclosing the violence they experienced may not result in meaningful support, but instead lead to further shame or social isolation. Previous

studies (Schultz et al., 2021; Zonp et al., 2022) align with the findings, suggesting that social support from family and friends may not be sufficient to prevent or halt the perpetrators' violence.

Similarly, in the light of gender lenses, the findings revealed socio-cultural stigma and pressure on family matters prompted both men and women intimate survivors to fear disclosing their marital challenges, including the incidents of violence, which corroborate Caarls & Valk (2018). From this perspective, survivors believe that disclosing their violent experiences to family members, social workers, or external authorities exposes them to judgment and isolation. This aligns with the study by Anguzu et al. (2023) and Chadambuka (2022), which found that intimate partner survivors fear losing their marriages by expressing their violence experiences and making them their own. This fear leads to severe mental depression, stress, and trauma.

The present study's findings indicate that intimate survivors use self-control coping strategies due to their lack of trust in support systems such as social workers, religious leaders, and street executive officers. This corroborates previous research that shows survivors distrust those with authority, including police interventions, and disengage from social networks because of perceived unavailability or unhelpfulness (Schultz et al., 2021).

Despite a good number of 34 (12%) out of 280 intimate partner survivors who mentioned employing self-control coping strategies for the sake of peace, the findings reveal that such survivors experienced severe emotional stress, physical injuries, sexual, and economic harm. In the present study, one of the FGDs revealed that some intimate partner survivors are experiencing internalized trauma and protecting their privacy even at the cost of their lives. These cases reveal that self-control coping, in this context, is not just about managing external perceptions but also about coping with deep emotional pains in a way that survivors perceive as safer than speaking out.

As noted by one of the religious leaders in the in-depth interview, the risk of suicide is an alarming outcome of prolonged emotional and physical suffering that remains unaddressed. This aligns with previous studies conducted in Uganda and Zimbabwe, which found that intimate partner survivors, fearing community stigmatisation and divorce that could lead to the loss of their partners' financial support, are reluctant to disclose their violent experiences to healthcare workers, religious leaders, or police (Anguzu et al., 2023; Chadambuka, 2022).

The findings highlighted how difficult it is to exercise self-control when coping with intimate partner violence. They thereby termed it a less productive strategy due to its negative consequences, such as the risk of committing suicide. These prolonged emotional, sexual, and physical sufferings remain unaddressed, apart from internalised trauma. Despite giving the survivors a sense of autonomy and privacy, self-control frequently makes survivors feel even more alone, ashamed, and distressed because they do not trust the current support networks and fear judgment from others, which aligns with Mahetta (2021), who states that people are reluctant to talk about their experiences of abuse. Therefore, we urgently need better-integrated support networks to break the cycle of silence and offer survivors tangible channels for assistance, free from concerns about retaliation or further harm.

V. CONCLUSION & RECOMMENDATIONS

5.1 Conclusion

The study's findings indicated that both men and women commonly use problem-solving, emotional control, escape-avoidance, fighting back, and separation coping strategies to combat intimate partner violence. The quantitative data revealed that among intimate partner violence survivors, separation and escape avoidance are the most reported preferred strategies employed in the study area. The study findings highlight the need to move beyond generalised or theoretical models of coping and instead prioritise survivor-informed, context-specific understandings. Additionally, traditional masculine roles and the men-dominance syndrome often lead men to use coercive coping strategies, such as drug and alcohol abuse, as an immediate and accessible source of relief. In contrast, women employed strategies that prioritise the family unit, including leaving the home to seek refuge with friends or neighbours, as well as separation coping strategies. The study revealed that socio-economic factors, including women's abilities in engaging in income-generating activities, severe intimate partner violence, and the extent to which both parties accumulate assets and wealth, trigger the use of fighting back and separation.

5.2 Recommendations

This study recommends an inclusive multi-sector approach to support intimate partner survivors. This involves tailoring intervention to survivors' preferred coping strategies and includes several key areas. Legal reforms are necessary to advocate for changes that better protect survivors and hold perpetrators accountable. Cross-sector

collaboration among healthcare, education, law enforcement, and social services is essential for an integrated approach to prevention and intervention. Programs should be survivor-informed, addressing the specific needs and underlying power dynamics survivors face. Addressing socio-cultural norms is also crucial, as it involves creating safe spaces for dialogue and reducing the stigma associated with leaving a relationship. Furthermore, economic empowerment programs can help women achieve financial independence, which is vital for their ability to leave violent situations. Finally, mental health support and trauma counselling should be integrated into services to address the emotional distress experienced by survivors.

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