

Risk Determinants of IPV Among Swahili-Speaking Refugee and Immigrant Women in Lancaster County

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Abstract

Intimate partner violence (IPV) remains a significant public health and human rights issue, disproportionately affecting immigrant women. This study explores IPV's prevalence, nature, and risk factors among Swahili-speaking women refugees and immigrants. It examines socio-cultural, economic, psychological, and environmental influences on IPV while identifying protective factors and community resources. This study sampled 15 key informants for semi-structured interviews, including community leaders, community gatekeepers, professional case managers, and social workers providing services to refugee and immigrant communities. The findings reveal that IPV manifests in multiple forms, including physical, sexual, psychological, and financial abuse, with reproductive coercion also identified as a prevalent issue. Sociocultural factors, which are traditional gender roles, financial dependence, social isolation, and lack of awareness, increase vulnerability to IPV. Additionally, fear of retaliation, cultural stigma, and challenges in accessing support services emerged as significant barriers to reporting abuse. The study showed the need for cultural interventions, increased awareness, and enhanced accessibility to IPV support services for Swahili immigrant and refugee women. Many women do not recognize non-physical abuse as a form of IPV, further limiting their ability to seek help.

Literature review

Given that intimate partner violence (IPV) is the most common form of gender-based violence experienced by women during displacement and migration (Tadesse et al., 2024), more targeted research is needed to understand its impact on Swahili-speaking refugee and immigrant women. According to Sabri et al. (2019), studies conducted in local communities have shown that between 24 and 60 percent of Immigrant and Refugee (IMR) women have experienced IPV at some point in their lives.

Women who are refugees or immigrants to the United States are included in this category (Sabri et al., 2019). According to the Migration Population Institute (Lorenzi et al., 2022), 35.2% of the United States' Sub-Saharan population comprises East African immigrants and refugees. However, there is a lack of published research on the causes of IPV among women in this population. Given the unique socio-cultural, economic, and political factors that this population experiences, it is critical to

understand the specific risks that contribute to IPV within this group.

Methodology

The study employed a purposive or judgement sampling approach, which guided the selection process for 15 participants who provided insights and in-depth understanding of the phenomena under investigation (Bloomberg & Volpe, 2019). The primary instrument used for data collection was a semi-structured discussion guide for interviews that lasted 45-60 minutes each. Participant recruitment was conducted based on the inclusion criteria, and screening was done to confirm eligibility. The informant interviews were digitally recorded, and interview transcripts were generated verbatim and thoroughly cleaned before analysis. The analysis phase involved the use of NVIVO, a statistical and qualitative data analysis software package, to explore patterns and themes.

Findings

Physical/sexual abuse, psychological/emotional abuse, and economic/financial abuse were identified by the interviewees as the most common forms of IPV among Swahili-speaking refugee and immigrant women in Lancaster County. Men are often perceived as the dominant figures in the household, and women are expected to conform to traditional roles. Economic dependence and financial insecurity significantly limit Swahili women's ability to leave abusive relationships, as many rely on their partners for financial support due to limited employment opportunities or work restrictions imposed by immigration status.

The prioritization of men over women is captured as being primarily from a cultural standpoint: "the woman is last, and the man is always first and always right." This cultural expectation often discourages women from seeking help in cases of intimate partner violence. Consequently, many women remain in abusive situations

without feeling empowered to leave. In addition, the generational transmission of violence against women is viewed as a regular thing and has been accepted as a means of disciplining and maintaining control over the woman.

There are also systemic barriers to support and resources, a combination of language barrier, lack of awareness of abuse, unfamiliarity with available resources, fear of community stigma, pressure from the family unit, social isolation, upholding of cultural values, and challenges in multicultural counseling, making it difficult for women to access and engage with IPV services. Despite these challenges, some protective factors, like religious institutions, community elders, and informal support networks within the community, exist, though they remain underutilized. However, reliance on traditional mediation often prioritizes reconciliation over survivor safety, which can prolong abusive situations.

Conclusion

This study examined the factors that contribute to intimate partner violence (IPV) among Swahili-speaking women refugees and immigrants. The findings highlight that traditional gender norms, which emphasize male authority and female submission, create an environment where IPV is normalized or minimized, making it difficult for survivors to seek help. Economic dependence further traps women in abusive relationships, as many lack financial independence due to limited employment opportunities, immigration restrictions, or financial control by their partners.

Additionally, psychological distress and social isolation exacerbate vulnerability, with language barriers, stigma, and fear of deportation preventing women from accessing critical resources. The study also sheds light on the prevalence and nature of IPV faced by Swahili-speaking women. Many survivors endure physical, emotional,

financial, and sexual abuse, often without seeking assistance due to cultural expectations and a lack of trust in formal support systems. The experiences of these women align with broader IPV patterns in immigrant and refugee communities but with distinct cultural challenges that further

silence survivors and limit their options for escape or intervention. While protective factors, such as religious institutions, community elders, and informal support networks, exist, they remain underutilized and often prioritize reconciliation over survivor safety, thereby perpetuating the cycle of abuse.

References

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