

NATIONAL UNIVERSITY OF LESOTHO



**COVID-19 PANDEMIC AND GENDER-BASED VIOLENCE AGAINST MEN IN
LESOTHO: THE CASE OF HA MANTS'EBO COMMUNITY**

DISSERTATION SUBMITTED

BY

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DECLARATION

I hereby declare that this dissertation ‘COVID-19 pandemic and gender-based violence against men in Lesotho: the case of Ha Mants’ebo community’ is my own work and is submitted towards Master of Arts degree in Development Studies. The content and material in this material has never been submitted to any institution or previously used by another person, and where information has been derived from other sources, such sources have been duly acknowledged.

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Supervisor’s name. **Dr M.T. Macheka.** Signature _____ Date **28 July 2023**

DEDICATION

This work is dedicated to my late brother, and all the minority of men who are facing gender based violence. To my mother, siblings and friends thank you for always being supportive during this journey. That time has finally come.

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I would like to thank the Almighty for carrying me through this journey, providing me with strength, knowledge, intelligence to begin and complete this study satisfactorily. Without His blessing, this achievement would have not been possible.

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ABSTRACT

Pandemics have been associated with a rise in different forms of violence against women and children. The global and regional nature of pandemics can provide an environment of uncertainty and fear. Against this background, this study assesses the impact of COVID-19 pandemic on gender-based violence against men. The study engaged a total of 30 purposively and snowball sampled participants through semi-structured interviews. The study found that men experienced several forms of GBV and these are verbal, emotional and physical abuse. The study also found that there are little to zero efforts taken by the government to combat GBV against men during the pandemic. Findings also revealed that adopting and implementing comprehensive preventative measures specifically targeting men could curb GBV against them. The study concludes that GBV experienced during the COVID-19 pandemic has left multiple long-lasting and life-threatening health complications on men and men received minimal attention and recognition. The study recommends that the government of Lesotho should be involved to address GBV against men working closely with NGOs, individual associations, institutions such churches to tackle and curb the spread of GBV against men.

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ACRONYMS

COVID-19 – Corona Virus Disease 2019

DRC- Democratic Republic of Congo

ECOWAS- Economic Community of West African States

GBV- Gender Based Violence

H1N1- Swine Flu

HIV/AIDS- Human Immune Virus Acquired Immune Deficiency Syndrome

LPPA- Lesotho Planned Parenthood Association

MERS- Middle East Respirator syndrome

NGOs- Non-Governmental Organizations

PTSD- Post Traumatic Stress Disorder

SADC- Southern African Development Community

SARS- Cov2- Severe Acute Respiratory Syndrome

UK- United Kingdom

UN- United Nations

UNCT- United Nation Country Team

UNDP- United Nations Development Programme

UNFPA- United Nations Population Fund

UNICEF- United Nations International Children’s Emergency Fund

WHO- World Health Organization

CHAPTER ONE: INTRODUCTION

1.1 Introduction

Crisis and times of unrest have been associated with increased interpersonal violence, including violence against women and children (Fraser, 2020). Pandemics are no exception to this trend. In fact, pandemics have been linked to aggravating different forms of violence against women and children. The global regional nature of pandemics creates a habitat that may increase alarm and unreliability leading to unhealthy ways of dealing with difficult situations, gender-based violence (GBV), suicide attempts and mental health disorders due to quarantines, social distancing, and limitations of freedom as possible contributing factors (Brand, 2013).

During infectious outbreaks, risk factors for gender-based violence are magnified. For example, during the Ebola epidemics in the DRC and West Africa, the way the virus spread was connected to gender roles within households with women and girls taking on the responsibility of caring for family members who had contracted the disease (Kang and Perrin, 2020). When the World Health Organization (WHO) declared COVID-19 as a pandemic, governments across the globe executed national lockdown measures and quarantines to limit the spread of the pandemic. This included curfews, movement restrictions, and public transportation shutdowns. Movement restrictions for instance, made it difficult for women and men to leave their abusive homes.

Therefore, this study analyses implications of COVID-19 lockdown on gender-based violence against men in Ha Mants'ebo. Understanding the impact of COVID-19 on GBV against men is crucial for public health and human rights, as it can help identify effective interventions.

Background of the study

Gender-Based Violence (GBV) is estimated to affect the lives, health, and wellbeing of millions of women, girls, boys, and men worldwide (Reynolds, 2020). GBV during pandemics operates on an individual level within intimate partner couples and families, and at a systemic level where affected communities, institutions, and the media monitor and reinforce gender roles (UNDP, 2015). According to Reynolds (2020) although GBV takes place in all societies and all cultures, forced displacement, including conflict, breakdown of the rule of law, and collapse of family and community structures tend to increase both the frequency and brutality of such violence. In addition, Langa (2019) also posits that since the 1990s, a growing body of international research has presented evidence of the gendered impact of pandemics and directed attention to GBV. With rare and isolated exceptions, the emergency sector worldwide is yet to devote attention to this prevalent and life-threatening “hidden disaster” to men in planning, recovery, and reconstruction. This feminization of GBV is situated within the purview of the Violence-Against-Women perspective that views women rather than men to be victims of violence in the family (Cook, 2009). However, emerging studies have challenged this view and argued that both females and males are almost equally violent against each other. Conversely, the few data available on GBV against men suggest that male victims of violence perpetrated by women are likely to report low social well-being, high psychopathological health problems, depression, loss of self-identity, diminished self-confidence and increased anxiety (Perry and Sayndee, 2017). Thus, the issue of male victims in intimate relationship constitutes a significant problem that is worth investigating, especially during pandemics. While the global pandemic of GBV against men is silent, pandemics due to novel diseases are garnering more attention (Ferris et al, 2013). Over the last 50 years, different parts of the world have seen at least 10 different disease outbreaks, from Marburg in 1967 to Ebola in 1976

to Middle East Respirator Syndrome (MERS) in 2012, with some, such as Ebola resurfacing multiple times (Ross, et al, 2015).

Prevalence figures released by the WHO based on 2003 data confirmed that 1 in 3 men around the world has been subjected to physical or psychological violence by an intimate partner during the pandemic outbreaks, especially those that create economic vulnerability (Evans, 2015). This indicates that levels of GBV on men have remained disturbingly high even before COVID-19 pandemic. As a result, during pandemics, the underreporting of physical violence against men, too, is apparent. This factor thus proves that men suffering violence from an intimate partner, especially during the pandemic, may seek care regarding the sustained injuries but may choose not to report the violence, thus failing to draw attention to the violence itself (Wenham *et al*, 2020). Anastario (2013) argues that men's reluctance to report violence against them is a factor further compounding gender blindness in times of pandemics. Survivors or victims generally do not speak of the incident for many reasons, including self-blame, fear of reprisals, mistrust of authorities, and risk/fear of re-victimization.

As a result, it is clear that the existing studies on GBV during the pandemics have privileged women as victims while treating men as perpetrators. Knowledge is currently limited on males as victims of GBV during pandemics. Thus, this study intends to contribute to GBV-pandemics studies through examining the implications of COVID-19 pandemic on gender-based violence against men in Lesotho using the case of Ha Mants'ebo community.

1.3 Statement of the problem

This study examines how COVID-19 pandemic has perpetuated gender-based violence against men in Lesotho. This is because gender-based violence is a serious issue and continues to be a threat to a person's empowerment and continues to be a persistent national issue in many countries

around the world including Lesotho. Growing research has highlighted the health burdens, intergenerational effects, and demographic consequences of such GBV. However, as COVID-19 pandemic swept the globe, a health pandemic of devastating proportions, another storm of GBV was unleashed. The decisions designed to protect people from COVID-19 such as lockdowns, empty streets, overstretched medical services, the closures of schools and justice system institutions, and lack of access to regular social networks and sources of social support, exposed the depth of GBV on not only against women, but on men also.

Many governments anticipated this threat due to experiences from past pandemics. As a result, measures like putting in place first responders, crisis hotlines that can help victims of GBV to report the violence were put in place. However, research post COVID-19 pandemic restrictions indicate high rates of GBV against women and incidences of GBV against men are under researched despite them being prevalent. Therefore, this study intends to assess the impact of COVID-19 pandemic on gender-based violence against men.

1.4 Justification of the study

Existing studies on GBV have privileged women as victims while treating men as perpetrators. Knowledge is currently limited on males as victims of GBV, especially during pandemics. Thus, this study is aimed at filling in the gap by providing data on GBV against men to help policy makers and the government in making interventions to curb gender-based violence against men, more especially during pandemics. A study such as this, is therefore, not only useful for exposing the position of men vis-a-vis access to justice but, also, for effectively planning, monitoring, and evaluating various existing intervention strategies. As a result, the study may serve to increase awareness and empower men as victims of GBV in Lesotho. Further, the findings of the study may be used to guide policy makers and other stakeholders in efforts to address the issue of GBV during

pandemics and formulate innovative approaches to provide care and support to those affected in Lesotho.

1.5 Research objectives

- To investigate how Gender-Based violence affected men during COVID-19 pandemics in Ha Mants'ebo.
- To examine interventions which have been taken by the government to address GBV against men in Ha Mants'ebo during COVID-19 pandemic.
- To suggest measures that can be used in order to fight against GBV against men in general and specifically during pandemics in Ha Mants'ebo.

1.6 Research questions

1. How has Gender-Based violence affected Men in Ha Mants'ebo during the COVID-19 pandemic?
2. What are the interventions that have been implemented by the government of Lesotho to address GBV against men during COVID-19 pandemic in Ha Mants'ebo?
3. Which are the measures that can be used to fight GBV against men in general and specifically during pandemics in Ha Mants'ebo?

1.7 Theoretical Framework

The study again adopted the masculinity theory. Masculinities theory is a field of study within the broader realm of gender studies and feminist theory that examines the construction, performance, and social norms associated with masculinity (Connell, 1995). Wood (2004) points out that this field offers valuable insights into the roles and expectations associated with being a man in different societies and how these roles intersect with broader issues of power, identity, and social change. It explores how notions of masculinity are shaped by social and cultural forces, and how

these notions influence men's behavior, identity, and experiences (Kimmel, 2008). Gardiner, (1997) postulates that this theory also explores the construction of masculinity and how societal expectations and norms around masculinity can contribute to men's experiences of violence. It guides this study and assists the researcher to examine how masculinity or traditional notions of manhood affect men's vulnerability to violence and their willingness to report it.

1.8 Definition of key terms

COVID-19 - is an infectious disease caused by the SARS-CoV-2 virus, which causes infected people to experience mild to serious respiratory illness (WHO, 2020). This study adopts the definition provided by the World Health Organisation.

Lockdown - Mittal and Singh (2020) defines lockdown as a state or period in which movement or access to an area is restricted in the interests of public safety or health. This study adopts the definition as provided by (Mittal and Singh, 2020).

Pandemic is defined as a situation posing characteristics of an endemic but is considered more severe and widespread over countries or continents (Mpofu, 2022). In this study, pandemic refers to the COVID-19 intense period where countries had to initiate protective measures including lockdowns.

Gender-based violence is described by the United Nations Development Programme as "any act of violence that results in, or is likely to result in, physical, sexual, or mental harm or suffering to men or women, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in public or in private life" (UNDP, 2020). For the sake of this study, various forms of domestic violence against men have been referred to as gender-based violence.

1.9 Limitations of the study

Due to the stigma attached to GBV against men, participants who are survivors of GBV during COVID-19 pandemic may not be easily located or willing to disclose their status. Secondly, some men may not be willing to reveal that they had been abused or violated because of the socialization process that indicates that men cannot be viewed as "weak". To mitigate the chances of these situations occurring, the researcher stressed to the participants that their responses will be held in the strictest confidentiality and that their identities will be protected.

1.10 Research structure

This current study contains five chapters where the first chapter focuses on introducing the topic of the study by providing background on the topic being studied. This chapter will be followed by chapter two of the study, which focuses on reviewing literature on how GBV affected men during different pandemics. The third chapter will focus on research methodology of the study, while chapter four will focus on data presentation, analysis, and discussion of the study. Then lastly, chapter five will provide the conclusions and recommendations of the study.

1.11 Chapter Summary

This chapter mainly focused on introducing the research problem and gave out a clear picture of what the study aims to achieve. Background of the study and the statement of the problem are also included to support why the research must be carried out. Research questions, research objectives,

justification and the theory which will be used in the study are also noted. Limitations of the study were highlighted and key terms are also defined in order to give a better picture of what the study entails. The next chapter will focus on review of related literature.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

This chapter reviews different existing literature in relation to pandemics and gender-based violence against men. This literature is composed of findings from global, regional, Africa outside of the Southern African Development Community (SADC), within SADC countries, and lastly focusing on literature in the context of Lesotho as the country where the study is to be conducted. An overview of gender-based violence and pandemics is also presented as well as literature on COVID-19 pandemic and gender-based violence.

2.2 Gender Based Violence and pandemics: An Overview

Violence has always been found to surface in the face of pandemics. During the South Asian Tsunami of 2004, a surge in gender-based violence was observed (Fisher, 2009). The author further emphasized that the after-effects of the Tsunami had several incidents of violence against women and sexual assaults were reported in Sri Lanka. It should also be noted that during pandemics, children and women are exposed to harassment and sexual violence when they try to procure necessities such as water, food, and firewood. Similarly, during the Zika epidemic in South America, research suggests that women who gave birth to children with microcephaly experienced elevated parental abandonment which resulted in single motherhood and potential socio-economic adversity (Meinhart et al., 2021). Moreover, in the areas mostly affected by Zika, that is in the north-eastern regions of Brazil, women had less access to necessary medication as they were the ones mostly affected by the pandemic (Nakamura-Pereira et al., 2018). The Zika outbreak has revealed the conspicuous invisibility of women in outbreak response.

The socio-economic status of women is a determining factor in their experience of gender-based violence and gender-discrimination, and it takes on heightened significance during emergencies.

Most of the women in Colombia, Brazil and South America who were affected by Zika are of lower-socio-economic status, and levels of access to inequality differ markedly across the rural-urban parts of the regions (Meinhart et al., 2021). Khan et al., (2020) reported that there were 15 suicide cases, 2 suicide attempts and 1 homicide-suicide attributable to the concomitant impact of GBV during the early HIV/ AIDS pandemic in London. All victims were men from all tiers of society. It has also been found that there has been correlation between the occurrence of the HIV epidemic and gender-based violence in India (Godbol, 2015). Previous research studies have shown that extended periods of quarantine can increase the risk of serious psychological consequences including anxiety, depression, and post-traumatic stress disorder (PTSD) (Brooks et al., 2020). The pandemic has had a significant impact on gender-based violence against men too with reports of increased violence and limited access to support services (Flood and Peace, 2020)

Gender-based violence (GBV) is also a prevalent human rights infringement and a global public health issue that affects individuals all over the world, hence Africa is not an exception. Mittal and Singh (2020) report that gender-based violence is more prevalent in HIV hyper-endemic countries like Sub Saharan Africa. In West Africa, during the Ebola outbreak, rape, sexual assault and violence against women and girls was reported to have been largely undocumented as collateral damage (Yasmine, 2016). The implementation of infectious disease control measures has been consistently absent of critical gender consideration in humanitarian settings. Pandemics like Ebola, Zika and Spanish flue revealed how women and girls living in humanitarian settings have faced bi-directional syndetic vulnerabilities between GBV and infectious diseases (Meinhart et al., 2021). Findings indicate that Ebola and Zika in Africa exacerbated GBV risk and experience of GBV, as well as increased community transmission of these infectious diseases. In addition, a study in Rwanda found that intimate partner violence increased during the Ebola epidemic in 2014-

2016 with economic stress and social disturbance recognized as key drivers of violence (Peterman, 2020).

Pandemics such as Ebola and the H1N1 influenza have been associated with a rise in GBV cases in affected populations (Gruber, 2016). Research suggests that pandemics worsen the prevalence of GBV due to increased stress, economic strain, and decreased access to support services (Peterman et al., 2020). In some African countries outside of the SADC region, GBV is underreported and remains a forbidden subject (Garcia-Moreno et al., 2015). Lack of recognition, shame and fear of comeback often prevent survivors from seeking help. Survivors may face difficulties to accessing justice such as inadequate legal protection and insufficient procedures for gathering evidence. The consequences of GBV can be critical and long-lasting and they can include physical injuries, mental health disorders and increased risk of HIV and other sexually transmitted infections (UN Women, 2015).

In South Africa, for instance, scholars found that women experienced increased levels of violence during the H1N1 pandemic in 2009. A study that was conducted to find about the impact of the H1N1 pandemic in 2009 found that the pandemic was associated with a rise in intimate partner violence against women in South Africa with fear and anxiety about the disease serving as contributing factors to the escalation of violence (Abrahams et al., 2020). In the Eastern Cape Province of South Africa, social and economic factors like poverty, unemployment and substance abuse were strong predictors of intimate partner violence (Dunkle, 2014). It was also found that women who went through intimate partner violence had a higher risk of HIV infection (Jewkes, 2010).

Lesotho has one of the highest rates of GBV in the world with reports suggesting that one in three women have experienced sexual or physical violence in their lifetime (UNICEF, 2019). GBV in

Lesotho is driven by deep-rooted gender stereotypes, a lack of economic opportunity and a high prevalence of HIV/AIDS (Jewkes, 2015). Women who experience GBV in Lesotho face multiple barriers to accessing justice, including social stigma, a lack of support services and inadequate legal protections (Murray, 2019). During the COVID-19 pandemic, there were reports of an increase in GBV cases in Lesotho as lockdown measures and economic stress exacerbated existing vulnerabilities (UN Women, 2020). The GBV indicators study by Gender Links (2015) reported that 86% of women and 40% of men in Lesotho experienced some form of violence in their lifetime and further reported that a major part of victims does not report the violence or even seek help, medical or legal. The study revealed the barriers to reporting as stigmatization by the community, feelings of shame, not enough response from police to victims and the belief that domestic violence is a private matter not to be discussed with people (Libuseng, 2021).

These studies illustrate the need for targeted interventions that address the unique challenges of GBV during pandemics and emphasize the importance of ensuring access to essential services for survivors. While acknowledging the existing literature on gender-based violence and pandemics on the global context, much has not been said about men during these times of crisis, a lot has been written about how women and children are the victims. Most of the literature also focuses on people with low socio-economic statuses which then brings up a question if only people with low socio-economic statuses are the only ones affected by gender-based violence during pandemics. This study, therefore, intends to assess the impact of pandemics on GBV against men in societies.

2.3 COVID-19 pandemic and Gender-Based Violence

Studies have shown that the COVID-19 outbreak had a significant impact on gender-based violence (GBV) and public health. Along with what the mainline media outlets reported, there had been reports of domestic violence all over the world since the pandemic started (Campbell, 2020).

As with other pandemics in the past, COVID-19 pandemic has caused more domestic violence. Bradbury-Jones and Isham (2020) argue that the COVID-19 containment measures presented abusers with more power to hurt others.

Various studies indicate a notable rise in gender-based violence (GBV) during the COVID-19 pandemic in countries such as Nepal, Bangladesh, and India. In their research in India, Singh et al. (2021) revealed that the pandemic caused an increase in the frequency and seriousness of GBV with women experiencing physical, sexual, and emotional abuse. In Bangladesh, Hasan et al. (2021) similarly discovered that the pandemic had a harmful effect on women's lives and that economic stress and limited movement caused an upsurge in GBV. Khatiwada et al. (2021) conducted research in Nepal and also demonstrated that the pandemic led to an increase in domestic violence with women facing multiple types of abuse.

In Australia, charities that were providing aid to victims of domestic abuse expressed worry over reports of partners using COVID-19 as a tool for abuse (Bates and McKay, 2021). These reports highlighted cases where partners were spreading false information about the extent of quarantine measures (Gearin and Knight, 2020). Additionally, victims of domestic abuse were afraid to seek medical attention for fear of contracting the virus (Fielding, 2020). The UK's National Domestic Abuse Helpline noted a 25% increase in calls and online requests for assistance of domestic violence intervention during the first two weeks of lockdown (Bradbury-Jones et al., 2020). They have also emphasized the need for more support for immigrant women and those who face discrimination and exclusion as these groups face additional challenges in accessing support services during the COVID-19 pandemic. Access to support services may be more difficult for immigrant women and others who experience prejudice and exclusion during the COVID-19 pandemic. In order to address GBV during the pandemic and give victims and survivors the support

they need to flee abusive situations, access to medical and legal assistance is needed. For victims to rebuild their lives free of violence and abuse, more support services such as helplines, counseling services, legal aid and shelters are essential.

A study conducted by Van der Merwe (2022) revealed that gender-based violence against men escalated to greater and unexpected heights as a result of the multiple negative socio-cultural implications brought about by COVID-19 on the male gender. The same study further established that the severity of the different forms of abuse on the well-being of the male victims. Similarly, a study by Omondi et al., (2021) in Kenya showed that the pandemic has led to an increase in GBV with both men and women facing various forms of abuse. The study found that lockdowns and limited access to support services for men contributed to the increase in GBV. Another study by Kabamba et al., (2021) in the Democratic Republic of Congo (DRC) found that the pandemic resulted in exponential increase of cases of GBV with men experiencing more physical, and emotional abuse. The study identified the closure of schools, reduced access to health services and the economic impact of the pandemic as significant factors also contributing to the increase in GBV.

In the study by Nkosi et al., (2021) in Malawi, women reported experiencing physical violence, emotional abuse and sexual violence during the COVID-19 pandemic. The study also found that men reported experiencing physical violence, emotional abuse, and economic abuse during the pandemic. According to a study conducted by Goliath et al., (2021) in Namibia, women and children experienced different forms of gender-based violence (GBV) during the pandemic which included physical, sexual and emotional abuse. The study also revealed that there was an increase in child abuse cases that were reported during the pandemic. In another study conducted in Zambia by Musonda and Kasonde (2020), women were reported experiencing physical violence, emotional

abuse, and sexual violence. Men were also reported experiencing physical violence and emotional abuse during the pandemic in this study.

According to Help Lesotho (2020), girls and women in Lesotho bear most of the household duties including the responsibility of caring for children, the sick and the elderly as is typical around the world. They are more likely to contract infectious diseases like COVID-19 because of their work as care-givers. Due to the pandemic, these girls and women struggled constantly to care for others while also facing financial hardship, food poverty and isolation from the social networks that normally helped them overcome obstacles. The study further states that girls and women were more likely to experience gender-based violence since families spend a lot of time together in their cramped houses. 86% of girls was also reported having been abused before the additional anxiety caused by COVID-19. With extremely high rates of pre-existing health conditions like HIV/AIDS (24%) and Tuberculosis (695 cases/100,000), COVID-19 would be extremely damaging too many Basotho people who already struggle with compromised immune systems. For women a pandemic poses a grave risk as they are inherently more susceptible to contracting HIV for reasons related indirectly and directly to their gender. Even before Lesotho could record any cases of COVID-19, concerns were raised about the Gender Based Violence (GBV), particularly domestic violence that could be exacerbated by the first 21-day lock down due to the outbreak of COVID-19 (UNFPA, 2020). Child abuse surged in Lesotho during the pandemic, especially physical and emotional abuse, as schools remained closed and movement was limited (United Nations Lesotho, 2021). Men in Lesotho also did experience GBV during the COVID-19 pandemic including physical violence and emotional abuse as per a study conducted by the Lesotho Planned Parenthood Association (LPPA, 2020). However, research on this topic is limited.

Based on the literature about gender-based violence and COVID-19 from globally to Lesotho, the literature highlights mostly the increased risk of GBV on women and children and there is limited research on the experiences of men during pandemics and COVID-19 specifically. This is an important gap to address as understanding men's experiences of GBV during the pandemic can help in developing effective prevention and intervention strategies that are inclusive of all genders. Given this background, it is important to understand the impact of the pandemic on GBV against men and develop tailored interventions to address the challenge.

2.4. Government Measures on Gender-based Violence during pandemics

Governments all around the world implemented restrictive strategies to contain the pandemics that overlooked gender-based vulnerabilities. Ad hoc instructions to stay at home and regional lockdowns were put into effect. Lockdowns and the breakdown of social and health services in humanitarian circumstances have resulted in increased rates of domestic and intimate partner abuse as well as inadequate protection for women and girls (Meinhart et al., 2021).

Homes within the COVID-19 context can potentially turn into pressure cookers for GBV when combined with lockdowns and other movement restrictions, as drivers of violence increase and survivors and those at risk are more unable than ever to seek safety or other necessary forms of support (CARE, 2020). During infectious disease epidemics, women, girls, and other structurally excluded populations such as sex workers and sexual and gender minorities often suffer the most because governments enforce restrictive laws to prevent the disease without considering any unintended repercussions (WHO, 2020). Governments have enacted sporadic stay-at-home orders and regional lockdowns in the absence of universal vaccination and efficient pharmaceutical treatment, which has led to increased gender pay inequities and financial hardship on households (Jones et al., 2020).

According to Fraser (2020), working closely with UN Country Teams and Resident Coordinators on the ground, United Nations Development Program (UNDP) and other partners were able to support governments in coordinating multi-sectorial action during COVID-19 pandemic while UNDP supported the National Human Rights Commission in Bangladesh to establish a hotline to receive human rights complaints. In addition, according to Fraser (2020), UNDP collaborated with partners to activate and broaden a national roundtable that brought together law enforcement, justice, GBV, and child protection officials in Paraguay. Additionally, UNDP collaborated with partners to provide the Ministry of Women with a situation room that tracked the development of GBV and coordinated the response and prevention of GBV during the COVID-19 crisis. Further emphasis was placed on the fact that these helplines were improved by the supply of essential tools and COVID-19-specific training, which covered how to handle situations involving children whose caregivers were unwell or were in a different type of quarantine.

Fraser (2020) states that the government of Mexico and UNDP collaborated with UN Women to create safe spaces for women and girls, sisterhood communities among municipalities, and other institutional initiatives administered by the Centers of Justice for Women. They also worked with other partners to assist the LUNA centers, which are safe spaces for women and girls. Through the Global Programme on Rule of Law and Human Rights, these centers worked to create new standards and offered support over the phone and online. In Fiji, the government in partnership with UNDP and UN Women strengthened the capabilities of the Women's Centers to provide remote care, expanded the capacity of shelters, and ensured that survivors had a place safe to go to as demand for GBV safe spaces increased. In Chile, the government in partnership with UNDP and UN Women ensured that survivors had somewhere safe to go as they increased.

France made 20,000 hotel room nights available to women needing shelter from abusive situations, (UNDP, 2020). When exiting a domestic violence situation, women in Spain were excused from the lockdown. In cases of domestic abuse, Italian prosecutors decided that the perpetrator rather than the victim should vacate the family residence (Fraser, 2020). The criminal was to be removed from the scene in Argentina, according to the deployed police (Erskine, 2020). Additionally, the government increased protection orders for victims of gender-based abuse to a 60-day duration. Additionally suspended were the statutes of limitations for crimes, notably those involving sexual violence. Women were instructed to warn pharmacies about instances of domestic abuse in the Canary Islands, Spain, by using the code message "Mask-19" (Erskine, 2020). In Cumbria, UK, police enlisted postal workers and delivery drivers to look out for signs of abuse (UNDP, 2020).

CARE International (2020) states that UNDP Uganda collaborated with partners from the government and the UN to design e-learning modules for police, public defenders, judges, and jail staff. Support was given in South Africa to hasten the provision of community-level services for GBV survivors, with a special emphasis on young girls and women impacted by HIV and AIDS, as well as women working in the informal economy. In order to give fundamental legal counsel and utilize dispute resolution approaches to avoid or lessen violence, UNDP Sudan funded community-based paralegals in camps for internally displaced people (Fraser, 2020).

In Somalia, the government and UNDP collaborated with partners to establish community watch programs that trained elected men and women to routinely patrol their neighborhoods to deter or lessen acts of violence (Fraser, 2020). In order to find creative methods for distributing real-time COVID-19 messages, particularly those that fostered social cohesion, Uganda and Spotlight Initiative partners worked with faith-based organizations, traditional and cultural institutions (GBV AoR Helpdesk, 2020).

The UN Country Team in Sierra Leone launched its Ebola Gender Mainstreaming Strategy in October in collaboration with UN Women (UN Women, 2015). It was further stated that the United Nations Country Team (UNCT) in Liberia similarly approved an Ebola Response Gender Strategy. The strategies call for women's participation in the Ebola response, better collection and use of sex disaggregated data and re-establishing trust in public health services. Furthermore, the African Development Bank, the Mano River Union, the ECOWAS, and the African Union collaborated with the governments of Guinea, Liberia, and Sierra Leone to conduct an Ebola Recovery Assessment (IASC Gender Reference Group, 2014).

During the Ebola pandemic, most governments also put into place lockdowns. The Democratic Republic of Congo (DRC) government worked with UNICEF and intentionally hired women's organizations during COVID-19 for mask making to curb the spread of the virus and to support women organizations (UNICEF, 2021). During the Ebola pandemic also in DRC, the government put in place public health policies of washing hands frequently which, however, failed to adequately consider the gender division of house labor as adhering to these forced women to leave their homes more often to get household water, (International Rescue Committee, 2019). Following public outrage over rising GBV incidences, South Africa, Kenya, Uganda, and Nigeria added GBV services to their list of essential services; their initial attempts had been patchwork and lacked sector-specific implementation standards (John et al., 2023).

According to the World Population Review 2022 report, 86% of Basotho women have experienced gender-based violence in their lifetime. In July 2022, the Ministry of Gender, Youth, Sports, and Recreation found it fitting in collaboration with the UN, civil society organizations, the private sector, and development partners to reconvene and re-energise the Anti-Gender Based Violence Forum (UN Lesotho, 2022). Lesotho and the other SADC Heads of State signed a declaration in

1997 pledging their nations' commitment to firmly integrating gender into their agendas, specifically repealing and reforming any laws and altering social norms that subject women to discrimination (Malephane, 2021). Lesotho has also used legal tools to prevent violence against women (Chipatiso et al., 2014). This shows how dedicated the government is to protecting human rights and ending violence against women in Lesotho. Additionally, there is limited research specifically focusing on the experiences of men in relation to gender-based violence in Ha Mants'ebo. While studies have explored gender-based violence from a broader perspective, there is a gap in understanding the unique challenges and dynamics faced by men as victims of gender-based violence in this context.

2.5 Chapter Summary

This chapter reviewed existing literature on pandemics and gender-based violence against men. It highlighted the increased prevalence of violence during past emergencies like the South Asian Tsunami and the Zika outbreak and stressed the impact of pandemics on women in terms of access to healthcare and essential resources. The chapter also discussed the high rates of gender-based violence in Africa, particularly during the Ebola outbreak and the barriers faced by survivors in accessing justice and support services.

With regards to the COVID-19 pandemic, this chapter explored studies from various countries showing an increase in gender-based violence together with physical, sexual, and emotional abuse against women and children. It also mentioned the challenges faced by immigrant women and those who face discrimination in accessing support services. Furthermore, this chapter highlighted the limited research on the experiences of men during pandemics and emphasizes the need to address this gap to develop inclusive prevention and intervention strategies.

Additionally, this chapter reviewed different government measures that were implemented during pandemics and how they impacted gender-based violence. It highlighted the oversight of gender-based vulnerabilities in restrictive strategies and points out the potential increase in violence within households due to lockdowns. However, it is important to note that there is a significant gap in addressing gender-based violence against men in Lesotho. Existing research and interventions primarily focus on GBV against women, leaving limited understanding and support for male victims of GBV in the country. The next chapter presents the research methodology.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Introduction

Research methodology is the general approach the researcher takes in carrying out the research project (Morse, 2013). The section of the research describes the procedure used in conducting the study. As part of it, a good research methodology should therefore address the specific methods employed in the study. Thus, this chapter discussed research approach, research design, description of the study area, target population, data collection methods, data analysis methods, ethical considerations and validity and reliability of instruments and findings.

3.2 Area of study

The study was conducted at Ha ‘Mantsebo, which is located in the centre-west region of Lesotho. It is 26km distance from the capital town of Maseru. The village is situated near the locality of Upper and lower Qeme villages and comprises of a population of about 480 people, 236 men and 244 women from 119 households (Bureau of Statistics, 2016). The basis of choosing the population from Ha Mants’ebo by the researcher was based on the fact that it was the place of residence of the researcher, hence increasing the chances of the participants being easily accessible.

3.3 Research approach

As the study sought to develop a comprehensive understanding of the COVID-19 pandemic and Gender-Based Violence against men in Lesotho, a qualitative approach was applied. According to Babbie and Mouton (2012: 270), “qualitative research is a generic research approach that takes its departure from the insider perspective”. The advantage of using this method was that, given the sensitivity of the topic, the researcher was going to be able to understand how gender-based

violence against men during pandemic was an issue based on its natural context. Thus, this approach was utilized in this study because it helped the researcher gain a better in-depth understanding of how men at Ha Mants'ebo were impacted by gender-based violence based on different events which occurred in the context.

3.4 Research Design

According to Groover's (2015) definition of research design, it should combine different study components logically in order to tackle the problem methodically. So, a case study was used in the research. Through a thorough contextual investigation of a small number of specific events or circumstances and their relationships, case studies explore and investigate contemporary real-life phenomena (Yin, 2009). Because it allowed for the exploration and comprehension of complicated subjects like the COVID-19 epidemic and gender-based violence against men in Lesotho, the researcher picked this specific methodology for this research project.

3.5 Study population

A research population is a well-defined collection of individuals or objects known to have similar characteristics (Crossman, 2020). Therefore, this study focused on men and women around Ha Mants'ebo who may have experienced GBV during COVID-19 pandemic lockdown with the help of village chiefs, councilors and the police station where the cases were reported.

3.6 Sample and Sampling procedure

Sample is defined as a designated section representative of the total population that is a small quantity selected out of the whole population that will allow for easy observation and analysis (Lune and Berg, 2016). The sample size for this study is 30. The researcher used non-probability sampling, which according to Babbie and Mouton (2012), requires the researcher to firmly choose

a portion of the larger population to include or exclude from the sample because they exemplified some characteristics in which the researcher was interested in having the sample represent itself rather than seek generalization. The method enabled the researcher to obtain extensive and thorough data regarding the causes of marital violence. The use of key informants was done to address the issues given, and the researcher picked this method since it conserves time, money, and labor force. The specific non-probability sampling methods that were used in this study were snowball sampling and purposive sampling since the members of the population were not easy to locate. Purposive sampling is a sampling technique which is used for the identification and selection of information-rich cases related to the phenomenon of interest (Kassiani, 2022). The research used snowball sampling to select a sample of different men and women within the village. Snowball sampling refers to a non-probabilistic sampling technique commonly used in qualitative research to identify and recruit participants based on their connections to existing participants. The method involves selecting initial participants who possess the desired characteristics or meet the research criteria and then relying on their referrals to identify and recruit additional participants. Snowball sampling is also defined as a non-probability sampling technique where participants in the study play a role in recruiting or referring others to participate in the study. This sampling technique is most common in studies where it is hard to find participants.

The sampled men and women referred others who were informative in relation to COVID-19 and gender-based violence at Ha Mants'ebo, as that played a role in saving time and assisted in collecting the right information from the right participants. For example, if the researcher worked with a sample that already knew other people with the same information, then time was saved. Ha Mants'ebo is a big community composed of small villages, having a representative sample saved time for the researcher.

3.7 Data collection methods

The study utilized in-depth interviews as data collection method. This method was time and resource saving to the researcher as only questions that fitted the study were asked. To ensure that all of these talks were available for transcription and data analysis later on, the researcher was able to set up a situation in which participants denied or accepted to be recorded on voice recorders. The researcher recorded some of the interviews when the participants agreed to it but also did not record those of which the participant denied consent. According to Cresswell (2014), in-depth interviews are ideal for analyzing complicated situations and sensitive topics because they provide the interviewer the chance to prepare the participant before posing delicate inquiries and to personally explain more difficult ones. Lune and Berg (2016) go on to say that interviews work best for gathering information on extremely private and socially delicate subjects related to a person's life experiences. Therefore, interviews were used in this study in order to accommodate local residents who cannot read or write to make the study open to everyone. A total of 30 people were interviewed. These were 18 men selected from Ha Mants'ebo community, 5 women, 4 community leaders and 2 Chiefs and 2 councilors and 3 police officers from Flight One Police Station. The police, chiefs and councilors mainly provided details about gender-based violence against men in Ha Mants'ebo community as they were the first hand recipients of the reported gender-based violence matters. Members of the community also gave a clear picture of gender-based violence among themselves as they were either eye witnesses or victims of gender-based violence against men.

3.8 Data collection procedure

The researcher played an active role in the data collection process by gaining access to the community, gaining permission to talk to the participants, conducting interviews and recording

data. The researcher accessed the community through seeking permission from the village chiefs who gave permission for the researcher to interview the community members. This step ensured ethical considerations were met and respected the community's norms and protocols. The chiefs also helped the researcher by making it easy for the community to trust the researcher. The interviews were held at the participant's homes to ensure they were comfortable. The purpose and the importance of the study was explained to the participants and they were asked to talk about their experiences about gender-based violence. A recorder was used to capture the interviews in an accurate manner and to ensure that the precise documentation of participant's responses was made to minimize the risk of loss of important details. The participants were informed about the recording process to get their consent to record the interviews. Interviews were conducted in Sesotho for effective communication. The researcher is fluent in Sesotho and proficient in English. During data analysis and reporting, the researcher translated the interviews from Sesotho to English while ensuring the accuracy and maintaining the participant's perspectives.

3.9 Data Analysis

The data were analyzed using a framework analysis. According to Grant and Osanloo (2015), framework analysis is a method for analyzing qualitative data that seeks to arrange data in a way that makes it easier for the researcher to understand and interpret the data. This form of analysis organizes data while simultaneously condensing it, and the framework nevertheless maintains a connection to the original material. With regard to the COVID-19 pandemic and gender-based violence against men, the researcher was able to identify, describe, and evaluate crucial trends within and between instances and themes in this setting. Data familiarization, framework identification, indexing, charting, mapping and interpretation were all applied in this study of the

COVID-19 pandemic and gender-based violence against men in order to give out a detailed framework.

3.10. Ethical Considerations

The following ethical principles were adhered to in this study. These were written informed consent, voluntary participation, confidentiality and anonymity, debriefing and right to withdraw. Leedy and Ormrod (2016) state that research should be based on mutual trust, acceptance, cooperation, promises and well accepted conventions and expectations between all parties involved.

Informed consent

Participants received information on the study's goals, objectives, nature, and potential applications for its findings. They were able to participate voluntarily because they were aware that they may withdraw at any time, which aided in their decision-making. Written, fully informed permission was required. Crossman (2020) contends that permission must be freely provided in order to be legal and ethical. The researcher notes that the original authorization might not be sufficient, especially if the researcher is audio recording the interviews, therefore additional consent was needed regarding the intended use of the data. As a result, the researcher requested consent to audio record the interviews for this study. The objective of audio recording was also mentioned by the researcher. Participants were also reassured that they could withdraw at any time from the research if they did not wish to continue their participation. Some participants pointed out that they have no problem with the interview being recorded while other denied being recorded.

Voluntarily participation

Allowing research subjects to freely decide whether or not to engage in a study without any pressure or coercion from the researcher or any other outside parties is known as voluntary participation. Participants were given the chance to give informed consent and were free to leave the study whenever they wanted without suffering consequences. To make sure that participants were at ease and willing to disclose their experiences of gender-based violence during the COVID-19 pandemic, this study placed a strong emphasis on voluntary involvement. Without any type of compulsion or pressure, participants were encouraged to participate after receiving explicit information about the study's purpose. To guarantee that participants completely comprehend the goals of the study, the steps involved and their rights as research participants, informed consent forms were made available. Additionally, participants had the option to leave the study at any moment without suffering any repercussions. The researcher made sure that all information gathered was kept private and anonymous to preserve the privacy of participants.

Confidentiality and Anonymity

In research ethics, confidentiality entails an obligation on the part of the researcher to ensure that any information obtained from or shared by the participants respects the dignity and autonomy of the participants, and does not violate the interests of individuals or communities (Contena, 2013). This ethical consideration was mainly important in the study in order to ensure that participants felt as comfortable as possible taking into consideration on how sensitive the study was. In this study, the participants were referred to in numbers when storing their data. Participants were also informed about measures to be taken to ensure their confidentiality and anonymity and a clear procedure of any breach of confidentiality or anonymity was provided.

Right to withdraw

According to Flicker et al. (2007), the right to withdraw refers to a participant's unrestricted capacity to leave a study or research project at any time. This idea was essential to ethical research procedures because it gave participants autonomy over their participation and safeguarded their rights and well-being. Participants in this study were not forced or coerced into continuing their involvement, and they were fully informed about their right to quit.

Debriefing

Magwa and Magwa (2015), argue that debriefing entails that prospective research participants must be fully informed about procedures and risks involved in research and must give their consent to participate. Debriefing is defined by Makore-Rukuni (2001) as a situation when one has to explain to the participants the full nature of the research to be undertaken.

This procedure ensured that participants in the study were well-informed about the nature of the study, the purpose, potential risks and benefits. It gave them an opportunity to seek clarification, express their concerns and reaffirm their voluntary participation.

3.11 Chapter Summary

This chapter mainly stipulated methods which were applied in conducting this research. This chapter also introduced the study area, which is Ha Mants'ebo, while also introducing the population under the study. Data collection methods and procedures were also highlighted in the study in order to brief the readers on how data was collected. This chapter also gave out detailed information on how a sample and sampling techniques were implemented in the study. Lastly this chapter noted how data was going to be analyzed while also including ethical considerations in the study which were also important. Introduce the next Chapter. The next chapter embarks on data presentation, analysis and discussion.

CHAPTER FOUR: DATA PRESENTATION, ANALYSIS AND DISCUSSION

4.1 Introduction

This chapter focuses on presenting the findings on implications of COVID-19 lockdown on gender-based violence against men in Ha Mants'ebo. This chapter uses the framework analysis approach to thoroughly assess the data generated and collected and identifying the recurrent themes and patterns and offering insightful information on the research questions and study objectives. The analysis and discussion offered in this chapter are organized around the research questions. The data demonstrated the effects of the pandemic on gender-based violence against men.

4.2 The impact of Gender-Based violence on men during COVID-19 pandemic in Ha Mants'ebo.

The data collected from the participants has revealed that GBV against men at Ha Mants'ebo was prevalent during COVID-19 pandemic. Some participants indicated that they had experienced some form of violence from their significant other during the COVID-19 pandemic. The data collected during the fieldwork provides valuable insights into the specific ways in which GBV affected men during the COVID-19. The impacts are based on the forms of abuse men experienced during the COVID-19 pandemic as well as the indicated causes of the said GBV during that time.

4.2.1 Verbal Abuse

The findings revealed some of the participants have experienced verbal abuse during the pandemic. Some of the participants indicated that all the time the abuse was happening, they realized that they were in fact being abused as the words being used against them were in fact degrading and very hurtful. The participants also indicated that they had not experienced verbal abuse before the

COVID-19 pandemic, however verbal abuse came with the COVID-19 pandemic. As one participant stated:

You know, in our relationship we have always prioritized communication where one will be able to voice their opinions and verbalize how they feel. I think that may have led to the verbal abuse I endured during the pandemic while I was sick. I am saying this because I was one of the first people who contracted the virus, and this meant I needed attention and care. At first, my wife was willing but as the infection progressed and I was unable to breathe properly, my wife would insult me and call me names if I requested for assistance. She would tell me how I am a stupid and useless because I went out and got infected by the virus, and now I am putting her life in danger. Sometimes the words were so hurtful that I would cry (Participant 1, Male at Ha Mants' ebo May 2023).

One other participant also adds that:

You know when they say women can build you and break you with just their words, they mean my wife. During the pandemic, it was broadcasted on television that there was panic buying and a lot of supermarkets did not have stock anymore. She commented and said 'oh well I guess we are one of those who are not going to survive because we chose to get married to losers, while there are millionaires who have no single ounce of fear of this pandemic because they are well resourced (Participant 2, Male ,Ha Mant'sebo June 2023).

Based on the narratives by the participants, there is an alarming prevalence of verbal abuse and the general deterioration of domestic relationships which are facing men, under the heightened tensions and confinement imposed by the pandemic. The responses from the participants also show that they experienced verbal abuse from their partners during the pandemic as a result of them not

being able to provide basic needs for their families due to the pandemic. Through the findings, it is clear that the major form of GBV that men face during pandemic is verbal abuse.

The findings are buttressed by the findings of study conducted in Zambia by Dienne and Gbeneol (2021) which found a prevalence of 0.0023% among men abused verbally by their wives during pandemics and conflicts. The study also revealed that 80% of the reasons women abuse men verbally were not due to self-defense like proponents of radical feminism claim. The study further revealed that men who are not able to meet the financial demands of their wives are likely to be abused.

4.2.2 Physical abuse

The data collected also shows that some men were experiencing physical abuse from their partners. Some participants stated that women inflicted bodily harm on them on different occasions during the COVID-19 pandemic and this happened without any physical altercation being perpetuated by a man. This shows that men experienced physical abuse from their partners, and sometimes the abuse happens just because the partner was angry or the partner was disagreeing with her male partner about something. As one victim of GBV indicated;

My wife and I live here at Ha Mants'ebo, while her mother lives in Semonkong alone. She has siblings but they are both married and they have kids while my wife and I do not have children. When lockdown was announced, we thought it would be a great idea to fetch her mother so that she could not be alone during lockdown. We have two houses in the yard, the main one and the other one we use for visitors, so my mother-in-law was going to use that one while we remain in the main house. When we went to fetch her, we realized that my wife's younger sister and their cousin were there and they insisted they want to come to Maseru with us. To cut the long story short, them living with us was very challenging as

many unpleasant things would happen and I was not allowed to complain. It got to the point whereby we would argue and my wife would beat me up, sometimes even in front of them. She would also throw things at me while angry and I would be left with injuries (Participant 3, Male, Ha Mants'ebo, June 2023).

Another self-employed participant also supported the notion of stress and stated:

The COVID-19 pandemic was one of the stressful and depressing times for my family. Everything was disrupted especially to us entrepreneurs. I had just bought my wife her first car when COVID-19 hit. I bought it on credit and when businesses halted, it meant the payments would stop. We talked about this with my wife and I suggested that we sell the car and repay the loan with it since she was not going to use it due to lockdowns. She was angry, that is the first time she hit me. I thought she would stop because I was begging her to but she did not stop. She ended up stabbing me on my shoulder with the mug that broke when she was assaulting me. She later apologized stating she was stressed and was not in the right state of mind (Participant 3, Male, Ha Mants'ebo, June 2023).

Based on the narratives by the participants, physical abuse on men was also prevalent during COVID-19 pandemic. The findings revealed that men also face physical abuse from their partners during the pandemic. As a result of confinement, it shows that men lacked the required support that can enable them to seek required protection. The results also show that men too are in danger because they could lose their lives, especially during pandemic when it is difficult to seek help. The findings also indicated that some men did not feel safe during the pandemic, due to physical abuse they endured from their partners.

The findings are similar to the study conducted by Brogden and Nijhar (2021), where men claimed that their wives deliberately inflicted injuries on their faces and arms in order to subject them to stigma and embarrassment. According to this study, some of the causes of physical abuse during pandemic restrictions were eating disorders, premenstrual syndrome, and financial limitations of men. The findings of the study are in line with the masculinity theory in that men who do not conform to the traditional notions of masculinity are more vulnerable to being victims of violence. The traditional masculinity norm of men being the provider and protector of his family was challenged and obstructed by the COVID-19 pandemic lockdown restrictions. Furthermore, the findings of this study support the masculinity theory's idea that men who willingly or unwillingly challenge and disrupt traditional power dynamics stand a higher chance of experiencing GBV. The theory was proven right by the findings as men who could not fully assume dominance and power due to the impact of COVID-19 experienced GBV.

4.2.3 Emotional abuse

The empirical findings of this research study also revealed that the COVID-19 pandemic increased financial vulnerability, which resulted in emotional abuse for men. Regarding the impact of the COVID-19 pandemic on GBV against men, the participants admitted that the increase in cases during the COVID-19 pandemic and the notorious lockdowns caused the economic hardships as well as the increased tensions in many families. This contributed to the GBV intensification. The participants indicated that they were abused emotionally due to being unable to provide for their families during the pandemic. The participants also indicated that the emotional abuse they suffered sometimes escalated to physical abuse. This was revealed by another victim who is married and unemployed when he mentioned that;

I was working at one company in the capital city, while my wife worked at Ha Mant'sebo as a primary school teacher. We were both employed and we both contributed to family needs. However, due to COVID-19 pandemic, I lost my job and that meant she automatically becomes the bread winner. Things were okay for several weeks, but I guess the financial burden started getting to her and she started to be abusive physically and emotionally. She would limit my food, and get furious if I ate what I wanted and it later escalated into her throwing anything to me if she thought I am not listening. It was horrible (Participant 5, Male, Ha Mants'ebo, June 2023).

The views were also supported by one police man who said:

Our unit of gender often gets GBV reports perpetrated by both men and women for different reasons. However, during the pandemic, the reports were mostly centered on financial challenges. I mean, the starting point will seem so small and ordinary, but when you hear both sides, it always goes back to finances. I remember one time, a woman called us saying her husband wants to set their house on fire. But when we got there, the man explained that he was trying to do so because his wife talks to other men on the phone in his presence. When the man complains, the wife indicates that he has no right to stop her since those men are the ones who are supporting them financially (Participant 6, Male, Maseru Central Police station, June 2023).

Thus, the findings showed that the economic hardships brought by pandemics and lockdowns often cause men to be vulnerable to forms of GBV as a result of not being able to provide for their families. In cases where men are taken care of by women, the findings show that men are abused by women because women see them as burdens. The findings show the difficulties the men have to go through during the pandemic as a result of not being able to provide for the family and that

was emotionally draining for men and being occasionally reminded of this makes men feel helpless and worthless.

This is in line with the study by Johnson et al. (2020) who found out that economic stressors such as unemployment and financial strain are major risk factors for intimate partner violence. Similarly, Smith et al. (2018) emphasized the role of economic factors in contributing to violence within families, emphasizing the importance of addressing financial stress as part of comprehensive interventions. This means that there is a connection between the literature and the findings of the study.

The findings also revealed that men suffered emotional abuse due to women being under stress. This impacted heavily on men during COVID-19. This emotional abuse was exacerbated by the issue of stress generally caused by pandemics and the uncertainty in the midst of the havoc instigated by the pandemic. Stories of some participants of the study have supported that fact as expressed by one participant in a cohabiting relationship revealed that;

When the COVID-19 pandemic started, I was in a stable space with my girlfriend. We had dreams and 2020 was an appropriate year of achieving them. My girlfriend planned on going back to school and had already applied, but because of COVID-19 restrictions it was clear that every plan was to be put on hold. My girlfriend was very stressed, to the point of depression. She thought she will never go back to school and the best thing to release the stress was to abuse me. She started to abuse me emotionally, she was always gas lighting me and also everything became about her. Suddenly, she thought the world including me was out to get her. She was very ignorant about my feelings (Participant 7, Male, Ha Mants'ebo, June 2023).

Another participant stated:

During the pandemic, I got stressed so much, as a result I was very quiet and withdrawn. When I can, I would communicate my feelings to my wife and her answers were normally very hurtful. For example, one time I told her I feel frustrated because I sit in one place without doing anything. She said I was lying, she is sure I am very satisfied with sitting in one place, I am lazy like my mother who never worked a day in her life (Participant 8, Male, Ha Mants'ebo, June 2023).

Revelations from the participant have highlighted that COVID-19 increased incidents of GBV against men due to women being under stress. The participants stated that the stress was worsened by the economic and financial uncertainty that was looming due to the lockdown restrictions around the world. These findings revealed that the women were stressed by the constraints brought by the pandemic, so they naturally took the stress out to men by abusing them and making them feel useless. The findings show that men were put on further stress by their partners and they were being blamed for the existence of the pandemic. The findings of this research align with the study by Peterman et al (2020) which suggests that pandemics worsen the prevalence of GBV due to increased stress, economic strain, and decreased access to financial opportunities. Also, previous research studies have shown that extended periods of quarantine can increase the risk of serious psychological consequences including anxiety, depression, and post-traumatic stress disorder (PTSD) (Brooks et al., 2020).

4.3 Interventions by the government to address GBV against men during COVID-19 pandemic

The empirical evidence gathered from the study showed that the government failed to put in place any form of interventions that address GBV against men at Ha Mants'ebo during COVID-19

pandemic. All the participants indicated that there was nothing that was prepared to specifically help men who may experience violence, and that many government interventions ignored GBV against men, a factor that has led to many male victims and survivors of GBV being afraid to report their experiences to the authorities. Under the objective of finding the interventions by the government to address GBV against men at Ha Mants'ebo during COVID-19 pandemic, only two major themes were highlighted, being no means to report violence and victims being stigmatized.

One significant theme derived from the findings of the study revealed that the government of Lesotho did not put in place any form of intervention for the victims of GBV, especially for men who ended up facing challenges while trying to report their violent experience. The participants expressed that women are urged by the government to report violent incidents of GBV more than men. This was clearly explained by one participant who was stabbed by his wife who complained that:

After my wife stabbed me, my wounds were so bad that I had to go to the hospital. This was during lockdown and there were patrols of police on the street who were supposed to know why a person is travelling. The first police officer we met asked me what was happening. I told her that my wife stabbed me with a glass. She asked my wife who was with me, and she confirmed that she stabbed me. Instead of helping me open the case, the police officer said I must have done something to provoke her. I later on called the police reporting the matter, but the person I was reporting to, said she will call me back and she never did. Women do not experience such while reporting their abuses that one I know for sure (Participant 9, Male, Ha Mants'ebo, May 2023).

Another participant explained that:

I feel that the government always ignore that men are also experiencing GBV. Their efforts are always some sort of a rescue mission meant for women. We are very reluctant to even report the abuse we experience because we are accused of having started the abuse or we are instigators (Participant 10, Male, Ha Mats'ebo, June 2023). .

To support that, one community leader Ha Mants'ebo stated that:

We are often mediators in very serious family disputes, more often men just like women end up being hurt. Also, both parties are sometimes very reluctant to report matters, but those who decide to involve the police, in a lot of cases the reporting by men is always disregarded, especially during the pandemic. If a GBV case is reported against a man, the police will quickly arrest the man, but if GBV is reported against a woman, the police would recommend counselling. I feel that our system is silencing men who experience GBV even though consequences are devastating for both men and women (Participant 11, Male, Ha Mants'ebo, June 2023).

From the findings it is clear that the government of Lesotho has failed to put in place different mechanisms that can enable men to be able to report their GBV experiences. As a result, men are generally reluctant to report their experiences because of the barriers put in the system that disregard them as victims. The system paints men as perpetrators of GBV. This is very risky, especially during pandemics where men might be confined in homes with their abusers.

As Garcia-Moreno et al., (2015), revealed in their study, this is similar to some African countries outside of the SADC region, where GBV against men is underreported and remains a neglected subject. Moreover, the results highlighted that due to government systems and departments that discouraged men from reporting their violent experiences, the survivors may face difficulties in

accessing justice because of inadequate legal protections and insufficient procedures for gathering evidence. As United Nations reported, the consequences of GBV can be critical and long-lasting and they can include physical injuries, mental health disorders and increased risk of HIV and other sexually transmitted infections (UN Women, 2015). Moreover, the findings also correlate with those of Murray (2019) which revealed that women who experience GBV in Lesotho face multiple barriers to accessing justice, including social stigma, a lack of support services and inadequate legal protections.

The findings of this study support the tenant of masculinity theory that challenges the idea and believe that men are not affected by GBV and that they do not need support and services to respond to it. The masculinity theory provides that while GBV is often discussed in the context of violence against women, it is essential to recognize that men can also be victims of different forms of GBV, including physical violence, sexual assault, emotional abuse, and more (Connel ,1997). In this study, men experienced different forms of violence during the pandemic and these are physical abuse, emotional abuse and verbal abuse.

4.4 Measures that can be used to fight GBV against men during pandemics

The findings of this study revealed that one factor that leads to men being disregarded while reporting cases is the issue of stigma that goes with an abused man. This is because traditionally, men are deemed as superiors and those who have power over women. A man is regarded as a strong figure, thus, society regards men who are abused especially by women as weak. As a result, some men, even the society at large disregards the GBV notions that put men as victims. This has caused men to experience GBV and not report it because they are afraid of being stripped of their “manhood” especially in critical times of pandemics. Thus, the major suggestions from the

fieldwork are ending stigma as well as implementation of comprehensive interventions that prevent GBV during pandemics.

4.4.1 Ending stigma

Majority of the participants stated that GBV against men can be addressed through ending stigmatization against men who publicly confessed that they are survivors of GBV. The following responses from participants shed more light on the issue:

Men are as vulnerable as women, it is our responsibility to raise awareness that talking about the abuse does not make male victims lesser men, but it is highlighting that one is in danger and should be offered help (Participant 12, Male, Ha Mants'ebo, June 2023).

Society needs to be educated on GBV against men. We raised our boy child to be a strong man. This was achieved through socialization, we later retaught those strong men that it is wrong to lift your hand and hit a women. Despite that, the society forgot to educate women that they should also not abuse men. Consequently, this matter calls for awareness in our society that men need protection too and women should also not raise a hand against men, not throwing things and avoid verbal abuse (Participant 13, Male, Ha Mants'ebo, June 2023).

We are all made of flesh and bones, God did not mix the flesh of men with steel. Thus, the society should be more accepting to those brave enough to talk (Participant 14, Male, Ha Mants'ebo, June 2023).

The findings show that reeducating the society to be more accepting and ending the stigma can protect male victims and survivors of GBV, not only during pandemics but also in everyday life. This is because stigmatizing and belittling men who confessed their experiences of abuse is

humiliating them and as a result men would hesitate to talk about it. If GBV against men is underreported, it will not receive attention from relevant stakeholders. In the end, the unreported abuse led to emotionally broken men and that may affect the society at large. In this case, by ending stigma, men can be able to report publicly without fear of prejudice from the family and society. This may lead to peaceful societies during pandemics.

Similarly, Marshal (2014) proposes that GBV needs special attention to curb the emotional repercussions that negatively impact men. Moreover, the findings of this study also support Reynolds (2020) ideas where he argued that addressing and reviewing of collaborative attempts to reduce the effect of GBV on men needs a special attention from all parties in society which includes NGOs, government ministries and advocacy communities that provide awareness on such detrimental issues. In addition to that, the findings of this study also aligns with a study by Mphatheni (2022), who argued that there are several ways that can be used to end the stigma on reporting incidents of GBV against men such as believing and supporting the survivors which are men in this case.

The findings of the study are in line with the masculinity theory which challenges the popular assumption that men are always the perpetrators of gender-based violence and are never victims of it. The findings reflects that men are also susceptible to gender-based violence. The findings further revealed that GBV experienced by men is often underreported and unrecognized due to the stigma and shame attached to it by society (Gardiner, 1997).

4.4.2 A need for comprehensive interventions that prevent GBV during pandemics

Some participants revealed that the government should create comprehensive interventions that prevent GBV during pandemics. The participants felt that since the interventions that propel men

to talk and report the abuse are still very stagnant, government should focus on prevention measures that deter the abuse of men even before it happens. As one community leader highlights:

A lot of people are not aware of this issue of GBV against men. I believe it is our responsibility to stop this from continuing by acknowledging that GBV against men exists and then we can easily address it (Participant 15, Male, Ha Mants'ebo, June 2023).

In line with that, one police officer expressed that:

I feel that we are not giving this matter the needed attention because we need to come up with ways and efforts to preventing GBV against men in all forms (Participant 16, Male, Ha Mants'ebo, June 2023).

The findings highlighted that preventing GBV against men should also be prioritized. Since many participants cited economic strains as the main factor that has perpetuated them experiencing GBV during COVID-19 pandemic, efforts to prevent GBV on men should therefore start by addressing the financial problems that are brought by the pandemics. This is because COVID-19 pandemic hit when people did not expect it, thus, people should be encouraged to always be prepared for anything anytime, so that even when unpredictable incidents of pandemic hit, people could still be able to afford to take care of their families without one thinking the other is useless. Thus, this is a lesson people can adhere to in order to avoid incidents of GBV skyrocketing during pandemics.

This recommendation is in line with Smith et al. (2021) findings where the scholars argue that to effectively address GBV against men in the context of economic hardships, comprehensive interventions are needed. These interventions should not only include the prevention and response measures to violence, but also the provision of economic support and opportunities during pandemics. As Johnson and Dawson (2018) emphasized, it is important to develop holistic support

programmers that address the physical, emotional and psychological needs of male GBV victims. Policymakers and stakeholders need to acknowledge and address these challenges in order to create a more inclusive and responsive support system for all victims of GBV regardless of gender. Collaborative efforts between government agencies, non-governmental organizations (NGOs) and community organizations are essential in establishing a comprehensive network of support services that address the specific needs of men who are victims of GBV.

In addition, policies and programs aimed at creating employment opportunities in a way that the pandemic will not worsen are also very important. Also, offering financial assistance to families with no income during periods of pandemics and lockdowns and promoting economic empowerment can help alleviate the financial stressors that contribute to violence. By addressing the economic root causes of GBV against men and implementing holistic interventions, communities can work towards creating a more resilient and supportive environment that mitigates the impact of economic stress and reduces the occurrence of violence especially during the pandemics.

These findings support Perry and Sayndee's (2017) idea that the creation of financially stabilizing strategies for households maintains the peace and limits the frequency of violence brought about and related to the financial strain of COVID-19. In addition, Wight (2021) proposed that there should be an increase on access to financial assistance for men who have lost their jobs or been unable to work during the pandemic. In the same line of argument, Flood (2017) also suggested men should be provided with social support through community-based organizations such as men's support groups or online forums.

4. 5 Chapter summary

This chapter presented the findings on the COVID-19 pandemic and gender-based violence against men. The findings revealed that men faced different forms of abuse during the pandemic such as verbal abuse, emotional abuse and physical abuse. The findings revealed that GBV against men during COVID-19 was normally caused by financial problems caused by the pandemic as well as the emotional stress that comes as a result of the unpredictability of the pandemic.

The findings of the study further revealed that there were no interventions implemented by the government during COVID-19 pandemic to deal with GBV against men. It is clear that the lack of interventions put in places has resulted in men facing challenges in reporting their experiences. Lack of interventions also increases the stigma against abused men in the communities.

The participants also suggested that the government should assist in ending stigma associated with men experiencing GBV. It was suggested that there is need for educating the society on the dangers of GBV against men, and the effects of it not being dealt with. On the other hand, the participants highlighted that pandemic has taught us that GBV against men is elevated by the financial strains that are caused by COVID-19. Therefore, there is a need for policies and efforts that may help deal with financial problems during pandemics. The next chapter focuses on the conclusion and recommendations.

CHAPTER FIVE: CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter focuses on conclusions and recommendations from the study. The conclusions are drawn from the objectives and research questions of the study. The recommendations are also presented in study as they conclude the chapter.

This study explored the relationship between COVID-19 pandemic and gender based violence against men in Lesotho in the case of Ha Mants'ebo community using the masculinity theory. The study maintains that the masculinity theory provided insights into how masculinity norms and expectations play a role in shaping men's experiences of violence. It underscored the importance of understanding masculinity as a complex and multifaceted concept that influences men's behaviour and their vulnerability GBV.

5.2 Conclusion

The study concludes that, the effects of gender-based violence (GBV) against men are wide-ranging and deeply impactful, encompassing physical, psychological, social, and financial dimensions. Men who experienced GBV suffered from physical injuries, ranging from minor to life-threatening, with long-lasting consequences for their health and well-being. Socially, men faced isolation as societal expectations of male strength and invulnerability undermines their experiences and hinder their ability to seek support. Their relationships are strained or disrupted due to trust issues and emotional scars left by GBV. In educational and professional spheres, GBV has impeded progress, leading to decreased productivity, missed opportunities, and discrimination in the workplace. The repercussions of GBV on men's lives during the pandemic extend to long-term health complications, including increased risk of chronic diseases, substance abuse, and sleep disorders.

In relation to measures taken by the Government of Lesotho to address GBV during the pandemic, it can be concluded that there is little that the government of Lesotho undertook to curb gender based violence against men in the Ha Mants'ebo community. It can be noted that that GBV against men is not taken seriously in Lesotho and it is often neglected due to a complex interplay of societal, cultural, and systemic factors. For instance, traditional gender norms and stereotypes portray men as strong, invulnerable, and in control, creating an environment where the victimization of men is seen as contradictory to these expectations. Consequently, male victims may face disbelief, ridicule, or shaming, deterring them from reporting their experiences or seeking support. Secondly, the focus on GBV has historically centred on women and girls, with a substantial body of research, advocacy, and support services directed towards their specific needs and this contributes to the perception that GBV is solely a women's issue. Thirdly, the research concludes that masculinity discourages men from acknowledging their victimization or seeking help, as it may be perceived as a challenge to their masculinity or strength. This internalized pressure to conform to traditional gender roles perpetuates silence and further hampers the recognition of GBV against men.

The research concludes that, in order effectively combat gender-based violence (GBV) against men, several measures can be employed. Firstly, raising awareness and challenging societal norms is crucial. The findings of the study show that this can be done through educational campaigns, media initiatives, and community dialogues that promote gender equality, challenge harmful stereotypes, and emphasize the importance of addressing GBV in all its forms. In addition, there is need to strengthen support services for male victims. This study draws a conclusion that establishing dedicated helplines, counselling centres, and safe spaces where men can seek assistance, share their experiences, and access specialized support are measures that can be tailored

to their unique needs. Collaborating with organizations that have expertise in providing services to male survivors helps ensure comprehensive and sensitive support. By not implementing these measures, societies are unable to work towards dismantling the barriers and biases that perpetuate GBV against men and creates an unsafe and less inclusive world for all individuals, irrespective of their gender.

5.3 Recommendations

To curb and stop gender-based violence (GBV) against men this study recommends the following policy and practice measures:

- The Government of Lesotho should strengthen legal frameworks and institutions on GBV. This includes enacting comprehensive legislation that explicitly recognizes and criminalizes GBV against men.
- To effectively respond to GBV cases involving men, there is need for capacitating law enforcement agencies such as the police and judiciary through specialised training programs that raise awareness about male victimization, challenge biases, and provide gender-sensitive approaches to investigation, prosecution, and providing support to male survivors.
- Comprehensive sex education programs in schools can play a vital role in promoting gender equality, consent, and respectful communication.
- Engaging boys and young men through educational initiatives, community campaigns, and peer support networks can encourage positive masculinity and challenge rigid stereotypes that perpetuate violence.
- There is need for involvement of religious and traditional leaders in awareness-raising efforts to disseminate information of non-violence and gender equality.

- Community-based programs should be developed to promote bystander intervention, where individuals are encouraged to intervene and support victims when witnessing acts of violence. This can create a culture of solidarity and support, empowering communities to take collective action against GBV.
- Creating and strengthening support services tailored to male survivors of GBV is crucial and highly recommended. This includes establishing safe spaces, helplines, and counselling centres where men can seek confidential support, share their experiences, and access trauma-informed care.
- Collaboration with local organizations and NGOs can help ensure comprehensive support, including legal aid, medical services, and psychosocial counselling. Training programs for service providers should focus on understanding the specific dynamics of GBV against men, addressing biases, and fostering empathetic and non-judgmental approaches. By implementing these recommendations, the Lesotho can take significant steps towards curbing and stopping GBV against men.
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APPENDIX I: INTERVIEW GUIDE

Interview guide for men

My name is 'Malejakane Moshoeshoe, a final year student of MA Development Studies at the National University of Lesotho. This interview is intended to collect data for academic research which is a prerequisite for the attainment of MA Development Studies at the National University of Lesotho. I am trying to find out about COVID-19 pandemic and Gender-Based Violence against men in Lesotho using Ha Mants'ebo community as my case study. I would like to ask you a few questions about this matter. The interview will take about 15 - 20 minutes of your time.

Do you know anything about gender-based violence? If yes? How has it impacted you or anyone you know?

Do you think men are also victims of gender-based violence?

During the COVID-19 pandemic are there any cases of gender-based violence that you came across?

Were you by any chance affected by gender-based violence during the Corona virus pandemic? If yes, kindly share your experience?

Did the COVID-19 pandemic make your situation better or worse? If so, how?

Have you reached out for help or support? If not, why?

Do you feel safe in your current living situation?

Have you reported the violence in your area chief or police? If not, what are your reasons?

Do you think that the authorities, either chiefs or police make it easier for men who are victims of gender-based violence to report it?

Are you aware of any interventions or support programs by the government or organizations to help men who are victims of gender-based violence?

What measures do you think can be taken to prevent gender-based violence against men?

What resources do you think would be helpful to you and other men in similar situations?

Do you have any questions or concerns about your rights as a victim of gender-based violence?

Is there anything else you would like to share about your experience or suggestions for addressing gender-based violence against men in your community?

Interview guide for women

My name is 'Malejakane Moshoeshe, a final year student of MA Development Studies at the National University of Lesotho. This interview is intended to collect data for academic research which is a prerequisite for the attainment of MA Development Studies at the National University of Lesotho. I am trying to find out about COVID-19 pandemic and Gender-Based Violence against men in Lesotho using Ha Mants'ebo community as my case study. I would like to ask you a few questions about this matter. The interview will take about 15 - 20 minutes of your time.

Are you familiar with gender-based violence against men?

Are you familiar with gender-based violence against men in Ha Mants'ebo?

Have you or anyone you know experienced gender-based violence during the pandemic? If yes, can you please share your experience?

What do you think are the causes of gender-based violence against men in Ha Mants'ebo?

How has the COVID-19 pandemic affected your daily life and the lives of those in your household?

What are some effective ways to prevent and respond to gender-based violence against men during pandemics?

What kind of support and resources do you think are necessary to address gender-based violence against men in your community during the pandemic?

Have you observed any government interventions to address gender-based violence against men in your community during the pandemic?

Do you believe that the pandemic has revealed any previously overlooked or underestimated forms of gender-based violence against men?

In your opinion, what are some effective ways to prevent and respond to gender-based violence against men during pandemics?

Do you have any questions or comments about the study or the interview process?

Is there anything else that you would like to add or share about your experiences or views on gender-based violence against men in Lesotho?

Interview guide for Chiefs and Councilors

My name is 'Malejakane Moshoeshoe, a final year student of MA in Development Studies at the National University of Lesotho. This interview is intended to collect data for academic research which is a prerequisite for the attainment of MA in Development Studies at the National University of Lesotho. I am trying to find out about COVID-19 pandemic and Gender-Based Violence against men in Lesotho using Ha Mants'ebo community as my case study. I would like to ask you a few questions about this matter. The interview will take about 15-20 minutes of your time.

What is your role in the community?

What do you hope to achieve through your participation in this study?

Are you familiar with gender-based violence against men?

Are you familiar with gender-based violence against men in Ha Mants'ebo?

Were there any reports to you about gender-based violence during the pandemic? If yes, can you please share details about them?

How has the pandemic impacted gender-based violence against men specifically?

What do you think are the main causes of gender-based violence against men in Ha Mants'ebo?

What kind of interventions has the government implemented to address gender-based violence against men in your community during the pandemic?

Have these interventions been effective in reducing gender-based violence against men?

What kind of support and resources do you think are needed to address gender-based violence against men in your community during pandemics?

How can traditional leaders like yourself contribute to addressing gender-based violence against men in your community during the pandemic?

Do you believe that the pandemic has revealed any previously overlooked or underestimated forms of gender-based violence against men?

In your opinion, what are some effective ways to prevent and respond to gender-based violence against men during pandemics?

Do you have any questions or comments about the study or the interview process?

Is there anything else that you would like to add or share about your experiences or views on gender-based violence against men in Lesotho?

Interview guide for Police Officers

My name is 'Malejakane Moshoeshe, a final year student of MA in Development Studies at the National University of Lesotho. This interview is intended to collect data for academic research which is a prerequisite for the attainment of MA in Development Studies at the National University of Lesotho. I am trying to find out about COVID-19 pandemic and Gender-Based Violence against men in Lesotho using Ha Mants'ebo community as my case study. I would like to ask you a few questions about this matter. The interview will take about 15 - 20 minutes of your time

Are you a resident of this place or did you come only to work?

What is your role in the Ha Mants'ebo community?

Are you familiar with gender-based violence against men?

Are you familiar with gender-based violence against men in Ha Mants'ebo?

Are there any reported cases of gender-based based violence against men in Ha Mants'ebo community to this station?

How has the COVID-19 pandemic affected your work as a police officer in Ha Mants'ebo?

Do you think the reported cases increased or decreased during the COVID-19 pandemic?

What kind of support and resources do you think the police force need in order to effectively address gender-based violence against men all the time and during pandemics?

Are there any challenges you face in addressing gender-based violence against men in Ha Mants'ebo?

How can the police work with the community to prevent and respond to gender-based violence against men during pandemics?

Do you believe that the pandemic has revealed any previously overlooked or underestimated forms of gender-based violence against men?

In your opinion, what are some effective ways to prevent and respond to gender-based violence against men during pandemics?

Do you have any questions or comments about the study or the interview process?

Is there anything else that you would like to add or share about your experiences or views on gender-based violence against men in Lesotho?