



RURAL PLANNING JOURNAL
 Website: <https://journals.irdp.ac.tz/index.php/rpj>
 DOI: <https://doi.org/10.59557/rpj.25.2.2025.186>



The Effectiveness of Community - Based Strategies in Ending Sexual Violence Against Women and Girls in Shinyanga Region

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ARTICLE INFO

ABSTRACT

Keywords

Gender

Women and girls

Sexual violence

Community-based
strategies

Tanzania

This paper explores the effectiveness of community-based strategies in addressing sexual violence against women and girls in the Shinyanga Region, Tanzania. Using a cross-sectional mixed-methods approach, data were collected from 282 households and from key informants, including police officers, teachers, religious leaders, and local officials. Quantitative data were analysed descriptively, and qualitative insights were thematically assessed to understand community perceptions and institutional responses. Findings reveal that sexual violence is both widespread and normalized, with 94.1% of respondents reporting personal or second-hand experience within the past five years. Common forms include child marriage (33%), rape (30.5%), intimate partner violence (23.2%), and other abuses (9.6%). Girls aged 12–17 were identified as most vulnerable. Community awareness of strategies was high (91%), with school programs, public awareness campaigns, community policing, and involvement of traditional or religious leaders most commonly cited. While educational and awareness efforts were viewed as effective, services like counselling, legal aid, and paralegal support were less visible and had limited impact. The study offers valuable, context-specific insights, using social-ecological and feminist frameworks to highlight how structural and community dynamics shape violence. It calls for stronger law enforcement, improved survivor-centred services, and the integration of gender-based violence strategies across sectors. NGOs are urged to expand psychosocial and legal support, while local leaders should promote accountability and shift harmful social norms. These coordinated actions are vital to reducing violence and improving protection for women and girls in the region.

1. Introduction

Sexual violence against women and girls is widely recognized as a serious human rights violation and global public health problem. The World Health Organization (WHO) estimates that approximately 6 - 7.2% of women aged 15 - 49 have experienced non-partner sexual violence, which is roughly 160 million women worldwide. However, the actual number of sexual violence cases is likely much higher due to widespread underreporting and stigma (Sardinha et al., 2024). Sexual violence includes rape, sexual assault, coercion, and other acts carried out without consent (Reuben et al., 2021). It can have severe consequences, including physical injuries, unintended pregnancies, sexually transmitted infections (including HIV), and lasting mental health challenges such as depression and post-traumatic stress. Survivors also often face social stigma and isolation, which can further compound the harm (Li et al., 2023; Sardinha et al., 2024). Structural barriers like limited access to

healthcare, legal support, and psychosocial services make it even harder for survivors to recover. At a broader level, sexual violence also carries high economic costs for society (Mgopa et al., 2021; Sardinha et al., 2024).

Sub-Saharan Africa has recorded some of the highest levels of sexual and gender-based violence globally. Recent estimates suggest that about 6% of women report non-partner sexual violence and roughly one third experience intimate partner violence (Sardinha et al., 2022; Sardinha et al., 2024). Studies from countries like South Africa, Nigeria, Ethiopia, and Cameroon consistently report high rates of sexual coercion, rape, and intimate partner violence among women and adolescent girls. These issues are often driven by a combination of factors, including poverty, conflict, displacement, and deeply rooted gender inequalities (Ajayi et al., 2021; Abreu et al., 2025; Nsahlai et al., 2023; Littleton & Dilillo, 2021). Harmful social norms that uphold male dominance alongside limited

access to justice and weak protection systems continue to fuel high rates of sexual violence while allowing many perpetrators to go unpunished (Gausman et al., 2021; Tefera, 2022).

In Tanzania, sexual violence is a serious public health and human rights issue, reflecting broader trends seen across the region. Nearly 30% of girls aged 13 - 24 report experiencing sexual violence before reaching adulthood, and about 14% of adult women report having faced sexual violence from an intimate partner (Mchome et al., 2024). The situation is especially concerning in Shinyanga Region, where 59% of girls are married before the age of 18, putting them at high risk of experiencing sexual violence within marriage. UNICEF (2003) also identifies the region as a hotspot for child sexual abuse and teenage pregnancy (Kassanga & Lekule, 2021). The Government of Tanzania has taken several steps to address sexual violence, including passing the Sexual Offences Special Provisions Act (1998), establishing community-based child protection mechanisms, running awareness campaigns like the “16 Days of Activism,” providing post-rape care in some health facilities, and supporting school-based interventions, often in collaboration with NGOs and international partners (Reuben et al., 2021; Randa et al., 2023; Evans et al., 2023). However, the impact of these efforts is often limited by weak enforcement, coverage gaps, resource constraints, and deeply rooted patriarchal norms that continue to pose significant barriers (Mwanukuzi & Nyamhanga, 2021).

Against this backdrop, the present study examines the effectiveness of community-based strategies in addressing sexual violence against women and girls in Shinyanga Municipal Council and Shinyanga District Council. It identifies the primary forms of sexual violence occurring in these communities and assesses how residents perceive the effectiveness of existing community-based interventions. By highlighting both strengths and gaps in current responses, the study aims to inform more effective, sustainable, and survivor-centred strategies to strengthen protection, challenge harmful social norms, and support long-term social change.

2. Theoretical Literature Review

The study was guided by the Social Ecological Model (SEM) and Feminist theory. The SEM, developed by Bronfenbrenner (1979), explains behaviour as the result of interactions among influences at the individual, interpersonal, community, and societal levels (Fahme et al., 2024; Tefera, 2022). When it comes to sexual violence, the evidence shows that personal beliefs, family dynamics, peer influences, community norms, and

the wider legal and policy environment all work together to shape both the risk of violence and the impact of prevention strategies (Gausman et al., 2021; Logie et al., 2019). For example, comprehensive sexuality education can raise individual awareness about consent, while supportive families, responsible peer groups, and positive community norms can help promote respectful, non-violent relationships (Bawa et al., 2021; Gumede et al., 2022). At a broader level, laws, how they are enforced, and the messages shared through media can either challenge or reinforce harmful gender norms (Fakahany & El-Kak, 2024). Research suggests that strategies targeting multiple levels at once, rather than relying on single interventions like education or legal reform alone, are more effective in reducing sexual violence (Modise & Masogo, 2024).

Feminist theory complements SEM by locating sexual violence in structural gender inequalities and patriarchal power relations. Feminist scholars argue that such violence is embedded in systems that privilege male authority and normalize women's subordination, rather than being the result of individual deviance (hooks, 2000; Butler, 1990). From this perspective, prevention must tackle unequal gender norms, economic disempowerment, and discriminatory laws and practices. Feminist-informed strategies include legal reforms such as criminalizing marital rape, efforts to strengthen women's economic and political participation, and educational campaigns that challenge gender stereotypes while engaging men and boys in promoting gender equality (Diko, 2024; Jewkes et al., 2021). Research shows that programs combining women's empowerment with work on masculinities and power dynamics tend to be more effective at reducing violence and shifting social attitudes than those focused only on punishment (Hudson, 2002; Peacock, 2022). Taken together, the SEM and Feminist theory provide a strong conceptual foundation for this study by highlighting the need for multilevel, rights-based, survivor-centred and transformative community strategies that address both immediate protection and longer-term changes in norms, institutions and power relations (Piedalue et al., 2020).

3. Materials and Methods

3.1. Study area

The study took place in the Shinyanga Region, Lake Zone Tanzania. It involved two local government authorities: Shinyanga Municipal Council, which is primarily urban, and Shinyanga District Council, which is mostly rural. These councils were deliberately chosen due to their high rates of sexual and gender-based violence and their differing socio-demographic and cultural backgrounds. According

to the 2022 National Bureau of Statistics (NBS), Shinyanga Municipal Council has an estimated population of 214,744, while Shinyanga District Council has about 468,611 residents. The primary economic activities, agriculture, mining, and small-scale trade, play a central role in shaping local livelihoods and influencing gender dynamics within the communities studied.

3.2. Study Population and Design

The study used a cross-sectional research design to collect data at a single point in time. This approach was chosen because it is cost-effective and suitable for examining multiple variables and their relationships without the need for long-term follow-up. The target population included 130,193 households: 51,367 in Shinyanga Municipal Council and 78,826 in Shinyanga District Council (NBS, 2022). Households were used as the primary sampling units to allow direct access to individuals with knowledge of, or experience with, sexual violence. The study sought to capture a wide range of perspectives, including those of survivors and non-survivors, to better understand community perceptions, prevalence, and responses to sexual violence.

3.3. Population Sample

The sample size was determined using Yamane's (1967) formula, which provides a simplified method for calculating sample size based on a finite population and a desired margin of error. At a 95% confidence level and a 5% margin of error, the formula is:

$$n = \frac{N}{1 + N(e)^2}, \quad \text{Whereas,}$$

n - Sample size, N - Total population, and e - margin of error

The N was set at 130,193 households (NBS, 2022).

$$n = \frac{130,193}{1 + 130,193(0.05)^2}, \quad n = 398.8 \text{ households}$$

The sample was proportionally distributed between Shinyanga Municipal and Shinyanga District Councils, based on household numbers, to ensure adequate representation of both urban and rural contexts. Due to item non-response, the number of valid responses varies slightly across Tables; percentages are therefore reported based on the number of respondents who answered each specific question.

3.4. Sampling Procedure

A combination of probability and non-probability sampling techniques was used. For the household survey, stratified random sampling was used: wards within each council formed the primary strata, and households were selected using simple random sampling proportional to the number of households in each ward, ensuring representation of different

geographic areas across both municipal and district councils.

For the qualitative component, purposive sampling was used to select key informants based on their roles and expertise in sexual and gender-based violence. These included Police Gender and Children's Desk Officers, District Community Development Officers (DCDOs), Ward Executive Officers (WEOs), and selected community and religious leaders, all of whom play direct roles in preventing sexual violence, managing cases, or implementing related policies.

3.5. Data Collection and Analysis

The study used a mixed-methods approach. Quantitative data were collected through structured, mostly closed-ended questionnaires administered to household respondents. These surveys captured socio-demographic information, perceptions of vulnerability, personal or known experiences of sexual violence, and awareness of community-based strategies, including how effective they were perceived to be. Qualitative data were collected through key informant interviews with police officers, community development officers, ward leaders, and religious leaders. It also included a review of institutional records, Police Gender Desk and Community Development Office reports, national policy documents, and relevant studies. Quantitative data were analysed using descriptive statistics (frequencies and percentages). In contrast, qualitative data were thematically examined to support and clarify the survey findings, especially regarding community strategies, institutional responses, and perceived effectiveness.

4. Results and Discussion

4.1. Socio-demographic characteristics of respondents

A total of 282 respondents participated in the survey, with women accounting for 74.5%, highlighting the study's focus on sexual violence against women and girls, as well as women's higher participation rate and willingness. The majority of respondents were within the economically active age groups: the 26 - 35 years old group was the largest, followed by those aged 18 - 25 and 36 - 45 years. Fewer participants were adolescents under 18 or adults over 45. This age structure suggests that the perspectives captured are essentially from individuals who are active in household and community roles and, therefore, likely to have direct knowledge of experiences and responses related to sexual violence.

In terms of socio-economic profile, farmers constituted the largest occupational group, followed by business people, students, employed

respondents, and the unemployed. Educational levels among respondents ranged from informal schooling to tertiary education. Most farmers and businesspeople had completed primary or secondary school, while those in formal employment were more likely to have college or university qualifications. Students were mainly at the secondary level, and unemployed participants had

mixed educational backgrounds. Some slight differences in the total numbers across results are due to items non-response, with percentages calculated based only on valid responses. Overall, the sample reflects a predominantly female, rural-agrarian population with modest education levels consistent with the wider socio-economic profile of the Shinyanga Region

Table 7: Characteristics of Respondents

		Sex		Total
		Female	Male	
Age (Yrs)	Under 18	42	6	48
	18-25	49	10	59
	26-35	52	15	67
	36-45	40	16	56
	Above 45	27	25	52
Total		210	72	282

4.2. Perceived Age of Vulnerability

Table 2 shows respondents' perceptions of which age group of girls is most vulnerable to sexual violence. A majority (56.9%) identified girls aged

12 - 17 as most at risk, followed by those below 12 years (32.1%). Only 7.6% indicated young women aged 18-24, and 3.4% selected women aged 25 and above.

Table 8: Perceived Age at Greatest Risk of Sexual Violence

S/N	Age (years) at Risk of Sexual Violence	Frequency	Percent (%)
1	Below 12	93	32.1
2	12 - 17	165	56.9
3	18 - 24	22	7.6
4	25 and above	10	3.4
Total		290	100.0

These perceptions strongly align with global and national evidence that adolescent girls face heightened risks of sexual abuse, child marriage, and coercive relationships. In Shinyanga, where the prevalence of child marriage is particularly high (Kassanga & Lekule, 2021), the focus on adolescents reflects lived experiences of early marriage, exploitation, and limited autonomy. It suggests that community members recognize the vulnerability of girls transitioning from childhood to adulthood, when they are often targeted for marriage or sexual relationships with powerful adults.

The perceived vulnerability of girls under 12 years (32.1%) also points to awareness of child sexual abuse, which UNICEF (2003) identifies as a serious problem in Shinyanga. Together, these findings indicate that minors, especially adolescent girls, are considered as the primary targets of sexual violence, reinforcing the need for age-specific and child-focused interventions.

Respondents were asked to indicate whether they or someone they know had experienced sexual violence in the past five years. Out of 288

respondents, 271 (94.1%) said that they or someone they know had experienced sexual violence in the past five years. Fourteen (4.9%) said they had not, and three (1.0%) were not sure.

This widespread acknowledgement of sexual violence highlights just how common and visible the issue is within the communities studied. It suggests that for many people, sexual violence is not a distant or rare event; it is something they have either experienced themselves or seen happen to those close to them. While high awareness might indicate a greater willingness to discuss the issue, it also raises concerns about normalization. When violence becomes a regular part of daily life, survivors might feel powerless to change their situation, and communities could become desensitized (Mwamsojo et al., 2023; Tano & Kitula, 2022).

Respondents were also asked how often sexual violence occurs in their communities (Figure 1). Most reported that cases occur "often" or "very often," with few describing them as rare. Key informants (e.g., local leaders and police) echoed

these perceptions, noting that cases are reported frequently, but many more are believed to go

unreported due to stigma, fear of blame, and pressure to resolve cases informally.

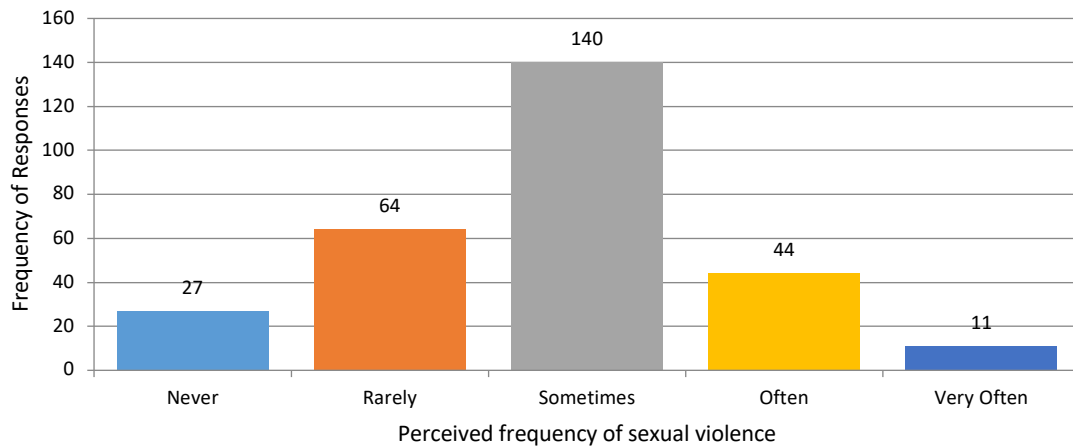


Figure 1: Perceived frequency of sexual violence in the community

Taken together, these findings highlight just how serious and widespread sexual violence is in Shinyanga. They point to an urgent need for coordinated, multi-sectoral efforts that strengthen prevention, improve reporting and justice systems, and provide comprehensive support for survivors. At the same time, the fact that many community members openly acknowledge the problem could be a sign of hope, creating space for meaningful change, especially in communities ready to confront the issue and work toward solutions.

4.3. Types of Sexual Violence

Respondents identified several forms of sexual violence present in their communities, summarized in Figure 2. Child marriage was the most frequently mentioned type (33%), followed by rape (30.5%), intimate partner violence (23.2%), and sexual abuse (9.6%). Less frequently reported forms included sodomy, Female Genital Mutilation (FGM), and forced marriage.

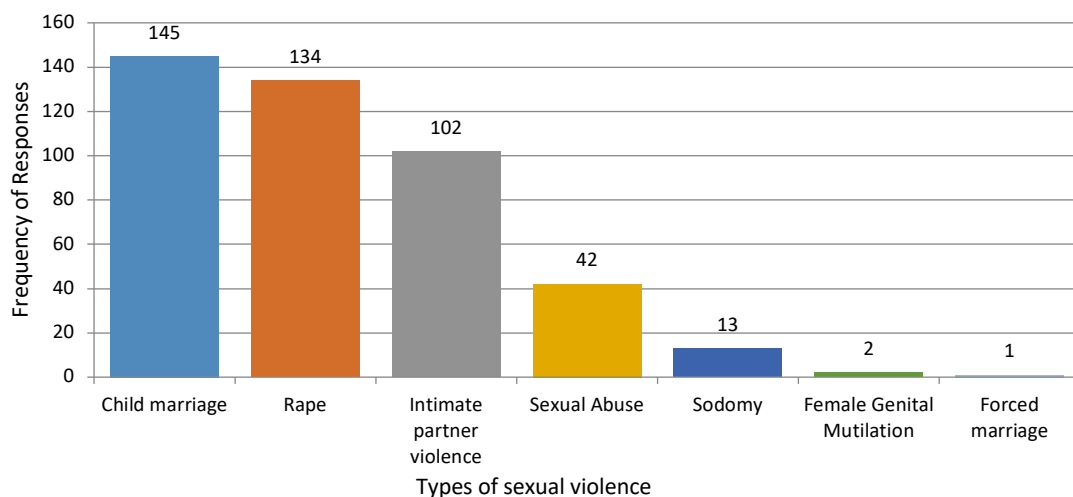


Figure 2: Types of sexual violence

These findings illustrate that sexual violence in Shinyanga is multidimensional, encompassing both legally recognized offences and practices that are sometimes normalized or justified by culture and tradition.

Child marriage was the most frequently reported form of sexual violence in the study area, mentioned by 33% of respondents as a common problem in their communities. This finding confirms that early

and forced marriage is not an isolated issue but a widespread problem in Shinyanga. This reflects earlier findings that the Shinyanga Region has one of the highest rates of child marriage in Tanzania, with around 59% of girls getting married before they turn 18 (Kassanga & Lekule, 2021). These early marriages often place girls in situations where they are expected to have sex without truly being able to give consent or make decisions about contraception. As a result, they face a higher risk of early

pregnancy, health complications, and are more likely to drop out of school (Walker-Descartes et al., 2021; Mwamsojo et al., 2023). The high prevalence of child marriage in these results reinforces the view that it should be considered as a structural form of sexual violence driven by poverty, patriarchal norms, and weak law enforcement (Mwanukuzi & Nyamhanga, 2021; Blaydes et al., 2025).

30.5% of respondents reported rape as a common form of sexual violence, making it the second most frequently mentioned type. This high number highlights not just individual experiences but also a shared understanding within communities about how common rape is, something that lines up with both national and global research showing that many women experience forced sex at some point in their lives (Abeid et al., 2015; Sardinha et al., 2022). In Tanzania, earlier studies show that survivors are often assaulted by people they know, like partners, family members, or neighbours. Because the perpetrators are usually people the victims know, it becomes even harder for them to come forward. As a result, many of these cases go unreported or are downplayed (Abeid et al., 2015; Mgopa et al., 2021).

On top of that, international studies show that survivors, especially those assaulted by intimate partners, often struggle even to define what happened as “rape.” This confusion or hesitation can make it even more difficult for them to seek help or take legal action (Jaffe et al., 2019). The study’s results, therefore, highlight the need for community education on consent, stronger survivor-centred reporting and support mechanisms, and improved legal responses to rape in both public and private settings (Peacock, 2022).

Intimate Partner Violence (IPV) was identified by 23.2% of respondents as a key form of sexual violence occurring in their communities. This includes situations where coerced occurs within marriages or partnerships, along with other forms of pressure and abuse. The findings align with broader research showing that IPV is one of the most common forms of violence against women worldwide, affecting about one in three women (Sardinha et al., 2022). In Tanzania, IPV is often linked to gender-based power imbalances, financial dependence, and cultural beliefs that view marriage as a private matter, which can discourage others from intervening (Mtasingwa & Mwaipopo, 2022). The fact that participants recognize IPV as a form of sexual violence indicates a growing awareness. Still, the fact that fewer mentioned it compared to child marriage or rape might point to how marital coercion is still considered as “normal” in some settings. These insights reinforce the need for interventions that involve men and boys, challenge

harmful masculinity norms, and promote women’s economic and social independence as part of broader efforts to reduce IPV (Jewkes et al., 2021; Rachel et al., 2015).

Sexual abuse, more broadly including unwanted touching, coercive sexual acts, and exploitative relationships, was reported by 9.6% of respondents as a form of sexual violence in their communities. While this percentage is lower than those for child marriage, rape, and IPV, research shows that sexual abuse is frequently underreported, especially when it takes place in families, schools, or other settings where perpetrators have authority or trust (Mantula & Saloojee, 2016; Ezekiel et al., 2017). Findings from Tanzania suggest that children and adolescents often lack the language, confidence, or supportive environment to disclose abuse, and that school- and community-based reporting systems are frequently weak (Kimaro & Biswalo, 2024). The relatively low number of sexual abuse reports in this study likely does not mean it is rare; it more likely reflects ongoing stigma and a culture of silence. These findings highlight just how important it is to have prevention education that’s appropriate for different age groups, along with safe, confidential ways for survivors to report abuse. It also underscores the need to train teachers, health workers, and community leaders to spot the signs of abuse better and respond effectively (Lungu et al., 2023; Reuben et al., 2021).

Other forms of sexual violence, like sodomy, Female Genital Mutilation (FGM), and forced marriage, were mentioned less often by respondents, but they still came up. Their lower frequency may partly be due to successful advocacy and legal reforms that have helped reduce some of these practices. At the same time, it might also result from underreporting, especially in communities where these issues are culturally sensitive or even criminalized (Mkuwa et al., 2023). In some cultures, FGM and forced marriage are still considered as traditional or religious obligations rather than forms of violence (Magesa, 2024; Wahyudani et al., 2023). The fact that these practices continue despite rare reporting underscores the importance of targeted strategies in Shinyanga that directly address harmful traditional norms. This involves collaborating with communities and local leaders to foster rights-based, culturally aware changes (Hodzi, 2024; Nanthambwe & Magezi, 2024).

4.3. Community Strategies against Sexual Violence

4.3.1. Awareness and strategic interventions

Respondents reported a high level of awareness of community-based strategies to reduce sexual violence: 264 out of 290 respondents (91.0%)

reported knowing at least one local strategy, while 26 respondents (9.0%) reported not knowing any.

When asked to identify specific strategies (Figure 3), respondents mentioned school-based educational programmes (21.7%), community policing and

safety groups (19.8%), public awareness campaigns (19%), and involvement of religious and traditional leaders (19%) as the most prominent. Support services for survivors (10.8%) and paralegal assistance (9.7%) were mentioned less frequently.

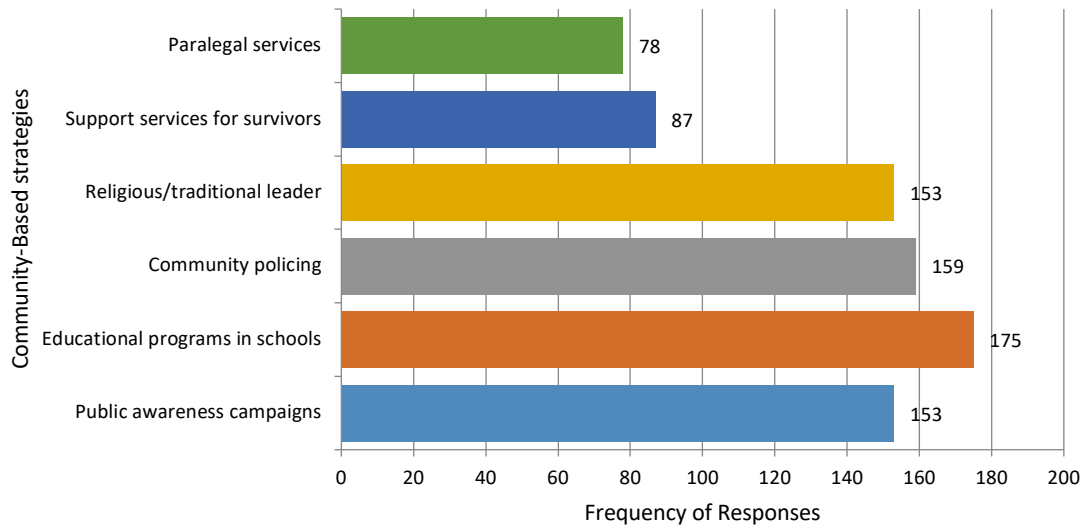


Figure 3: Community-Based Strategies to Address Sexual Violence

These findings suggest that prevention efforts such as education, policing, and awareness campaigns are evident in both urban and rural communities. Key informants identified various activities, such as community meetings, sermons addressing gender-based violence, radio broadcasts, and school programs focused on children's rights and reporting abuse. However, they also noted that many of these initiatives are project-based and rely on external funding, which raises concerns about their long-term sustainability.

High levels of awareness do not automatically translate into behavioural change, but they suggest that a foundation exists upon which more intensive, participatory, and survivor-centred interventions can be built. As Lungu et al. (2023) and Reuben et al. (2021) argue, awareness must be coupled with

improved access to services, effective enforcement, and ongoing engagement to produce lasting change.

4.3.2. Perceived effectiveness of community-based strategies

Table 5 highlights how respondents rated the effectiveness of various community-based strategies for addressing sexual violence. School-based education programs stood out as the most highly rated. These were followed by the involvement of religious and traditional leaders and then public awareness campaigns. Many respondents also viewed community policing and local safety groups as generally helpful. Support services for survivors and paralegal services were considered as less effective, with many respondents staying neutral.

Table 9: Perceived Effectiveness of Community-Based Strategies in Ending Sexual Violence

Community-based strategy	Strongly effective (f, %)	Not effective (f, %)	Neutral (f, %)	Slightly effective (f, %)	Very effective (f, %)	Total
1 Public awareness campaigns	26 (9.1)	40 (13.9)	89 (31.0)	85 (29.6)	47 (16.4)	287
2 Religious/traditional leader involvement	15 (5.3)	26 (9.2)	93 (32.8)	98 (34.5)	52 (18.3)	284
3 Educational programmes in schools	13 (4.5)	19 (6.6)	84 (29.3)	115 (40.1)	56 (19.5)	287
4 Community policing and safety groups	8 (2.8)	40 (14.0)	102 (35.8)	90 (31.6)	45 (15.8)	285
5 Support services for survivors (counselling, legal aid)	19 (6.7)	32 (11.3)	95 (33.5)	86 (30.3)	52 (18.3)	284
6 Paralegal services	31 (11.0)	36 (12.8)	83 (29.5)	90 (32.0)	41 (14.6)	281

The survey results indicate that people generally view community policing, safety groups, and religious and traditional leaders as helpful in addressing sexual violence. For community policing, 31.6% of respondents rated these groups as “slightly effective” and 15.8% as “very effective”, while 35.8% were neutral and 16.8% considered them ineffective. Religious and traditional leaders were also viewed fairly positively, with about 34.5% of respondents describing their role as “slightly effective” and 18.3% as “very effective.” Still, nearly a third (32.8%) were neutral, suggesting mixed perceptions. Although their impact varies, these results show that locally rooted structures are seen as essential players in preventing and responding to sexual violence. These results align with other studies showing that, when they are engaged in gender-sensitive ways, traditional and religious leaders can play a decisive role in shifting harmful social norms, speaking out against abuse, and offering real support to survivors (Hodzi, 2024; Nanthambwe & Magezi, 2024; Mkuwa et al., 2023). Nevertheless, there is another side to it: both the qualitative findings and broader research indicate that without proper training and transparent accountability, some of these leaders may actually do more harm than good. They might push for informal resolutions, focus more on protecting a family’s reputation, or reinforce patriarchal beliefs that silence survivors rather than support them (Buhori, 2024; Ndlovu et al., 2024). The findings therefore point to the need not only to use community policing and local leadership as entry points for change, but also to invest in sustained capacity-building. Hence, their influence becomes consistently survivor-centred and rights-based.

Educational programmes in schools were rated as the most effective community-based strategies in the survey. According to Table 4, 40.1% of respondents considered school-based education “slightly effective” and 19.5% “very effective”, while 11.1% regarded it as ineffective and 29.3% remained neutral. Additional responses from the questionnaire showed that more than half of the participants agreed that these programs help prevent sexual violence. At the same time, about a third were unsure rather than outright opposed. This suggests that school-based interventions are generally well accepted and seen as genuinely beneficial. It also aligns with research showing that comprehensive, age-appropriate education on sexuality and rights can improve young people’s understanding of consent, bodily autonomy, and respectful relationships, key factors in reducing tolerance for violence (Lees et al., 2021; Oosterhoff et al., 2023; Evans et al., 2023). At the same time, studies emphasize that schools cannot do it alone. It is

crucial to involve families and religious institutions, as these spaces shape values and norms (Adewale Ojo et al., 2023; Kimaro & Biswalo, 2024). The results from Shinyanga, therefore, support calls to expand and deepen school-based programmes, strengthen teacher training on gender and child protection, and build stronger links between schools, parents, and community structures as part of a holistic prevention strategy.

Public awareness campaigns, group discussions, and community workshops were generally viewed positively, though responses were somewhat mixed. About 29.6% of participants rated public awareness campaigns as “slightly effective,” and 16.4% considered them “very effective.” Meanwhile, 31% were neutral, and around 23% felt the campaigns were not effective. Additional survey data showed that 56.5% of respondents believed group discussions and workshops helped raise awareness about sexual violence, and just over half (51.9%) felt these activities encouraged survivors to report incidents. These findings indicate that campaigns have effectively enhanced visibility and dialogue around sexual violence, although their influence on behaviour and reporting appears variable. Research from Malawi and Tanzania suggests that community dialogues, theatre, and media initiatives are effective in breaking the silence and reducing stigma, particularly when they involve local communities actively (Lungu et al., 2023; Buhori, 2024; Magesa, 2024). Additionally, Tanzania’s MAISHA programme demonstrates that ongoing efforts to promote social empowerment and collective reflection can lead to tangible reductions in intimate partner violence (Lees et al., 2021). However, awareness alone is not enough. Without simultaneous improvements in support services and justice systems, these campaigns risk raising expectations that communities and institutions are not prepared to meet (Reuben et al., 2021; Opoku, 2024). The Shinyanga findings, therefore, reinforce the value of public awareness efforts while highlighting the need to link them more systematically to concrete support and accountability structures.

Support services for survivors, such as counselling, legal aid, and paralegal services, were rated less favourably than preventive strategies, though they were still recognised as necessary. For support services, 30.3% of respondents rated them as “slightly effective” and 18.3% as “very effective”, but one third (33.5%) were neutral, and 18.0% felt they were not effective. Paralegal services attracted the weakest ratings overall: 32.0% considered them “slightly effective” and 14.6% “very effective”, while almost a quarter (23.8%) rated them not effective and 29.5% remained neutral. Other survey

items showed that approximately 53.2% of respondents believed that communities support survivors, and 46.7% felt that counselling and legal aid are both accessible and valuable. However, a significant number were uncertain. These results indicate that many people acknowledge the importance of survivor services but encounter limited awareness, inconsistent quality, or practical barriers to access. Research consistently shows that comprehensive, survivor-centred services like medical care, psychosocial support, legal assistance, and safe housing are essential for helping survivors heal and pursue justice (Lungu et al., 2023; Randa et al., 2023; Oosterhoff et al., 2023). Informal networks, such as women's groups and peer supporters, can also be vital, but they need training and coordination with formal systems (Mwatsiya & Rasool, 2021; Reuben et al., 2021). The findings from Shinyanga highlight a significant gap: while community involvement in prevention efforts is growing, access to timely, accessible, and trauma-informed support services and legal assistance remains limited. Closing this gap will take meaningful investment in strengthening service delivery, building precise and reliable referral systems, and actively challenging stigma so that survivors feel safe, supported, and empowered to seek help when they need it.

5. Conclusion and Recommendation

5.2. Conclusion

This study provides empirical evidence on the prevalence, forms, and community responses to sexual violence against women and girls in Shinyanga Municipal and Shinyanga District Councils. The findings show that sexual violence is pervasive and deeply entrenched: almost all respondents reported direct or indirect experience of such violence in the past five years. The most common forms of child marriage, rape, and intimate partner violence disproportionately affect adolescent girls aged 12 - 17, reflecting the combined effects of socio-cultural norms, economic pressure, and weak enforcement of protective laws. At the same time, the study shows that communities are not passive. A range of community-based strategies are in place, including school-based educational programmes, community policing, public awareness campaigns, and engagement with religious and traditional leaders. Respondents generally viewed education and awareness activities as effective in raising knowledge and shifting attitudes. At the same time, more specialised survivor services, such as counselling, legal aid, and paralegal support were less visible and perceived as weaker. Overall, the findings point to the need for integrated, multilevel approaches that bring together prevention, protection, and survivor support. It is

crucial to address deeper structural issues such as gender inequality and poverty while also improving coordination and strengthening community-based efforts rooted in local realities. Only by connecting these pieces can we make real progress in reducing sexual violence and promoting the rights and wellbeing of women and girls.

5.3. Contribution of the Study

This study adds context-specific evidence to the literature on sexual and gender-based violence in Tanzania and sub-Saharan Africa by focusing on Shinyanga Municipal and Shinyanga District Council, an area known as a hotspot for child marriage and child sexual abuse but still underrepresented in detailed empirical work. It documents the prominence of child marriage, rape, intimate partner violence, and other forms of sexual abuse and shows that girls aged 12 - 17 are perceived as the group most at risk. In doing so, it provides granular, community-level insights that complement national survey data and global estimates.

At a conceptual level, the study draws on the Social Ecological Model (SEM) and Feminist theory to explore how the individual, relational, community, and structural layers interact to influence both the occurrence of sexual violence and people's perceptions of the effectiveness of community-based strategies. It shows how things like patriarchal beliefs, economic hardship, and weak enforcement of protective laws play out through everyday institutions like schools, religious settings, and community policing groups. Looking at it through this combined lens helps explain why some approaches, such as school-based education and participatory awareness campaigns, are considered more effective than others, such as formal legal or paralegal services.

From both a methodological and practical standpoint, this research shows the value of combining household surveys with key informant interviews to connect community views with institutional perspectives on how sexual violence is being prevented and addressed. The mixed-methods approach enables the interpretation of numerical data, such as high rates of reported exposure and strategy ratings, through the lens of lived experiences and insights from police officers, community development workers, teachers, and religious leaders. The study also points to clear gaps, especially in areas such as survivor support and legal help. At the same time, it highlights practical entry points for improving community-based responses. It provides valuable guidance to policymakers, service providers, and civil society groups working in Shinyanga and similar contexts.

5.4. Recommendations

The Government of Tanzania should more firmly enforce existing laws on sexual offences and child marriage, ensuring timely investigation and prosecution of cases. Key frontline actors, police, magistrates, health workers, and social welfare officers need ongoing training so that responses are gender-sensitive, survivor-centred, and confidential. Sexual and gender-based violence must be comprehensively incorporated into health, education, and social protection policies, supported by ongoing financial resources. Enhancing girls' access to quality secondary education and promoting women's economic empowerment through skills development, credit, and employment opportunities are essential strategies for addressing the fundamental structural causes of violence.

Non-governmental organizations and civil society can complement state efforts by expanding survivor-centred services and strengthening prevention. Priorities include accessible medical, psychosocial, and legal support, including outreach in rural areas, and culturally appropriate school- and community-based programmes that challenge harmful gender norms and engage men and boys. NGOs should also help build stronger referral systems by bringing local stakeholders together around transparent reporting and follow-up pathways and by training staff and volunteers in trauma-informed, survivor-sensitive care.

Community and local leaders play a critical role in shaping norms. They should use their authority to publicly condemn child marriage, rape, intimate partner violence, and informal settlements of cases, as well as to promote reporting through formal channels. Through community meetings, religious gatherings, and other forums, leaders can champion respect, equality, and zero tolerance for violence. Supporting and monitoring interventions at local levels, they identify survivors and vulnerable groups, facilitate referrals, and strengthen community structures like child protection or gender committees, boosting local ownership and accountability to prevent and respond to sexual violence.

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