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Police Differentiated Response to Men and Women Physical Intimate Partner Violence Cases Reported to Police Gender Violence Units in **Kiminini Sub-County**

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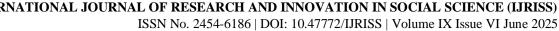
ABSTRACT

Intimate partner violence is a pervasive issue that primarily affects women and men. Police officers play a crucial role in addressing intimate partner violence, specifically within gender units established by the Kenyan government in every police station across the country to address gender-based violations. Despite the presence of these gender units, the incidence of intimate partner violence continues to rise. This study builds upon the principles of family violence and feminist theories to address this issue comprehensively. The objective of the study was to find out the police differentiated response to men and women physical intimate partner violence cases reported to police gender violence units in Kiminini Sub-County. The study utilized a descriptive research design, and the sample size was determined using the Cochran formula. In this regard, the study sampled 185 intimate partner violence survivors, selected through convenient sampling criteria. Participants were selected based on their status as survivors of intimate partner violence, with a preference for those who experienced the incident at least six months prior to the study or have had undergone three cycles of counselling in relevant facilities. Data collection involved questionnaires for intimate partner violence survivors and key informant interviews with police units. Thematic analysis was used for qualitative data analysis, while percentages and frequencies were computed for quantitative data. The findings showed that police prioritized the safety of survivors irrespective of gender, tailoring their responses to the urgency and nature of each case without demonstrating a clear gender bias. Interviews revealed that while both men and women received protective interventions, logistical challenges sometimes delayed response times, although the 999-emergency hotline and structured response procedures aimed to ensure timely support for all survivors. The results suggest that in Kiminini Sub-County, police do not explicitly differentiate their responses based on the survivor's gender but rather focus on the immediate needs and safety of the individual. Based on the research findings, the study recommends a multifaceted approach to address intimate partner violence, emphasizing robust comprehensive training programs for police officers in response to intimate partner violence cases.

Keywords: Gender, police differentiated response, intimate partner violence, gender units, Kiminini Sub-County.

INTRODUCTION

Intimate Partner Violence (IPV) has become a global epidemic. According to Barnett, Maticka-Tyndale and Kenya (2016), IPV encompasses various ways of abusive behavior, including sexual or physical violence, as well as emotional abuse, perpetrated by a current or former intimate partner. This type of violence can be inflicted by a spouse, former spouse, current or former boyfriend/girlfriend, or a partner in a dating relationship. IPV has emerged as a pervasive violation of human rights and a significant public health concern worldwide, leading to profound long and short-term outcomes for the mental and physical well-being of its survivors. Regardless of socioeconomic, religious, or cultural backgrounds, IPV can occur in any setting and



among diverse groups (Barnett et al., 2016). The burden of IPV is predominantly experienced by women globally. While it is acknowledged that women can exhibit violence within relationships, often in self-defence and that violence can also occur in same-sex partnerships, research consistently demonstrates that male intimate partners or ex-partners are the most common committers of violence against women. Conversely, men are more probably to encounter violent deeds from acquaintances or strangers rather than individuals nearer to them (Bazargan-Hejazi, Kim, Lin, Ahmadi, Khamesi & Teruya, 2014).

According to the Centre for Disease Control and Prevention (CDC) in the United States, approximately 24 individuals, both women and men, experience oppression by an intimate partner every minute, resulting in around 12 million survivors annually (Lockwood & Prohaska, 2015). Furthermore, in 2010, the national average of women killed by men in the US stood at 1.22 per 100,000 (Novisky & Peralta, 2015). In current years, there has been a rising awareness among the public regarding IPV, partly due to increased exposure through public service announcements that aim to educate and illuminate the dangers associated with such situations. The proliferation of technology has also played a role in facilitating the dissemination and exchange of information, contributing to heightened public consciousness surrounding IPV. Still on the matter, in the US, around 19.3% of women and approximately 1.7% of men have encountered incidents of rape throughout their lifetime according to the updated results from the National Intimate Partner and Sexual Violence Survey (NISVS) (Lockwood & Prohaska, 2015). In this sense, regardless of whether an arrest takes place, the law enforcement response to IPV occurrences include evaluating the survivor, offender, or both for risk and needs before linking one or both parties to suitable services.

Regionally, various tools have been established to address IPV. For example, adopted in 1995, the African Charter on Human and Peoples' Rights on the Rights of Women in Africa aims to protect women against Gender-Based Violence (GBV) by incorporating its eradication within the context of women's rights to life, personal integrity, security and dignity. Protection against sexual abuse as a form of torture, cruel treatment, or humiliating treatment is another provision of the African Charter on the Rights and Welfare of Children. Several countries, including South Africa, Sierra Leone, Rwanda and Liberia, have established women police stations. These specialized units, particularly in Rwanda and neighbouring South Africa, streamline the reporting process for women and girls experiencing IPV, offering a dedicated department within the police force where survivors can seek appropriate assistance. Based on a study done by the United Nations Development Fund for Women (UNIFEM, 2005) regarding the gender desk of the Rwanda National Police (RNP), it was found that the effectiveness of gender units was attributed to their establishment of operational offices with trained staff members (Thomson et al., 2015). Additionally, these units were equipped with vehicles and motorcycles to ensure prompt response to cases of IPV. This means that to be effective, these gender units require resources and trained human resource.

Nationally in Kenya, the National Monitoring and Evaluation Framework towards the Prevention of and Response to Sexual and Gender Based Violence (2014) was established to monitor all forms of GBV including the IPV situation in the country. The focus is on examining the legal mechanisms utilized to combat IPV and address gender inequality. These instruments encompass the Kenya Constitution of 2010, the Sexual Offences Act (SOA) of 2006, the Children's Act of 2001, the Criminal Procedure Code of 2012, the Prohibition of Female Genital Mutilation Act of 2011 and the National Gender Policy. According to Gibson-McCrary and Upchurch (2015), similar services in mitigating IPV are provided by the Equality Commission Act of 2011, Political Parties Act of 2011, Election Act of 2011, Sexual Offences (Medical treatment) Regulations of 2012, Matrimonial Property Act of 2013 and the Marriage Act of 2014. Gender units have been established in every police station across the country as part of the Kenya police's reforms to enhance accessibility and responsiveness to the community's needs, specifically by addressing cases of IPV.

At the local level, police stations in various counties have established gender desks to specifically address cases of GBV, including IPV. The heads of these gender desks have the responsibility to receive, investigate and appropriately charge the perpetrators involved in such cases. Additionally, the gender desks are tasked with receiving complaints, conducting thorough investigations and referring the accusers to relevant partners and organizations, such as health facilities for medical support and NGOs for psychosocial assistance and counselling. They also collaborate with the courts for the legal proceedings. In the framework of Kiminini sub-County, the national law considers IPV as both a criminal offense and an ethical violation, as stipulated in the





Kenyan Penal Code, the Sexual Offences Act of 2006 and the Constitution of 2010. It is recognized that IPV also has significant implications for public health, leading to economic and social burdens for both individuals and the government. Consequently, It prevents the accomplishment of developmental objectives like Kenya's Vision 2030 and the Millennium Development Goals.

In Trans Nzoia County, Kinyondo, Ntegwa and Miho (2021) found higher rates of IPV cases due to social cultural differences and methodological complexity, which make psychological violence more difficult to understand. Domestic violence is also associated with a rise in females' age (Kinyondo et al., 2021). This means that as women get older, they are less likely to be exposed to IPV. It is probable that younger women are less versed with how to deal with suspected IPV (Kinyondo et al., 2021). Furthermore, as compared to women from the poorest homes, women from middle-income households are much more likely to face sexual violence. In addition, a woman who has a spouse who drinks alcohol is more likely to be subjected to all types of abuse. This might be since alcohol abuse has been indicated to have a bad influence on mental health, leading to a typical responses and actions, which can lead to violent behavior. Therefore, there is a gap as studies such as Kinyondo et al. (2021) do not give data on the exact social cultural differences and methodological complexities that contribute to the higher rates of psychological violence. Addressing this gap could help provide a more nuanced understanding of the elements contributing to IPV in Trans Nzoia County.

In Kiminini sub-county, the cases of IPV reported in the police gender unit are very minimal because some cases are reported to the 'Mkasa' or the chief to solve the cases. Some cases are not reported because families interfere especially if the dowry is already paid up as opposed to if the dowry is not paid. The minimal number of IPV cases reported in the police gender unit in Kiminini sub-county also suggests a potential issue within the gender police units themselves, which may contribute to underreporting. Possible contributing factors may include a lack of awareness among the community about the role and services provided by these units, insufficient training and resources for the officers assigned to the gender desks and potential biases or insensitivity in handling IPV cases. Additionally, there could be a lack of trust and confidence in the gender police units among survivors, resulting from previous negative experiences or perceptions of inadequate support and response. However, according to the National Crime Research Centre (2018), the cases of IPV in Trans Nzoia County are reported at a rate of 11.2% against the national outlook of 9.2%. In Kiminini Sub-County, specifically, the percentage of reported IPV cases is even higher, standing at 14%.

From the background information, there is a gap that studies such as Thomson et al. (2015) do not address the responses of police units deployed in gender unit to physical IPV. It is not clear how police officers in the gender unit respond to cases of IPV that are reported to them. Given that IPV is a stern crime and an alteration of human rights, it is crucial to realize how police officers in the gender unit respond to cases of IPV and whether their responses are effective in addressing this issue. Therefore, addressing this gap could give vision into the effectiveness of police response to IPV in Trans Nzoia County and identify potential areas for improvement.

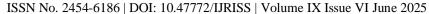
Purpose of the Study:

The aim of this paper was to find out the police differentiated response to men and women physical intimate partner violence cases reported to police gender violence units in Kiminini Sub-County.

LITERATURE REVIEW

Conceptual Literature

Studies have highlighted how police officers respond differently to reports of internal violence regarding the gender of the survivor and perpetrator. For instance, a study by Duvvury et al. (2013) established that police officers are more probable to arrest male perpetrators of domestic violence against female survivors than vice versa. The researchers also indicated that police officers tend to reduce the severity of domestic violence incidents when the survivor is male. Correspondingly, research by Bazargan-Hejazi et al. (2014) established that police officers were extra probable to detain male perpetrators of domestic violence and that male





survivors were less possible to receive survivor services than female survivors. The researchers also established that male survivors were more likely to be detained themselves than female survivors.

Furthermore, a study by Umubyeyi et al. (2016) indicated that police officers demonstrated a tendency to apprehend male individuals who were responsible for domestic violence incidents, against female survivors than vice versa. The researchers also established that female survivor were possible to report being hit, kicked, or punched by female perpetrators, while male survivors were more likely to account for being strangled or endangered with a weapon by female perpetrators. These studies suggest that gender stereotypes and biases can influence police officers' response actions to reports of domestic violence, with male culprits of violence against female sufferers receiving more severe responses than other types of violence (Bazargan-Hejazi et al., 2014). Gender stereotypes may be crucial in regulating domestic violence not just between partners, but also between children and parents, according to their research. However, this research failed to document the occurrence of domestic violence amongst partners.

Theoretical Review

This research was led by the feminist theory by Dobash and Dobash (1979), which emphasizes the patriarchal dominance of men over women as a root cause of IPV. The root cause of IPV, as highlighted by feminist theory, significantly influences how such cases are reported and handled; the patriarchal dominance embedded in societal structures often leads to underreporting, stigma, and biases in law enforcement and judicial responses, thereby perpetuating a cycle of violence and silence among survivors. Until the 1970s, IPV was predominantly regarded as a private matter, not warranting investigation or public attention. However, Dobash and Dobash (1979) marked a turning point by acknowledging it as a social problem for the first time. According to this theory, IPV is not qualitatively dissimilar from the rest forms of family conflict like child abuse, elder abuse, or violence between siblings and can be conceptualized using a variety of theories. The feminist perspective sees partner violence as a gendered issue and the language used to describe the issue reflects different theoretical underlying assumptions (Lawson, 2012).

The feminist theory's emphasis on gendered power dynamics is highly applicable to the study. Recognizing that IPV is a gendered issue rooted in patriarchal dominance, a gender desk response can ensure that interventions and policies address the underlying power imbalances that contribute to violence against women. Having a know-how on the gendered nature of IPV is crucial to creating effective prevention and response strategies that address the unique experiences of women and other marginalized groups. Additionally, the feminist perspective's emphasis on the family as the primary analytical unit provides a holistic know how of IPV that considers the wider cultural and social elements that lead to this issue. A gender desk response that incorporates the feminist theory can therefore provide a comprehensive and nuanced approach to addressing IPV. A gender desk response that incorporates feminist theory can effectively address IPV by empowering survivors through tailored support services and challenging patriarchal norms through education and advocacy. Additionally, it promotes interdisciplinary collaboration and training for service providers to ensure informed and sensitive responses to the complexities of IPV.

Gelles and Straus (1979), prominent sociologists specializing in family violence theory and research, have engaged in a pivotal role in determining and promoting the perspective of family violence. This viewpoint posits that conflicts among family members are universal and inevitable and violence, including spousal violence, is regarded as a strategy employed by family members to address such predictable conflicts. To understand IPV from the perspective of family violence, it is essential to explore the underlying motivations that drive family members to resort to violence as a means of resolving conflicts. Sociologists employ various theoretical frameworks within the family violence paradigm to understand IPV within the familial framework. These frameworks include resource theory, subculture-of-violence theory, exchange theory, ecological theory and systems theory. These theoretical perspectives provide insights into the dynamics and elements resulting to IPV within the broader framework of family violence. It is important to note that while the family is seen as the fundamental unit of analysis, these theories effectively apply to the study of IPV by highlighting how familial relationships, power dynamics, and social environments influence violent behaviours within intimate partnerships.





EMPIRICAL LITERATURE

Richardson-Foster, Stanley, Miller and Thomson (2012) observed that the police are more equipped for working with young people and children than situations involving DV in older individuals, such as in cases of children's inconsiderate conduct. Richardson-Foster et al. (2012) is one of the few studies addressing these topics, which shows a large gap in literature involving IPV in adults. The authors highlight the omission of children as key actors and survivors in policing domestic violence, concluding that a strategy that incorporates all children as survivors of domestic violence, rather than focusing on girls and women, is required.

In addition, Arnocky and Vaillancourt (2014) claimed that policing child-to-parent violence (CPV) is specifically difficult due to survivors' severe aversion to cooperating. They furthermore discovered a gender difference in police reactions, with male assailants being more probable to be detained when the target is a woman (i.e., mother). When they persecute a man (i.e., father), male attackers are no more likely than female aggressors to be arrested, showing how ineffective the responses are (Arnocky & Vaillancourt, 2014).

In the African continent, a variety of elements affecting how police officers understand and respond to IPV situations and how their IPV assessments cause specific police actions have been studied (Myhill & Johnson, 2016). Perez Trujillo and Ross (2008) discovered, for example, that survivors' fear of the suspect influences police officers' reactions when interfering. In their review of IPV, Perez Trujillo and Ross also mentioned that study ought to consider situational dynamics (e.g., the survivor's level of fear measured by self-reported feelings and observable behaviours related to their experiences), as these elements may swiftly elevate the danger of injury, and it is unknown how much police officers grasp the importance of these aspects. Furthermore, concerning gender-differentiated responses to IPV, signs of criminal severity, such as survivor injuries, often significantly influence police officers' decisions to make arrests in the moment (Tatum & Pence, 2015). In Kenya, police officers exercise discretion in assessing what constitutes domestic violence and their individual perspectives shape their evaluation of the severity of an incident. This creates a gap in the gender-specific effectiveness of their operations, highlighting the need for further investigations to determine the actual impact's severity instead of relying solely on individual judgments (Gibson-McCrary & Upchurchm, 2015.

METHODOLOGY

The study employed a descriptive research design with a mixed-methods approach, combining quantitative and qualitative data to provide a comprehensive understanding of IPV prevalence and police responses. Quantitative data was gathered through structured and semi-structured questionnaires administered to 185 survivors of IPV, while qualitative insights were obtained via interviews with 12 police officers from GBV units. The mixed-methods approach ensured a balanced analysis, capturing both statistical trends and personal experiences. The study was conducted in Kiminini Sub-County, selected due to its high IPV rates (14% among women aged 14-49) and the lack of rural-focused IPV research. The target population included survivors (124,730 women aged 18-49) and police officers handling GBV cases. Sampling involved multistage and purposive techniques, with survivors identified through police records, NGOs, and shelters. The Cochran formula determined the sample size, ensuring statistical reliability. Police officers were purposively selected to provide expert perspectives on IPV response mechanisms. Data collection instruments included questionnaires for survivors (with adaptations for low literacy) and structured interviews for police officers. A pilot study in Kwanza Sub-County (with 18 respondents) tested the tools' validity and reliability, yielding a Cronbach's alpha of 0.842 and a Content Validity Index (CVI) of 0.759. Ethical considerations such as informed consent, confidentiality, and NACOSTI approval were strictly followed to protect participants. Data analysis involved descriptive statistics (SPSS v.27) for quantitative findings and thematic analysis for qualitative responses. Results were presented in tables and figures, highlighting frequencies, percentages, and key themes. Survivor participants were ethically and securely identified through confidential referrals from GBV support organizations, police records, and shelters, ensuring privacy and minimizing risk of re-traumatization.



RESULTS AND DISCUSSION

The research first sought out the way the respondents described their relationships. The research sought to find out the way the respondents described their relationship. A notable portion of respondents, constituting 54.1% (n=85), reported experiencing "No tension" in their relationships. Furthermore, 38.2% (n=60) reported experiencing "Some tension." A smaller but still noteworthy percentage, 7.6% (n=12), indicated experiencing "A lot of tension" in their relationships. These findings emphasize the diversity of experiences within relationships among the surveyed population. Based on gender, among the respondents, a higher number of females (62) reported having no tension in their relationship, while a smaller number of males (23) reported similar experiences. Additionally, a significant number of female respondents reported some tension (49) in their relationship, whereas a smaller proportion of male respondents reported similar experiences. These disparities in how respondents describe their relationships emphasize gender-based differences in relationship dynamics in Kiminini Sub-County, as shown in Table 1. These findings align with feminist theory, which posits that patriarchal dominance influences the dynamics within intimate relationships, often placing women in more emotionally vulnerable positions (Dobash & Dobash, 1979). The higher proportion of women reporting tension supports the argument that gendered power imbalances shape relationship experiences, reinforcing the feminist view that IPV and emotional strain are not gender-neutral phenomena but rooted in societal structures (Lawson, 2012).

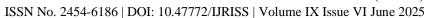
Table 1: The way the Respondents described their relationship

		The way you would describe your relationship			Total
		A lot of tension	Some tension	No tension	
Gender	Male	3	11	23	37
	Female	9	49	62	120
Total		12	60	85	157

The data regarding feeling safe in one's current relationship provides crucial insights into the overall sense of security and well-being within these partnerships. A significant majority of respondents, comprising 64.3% (n=101), reported feeling safe in their current relationship. On the other hand, 35.7% (n=56) reported that they do not feel safe in their current relationship. Based on gender, a higher number of females (82) reported feeling safe in their current relationship, while a smaller number of males (19) reported similar feelings. These disparities indicate gender-based differences in feelings of safety within current relationships in Kiminini Sub-County (Table 2). These gendered disparities in perceived safety resonate with feminist theory, which underscores how patriarchal power structures can create environments where women disproportionately experience vulnerability and control in intimate relationships (Dobash & Dobash, 1979). The finding that a significant portion of women feel unsafe supports the notion that gendered power imbalances contribute to emotional insecurity, aligning with the feminist view that IPV is not just physical but also psychological, shaped by broader societal norms and inequalities (Bazargan-Hejazi et al., 2014).

Table 2: Feeling safe in current relationship based on Gender

		Feeling safe in	Feeling safe in your current relationship	
		Yes	No	
Gender	Male	19	18	37
	Female	82	38	120
Total		101	56	157





Data for this study was also gathered through interviews with police officers, providing insights into the varied responses police took based on the gender of the complainant in cases of physical IPV in Kiminini Sub-County. The findings indicate that Trans Nzoia police prioritized survivor safety without specific gender bias, offering tailored responses that included mediation when appropriate. These findings suggest an evolving police response that attempts to move beyond traditional gender biases often documented in IPV cases (Duvvury et al., 2013). The use of a gender-neutral approach and timely interventions aligns with calls for survivor-centred policing, reflecting a shift towards professionalized, equitable service delivery (Myhill & Johnson, 2016). However, this also contrasts with studies highlighting the persistent influence of gender stereotypes on police discretion, suggesting that while structural improvements like emergency lines enhance responsiveness, the subjective interpretation of cases remains critical (Bazargan-Hejazi et al., 2014). The availability of a 24/7 emergency response line (999) helped minimize delays, underscoring the police's effectiveness in handling IPV cases, as illustrated by the following responses:

When it comes to ensuring the well-being of survivors, the police in Kiminini sub-County take immediate action, tailoring their response to the specific circumstances of each case. This is particularly crucial in instances where mediation may be required, emphasizing the priority placed on the survivor's safety and security (Police Officers, Kiminini Sub-County).

In cases involving partner violence, our priority lies in swiftly assessing the well-being of the survivor. Depending on the urgency of the situation, immediate action is taken to ensure their safety and security (Police Officers, Kiminini Sub-County).

In case of emergencies, the reliable emergency number 999, based in Nairobi, ensures that a standby response is available round the clock, 24 hours a day. However, it's worth noting that any delays in response are typically due to logistical challenges, ensuring a commitment to swift action. This centralized emergency infrastructure reflects institutional efforts to standardize IPV response protocols across regions, supporting literature that emphasizes the role of structural readiness in effective survivor protection (Umubyeyi et al., 2016). Nonetheless, logistical constraints, such as vehicle availability or distance from dispatch centres, often hinder immediate action, echoing findings by Perez Trujillo and Ross (2008) on the operational limitations that can reduce police effectiveness. These realities highlight the tension between policy intentions and on-the-ground capacities in IPV management.

We have established a dedicated call centre in Nairobi, reachable at 999, where anyone can report incidents. This hotline serves as a vital lifeline for individuals in distress (Police Officers, Kiminini Sub-County).

Once a report is received, our team ensures that the necessary steps are taken promptly and effectively. A well-defined procedure is meticulously followed, leaving no room for delay or oversight. This approach is integral to providing the support and protection that survivors of partner violence urgently require. Our commitment is unwavering in ensuring the safety and well-being of those affected by such distressing circumstances (Police Officers, Kiminini Sub-County).

A notable portion of respondents reported experiencing some tension in their relationships. According to Duvvury et al. (2013), sexual violence, irrespective of the survivor's relationship, involves coercing or forcing an individual into unwanted sexual actions or advances. Any conduct or act inside an intimate connection that causes, or is likely to cause, bodily, sexual, or psychological harm to individuals in the association constitute IPV. Interviews with police officers in Kiminini Sub-County revealed a strong commitment to prioritizing survivor safety and security. In cases of IPV, the police take prompt action and tailor their responses to suit the specific circumstances of each case. This is particularly vital in situations where mediation may be necessary. In terms of emergency response, the establishment of a dedicated call centre reachable at 999 in Nairobi reflects a resolute commitment to providing a reliable and round-the-clock emergency response. This hotline serves as a lifeline for individuals in distress, ensuring that help is readily accessible. The police officers also underscored the meticulous adherence to a well-defined procedure when responding to reports of IPV. This approach leaves no room for delay or oversight, underscoring their commitment to providing timely support and protection to survivors.





CONCLUSION AND RECOMMENDATION

The results suggest that in Kiminini Sub-County, police do not explicitly differentiate their responses based on the survivor's gender but rather focus on the immediate needs and safety of the individual. Whether male or female, survivors receive individualized attention based on the severity and context of the IPV incident. Although police efforts are commendable, practical challenges such as logistics occasionally affect the speed of response.

The study recommends establishing comprehensive training programs for police officers. These programs should focus on gender-sensitive handling of IPV cases and include clear protocols to guide officers in responding to various forms of partner abuse. The study found significant variations in police actions depending on the complainant's gender, highlighting the need for consistent and gender-sensitive protocols. Implementing these training programs will help ensure that all IPV cases are handled with the necessary sensitivity and consistency. To enhance the applicability of findings, NGOs, community leaders, and policymakers can use the results to design targeted interventions, allocate resources efficiently, and implement context-specific policies that strengthen IPV prevention and response in rural settings.

The topic of the research had a limited scope since it focused only on Kiminini Sub-County. Therefore, future research is recommended on the responses of police gender units to physical intimate partner violence in other counties of Kenya at large. Since sexual assault has been identified common amongst partners, researchers can broaden the research by focusing on the effectiveness of support services for survivors of sexual assault in Kenya.

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