Original Research Article

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Prevalence and correlates of intimate partner violence among men in a rural community of Oyo State, South-West Nigeria

Idowu Ajibola¹*, Olumide Aderonke¹, Aremu Olatayo A.¹, Fehintola Funmito O.¹, Popoola Gbenga²

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*Correspondence: Dr. Idowu Ajibola,

E-mail: idajibola@yahoo.com

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ABSTRACT

Background: Perpetration of intimate partner violence (IPV) has continued unabated in many parts of the world including Nigeria with women being the victims in most instances. It is scientifically imperative to understand facilitating factors among men. This study examined the prevalence and the determinants of IPV practice among men in a rural community of Nigeria.

Methods: This cross-sectional study was conducted among 430 men in Eruwa community, Oyo State, South-Western Nigeria. Two-staged cluster sampling technique was used to recruit study participants. A pre-tested, interviewer administered questionnaire was used for data collection. Data were analyzed using descriptive and inferential statistics. The level of statistical significance was set at p<0.05 and 95% confidence intervals were obtained to assess the determinants of IPV practice.

Results: Almost three-quarter (74%) of men had perpetrated one form of IPV or the other prior to the survey. Psychological IPV had the highest prevalence of 67.2%. At the bi-variate level, practice of IPV was significantly associated with respondents' age (p=0.001), their educational status (p=0.001), employment status (p=0.001), marital status (p=0.001), duration of relationship (p=0.001), attitudes towards IPV perpetration (p=0.001) and age of partners (p=0.001). However, only respondents' attitude towards IPV practice (OR; 3.10, 95% CI; 1.70-5.74) and their marital status (OR; 0.43, 95% CI; 0.27-0.70) were the significant predictors of IPV practice among the respondents.

Conclusions: The burden of IPV is high among men. There is urgent need for policy formulation and implementation to curtail this public health challenge particularly among rural based men.

Keywords: Intimate partner violence, Men, Rural community

INTRODUCTION

Intimate partner violence (IPV) could be defined as any behaviour within an intimate relationship that causes physical, psychological or sexual harm to those in the relationship. Violence against women by an intimate partner has been documented as a major contributor to illhealth of women world-wide.²

Physical abuse is the use of physical force (beating, kicking, knocking, punching, choking and confinement) within an intimate relationship in a way that either injures or puts the victim at risk of being injured.³ Sexual abuse includes all forms of sexual assaults, harassment or exploitation within an intimate relationship. It involves forcing a person to participate in sexual activity, as well as marital rape.⁴ Psychological violence may involve acts

¹Department of Community Medicine, Bowen University Teaching Hospital, Ogbomoso, Nigeria

²College of Health Sciences, University of Ilorin, Nigeria

such as verbal assaults, shouting, belittling and humiliation with the intent of causing harm within an intimate relationship.⁵ Economic or financial abuse includes stealing from or defrauding an intimate partner, withholding money for essential things like food and medical treatment, manipulating or exploiting family member for financial gain, preventing an intimate partner from working or controlling their choice of occupation.⁶

The practice of IPV has consistently risen across several countries, especially developing nations. Although it is difficult to know the real prevalence of IPV, researchers in different parts of the world have documented several cases in recent times. In Africa, the prevalence range from 40% in Uganda to 42.3% in South Africa. In Nigeria, Fatusi et al reported 50.0% as the prevalence of IPV in Ile-Ife while Fawole et al reported a prevalence rate of 14.4% in Ibadan. 9,10

Estimating the true burden of IPV has been a daunting task in Nigeria as well as other developing countries where cases often go unreported due to restraining sociocultural factors. Moreover, most research efforts on this subject had been urban-based with focus on women as victims. Few studies had therefore examined factors that influence men in rural areas to carry out violent acts against their spouses. This study thus sought to provide base-line information on factors associated with men's perpetration of IPV in rural areas. The information generated could assist policy makers in designing costeffective programs to curtail the menace of IPV in Nigeria.

METHODS

Study area

This study was carried out in Eruwa community, the headquarters of Ibarapa East Local Government Area (LGA), Oyo State, South-west Nigeria. Christianity and Islam are the dominant religion while farming and trading were the prevalent occupation. According to 2006 population census, the population of Ibarapa East LGA, a rural LGA, was estimated to be 118,288 inhabitants. 11

Study design

A cross-sectional study design was used for this study.

Study population

The study population consisted of men resident in the community that have intimate relationship.

Inclusion criteria

Men who had been or are currently in intimate relationships, who had been residing in the community for at least six (6) months prior to the survey and who

gave informed consents were recruited to participate in the study.

Exclusion criteria

Mentally unstable respondents were excluded from the study.

Sample size calculation

This was estimated using the Leslie Kish formula for estimating single proportion. The prevalence of IPV was assumed to be 67% based on the work of Fawole et al. in Ibadan Oyo state. Non-response rate of 10% was anticipated among our respondents and a precision of 5% was used. Thus, a total sample size of 453 was estimated for the study.

Sampling technique

Two staged cluster sampling technique was used to recruit the study participants. At the first stage, three electoral wards were selected by balloting from a list of six wards in Eruwa. The selected wards include; Anko, New Eruwa and Sango. The second stage involved selection of eligible respondents from the selected wards. All households in the selected wards with eligible respondents were visited.

Data collection

Data were collected in between July and August, 2016 administered. semi-structured using interviewer questionnaire developed by reviewing extant literatures. The questionnaire consisted of four sections. The first section collected information on the socio-demographic characteristics of the respondents and the second section asked questions on their attitudes toward IPV. The third section sought information on the practice of IPV while the fourth part collected information on factors associated with the practice of IPV among the study population. The questionnaire was written in English, translated to Yoruba, the prevalent language in the study area, and translated back to English to preserve the original meaning of the questions asked.

Eight medical students on community medicine posting trained on questionnaire administration in the rural settings helped in data collection.

Pretesting

The questionnaire was pretested among 45 men in Igbo-Ora, a community near Eruwa which was the site of the main study. The exercise helped to assess the ability of the instrument to elicit desired response from our respondents. Ambiguous questions were re-phrased in line with study objectives.

Data analysis

Data collected were field-edited daily and entered into Statistical Package for Social Sciences (SPSS) version 20 for analysis. Data were presented using tables and charts and were summarized using mean and percentages. Chi-square test was used to assess relationships between categorical variables while stepwise logistic regression analysis was conducted at the multi-variate level. Variables in the model were selected based on whether they were significant at the bi-variate level. The level of statistical significance was set at p≤0.05 and 95% Confidence Intervals were obtained to assess the determinants of IPV perpetration among the respondents.

Definition of terms

Practice of IPV

This referred to men who perpetrated any of the types of IPV on their spouses within the past six months.

Respondents' socio-economic class

Using Oyedeji's classification of Social Class, respondents' socio-economic status was classified into three; low, middle and high. This classification used a composite score of respondents' educational levels and occupational types of their spouses; each was given a score ranging from 1 to 5. Total score was ten; respondents who had aggregate score of less than 5 were classified into low socio-economic class, those who scored 5-7 points were categorized into middle socio-economic class while those who scored 8-10 points were in high socio-economic class.

Respondents' attitudes to IPV

A set of questions were asked on what behavior or acts the respondents feels should constitute IPV practice. This was done on a Likert's scale ranging from strongly agreed (1) to indifferent (5). Each of these questions was scored into either negative or positive attitude to IPV based on responses of the interviewees; those who strongly agreed or agreed to the questions asked were classified as having negative attitude and coded as having zero point while those who disagreed, strongly disagreed or indifferent were categorized to have positive attitude and coded as having a score of 1 point. In all, respondents were rated over 14 points; those who scored less than 7 points were classified as having negative attitude while respondents who scored 8-14 points had positive attitude towards IPV.

Ethical consideration

Approval to conduct the study was obtained from the Ethical Review Committee of Bowen University Teaching Hospital, Ogbomoso. Permission was also obtained from the Department of Primary Healthcare of Ibarapa-East LGA. Written consents were obtained from

each respondent before the interview. Respondents were assured that the information received during the survey will be kept confidential. Codes rather names were used as personal identifiers. Participation was entirely voluntary and data were saved in a pass-worded computer.

RESULTS

Table 1: Socio-demographic variables.

Variables	Frequency	%		
Age (years)				
<20	30	7.0		
20–39	281	65.3		
40–59	100	23.3		
>60	19	4.4		
Education level				
No formal education	19	4.4		
Primary	35	8.1		
Secondary	140	32.6		
Tertiary	236	54.9		
Tribe				
Yoruba	405	94.2		
Igbo	15	3.5		
Hausa	6	1.4		
Others	4	0.9		
Religion				
Christian	294	68.4		
Muslim	131	30.5		
Traditional	5	1.2		
Employment status				
Employed	275	64.0		
Unemployed	155	36.0		
Marital status				
Single	196	45.6		
Married	228	53.0		
Divorced/ Widowed	6	1.4		
Length relationships				
<10	283	65.8		
10–19	84	19.5		
20–29	36	8.4		
≥30	27	6.3		
Family settings (n=234)				
Monogamous	211	90.2		
Polygamous	23	9.8		
Age partner group (years)				
<20	79	18.4		
20–39	271	63.0		
40–59	70	16.3		
≥60	10	2.3		

Out of 453 questionnaires that were distributed, 430 were returned satisfactorily answered hence were analyzed, thus response rate was 95%. As shown in Table 1, 65.3% of the respondents and 63% of their partners were in the

20-39 age category, more than half (54.9%) had tertiary education while 94.2% were Yorubas by tribe. About 68% of the respondents practiced Christianity while 64% of them were gainfully employed. Over half (53%) were married with 65.8% of them having spent less than 10 years in their relationships. Monogamous family setting was prevalent (90.2%) among married respondents.

Almost three-quarter (74%) of the respondents reported practicing one form of IPV or the other in their relationships (Figure 1). Psychological violence was the commonest form among IPV perpetrators (67.2%), (Figure 2).

Table 2: Factors associated with practice of IPV among men in Eruwa.

	Intimate partner violence				
Variable	Yes n (%)	No n (%)	Total n (%)	χ^2	P value
Age group				••	
< 20	27 (90.0)	3 (10.0)	30	15.604	0.001*
20 – 39	216 (76.9)	65 (23.1)	281		
40 – 59	60 (60.0)	40 (40.0)	100		
> 60	15 (78.9)	4 (21.1)	19		
Education Level					
None	9 (47.4)	10 (52.6)	19	19.209	<0.001*
Primary	20 (57.1)	15 (42.9)	35		
Secondary	98 (70.0)	42 (30.0)	140		
Tertiary	191 (80.9)	45 (19.1)	236		
Tribe					
Yoruba	298 (73.6)	107 (26.4)	405	1.839 ^Y	0.606
Igbo	13 (86.7)	2 (13.3)	15		
Hausa	3 (50.0)	3 (50.0)	6		
Others	4 (100.0)	0 (0.0)	4		
Religion					
Christian	214 (72.8)	80 (27.2)	294	0.464 ^Y	0.793
Muslim	100 (76.3)	31 (23.7)	131		
Traditional	4 (80.0)	1 (20.0)	5		
Employment					
Employed	187 (68.0)	88 (32.0)	275	14.038	<0.001*
Unemployed	131 (84.5)	24 (15.5)	155		
Marital Status					
Married	148 (64.9)	80 (35.1)	228	20.597	<0.001*
Cohabiting	170 (84.2)	32 (15.8)	202		
Length of Relationship					
<10 Years	224 (79.2)	59 (20.8)	283	11.614	0.001*
≥10 Years	94 (63.9)	53 (36.1)	147		
Family Setting					
Monogamous	143 (65.6)	75 (34.4)	218	0.001	0.971
Polygamous	15 (65.2)	8 (34.8)	23		
Age of partner					
<20	70 (88.6)	9 (11.4)	79	10.789	0.001*
≥20	248 (70.7)	103 (29.3)	351		
Attitude towards IPV					
Negative	151(49.0)	157(51.0)	308	32.040	<0.001*
Positive	67 (54.9)	55 (45.1)	122		
Alcohol					
Yes	146 (74.9)	49 (25.1)	195	0.156	0.693
No	172 (73.2)	63 (26.8)	235		
Cigarette					
Yes	33 (78.6)	9 (21.4)	42	0.515	0.473
No	285 (73.5)	103 (26.5)	388		

 χ^2 : Chi square; Y: Yates corrected chi square; *: p value <0.05

Table 3: Factors predicting perpetration of Intimate partner violence among men in Eruwa.

Variable	OR	95% CI	P value
Age (years)			
<20 ^{REF}			
≥20	1.01	0.933 - 1.084	0.892
Education level			
None	2.85	0.79 - 10.31	0.111
Primary	2.07	0.78 - 5.48	0.144
Secondary	1.45	0.72 - 2.95	0.302
Tertiary ^{RÉF}			
Employment status			
Unemployed ^{REF}			
Employed	3.33	0.54 - 20.64	0.197
Length of relationship			
≥10 years ^{REF}			
<10 years	0.94	0.45 - 1.94	0.861
Age of partner (years)			
≥10 ^{REF}			
<10	1.00	0.92 - 1.09	0.948
Attitude grade			
Negative			
Positive	3.10	1.70 - 5.74	<0.001*
Marital status			
Cohabiting REF			
Married	0.43	0.27-0.70	0.001*

OR: Odds ratio; 95% CI: 95% Confidence Interval; REF: Reference category; *: P value <0.05; R²: 0.169; Predictive value: 67.1%; χ^2 : 30.675; P value: 0.022.

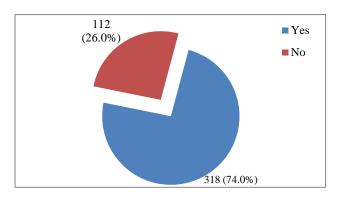


Figure 1: Prevalence of intimate partner violence among men based in the rural community.

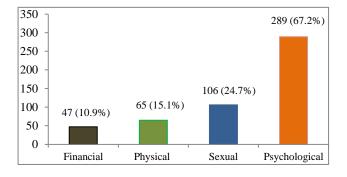


Figure 2: Types of intimate partner violence among respondents.

In Table 2, the proportion who practiced IPV was significantly higher among men who were less than 20 years of age (90.0%, p=0.001) and those who had no formal education (84.0%, p=0.001). Prevalence of IPV was significantly higher among unemployed respondents (84.5%, p=0.001) and those who were cohabiting (84.2%, p=0.001). Moreover, the proportion of men with IPV was significantly higher among those whose relationships were less than 10 years (79.2%, p=0.01) and among those whose partners were less than 20 years old (88.6%, p=0.001). Men with positive attitude towards IPV constituted significantly higher proportion of those who practiced IPV (54.9%, p=0.001).

Table 3 shows the results of multi-variate analysis; respondents with positive attitude to IPV were three times more likely to practice IPV compared to those with negative attitude (OR: 3.1; 95% CI: 1.68-5.74). Also, married men had significantly lesser odds (43%) of IPV practice compared to those who were cohabiting (OR: 0.43; 95% CI: 0.27-0.70).

DISCUSSION

This study determines the prevalence and the determinants of IPV among men in a rural community. This study revealed that almost three-quarter (74%) of the respondents practiced at least one form of IPV.

Psychological violence was the commonest form of IPV among men in Eruwa; accounting for 67.2% of all cases. The burden of IPV revealed in this study is not at variance with what other studies had documented. For instance, a study conducted by Owoaje et al among residents of a migrant community in South West Nigeria, revealed that 87% of women had experienced IPV.1 Also, Fatusi et al in 2006 revealed that 50.5% of women resident in Ile-Ife, South West Nigeria had experienced IPV. Likewise, Obi et al in 2007 revealed that 83% of women in South-East, Nigeria reported physical abuse.¹⁴ Contrary to our findings however, some researchers have reported lower figures as the prevalence of IPV practice; it was estimated in South Africa and Uganda to be 42.3% and 40% respectively.^{7,8} In South Korea, a national survey conducted in 2010 revealed the prevalence to be 53.8%. 15 In Nigeria, lower figures had also been reported by some studies. In Ibadan, Fawole et al revealed that only 44.1% of men admitted perpetrating IPV while Yusuf et al reported a much lower figure of 26.9%. 10,16 Reason for the higher figure in our study could have been due to the fact that it was rural-based. This is because most communities in Nigeria have the patriarchal family system and strong male dominance especially in the rural settings hence perpetration of any form of IPV by the men is viewed as a way of instilling discipline in errant women. IPV thus appeared to be culturally acceptable by the society as a veritable method of taming the excesses of women. Also, the fact that the study was conducted among men who have been reported in previous studies as the main perpetrators of IPV in the society could have accounted for the higher percentage reported. Men tend to be at liberty in divulging information on IPV because it appears to give them the psychological euphoria that they are strong and are in-charge in their respective homes. Women on the other hand may not be willing to volunteer information regarding IPV for the fear of experiencing further IPV as a punishment from their abusive spouses.

The proportion of men who practiced IPV in our study was significantly higher among respondents who were less than 20 or whose spouses were less than 20 years of age. Studies have shown that young people are generally more likely to carry out acts of violence in intimate relationships than older people. 17 This could be attributed to their lack of requisite experiences to handle social issues and conflicts within their relationships. The prevalence of IPV was also found to be significantly higher among those who had no formal education and among the unemployed. Men with no formal education have been documented to be more likely to perpetrate IPV. 18,19 Unemployment among men tends to make them lose their sense of self-worth, they are particularly threatened if their spouses are gainfully employed and this may enhance IPV perpetration. Moreover, the proportion of men with IPV was significantly higher among respondents with shorter duration of relationships. Long relationships often connote better understanding among spouses and development of enhanced conflict resolution skills thereby reducing the incidence of IPV.

Our study showed that being married protects against the practice of IPV as married men were 43% less likely to practice IPV compared to those who were cohabiting. This is not unexpected as married couples would mostly respect their marital vows and place more values on their relationships than spouses who simply cohabit. Respondents with positive attitude were significantly more likely to practice IPV compared to men with negative attitude. Positive attitude has been found to be correlated with IPV practice.²⁰

This study is limited by its cross-sectional design and reliance on self-reported information on their behaviour in their partner's absence. Hence, some men despite being reassured of the purpose of this study could have given socially accepted responses which differ from their actual behaviour.

In conclusion, the rate of perpetration of IPV was high among men resident in the rural community used for the study. It is imperative for the government to start investing on community education on the dangers of IPV using the media to change social belief that is in support of IPV perpetration. Local and international nonorganizations should governmental work government to achieve the desired goal of reducing the burden of gender based violence especially in the rural areas. Also, social media could be utilized and information disseminated in local languages of the rural dwellers to be more effective. Moreover, Nigerian government should double its efforts on poverty alleviation and enhancement of income generating programme particularly targeting people in rural communities. This will reduce the unemployment rate among men and the burden of IPV.

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