

Gender-Based Violence in Higher Education: An Integrative Review

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Abstract

Background: The phenomenon of gender-based violence is a global phenomenon that affects women negatively, including those in higher education. The scourge of gender-based violence has been highlighted in numerous studies and statistics have shown that instead of decreasing, the incidence thereof is rising. **Aim:** To critically analyse research that has been conducted to understand the phenomenon of gender-based violence in higher education. **Methodology:** The revised integrative review protocol of Whitemore and Knafl was employed in the analysis. A comprehensive search was undertaken for gender-based violence in higher education research conducted and published between 2010 and 2021. Literature indexes in CINAHL, Medline, Proquest and Pubmed were searched. Search terms were gender-based, violence, and higher education. The integrative approach was used to conduct the methodological review. A sample of 12 research articles and reports that met the inclusion criteria were analysed. A systematic iterative method was employed to extract and reduce the data in order to draw conclusions. **Results:** Factors leading to gender-based violence, its effects on the victim and methods to eliminate its occurrence were revealed by the analysis. **Conclusion:** Becoming aware of factors contributing to gender-based violence and strategies to address this scourge can minimise the occurrence of gender-based violence in higher education institutions. **Contribution:** Understanding the concepts and strategies to prevent the occurrence of gender-based violence can assist higher education institutions to minimise these incidences.

Keywords

Gender-Based, Violence, Higher Education

1. Introduction

Gender-based violence (GBV) is defined as violence targeting individuals based

on biological sex, gender identity, or social gender norms, is a critical global health concern of the U.S. Agency for International Development. The [United Nations \(1989\)](#) defines GBV as any act or threat by men or male-dominated institutions that inflict physical, sexual, or psychological harm on a woman or girl because of her gender. To date, GBV remains a substantial public health problem in the United States with profound consequences for individuals and society ([Walsh, Keyes, Koenen, & Hasin, 2015](#)). GBV does not only refer to the use of one's power deliberately against individuals, groups or the community thereby resulting in any type of injury, it also includes violence against a person based on gender ([Kibriya, Tkach, Ahn et al., 2016](#)). [Gordon and Collins \(2013\)](#) define GBV as violence towards minority groups, individuals and/or communities solely based on their gender. This can directly or indirectly result in psychological, physical and sexual traumas, injury, as well as deprivation of their rights as a human being ([Gordon & Collins, 2013](#)).

GBV can occur throughout a woman's lifespan, with many reporting their first exposure occurring during childhood or adolescence ([Walsh et al., 2015](#)). Globally, it has been incorporated into different types, such as civil and criminal codes ([Joseph, 2015; Walsh et al., 2015](#)). The issue of GBV has been in existence for a long period and was detected in different socio-cultural and geographic areas ([Joseph, 2015](#)). In 1993, the global conference on human rights held in Vienna highlighted concerns of issues regarding female's lives, psychological integrity, physical bodies and liberty ([Junko & Atsuko, 2018](#)). Furthermore, other similar conferences also recognised GBV as an obstacle to the achievement of equity, development and peace ([Mahlori, Byrne, & Mabude, 2018; Makhubele, Malesa, & Shika, 2018](#)). GBV is a worldwide major public health issue with detrimental effects on the health of women ([Maquibar, Hurtig, Vives-Cases, & Estalella, 2018](#)). According to [McCloskey \(2016\)](#), the term "gender-based violence" (GBV) applies to the sexual or physical abuse of groups targeted, because of their gender or gender roles and their relegation to a lower position of social status or power.

Studies have shown that in South Africa, it is estimated that one in four women are abused by their partners and a higher proportion of women are murdered by their partners than anywhere else in the world ([Gordon & Collins, 2013](#)). In a study by [Shefer, Clowese and Vergnani \(2012\)](#) among university students in South Africa, it was found that females engaged in transactional sexual relationships that were characterised by violence with elderly men. [Collins, Loots, Meyiwa and Mistrey \(2009\)](#) argued that the prevalence of the problems tends to be dramatically underestimated and incorrectly identified by authorities. Secondly, many victims do not access support services. Lastly, prospective and repeat perpetrators come to believe that they can operate with impunity, and that their acts are neither deeply antisocial nor criminal, but rather only mildly transgressive matters of individual preference that will not result in any serious repercussions.

Under-reporting of GBV remains a challenge. South Africa has one of the

highest rates of violence against women and girls in the world, and a femicide rate that is five times the global average, with an estimated 12.1 in 100,000 victims each year. South Africa's GBV statistics are equal to a country at war. In March 2020, when the South African government introduced one of the world's longest and strictest lockdowns in response to the first detected cases of coronavirus, the devastating impact of lockdown on the already severe GBV issue was exposed. The Government's GBV and Femicide Command Centre, a call centre to support victims of GBV, recorded more than 120,000 victims in the first three weeks of the lockdown (Statistics SA, 2021). Systemic gender inequality in the contemporary society has disempowered women and this led to stifling their voices so that they are not heard (Enaifoghe, Dlelana, Durokifa, & Dlamini, 2021).

2. Problem Identification

The problem identification stage involves defining the problem that the review is focusing on and outlining the purpose of the review (Whittemore & Knalf, 2005). The focus of this integrative review was to provide information on what populations have been studied, to identify contributing factors to GBV, to discover the characteristics of the woman prone to GBV, to determine the effects of GBV and to establish strategies that would help to empower women in higher education. The researcher's interest and focus were brought about by the fact that largely there appeared to be widespread reporting on domestic GBV, with an apparent dearth in studies done on the topic in higher education institutions. Having observed that GBV also occur in institutions of higher learning the researcher decided to undertake an integrative review of existing studies that focused on this phenomenon.

The following research questions guided this review:

- 1) What is gender-based violence (GBV)?
- 2) What factors contribute to GBV in higher education?
- 3) What are the effects of GBV on the victim?

What strategies could be used to deal with GBV in higher education?

3. Purpose of This Paper

The aim was to obtain an understanding of factors causing gender-based violence (GBV), its effect and strategies that can be used to empower women in higher education. This integrative review synthesises current GBV research in higher education and identifies gaps in the literature that need further and future research.

4. Research Design and Methods

An integrated review of existing literature on GBV in higher education was undertaken. The literature was searched for studies focused on the notion utilising a methodical review based on the integrated methodology of Whittemore and Knafl (2005). This method allowed papers with a variety of study designs, such

as experimental and non-experimental, to be included. To improve the rigour of the process when performing an integrative review, [Whittemore and Knafl \(2005\)](#) developed a five-stage framework, namely issue identification, literature search, data evaluation, data analysis and presentation. This integrative approach was used to analyse and summarise studies on GBV with the focus in higher education.

4.1. Data Search Stage

The search for literature was the second part of the review process, which detailed the tactics utilised to gather relevant material on the topic of interest ([Whittemore & Knalf, 2005](#)). To ensure that articles published at the end of 2020 were included, the data search (gathering) stage was completed in 2020 and completed in the first two weeks of January 2021. During this stage, searches were conducted using the following electronic databases: 1) Cumulative Index to Nursing and Allied Health Literature (CINAHL); 2) Medline; 3) EBSCO host; and 4) Proquest. Key search terms were GBV and higher education. Publications were included if the topic addressed GBV in higher education, participants in the studies were university students, the design was either qualitative or quantitative, the language was English and the date of publication was between January 2013 and January 2021.

The goal of focusing on research published after January 2013 was to examine the literature that best represented: 1) the current GBV challenges experienced by women in higher education; 2) physical and psychological elements; and 3) measures employed to empower women. Publications were eliminated if they were unpublished (dissertations and theses), written in a language other than English, participants were not higher education students and they were not empirical research studies (discussion and review papers). After deleting duplicates, the search revealed ([Figure 1](#)) 400 items, of which 325 remained. Thirty of the 75 articles did not match the inclusion requirements because the topic was unclear.

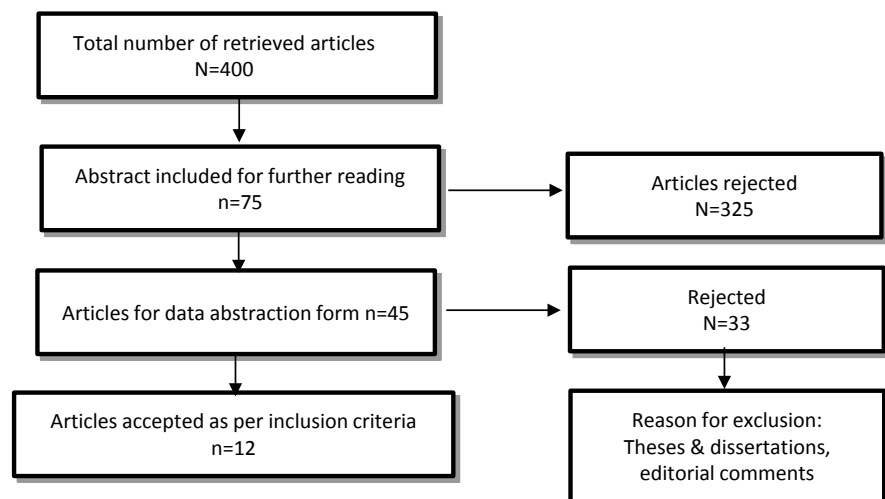


Figure 1. Prisma of data search.

The remaining 45 publications were thoroughly examined, either by reading the abstract or the entire article and 33 were deemed to be ineligible for inclusion and 12 articles were analysed.

4.2. Data Search Prisma

The data that was excluded involved articles that discussed GBV generally. The data did not provide information that answered the questions asked and, therefore, would not provide the information that was sought. Secondly, if the outcomes did not outline information that would yield strategies on how GBV can be eliminated and empower women.

4.3. Data Evaluation Stage

The data evaluation stage encompassed assessing the quality of primary sources using a methodical approach that includes the application of quality criteria appraisal tools (Whittemore & Knalf, 2005). For this review, the author worked independently to check the titles and abstracts, then went on to study thoroughly each of the papers to ensure accuracy of data evaluation. In-depth reviewing of publications meeting the inclusion criteria was undertaken. The seven articles were then evaluated for quality using either a quantitative or qualitative critical appraisal tool (Law, Stewart, Pollock et al., 1998; Letts, Wilkins, Law et al., 2007). Review criteria for quantitative studies included study purpose, design, sample size, outcomes, interventions, results, conclusions and implications. Review criteria for qualitative studies included study purpose, qualitative design, sampling framework, data collection methods and data analysis. The aim of this integrative review was done following a set criterion in order to summarize past empirical and theoretical literature, discover patterns for observed patterns and provide a more comprehensive understanding of phenomenon of GBV, especially in higher education institutions. Additionally, the intention was to make a case for further investigation and research, highlighting gaps in knowledge and asking questions that need to be answered for the betterment of the approaches to addressing GBV.

The appraised papers were separately examined by a co-worker to enhance the trustworthiness of the review. Thereafter, the researcher and coder met several times to examine the critical appraisal forms and assist with the critique and summarising each article. Concerns relating to the critical appraisal review were explored until an agreement was reached, when there were any misunderstandings.

Additionally, each study was ranked on the level of evidence using a 7-level scale ranging from Level 1 (systematic review or meta-analysis of randomised controlled trials [RCT] or evidence-based clinical practice guidelines based on systematic reviews of RCTs) to Level VII (opinion of authorities and/or reports of expert committees). All 12 articles were ranked at a Level VI (single, descriptive/qualitative/physiologic study). Despite some methodological limitations

(addressed in the limitation section) and the low level of evidence, all 12 were included in the review (**Table 1**) due to the paucity of research in this area, specifically in higher education in South Africa.

Table 1. Details of selected literature.

Origin	Title of article	Authors	Journal, volume, issue, page, year	Effects of gender-based violence (GBV)
United States of America	Lifetime prevalence of gender-based violence in US women: Associations with mood/anxiety and substance use disorders	Walsh, Keyes, Koenen, & Hasin (2015)	<i>Journal of Psychiatric Research</i> 62 (March), 7-13, 2015.	Mood disorders; anxiety; substance abuse.
United States of America	Sexual harassment in tertiary institutions: A comparative perspective	Joseph (2015)	<i>TEMIDA</i> 18(2), 125-144, 2015.	Psychological stress; post traumatic distress syndrome; anxiety; depression; neuroticism; melancholia; anger.
South Africa	“We face rape. We face all things”: Understandings of gender-based violence amongst female students at a South African university	Gordon & Collins (2013)	<i>African Safety Promotion Journal</i> 11(2), 1-7, 2013.	Fear; anxiety; victim-blaming; marginalisation; disempowerment.
South Africa	Experiences of gender-based violence at a South African university: Prevalence and effect on rape myth acceptance	Finchilescu & Dugard (2021)	<i>Journal of Interpersonal Violence</i> 36(5-6), NP2749-NP2772, 2021.	Psychological issues such as depression and symptoms of trauma; grades suffering.
Australia	International students and gender-based violence	Forbes-Mewett & McCulloch (2016)	<i>Violence Against Women</i> 22(3), 344-365, 2016.	Fear; stigma; esteem issue.
South Africa	Perceptions of gender-based violence among university staff: Interim results	Mahlori, Byrne, & Mabude (2018)	<i>SAGE Open</i> 8(6), 1-14, 2018.	Anxiety; depression; low self-esteem; feelings of hopelessness; post-traumatic stress.
South Africa	Gender-based violence in South African universities: An institutional challenge	Dauids (2020)	<i>Council on Higher Education Quality Matters</i> 10(November), 1-12, 2020.	Shame; fear; confusion; trauma; fear of stigma; fear of reprisal.
South Africa	Addressing violence against women: A call to action	Garcia-Moreno, Zimmerman, Morris-Gehring et al. (2015)	<i>The Lancet</i> 385(April), 1685-1695, 2015.	Economic and social empowerment programmes for girls and women; institutional response to GBV; victim advocacy; programmes involving men and women; community mobilisation.
South Africa	Factors influencing gender-based violence against young women migrants in selected provinces of South Africa	Kwakwa, Makhubele, Mabasa et al. (2021)	<i>Gender and Behaviour</i> 19(1), 17634-17644, 2021.	Policies need to be gender specific.
South Africa	Voices of women teachers about gender inequalities and gender-based violence in rural South Africa	De Lange, Mitchell, & Bhana (2012)	<i>Gender and Education</i> 24(5), 499-514, 2012.	Gender inequality; difficulty in changing the status quo; reality of GBV in school; addressing GBV.
South Africa	Risk factor management and perpetrator rehabilitation in cases of gender-based violence in South Africa: Implications of salutogenesis	Naidoo & Nadvi (2013)	<i>Agenda</i> 27(1), 141-150, 2013.	Perpetrator rehabilitation: efficacy is minimal; pursuit of societal wellness; enhancing sense of coherence.

Continued

South Africa	Working with men and boys to prevent gender-based violence: Principles, lessons learned and ways forward	Peacock & Barker (2014) <i>Men and Masculinities</i> 17(5), 578-599, 2014.	Policy on men and gender equality must: promote human rights; including the rights of women and girls; remain accountable to and in dialogue with women's rights movements and organisations; scaling up school-based; gender equality curricula including discussions of GBV; engaging men via women's economic empowerment.
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Of the 12 studies, three were quantitative (Finchilescu & Dugard, 2021; Joseph, 2015; Walsh et al., 2015) and 9 were qualitative (Davids, 2020; De Lange, Mitchell, & Bhana, 2012; Forbes-Mewett & McCulloch, 2016; Garcia-Moreno et al., 2015; Gordon & Collins, 2013; Richards & Kafonek, 2017; Mahlori et al., 2018; Naidoo & Nadvi, 2013; Peacock & Barker, 2014). The quantitative studies included two prevalence research designs and one comparative design. The qualitative studies included eight phenomenology research studies of those that originated from South Africa (Davids, 2020; De Lange et al., 2012; Finchilescu & Dugard, 2021; Garcia-Moreno et al., 2015; Gordon & Collins, 2013; Mahlori et al., 2018; Naidoo & Nadvi, 2013; Peacock & Barker, 2014), two from the United States of America (Joseph, 2015; Walsh et al., 2015) and one from Australia (Forbes-Mewett & McCulloch, 2016).

4.4. Data Analysis Stage

Data from primary sources were organised, classified and summarised during the data analysis process to form an integrated conclusion regarding the research problem under investigation (Whittemore & Knalf, 2005). In this review, a matrix was created that detailed the population being examined, the GBV contributing variables, the characteristics of women who are vulnerable to GBV and women's empowerment strategies. The matrix was then filled with content collected from the articles. The data was then organised and classified utilising a constant comparative method to integrate and analyse the results. The contributing factors were found to be cultural, for example gender stereotyping and the power men still have over women, lack of economic strength and poverty which makes women vulnerable, political factor in that there are fewer opportunities and reluctance to discuss GBV and effect changes in policy, or to adopt measures to combat gender-based violence and support equality and lastly legal factors whereby gender-based violence is perceived in many societies as shameful and involving weak women, with many victims still being considered guilty of attracting violence against themselves through their behaviour.

4.5. Review Presentation

Data presentation was the last step in the integrative review process. Researchers offer readers specific details from each of the main sources in order to demon-

strate evidence in support of the final conclusions (Whittemore & Knalf, 2005). The following subheadings were used to organise the articles in this review, namely author, date of publication, country, study design and findings (Table 2). The findings of each study were combined to produce a comprehensive summary of what is known about GBV in higher education and how to prevent it.

5. Results

5.1. Research Populations and Samples

The population in the reviewed studies included largely female participants. The larger number were students and female academics, who were recruited from universities and colleges.

5.2. Contributing Factors to GBV

According to Kaufman, Williams, Grilo et al. (2019), female students' low social status and perceived academic inferiority, as well as traditional relationship dynamics, such as the obligation for females to have sex and relationships with males in order to obtain financial support, contributed to their risk of victimisation and sexual coercion, especially when combined with substance use with males. Women may engage in transactional sex with older men to support their basic needs (food, clothing, school fees) or to obtain desirable consumer goods (cell phones, fashionable clothing, jewellery, meals at expensive restaurants) and the social status that is attributed to such material assets (Forbes-Mewett & McCulloch, 2016). Extreme social and economic inequality, high unemployment, widespread patriarchal and gendered norms, as well as a long history of violent oppression and socio-economic upheaval as a result of apartheid's exclusion, were all identified as contributory factors (Finchilescu & Dugard, 2021).

5.3. Effects of GBV

Physical

Acute repercussions of GBV accidents include bruising, broken bones, brain

Table 2. Classification of recommendations.

Classification	Action Needed
Higher Education institution	Awareness of GBV causes, its effects on the victim and strategies on how it can be prevented
Stakeholder involvement in the fight against GBV (Government and civil society)	Need for the will to engage in a multi-faceted collaborative, intentional, committed and active approach to deal with GBV at all levels of society
Legislative frameworks for prevention	Formulation and implementation of violence prevention policies both by Government and other stakeholders
GBV Prevention programmes	Evidence based theoretical models informed by research and piloted preventative programmes to address causal factors

injuries, lacerations and internal bleeding, which necessitate medical attention and hospitalisation. Arthritis, irritable bowel syndrome, chronic pain, pelvic pain, ulcers and migraines are some of the chronic health issues connected with GBV sufferers. Victims, who are pregnant at the time of the abuse, are at a higher risk of miscarriage, pre-term labour and foetal harm or death. Physical abuse has a significant influence on the physical and mental health of abused women. Furthermore, physical abuse has not only psychological but also bodily consequences that include severe injuries that may result in death. Physically abused women are more likely to have high blood pressure, fear of proximity, suicide, alcoholism, drug misuse and low self-esteem, according to the findings of new research (Mahlori et al., 2018).

Psychological

GBV victims have higher levels of anxiety, despair, low self-esteem, feelings of hopelessness and post-traumatic stress symptoms. The psychological and health consequences of GBV exposure can be translated into monetary expenses for the individuals involved, as well as for societies. Women who have been physically assaulted are more likely to have social isolation, post-traumatic stress disorder PTSD, panic attacks, sleeping difficulties and eating disorders. In a study by Gordon and Collins (2013), it was found that a culture of fear was created among women and was promoted by the unwillingness of authorities to respond adequately to GBV in South Africa.

Other effects

Victims also missed lectures, dropped a course, switched lecturers or supervisors and filed a disciplinary complaint, among other things. Missing work, reporting the incident to a line manager and filing a disciplinary complaint or grievance were among the effects presented by employees.

5.4. How to Prevent GBV

Building gender equality and addressing general acceptance of violence are two specific techniques that might be implemented (Gevers, Jama-Shai, & Sikweyiya, 2013). Davids (2020) contends that a comprehensive framework for the prevention of GBV is required. Higher education institutions are supposed to have policies on sexual harassment and related topics with no exceptions. Institutions are hesitant to approach GBV for fear of jeopardising their reputation. The GBV prevention framework should make a point of identifying contextual norms, structures and cultures that reinforce gender bias and discrimination.

According to Richards and Kafonek (2017), prevention programmes that are comprehensive, theory-driven, encourage positive relationships, are socio-culturally relevant, use varied teaching methods, are delivered in sufficient dosage, are well-timed, with well-trained staff and include the needed outcome evaluation. The notion is that the institutional GBV programme should be led by campus safety officers. Additionally, preventative programmes should identify and target students and personnel who are in need or in danger (Richards & Kafonek, 2017).

According to Joseph (2015), the efficiency of GBV regulations is determined by how well they are implemented by colleges and universities. Academics, campus management, personnel and students must all buy into prevention programmes. Campus-wide campaigns must provide a clear message about GBV's intolerance, the consequences for students who break related behaviour standards and the support and services available to victims.

6. Discussion

Establishment of a GBV command centre and passing new legislation are all good initiatives to curb the scourge of GBV. The recent announcement by the President of South Africa that there were three GBV bills in parliament awaiting approval, has not changed the status quo. The Government's most current strategy is the 2020 Gender-based Violence and Femicide National Strategic Plan (GBVF-NSP) by the interim steering committee, which was established in April last year, after the historic presidential summit on GBV in 2018 (Mboyisa & Chelin, 2020). According to Joseph (2015), the effectiveness of GBV laws is influenced by how successfully colleges and universities enforce them. Academics, university administration, personnel and students must all support preventative efforts. Campus-wide campaigns must provide a clear message about the intolerance of GBV, the repercussions for students who violate relevant conduct norms and the importance of speaking up. This societal disease is perpetuated by women who are compromised by cultural standards and a patriarchal culture that still regards males as superior to women. In the South African context, gender inequality and the general annihilation of women has been propagating GBV. This can be traced back to historically established patriarchal systems and structures that have been in place for many years.

Males have been placed at the centre of decision-making, leadership and the occupation of political and productive arenas due to patriarchy (Akala & Divala, 2016). Women's voices are muffled by the attitudes of those in positions of authority and the victim-blaming culture. The Government should increase the authority of the legal system so that it can deal appropriately with cases of domestic violence by enacting or enforcing laws that safeguard the rights of abused partners. The programmes should also encourage the abused party to disclose the abuse and seek assistance in order to put an end to it (Makhubele et al., 2018). Creating or enhancing institutional systems that allow women to report incidents of violence against them in a secure and confidential setting, without fear of punishment or retaliation, is more important than ever. It is critical that the Government construct, refine, develop and fund training programmes for judicial, legal and medical reasons and to sensitise police officials about the nature of GBV and ensure that victims are treated fairly (DoHET, 2019; RAPSSA, 2017).

One strategic objective of DoHET (Department of Higher Education and Training) is to improve the safety of students and staff in higher education in-

stitutions by implementing comprehensive prevention programmes aimed at raising knowledge of GBV policies and services, as well as other preventative actions in PSETA (Public Service Education and Training Authority) institutions. The goal is to provide a safe environment, raise awareness and provide assistance. To raise awareness and educate students about GBV and how to prevent it, [Magudulela \(2017\)](#) recommended that programmes include activities, dialogues, panel discussions, media interviews, participatory visual methodologies (photovoice, art, drama and poetry), social media campaigns and collaboration with other like-minded parties.

To eliminate institutional and state self-interest and reduce structural gender, racial and heteronormative power and bias, [Todorova \(2018\)](#) recommended that information about sexual and GBV within the institution be collected by non-institutional and non-governmental women's and community groups. Furthermore; community members and survivors should be encouraged to speak to the public about sexual and GBV in colleges using affordable or free media time. University chancellors, vice-chancellors, deans and other high-ranking officials should talk openly and honestly about the problem. Institutions must form budget advisory boards made up of representatives from various campus populations, develop gender-sensitive budgeting to secure enough funding for preventative programmes and seek governmental support in obtaining ongoing funding ([Todorova, 2018](#)).

[Collins et al. \(2009\)](#) argued that there is an urgent need for efficient, accessible and trusted 24-hour crisis response services that have a single contact point known to all staff and students that should mobilise the appropriate psychological, medical, forensic, social and security support without placing any additional stress on the victim. Social spaces should discourage activities like the consumption of alcohol and drugs, provision of platforms to role models who embody misogynistic, sexist and racist; attitudes and events (corporate alcohol branding events) that predispose to violent, hateful and harmful behaviour ([Collins et al., 2009](#)). [Peacock and Barker \(2014\)](#) are of the view that men need to be involved in the drive to address GBV. However, engaging men for gender equality should not detract from efforts to empower women and is supportive of and furthers progress toward strengthening the commitment of national justice systems to end GBV.

Recommendations

This integrative review provides vital information about the concept of gender-based violence (GBV). Becoming aware of contributing factors to GBV in institutions of higher education, incorporating its causes and effects on the victim and how it can be prevented. Prevention of GBV requires the will from all stakeholders to eliminate this scourge actively and collaboratively from society. Addressing GBV is a complex issue requiring multi-faceted responses and commitment from all stakeholders, including government and civil society. Violence

prevention policies and programmes should be informed by the best evidence available. Programmes that are evidence-based are built on what has been done before and has been found to be effective, is informed by a theoretical model, is guided by formative research and successful pilots that are multi-faceted and address several causal factors.

Limitations

There were several methodological limitations to the study. Some studies did not provide detailed information about the sample characteristics. There is limited national data that exists and documentation of the extent of GBV on campuses. The few studies that have been undertaken are also specific to universities (and often particular faculties) and focus almost exclusively on students' experiences of sexual harassment and rape. There is a paucity of studies undertaken in higher education institutions in South Africa.

Conflicts of Interest

The author declares no conflict of interest.

References

- Akala, B., & Divala, J. J. (2016). Gender Equity Tensions in South Africa's Post-Apartheid Higher Education: In Defence of Differentiation. *South African Journal of Higher Education, 30*, 1-16. <https://doi.org/10.20853/30-1-557>
- Collins, A., Loots, L., Meyiwa, T., & Mistrey, D. (2009). Nobody's Business: Proposals for Reducing Gender-Based Violence at a South African University. *Agenda, 23*, 33-41.
- Davids, N. (2020). Gender-Based Violence in South African Universities: An Institutional Challenge. *Council on Higher Education: Quality Matters, 10*, 1-12.
- De Lange, N., Mitchell, C., & Bhana, D. (2012). Voices of Women Teachers about Gender Inequalities and Gender-Based Violence in Rural South Africa. *Gender and Education, 24*, 499-514. <https://doi.org/10.1080/09540253.2011.645022>
- DoHET (Department of Higher Education and Training) (2019). *Department of Higher Education Policy Framework to Address Gender-Based Violence in the Post-School Education and Training System*. DoHET.
- Enaifoghe, A. O., Dlelana, M., Durokifa, A. A., & Dlamini, N. (2021). The Prevalence of Gender-Based Violence against Women in South Africa: A Call for Action. *African Journal of Gender, Society and Development, 10*, 121-150. <https://doi.org/10.31920/2634-3622/2021/v10n1a6>
- Finchilescu, G., & Dugard, J. (2021). Experiences of Gender-Based Violence at a South African University: Prevalence and Effect on Rape Myth Acceptance. *Journal of Interpersonal Violence, 36*, NP2749-NP2772. <https://doi.org/10.1177/0886260518769352>
- Forbes-Mewett, H., & McCulloch, J. (2016). International Students and Gender-Based Violence. *Violence against Women, 22*, 344-365. <https://doi.org/10.1177/1077801215602344>
- Garcia-Moreno, C., Zimmerman, C., Morris-Gehring, A., Heise, L., Amin, A., Abrahams, N., Montoyo, O., Bhate-Deosthali, P., Kilonzo, N., & Watts, C. (2015). Addressing Violence against Women: A Call to Action. *The Lancet, 385*, 1685-1695. [https://doi.org/10.1016/S0140-6736\(14\)61830-4](https://doi.org/10.1016/S0140-6736(14)61830-4)

- Gevers, A., Jama-Shai, N., & Sikweyiya, Y. (2013). Gender-Based Violence and the Need for Evidence-Based Primary Prevention in South Africa. *African Safety Promotion Journal, 11*, 14-20.
- Gordon, S. F., & Collins, A. (2013). "We Face Rape. We Face All Things": Understandings of Gender-Based Violence amongst Female Students at a South African University. *African Safety Promotion Journal, 11*, 93-106.
- Joseph, J. (2015). Sexual Harassment in Tertiary Institutions: A Comparative Perspective. *TEMIDA, 18*, 125-144. <https://doi.org/10.2298/TEM1502125H>
- Junko, A., & Atsuko, A. (2018). Harassments and Dating Violence among University Students in Japan. *Annual Review of Critical Psychology, 15*, 50-65.
- Kaufman, M. R., Williams, A. M., Grilo, G., Marea, C. X., Fentaye, F. W., Gebretsadik, L. A., & Yedenekal, S. A. (2019). "We Are Responsible for the Violence, and Prevention Is up to Us": A Qualitative Study of Perceived Risk Factors for Gender-Based Violence among Ethiopian University Students. *BMC Women's Health, 19*, Article No. 131.
- Kibriya, S., Tkach, B., Ahn, J., Valdez Gonzalez, N., Xu, Z., & Zhang, Y. (2016). *The Effects of School-Related Gender-Based Violence on Academic Performance: Evidence from Botswana, Ghana and South Africa*, USAID.
- Kwakwa, M. M., Makhubele, J. C., Mabasa, M. A., Baloyi, T. V., Rabotata, N. E., Matlakala, F. C., Mata, P., & Masilo, D. T. (2021). Factors Influencing Gender-Based Violence against Young Women Migrants in Selected Provinces of South Africa. *Gender and Behaviour, 19*, 17634-17644.
- Law, M., Stewart, D., Pollock, M., Letts, L., Bosch, J., & Westmorland, M. (1998). *Guidelines for Critical Review Form: Quantitative Studies*. McMaster University Occupational Therapy Evidence-Based Practice Research Group.
- Letts, L., Wilkins, S., Law, M., Stewart, D., Bosch, J., & Westmorland, M. (2007). *Guidelines for Critical Review Form: Qualitative Studies*. McMaster University Occupational Therapy Evidence-Based Practice Research Group.
- Magudulela, N. (2017). Tackling Sexual and Gender-Based Violence on Campus: An Intervention at the Durban University of Technology. *Agenda, 31*, 99-108. <https://doi.org/10.1080/10130950.2017.1362900>
- Mahlori, X. F., Byrne, D. S., & Mabude, L. A. (2018). Perceptions of Gender-Based Violence among University Staff: Interim Results. *SAGE Open, 8*, 14 p. <https://doi.org/10.1177/2158244018800163>
- Makhubele, J. C., Malesa, S. E., & Shika, F. L. (2018). Knowledge of Students at Higher Learning Institutions on Intimate Partner Violence (IPV). *Gender and Behaviour, 16*, 10889-10901.
- Maquibar, A., Hurtig, A. K., Vives-Cases, C., Estalella, I., & Goicolea, I. (2018). Nursing Students Discourses on Gender-Based Violence and Their Training for a Comprehensive Healthcare Response: A Qualitative Study. *Nurse Education Today, 68*, 208-212. <https://doi.org/10.1016/j.nedt.2018.06.011>
- Mboyisa, Z., & Chelin, R. (2020). South Africa Has the Legislation but Not Enough Action against Gender-Based Violence. *Mail & Guardian Opinion, 12*, 1-5.
- McCloskey, L. A. (2016). The Effects of Gender-Based Violence on Women's Unwanted Pregnancy and Abortion. *Yale Journal of Biology and Medicine, 89*, 153-159.
- Naidoo, N., & Nadvi, L. (2013). Risk Factor Management and Perpetrator Rehabilitation in Cases of Gender-Based Violence in South Africa: Implications of Salutogenesis. *Agenda, 27*, 141-150. <https://doi.org/10.1080/10130950.2013.801196>
- Peacock, D., & Barker, G. (2014). Working with Men and Boys to Prevent Gender-Based

- Violence: Principles, Lessons Learned, and Ways forward. *Men and Masculinities*, 17, 578-599. <https://doi.org/10.1177/1097184X14558240>
- RAPSSA (Rape Statistics in South Africa) (2017). *Addressing Gender-Based Violence in the Post-School Education and Training Sector: Draft Policy and Strategy Framework*. Rape Statistics in South Africa.
- Richards, T. N., & Kafonek, K. (2017). An Examination of Strategies for the Prevention of Gender-Based Violence at Four-Year Institutions of Higher Education. *Journal of School Violence*, 16, 271-285. <https://doi.org/10.1080/15388220.2017.1318576>
- Shefer, T., Clowes, L., & Vergnani, T. (2012). Narratives of Transactional Sex on a University Campus. *Culture, Health and Sexuality*, 14, 435-447. <https://doi.org/10.1080/13691058.2012.664660>
- Statistics SA (2021). *Crimes against Women in South Africa: An Analysis of the Phenomenon of GBV and Femicide*. Government Printers.
- Todorova, M. S. (2018). Studying Sexual and Gendered Violence Prevention in Higher Education. *Canadian Woman Studies/Les Cahiers de la femme*, 32, 6-19.
- United Nations (1989). *Violence against Women in the Family*. United Nations.
- Walsh, K., Keyes, K. M., Koenen, K. C., & Hasin, D. (2015). Lifetime Prevalence of Gender-Based Violence in US Women: Associations with Mood/Anxiety and Substance Use Disorders. *Journal of Psychiatric Research*, 62, 7-13. <https://doi.org/10.1016/j.jpsychires.2015.01.002>
- Whittemore, R., & Knafl, K. (2005). The Integrative Review: Updated Methodology. *Journal of Advanced Nursing*, 52, 546-553. <https://doi.org/10.1111/j.1365-2648.2005.03621.x>