

Original Article

Prevalence and Patterns of Domestic Violence Among Women in a Rural and Urban Area of Kwara State, Nigeria

*Elegbua AA¹, Elegbua CO¹, Shehu A², Ameen HA³, Belabo DA⁴, Fasiku MM⁵, Kayode TG⁵, Igwe UP⁶, Madubueze UC⁷, Osagbemi GK⁸

¹National Obstetric Fistula Centre, Abakiliki, Ebonyi State, Nigeria, ²Department of Community Medicine, Federal Medical Centre/Federal University, Gusau, Zamfara State, Nigeria, ³Department of Epidemiology and Community Health, Faculty of Clinical Sciences, College of Health Sciences, University of Ilorin, PMB 1515, Ilorin, Nigeria, ⁴Department of Community Medicine, Federal Medical Centre, Makurdi, Benue State Nigeria, ⁵Department of Epidemiology and Community Health, University of Ilorin Teaching Hospital Ilorin, Kwara State Nigeria, ⁶East China University of Political Science and Law, Shanghai, China, ⁷Alex-Ekwueme Federal University Ndufu-Alike, Ikwo, Ebonyi State; Alex-Ekwueme Federal University Teaching Hospital, Abakiliki, Ebonyi State, Nigeria, ⁸University of Ilorin/University of Ilorin Teaching Hospital, Ilorin Nigeria,

Article History

Submitted: 27/11/2025; Accepted: 24/12/2025; Published: 27/12/2025

*Correspondence: Elegbua AA

Email: adapassion09@gmail.com

ABSTRACT

Domestic violence (DV) is of a major Public health and human rights concern. It is perpetrated by intimate partners and manifests through physical, sexual and psychological abuse and has many adverse health consequences. The aim of the study was to determine and compare the prevalence and patterns of domestic violence among women in rural and urban communities. This study employed a comparative cross-sectional study with a mixed data collection method of QUANT/qual type. In the study, 518 participants comprising 259 rural and 259 urban women, were recruited using a multi-stage sampling technique. The revised tactics short form was used to assess domestic violence among the women. Quantitative data was analysed using the IBM/SPSS version 24, while the qualitative data from the In-depth interviews and Key Informant Interviews were digitally recorded and transcribed verbatim, coded and analysed using ATLAS.ti. Data was summarized using proportions, percentages and standard deviations as appropriate. The chi square test was used to compare proportions and the association between categorical data. A significant level was set as p-value of <0.05 at a 95% confidence level. The prevalence of domestic violence was higher in the rural communities 57.5%, than in the urban communities, 45.9%. More women in the rural communities experienced physical violence in the form of beating 98.0% than their urban counterparts 97.5%. On the contrary, fewer respondents in the rural communities experienced sexual violence in the form of forced sex 29.5% and forced caress and romance, 24.8%, while in the urban communities, 39.5% and 32.8% experienced forced sex and romance, respectively. In addition, respondents in the rural communities experienced psychological violence in the form of their partners not allowing them to visit their family members 12.8%, and humiliation before their friends 17.4% which was less than the experience of their counterparts in the urban communities which was 14.3% and 21.8% respectively. The study showed higher prevalence of domestic violence in the rural communities than in the urban communities. The patterns of domestic violence assessed were physical, sexual and psychological violence. To tackle the issue of domestic violence, Continuous sensitization and awareness should be carried out in both rural and urban communities in Kwara state to enlighten people about the dangers of domestic violence. Government should empower women, provide jobs for them and provide shelters for the victims and funds to set them up; this will encourage those whose lives are being threatened to leave.

Keywords: Domestic violence, Physical violence, Psychological violence, Rural, Sexual violence, Urban

INTRODUCTION

Domestic violence can be defined as the

aggressive and coercive behaviour of adults or adolescents against their intimate partners.² Domestic violence against women is a manifestation

Article Access



Website: www.wjmbbs.org

10.5281/zenodo.18142478

How to cite this article

Elegbua AA, Elegbua CO, Shehu A, Ameen HA, Belabo DA, Fasiku MM, Kayode TG, Igwe UP, Madubueze UC, Osagbemi GK. Prevalence and Patterns of Domestic Violence Among Women in a Rural and Urban Area of Kwara State, Nigeria. *West J Med & Biomed Sci.* 2025;6(4):390-404. DOI:10.5281/zenodo.18142478.

of unequal power relations between men and women, which have led to discrimination against and domination over women by men.³ The United Nations defines violence against women as any act of gender-based violence that results in, or is likely to result in, physical, sexual, or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.⁴

Domestic violence happens across all sectors of society. It affects the educated and the illiterate, the religious and the free thinkers, classes of career women and stay-at-home wives, the married and the single, as well as all ages. According to Amnesty International Nigerian women suffer disproportionately from domestic violence due to their disadvantaged economic status.⁵ Many women depend on the financial resources of their husbands. This forces them to put up with domination for fear of the withdrawal of his financial support.⁵ Yet even for educated women, domestic violence poses a serious threat to their safety and well-being.

Domestic violence is mainly associated with physical abuse, which often is not the truth. This is because the effect is always visible. The forms of domestic violence are physical, sexual, psychological/emotional abuse.⁶ The global prevalence of physical and sexual violence among all women in intimate relationships is 30 per cent.¹ The prevalence of domestic violence varies worldwide with the highest incidence of domestic violence found in Ethiopia (71%).⁷ A systematic review also indicated a high rate in the Eastern Mediterranean, and south-east Asian zones and African countries.⁸ Emotional violence is a common type of domestic violence especially in African and Asian countries.⁹ Studies in Iran indicate high rates of domestic violence.¹⁰ For example, in a study conducted in Ilam (a western province of Iran),¹¹ it was discovered that domestic violence was widespread and that emotional violence was the most prevalent type. Variable prevalence had been reported in Nigeria. Cross-sectional studies in the southern part of Nigeria reported a prevalence of 28.2% while in the North, 42%.^{7,12} According to a study carried out in the Northwestern Nigeria, over two-thirds of male (71.8%) who participated in the study had beaten

their wives at one time or the other.³ The reasons for the abuse include food not sweet enough, refusal of sex, leaving home without the consent of the husband and unfaithfulness.³ Another study showed that ¹³ 72% of domestic violence in Nigeria is primarily caused by lack of or inadequate sexual performance or satisfaction. The remaining 28% constitute the secondary causes which usually borders around socio-economic and cultural forces.¹³ According to the findings of a study which was done on the patterns of domestic violence in the Ilorin metropolis, from the interview conducted, it was noted that poor sexual relationships between couples, poverty, poor conflict resolution skills, lack of respect for other spouse's personality, infidelity, negative family background, differing religious beliefs, wide gap in age differences, difference in ethnic group, and lack of appropriate sanction for abusers are the causes of domestic violence.¹⁴ Domestic violence is seen in the local communities mostly as due to women who nag, disobey or want to become the head of the family.¹⁵ The National Advisory Committee on Rural Health (2015) indicate a 7.4% difference in higher rates of women in rural are as experiencing domestic violence than in urban areas.¹⁶ According to a study done in the Southeastern Nigeria, the burden of domestic violence against women may be higher in rural communities than in urban communities in southeast Nigeria.¹⁷ More rural women perceived domestic violence as excusable; this finding suggests that factors that sustain domestic violence could be strong in rural areas. The prevalence and serious impacts of this violence make it one of the most significant issues to be addressed in our time. Violence against women violates and impairs the enjoyment of women of their human rights and fundamental freedoms.

Despite these victims' ordeal, they find it difficult to report the cases. Research shows that many survivors tend not to report abuse from their partners due to fear that the abuser will retaliate, desire to protect the family, financial dependence on the perpetrator, and fear of ending the marriage.¹⁸ This study was therefore carried out to ascertain the extent of domestic violence in the society using Kwara State as a case study and hence profer

solutions to it.

MATERIALS AND METHODS

Study Area

The study was conducted in Kwara State. Kwara State is located in North-Central Nigeria. The state is located between the latitude of 8.30°N and longitude 5.00°E of the equator and has a land area of 36,825 square.¹⁹ It has a projected population (2022) of 3,400,508 based on the 2006 census, calculated at an annual growth rate of 3.2% with a male to female ratio of 1:1.15.²⁰ The Fulani, Hausa, Baruba, and Nupe are among the ethnic groups that make up Kwara State, but the Yoruba are the majority. Major occupations in the State are farming, cotton weaving, pottery making, trading, and the production of crafts and arts. About 30% of the inhabitants are civil servants who work in both Federal and State parastatals, while others work with the organized private sector. The State is divided into 3 senatorial districts, namely Kwara Central, North and South.

Study design

This study employed a comparative cross-sectional study with a mixed data collection method of QUANT/qual type.²¹

Sample size determination

From study conducted on domestic violence among women in an urban area (Makurdi Metropolis and another study in a rural area (Otukpo Local Government Area), both in Benue State, North Central Nigeria, the prevalence in the urban and rural areas were 63.3%²² and 76.9%²³ respectively. The sample size was thus calculated using the formula:

$$n = \frac{(Z1 - \alpha + Z1 - \beta)^2 (P1q1 + P2q2)}{(P1 - P2)^2}$$

Where n = minimum sample size for each group

P1 = prevalence of domestic violence against women in urban area is 63.3%.²²

P2 = prevalence of domestic violence against women in rural area is 76.9%.²³

Adjustment for Non-Response was done using the formula below.

The minimum sample size; $N = n / (100 - r\%)$ ²⁴

Where r% is the anticipated non-response rate=10%.

This gave a sample size of 518, 259 rural, 259 urban women.

Sampling technique

In the study, 518 participants comprising 259 rural and 259 urban women were recruited using a multi-stage sampling technique. Data were collected using both quantitative and qualitative methods. Quantitative data was collected through a semi-structured interviewer-administered questionnaire while qualitative data was collected using an In-depth interview guide (IDI) and a Key Informant Interview guide (KII). The revised tactics short form was used to assess domestic violence among the women. The questionnaire was pretested and validated.

Data Analysis

Quantitative data was analyzed using the IBM/SPSS version 24, while the qualitative data from the In-depth interviews and Key Informant Interviews were digitally recorded and transcribed verbatim, coded and uploaded into ATLAS.ti. Data was summarized using proportions, percentages and standard deviations as appropriate. The Chi-square test was used to compare proportions and the association between categorical data. A significant level was set as a p-value of <0.05 at a 95% confidence level.

Ethical consideration

Ethical approval was obtained from the Health Review Ethics Committee of University of Ilorin Teaching Hospital. A letter of introduction was obtained from the Department of Epidemiology and Community Health, University of Ilorin Teaching Hospital. The letter was used to seek permission from the community leaders in the 3 senatorial zones in Kwara State where the study was carried out. Community entry was carried out in all the selected 12 communities and permission was sought from the Community leaders and the local government Chairman and Councilors. In the various households, permission was also sought from the Heads of the households before consent was obtained from each of the eligible respondents in the households selected. Finally, consent form was filled and signed by the respondents before participating in the study. Community exit was done

at the end of data collection.

RESULTS

Table one shows that, more respondents (29.3%) in the rural communities were between ages of 31-40 with a mean age of 39 ± 11.20 years while in the urban communities, 28.6% of the respondents were in age group 31-40 with a mean age of 40 ± 11.17 years. In the urban communities, more respondents (40.8%) were business women while in the rural communities (36.5%) of the women were business women. This was statistically significant ($p=0.001$). In the urban communities, more (71.4%) of the respondents were married in the monogamous setting than their counterparts in the rural communities (63.7%). About 83.0% of the respondents in the rural communities are Yoruba while 72.6% of the urban respondents are Yoruba. This was statistically significant ($p=0.001$). More of the respondents in the urban communities (39.7%) had tertiary education than in the rural communities (30.5%).

Table two shows that, more of the respondents in the rural communities (61.4%) had house hold income of \leq #30,000 per month than the urban respondents (52.0%). More of the respondents (38.4%) in the urban communities are within the age group 41-50 than the respondents in the rural communities (36.4%). More of the male partners (53.8%) in the urban communities have tertiary education as the highest educational qualification than those in the rural communities (46.2%). More than half of the respondents in both communities were practicing Islamic religion.

Table three shows that, the respondents in the rural communities (87.8%) who had primary education as their highest level of education had more experience of domestic violence than those of their counterparts in the urban communities (75.4%). This was statistically significant ($p=0.001$). The respondents in the rural communities (81.9%) who are married in the polygamous family setting had more experience of domestic violence than those of their counterparts in the urban communities (74.3%). This was statistically significant ($p=0.001$, 0.003, rural and urban respectively). The respondents in the rural communities (67.8%) who practice Islam had more

experience of domestic violence than those of their counterparts in the urban communities (53.5%). This was statistically significant ($p=0.037$, 0.012 for rural and urban respectively). The respondents in the rural communities (73.3%) who are of Hausa tribe had more experience of domestic violence than those of their counterparts in the urban communities (28.6%). This was statistically significant ($p=0.037$, 0.012 for rural and urban respectively). The respondents in the rural communities (75.3%) who had been married 11-20 years had more experience of domestic violence than those of their counterparts in the urban communities (61.8%). This was statistically significant ($p=0.001$, 0.013 for rural and urban respectively).

Table four shows that, more of the respondents in the rural communities (69.8%) with house hold monthly income \leq #30 000 had more experience of domestic violence than their counterparts in the urban communities (5.3%). This was statistically significant ($p=0.001$).

More of the partners of the respondents in the rural communities (70.0%) in the age group ≥ 61 had more experience of domestic violence than their counterparts in the urban communities (57.1%). This was statistically significant ($p=0.002$, 0.037 for rural and urban respectively). The partners of the respondents in both rural and urban communities with no formal education all had experiences of domestic violence. More of the partners of the respondents in the rural communities (82.6%) with primary education as the highest educational attainment had more experience of domestic violence than their counterparts in the urban communities (67.1%). This was statistically significant ($p=0.001$). More of the partners of the respondents in the rural communities (67.2%) with primary education as the highest educational attainment had more experience of domestic violence than their counterparts in the urban communities (51.9%). This was statistically significant ($p=0.001$).

Table five shows that, in the rural communities, respondents without formal education were 3 times more likely to have experienced domestic violence than those with formal education. Also, the

respondents who were married in the monogamous family setting were 2 times more likely to have experienced domestic violence than those married in the polygamous family setting. The respondents whose household monthly income was $\leq 30\ 000$ were 3 times more likely to have experienced domestic violence than those with higher income. Again, the partners of the respondents with only primary education were 6 times more likely to have perpetrated domestic violence than those with more than primary education.

In table six, in the urban communities, the respondents with only primary education were 10 times more likely to experience domestic violence than those with more than primary education. Also, the partners of the respondents with only primary education were 5 times more likely to experience domestic violence than those with more than primary education.

In table seven, more respondents in the rural communities (98.0%) experienced domestic violence in the form of beat/slap/kick/punches than those in the urban communities (97.5%).

Table eight shows that more of the respondents in the urban communities (38.7%) had experience of

sexual violence in the form of unwanted sexual comments than the respondents in the rural communities (26.2%). This was statistically significant ($p=0.029$). Also, more of the respondents in the urban communities (39.5%) had experience of forced sex than their counterparts in the rural communities (29.5%).

In table nine, more of the respondents in the urban communities (34.9%) experienced psychological violence in the form of calling of names than those in the rural communities (22.9%). This was statistically significant ($p=0.001$). Again, more respondents in the urban communities (39.5%) experienced their partners refusing their food than their counterparts in the rural communities (19.5%). This was also statistically significant ($p=0.001$). On the contrary, more respondents in the rural communities (33.3%) had experience of their partners coming home with a girlfriend than the respondents in the urban communities (17.2%). This was also statistically significant ($p=0.001$).

Figure one shows that, the prevalence of domestic violence was higher among the respondents in the rural communities (57.5%) than among the urban communities (45.7%). This was statistically significant ($p=0.006$).

Table 1: Socio-demographic characteristics of Respondents

Variable	Rural (%) n = 259	Urban (%) n = 259	Total (%) N = 518	χ^2/t	p-value
Age group				0.959	0.916
≤ 30	72 (27.8)	65 (25.1)	137 (26.4)		
31 – 40	76 (29.3)	74 (28.6)	150 (29.0)		
41 – 50	66 (25.5)	75 (29.0)	141 (27.2)		
51 – 60	35 (13.5)	35 (13.5)	70 (13.5)		
> 60	10 (3.9)	10 (3.9)	20 (3.9)		
Mean ± SD	39 ± 11.20	40 ± 11.17		-0.632	0.528
Level of education				6.362	0.174
No formal	8 (3.1)	7 (2.7)	15 (2.9)		
Primary	82 (31.7)	61 (23.6)	143 (27.6)		
Secondary	90 (34.7)	88 (34.0)	178 (34.4)		
Tertiary	79 (30.5)	103 (39.7)	182 (35.1)		
Employment status				0.496	0.273
Employed	189 (73.0)	196 (75.7)	385 (74.3)		
Unemployed	70 (27.0)	63 (24.3)	133 (25.7)		
Type of occupation	n=189	n=196	n=385	37.031	0.001
Business	69 (36.5)	80 (40.8)	149 (38.7)		
Farmer	32 (16.9)	6 (3.1)	38 (9.9)		
Trader	56 (29.6)	39 (19.9)	95 (24.7)		
Artisan	12 (6.3)	32 (16.3)	44 (11.4)		
Civil servant	18 (9.5)	33 (16.8)	51 (13.2)		
Others	2 (1.1)	6 (3.1)	8 (2.1)		
Type of marriage				3.524	0.060
Monogamy	165 (63.7)	185 (71.4)	350 (67.6)		
Polygamy	94 (36.3)	74 (28.6)	168 (32.4)		
Religion				0.008	0.930
Christianity	116 (44.8)	115 (44.4)	231 (44.6)		
Islam	143 (55.2)	144 (55.6)	287 (55.4)		
Tribe				28.035	0.001
Hausa	15 (5.8)	7 (2.7)	22 (4.2)		
Igbo	15 (5.8)	11 (4.2)	26 (5.0)		
Yoruba	215 (83.0)	188 (72.6)	403 (77.9)		
Others (Ebira, Nupe)	14 (5.4)	53 (20.5)	67 (12.9)		
Number of years of Marriage				1.658	0.798
1 – 10	98 (37.7)	103 (39.8)	201 (38.8)		
11 – 20	89 (34.4)	76 (29.3)	165 (31.9)		
21 – 30	52 (20.1)	58 (22.4)	110 (21.2)		
31 – 40	10 (3.9)	12 (4.6)	22 (4.2)		
> 40	10 (3.9)	10 (3.9)	20 (3.9)		
Mean ± SD	15 ± 10.47	16 ± 10.71		-0.087	0.931

Table 2: Socio-demographic characteristics of the partners

Variable	Rural (%) n = 259	Urban (%) n = 259	Total (%) N = 518	χ^2/t	p - value
Household Income				3.265	0.352
≤ 30 000	116 (61.4)	103 (52.6)	219 (56.9)		
30 001 – 50 000	25 (13.2)	33 (16.8)	58 (15.1)		
50 001 – 70 000	26 (13.8)	30 (15.3)	56 (14.5)		
≥ 70 001	22 (11.6)	30 (15.3)	52 (13.5)		
Mean ± SD	36740 ± 27843	41209 ± 29174		- 1.536	0.125
Age group of partners				1.043	0.903
21 – 30	11 (4.9)	15 (6.5)	26 (5.7)		
31 – 40	73 (32.4)	69 (29.6)	142 (31.1)		
41 – 50	82 (36.4)	89 (38.4)	171 (37.4)		
51 – 60	29 (13.0)	31 (13.4)	60 (13.1)		
≥ 61	30 (13.3)	28 (12.1)	58 (12.7)		
Mean ± SD	45 ± 11.10	46 ± 11.18		- 0.047	0.963
Highest level of partner's education				5.471	0.140
No formal	4 (1.8)	2 (0.9)	6 (1.3)		
Primary	46 (20.4)	31 (13.4)	7 (16.8)		
Secondary	71 (31.6)	74 (31.9)	14 (31.7)		
Tertiary	104 (46.2)	125 (53.8)	22 (50.2)		
Religion of partner				0.001	0.992
Christianity	100 (44.4)	103 (44.4)	203 (44.4)		
Islam	125 (55.6)	129 (55.6)	254 (55.6)		
Employment status of partner				0.374	0.541
Employed	201 (89.3)	203 (87.5)	404 (88.4)		
Unemployed	24 (10.7)	29 (12.5)	53 (11.6)		

Table 3: Socio demographic determinants of domestic violence in rural and urban communities among the respondents

Variables	Domestic violence in rural community		χ^2	p-value	Domestic violence in Urban community		χ^2	p-value
	Yes (%)	No (%)			Yes (%)	No (%)		
Age group			4.751	0.318			4.392	0.358
≤ 30	38(52.8)	34(47.2)			26(40.0)	39(60.0)		
31 – 40	50(65.8)	26(34.2)			38(51.4)	36(48.6)		
41 – 50	33(50.0)	33(50.0)			29(38.7)	46(61.3)		
51 – 60	22(62.9)	13(37.1)			19(54.3)	16(45.7)		
> 61	6(60.0)	4(40.0)			5(50.0)	5(50.0)		
Level of education			56.632	0.001			41.322	0.001
No formal	6(75.0)	2(25.0)			4(57.1)	3(42.9)		
Primary	72(87.8)	10(12.2)			46(75.4)	15(24.6)		
Secondary	47(52.2)	43(47.8)			42(47.7)	46(52.3)		
Tertiary	24(30.4)	55(69.5)			25(24.3)	78(75.7)		
Employment status			0.413	0.572			1.014	0.383
Employed	111(58.7)	78(42.3)			92(46.9)	104(53.1)		
Unemployed	38(54.3)	32(45.7)			25(39.7)	38(60.3)		
Type of occupation			57.695	0.001			39.866	0.001
Business	23(33.3)	46(66.7)			27(33.8)	53(66.3)		
Farmer	16(50.0)	16(50.0)			2(33.3)	4(66.7)		
Trader	52(92.9)	4(7.1)			28(71.8)	11(28.2)		
Artisan	12(100.0)	0(0.0)			26(81.2)	6(18.8)		
Civil servant	7(38.9)	11(61.1)			8(24.2)	25(75.8)		
Others	1(50.0)	1(50.0)			1(16.7)	5(83.3)		
Type of marriage			35.912	0.001			35.545	0.001
Monogamy	72(43.6)	93(56.4)			62(33.5)	123(66.5)		
Polygamy	77(81.9)	17(18.1)			55(74.3)	19(25.7)		
Religion			13.872	0.001			9.019	0.003
Christianity	52(44.8)	64(55.2)			40(34.8)	75(65.2)		
Islam	97(67.8)	46(32.2)			77(53.5)	67(46.5)		
Tribe			8.490	0.037			10.939	0.012
Hausa	11(73.3)	4(26.7)			2(28.6)	5(71.4)		
Igbo	4(26.7)	11(73.3)			3(27.3)	8(72.7)		
Yoruba	124(57.7)	91(42.3)			78(41.5)	110(58.5)		
Others (Ebira, Nupe)	10(71.4)	4(28.6)			34(64.2)	19(35.8)		
Number of years of relationship			18.336	0.001			12.749	0.013
1 – 10	47(48.0)	51(52.0)			39(37.9)	64(62.1)		
11 – 20	67(75.3)	22(24.7)			47(61.8)	29(38.2)		
21 – 30	25(48.1)	27(51.9)			22(37.9)	36(62.1)		
31 – 40	4(40.0)	6(60.0)			4(33.3)	8(66.7)		
> 40	6(60.0)	4(40.0)			5(50.0)	5(50.0)		

Table 4: Socio-demographic determinants of domestic violence among the partners of the respondents in rural and urban communities

Variables	Domestic violence in rural community		χ^2	p-value	Domestic violence in Urban community		χ^2	p-value
	Yes (%)	No (%)			Yes (%)	No (%)		
Income (in Naira) of household per month			15.422	0.001			7.675	0.053
≤ 30 000	81 (69.8)	35 (30.2)			57 (55.3)	46 (44.7)		
30 001 – 50 000	11 (44.4)	14 (56.0)			15 (45.5)	18 (54.5)		
50 001 – 70 000	10 (38.5)	16 (61.5)			9 (30.0)	21 (70.0)		
≥ 70 001	9 (40.9)	13 (59.1)			11 (36.7)	19 (63.3)		
Age group of partner			16.821	0.002			10.200	0.037
≤ 30	4 (36.4)	7 (63.6)			6 (40.0)	9 (60.0)		
31 – 40	50 (68.5)	23 (31.5)			36 (52.2)	33 (47.8)		
41 – 50	34 (41.5)	48 (58.5)			28 (31.5)	61 (68.5)		
51 – 60	13 (44.8)	16 (55.2)			11 (35.5)	20 (64.5)		
≥ 61	21 (70.0)	16 (30.0)			16 (57.1)	12 (42.9)		
Highest level of partner's education			24.031	0.001			22.817	0.001
No formal	4 (100.0)	0 (0.0)			2 (100.0)	0 (0.0)		
Primary	38 (82.6)	8 (17.4)			21 (67.7)	10 (32.3)		
Secondary	35 (49.3)	36 (50.7)			38 (51.4)	36 (48.6)		
Tertiary	45 (43.3)	59 (56.7)			36 (28.8)	89 (71.2)		
Religion of partner			19.084	0.001			12.250	0.001
Christianity	38 (38.0)	62 (62.0)			30 (29.1)	73 (70.9)		
Islam	84 (67.2)	41 (32.8)			67 (51.9)	62 (48.1)		
Employment status of partner			0.183	0.669			2.432	0.119
Employed	108 (53.7)	93 (46.3)			81 (39.9)	122 (60.1)		
Unemployed	14 (58.3)	10 (41.7)			16 (55.2)	13 (44.8)		

Table 5: Predictors of determinants of domestic violence in rural communities

Variables	Beta	p-value	Odd ratio	95 % C I Lower – upper
Level of education				
No formal	19.381	0.999	2.613	0.101 – 5.103
Primary	0.043	0.925	1.044	0.425 – 2.567
Secondary	-0/364	0.388	0.695	0.304 – 1.589
Tertiary	RC			
Type of marriage				
Monogamy	0.854	0.015	2.349	0.179 – 4.680
Polygamy	RC			
Number of years of relationship				
1 – 10	-0.487	0.471	0.614	0.163 – 2.313
11 – 20	0.708	0.305	2.030	0.524 – 7.861
21 – 30	-0.482	0.492	0.617	0.156 – 2.447
31 – 40	-0.811	0.374	0.444	0.074 – 2.660
> 40	RC			
Income (in Naira) of household (per month)				
≤ 30 000	1.207	0.012	3.343	1.309 – 8.539
30 001 – 50 000	0.127	0.831	1.135	0.356 – 3.621
50 001 – 70 000	-0.102	0.863	0.903	0.283 – 2.881
≥ 70 001	RC			
Age group of partner				
≤ 30	-1.407	0.058	0.245	0.057 – 1.050
31 – 40	-0.071	0.881	0.932	0.370 – 2.347
41 – 50	-1.192	0.009	0.304	0.124 – 0.744
51 – 60	-1.055	0.053	0.348	0.119 – 1.015
≥ 61	RC			
Highest level of partner's education				
No formal	21.44	0.999	2.118	0.012 – 9.175
Primary	1.829	0.001	6.228	2.647 – 14.650
Secondary	0.243	0.432	1.275	0.696 – 2.336
Tertiary	RC			

Table 6: Predictors of determinants of domestic violence in urban communities

Variables	Beta	p-value	Odd ratio	95 % C I Lower upper
Level of education				
No formal	1.426	0.074	4.160	0.871 – 19.861
Primary	2.258	0.001	9.568	4.581 – 19.985
Secondary	1.047	0.001	2.849	1.541 – 5.268
Tertiary	RC			
Type of marriage				
Monogamy	-1.748	0.001	0.174	0.095 – 0.319
Polygamy	RC			
Number of years of relationship				
1 – 10	-0.495	0.456	0.609	0.166 – 2.240
11 – 20	0.483	0.474	1.621	0.432 – 6.086
21 – 30	-0.492	0.474	0.611	0.159 – 2.353
31 – 40	-0.693	0.431	0.500	0.089 – 2.807
> 40	RC			
Age group of partner				
≤ 30	-0.693	0.287	0.500	0.140 – 1.791
31 – 40	-0/201	0.657	0.818	0.338 – 1.983
41 – 50	-1.066	0.017	0.344	0.144 – 0.823
51 – 60	-0.088	0.098	0.413	0.144 – 1.178
≥ 61	RC			
Highest level of partner's education				
No formal	22.108	0.999	3.994	0.012 – 9.175
Primary	1.647	0.001	5.192	2.226 – 12.107
Secondary	0.959	0.002	2.610	1.453 – 4.746
Tertiary	RC			

Table 7: Patterns of domestic violence (physical) among women in rural and urban communities in Kwara State

Variable	Rural (%) n = 149	Urban (%) n = 119	Total (%) n = 268	χ^2	p-value
Beatings/Slap, kicks/Punches	146 (98.0)	116 (97.5)	262 (97.7)	4.384	0.036
Number of times in the last six months	n = 146	n = 116		3.549	0.314
Once	12 (8.3)	11 (9.5)	23 (8.8)		
Twice	71 (49.3)	48 (41.4)	119 (45.8)		
More than twice	63 (41.0)	57 (49.1)	120 (45.8)		
Stab	11 (7.4)	7 (5.9)	18 (6.7)	0.238	0.626
Number of times in the last six months	n = 11	n = 7		0.267	0.605
Once	2 (18.2)	2 (28.6)	4 (22.2)		
More than twice	9 (81.8)	5 (71.4)	14 (77.8)		
Subjects to burns on the body	2 (1.3)	4 (3.4)	6 (2.2)	1.232	0.267
Number of times in six months	n = 2	n = 4			
Once	2 (100.0)	4 (100.0)	6 (100.0)	0.188 ^y	0.665
Threat with a weapon	20 (13.4)	23 (19.3)	43 (16.0)	1.713	0.191
Number of times in six months	n = 20	n = 23		0.359	0.836
Once	7 (35.0)	8 (34.8)	15 (34.9)		
Twice	3 (15.0)	5 (21.7)	8 (18.6)		
More than twice	10 (50.0)	10 (43.5)	20 (46.5)		
Strangles/chokes	39 (26.2)	29 (24.4)	68 (25.4)	0.114	0.736
Number of times in six months	n = 39	n = 29		0.500	0.779
Once	18 (46.2)	11 (37.9)	29 (42.6)		
Twice	10 (25.6)	8 (27.6)	18 (26.5)		
More than twice	11 (28.2)	10 (34.5)	21 (30.9)		

Table 8: Pattern of domestic violence (sexual) among women in rural and urban communities in Kwara State

Variable	Rural (%) n = 149	Urban (%) n = 119	Total (%) n=268	χ^2	p-value
Unwanted sexual comments	39 (26.2)	46 (38.7)	85 (31.7)	4.759	0.029
Number of times in six months	n=39	n=46		1.399	0.497
Once	8 (20.5)	6 (13.0)	14 (16.5)		
Twice	19 (48.7)	21 (45.7)	40 (47.0)		
More than twice	12 (30.8)	19 (41.3)	31 (36.5)		
Forceful caress and romance	37 (24.8)	39 (32.8)	76 (28.4)	2.053	0.152
Number of times in six months	n=37	n=39		1.192	0.551
Once	10 (27.0)	7 (17.9)	17 (22.4)		
Twice	15 (40.5)	20 (51.3)	35 (46.0)		
More than twice	12 (32.4)	12 (30.8)	24 (31.6)		
Forced sex	44 (29.5)	47 (39.5)	91 (34.0)	2.930	0.087
Number of times in six months	n=44	n=47		1.937	0.380
Once	9 (20.5)	13 (27.7)	22 (24.2)		
Twice	19 (43.2)	23 (48.9)	42 (46.1)		
More than twice	16 (36.3)	11 (23.4)	27 (29.7)		

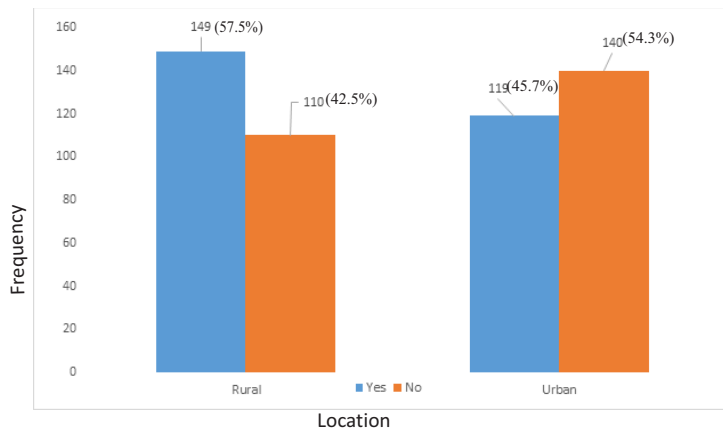


Figure 1: Prevalence of domestic violence among women in rural and urban communities in Kwara State

Table 9: Pattern of domestic violence (Psychological) among women in rural and urban communities in Kwara State

Variable	Rural (%) n = 149	Urban (%) n = 119	Total (%) n = 268	χ^2	p-value
Going out with his permission only	96 (64.4)	76 (63.9)	172 (64.2)	0.009	0.924
Number of times in six months	n=96	n=76		2.123	0.346
Once	9 (9.4)	8 (10.5)	17 (9.9)		
Twice	38 (39.6)	22 (28.9)	60 (34.9)		
More than twice	49 (51.0)	46 (60.4)	95 (55.2)		
Calls respondent names	48 (32.2)	63 (52.9)	111 (41.4)	11.714	0.001
Number of times in six months	n=48	n=63		1.879	0.170
Twice	11 (22.9)	22 (34.9)	33 (29.7)		
More than twice	37 (71.1)	41 (65.1)	78 (70.3)		
Disallows visit to family members and friends	19 (12.8)	17 (14.3)	36 (13.4)	0.134	0.714
Number of times in six months	n=19	n=17		1.726	0.189
Twice	4 (21.1)	1 (5.9)	5 (13.9)		
More than twice	15 (78.9)	16 (94.1)	31 (86.1)		
Humiliation before friends	26 (17.4)	26 (21.8)	52 (19.4)	0.819	0.366
Number of times in six months	n=26	n=26		0.375	0.829
Once	2 (7.7)	2 (7.7)	4 (7.7)		
Twice	7 (26.9)	9 (34.6)	16 (30.8)		
More than twice	17 (65.4)	15 (57.7)	32 (61.5)		
Refuses food	29 (19.5)	47 (39.5)	76 (28.4)	13.069	0.001
Number of times in six months	n=29	n=47		0.166	0.920
Once	6 (20.7)	11 (23.4)	17 (22.4)		
Twice	2 (6.9)	4 (8.5)	6 (7.9)		
More than twice	21 (72.4)	32 (68.1)	53 (69.7)		
Comes home with a girlfriend	9 (6.0)	29 (24.4)	38 (14.2)	18.267	0.001
Number of times in six months	n=9	n=29		3.091	0.213
Once	3 (33.3)	5 (17.2)	8 (21.1)		
Twice	0 (0.0)	7 (24.1)	7 (18.4)		
More than twice	6 (66.7)	17 (58.7)	23 (60.5)		

DISCUSSION

Several factors were found in the study to be associated with the experience of domestic violence. In both rural and urban communities, the educational level of respondents and partners, marriage type and years of marriage, were found to be associated with the experience of domestic violence. After logistic regression was carried out, it was found out that in the rural communities, the respondents without formal education were about 3 times more likely to have experienced domestic violence. In contrast, the respondents in the urban communities with primary education were 10 times more likely to have experienced domestic violence. So also, in the rural communities, male spouses with primary education were six times more likely to have perpetrated domestic violence while their counterparts in the urban community had five times of such risk. The respondents in the rural communities with 11-20 years of marriage were two times more likely to have experienced domestic violence than their

counterparts in the urban communities. Again, it was found out that respondents in the rural community who were married in the monogamous setting were two times more likely to have experienced domestic violence than their counterparts in the urban communities. In addition, in the rural communities, spouses with household income \leq #30,000 per month were 3 times more likely to have experienced domestic violence than their counterparts in the urban communities. These findings were similar to findings on a study conducted on domestic violence in Ethiopia.⁹ The results on educational attainment of the respondents were supported by a study conducted in the Northern Nigeria stated that higher educational attainment and women's engagement in economic activity outside the home was associated with reduced risk of domestic violence.²⁵ The findings on duration of marriage were supported by a study conducted in Ghana, which stated that there was a significant association between age of marriage and the experience of domestic violence.²⁶ The findings on house hold income were supported by a study

which discovered that lower income status of the household, especially of the woman, is likely to cause domestic violence.²⁷ In addition, from the qualitative study, three quarters of the interviewee attributed low income of the house hold as the main cause of domestic violence.

According to the findings of this research, the prevalence of domestic violence in rural communities was more than half, while that in urban communities was less than half. The high prevalence of domestic violence among the rural respondents was similar to the studies conducted globally, with the prevalence of 35 %, ²⁸ in Europe 43%, ²⁹ in Asia and Africa 30- 57% ³⁰ and in Nigeria, 31%. ³¹ These high prevalence were also comparable to the results of community-based research that was conducted in Ibadan, Nigeria. ³² However, they are greater than the findings of hospital-based studies that were conducted in Ebonyi and Imo, Nigeria. ^{33,34} Also these rates were substantially greater than those found in the report from Anambra and in the Nigerian Demographic and Health Survey conducted in 2008. ^{35,36}

On the contrary, the rates are lower than the prevalences from a similar study in both rural and urban areas of Makurdi, Benue state, Nigeria, which were 76.9% and 63.3%, respectively. ³⁶ Also, a study conducted by the National Advisory Committee on Rural Health noted 7.4% difference in higher rates of women in rural areas experiencing domestic violence than in urban areas. ³⁷ Again, a study done in the Southeastern part of Nigeria showed that the burden of domestic violence against women is higher in rural communities than in urban communities in southeast Nigeria. ³⁸ The reason for higher prevalence rate among the rural respondents was supported by a study conducted in Southeastern part of Nigeria which stated that more rural women perceived domestic violence as excusable and that factors that sustain domestic violence could be strong in rural areas. ³⁸ Rural women have less access than urban women to domestic violence shelters, physical and mental health professionals, law enforcement, and judicial personnel. ^{39,40} Rural women are also nearly twice as likely to be turned away from services because of the insufficient number of programs and inadequate staffing of community-based health

programs; they also face barriers to accessing services because of geographic distance and isolation. ^{41,42}

From this study, most (98.0%) of the rural and urban respondents (97.5%) experienced physical violence in the form of beat/slap/kick/punch. Again, more than one quarter (26.2%) of the rural women had experienced strangling/choking by their partners, while less than one quarter (24.4%) of the urban women had experienced this. This was higher than the rates from a study in Enugu, Nigeria. ⁴³ This was also higher than 36% prevalence obtained by a study in Zaria, Nigeria. ²⁵ It was also higher than the prevalence rate of 19.5% obtained in a study conducted in Oiji, Benue, North Central Nigeria. ³⁶ This result is consistent with the findings from a research conducted in Rwanda. ⁴⁴ The higher prevalence rates of physical violence seen among rural women may be attributed to the traditional culture, which accepts beating as a method to chastise members of the community who have broken the rules. ⁶

More than one-quarter of the respondents in the rural communities experienced sexual violence in the form of forced sex(29.5%), forced caress and romance(24.8%) which is lower than one third of the respondents in the urban communities who had similar experience of forced sex(32.8%) and forced caress and romance(39.5%). The prevalence rates of sexual abuse from this study was, however lower than those stated in prior publications from another study from Abuja and South Africa. ^{45,46} This low prevalence rate can be attributed to poor reporting by women due to guilt and embarrassment. ⁴⁷ Another study also attributed this poor reporting to religious reasons. ⁴⁷ In this study, more than one-tenth of the respondents in rural communities experienced psychological violence in the form of their partners preventing them from visiting family members and friends(12.8%) and being humiliated(17.8%) while their counterparts in the urban communities had higher experience of psychological violence in these forms with rates of (14.3%) and (21.8%) respectively. In addition, more than one-tenth (19.5%) of the respondents in rural communities reported that their spouse has refused to eat their food in the past. In contrast, more than one third

(39.5%) of the respondents in urban communities made similar report.

Again, in the rural communities less than one-tenth of the respondents reported that their spouse had come home with a girlfriend in the past while in the urban area less than one-quarter of the respondents made similar report. These prevalence rates were also higher than the results for a rural community in Imo state of Nigeria.⁴⁸ They were also higher than the rate obtained from a study on domestic violence in Turkey.⁴⁹ However, the various rates were lower than that obtained in a study done in Makurdi, Benue state, Nigeria.³⁶ The lower prevalence rates of psychological violence compared to that of physical violence can be linked to poor reporting due to social stigma.⁵⁰ Among the three patterns of domestic violence accessed in this study, the prevalence of physical was the highest followed by psychological violence, then sexual violence. This was supported by the KII interview finding, which stated that most of the respondents reported higher cases of physical abuse, followed by psychological and sexual abuse.

CONCLUSION

According to the findings of this research, the prevalence rate of domestic violence in rural communities was higher than those found in urban communities. The patterns of domestic violence assessed were physical, sexual and psychological violence. The experience of physical violence by the respondents in both communities were similar. The experience of sexual violence and psychological violence by the respondents in the urban communities were higher than those of the rural communities.

RECOMMENDATIONS

It is therefore recommended that continuous sensitization and awareness should be carried out in both rural and urban communities in Kwara state to enlighten people about the dangers of domestic violence. The government should empower women, provide jobs for them and provide shelters for the victims and funds to set them up; this will encourage those whose lives are being threatened to leave.

Conflict of interest: No conflict of interest was declared by the authors.

REFERENCES

1. World Health Organisation. Responding to Intimate Partner Violence and Sexual Violence against Women. WHO Clinical and Policy Guidelines. Geneva: World Health Organization; 2013.
2. Mariam S. Women's Level of Education and Its Effect on Domestic Violence in Rural Bangladesh. *Journal of Humanities and Social Science*. 2014;19(5):40-5.
3. Salaudeen A G, Osinubi M O, Ahmed A, Adeyemi M F, Hussain NA, Musa O I. Prevalence of and perception to domestic violence against women in a north Western city of Nigeria. *Tropical Journal of Health Sciences*. 2019;26(2).
4. World Health Organization. Violence against women. Geneva, Switzerland: 2017 Available on <https://www.who.int/health-topics/violence-against-women>. Last accessed on 7/03/2020.
5. Stephane M. Domestic violence: The problem pervading Nigeria. thinkafricapress.com/nigeria/domestic_violence. 2012. Last accessed on 22/01/2022.
6. Aihie O N. Prevalence of domestic violence in Nigeria: Implications for counselling. *Edo Journal of Counselling*. 2009;2(1):1-8.
7. Owoaje E, OlaOlorun F. Women at risk of physical intimate partner violence: A cross-sectional analysis of a low-income community in southwest Nigeria. *Afr J Reprod Health*. 2012;16:43-53.
8. Shamu S, Abrahams N, Temmerman M, Musekiwa A, C. Z. A systematic review of African studies on intimate partner violence against pregnant women: Prevalence and risk factors. *PLoS ONE*. 2011;6(e 17591). Available at <https://pubmed.ncbi.nlm.nih.gov/21408120/>. Last accessed on 03/02/2022
9. Semahegn A, Mengistie B. Domestic violence against women and associated factors in Ethiopia; systematic review. *Reproductive Health*. 2015;12(1):78.

10. Saffari M, Arslan SA, Yekaninejad MS, Pakpour AH, Zaben FA, Koenig HG. Factors Associated with Domestic Violence against Women in Iran: An Exploratory Multicenter Community-Based Study. *Journal of Interpersonal Violence*. 2017;00(0):1-15 <https://pubmed.ncbi.nlm.nih.gov/29294772/>. Last accessed on 03/02/2022
11. Mohamadian F, Hashemian A, Bagheri M, Direkvand-Moghadam A. Prevalence and Risk Factors of Domestic Violence against Iranian Women: A Cross-Sectional Study. *Korean J Fam Med*. 2016;37(4):253-8. Available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4961859/> Last accessed on 03/02/2022
12. Tanko S T, Yohanna S, Omeiza, S Y. The pattern and correlates of intimate partner violence among women in Kano, Nigeria. *Afr J Prim Health Care Fam Med* 2016;8(:a12091).
13. Sepper S B, Pious E G. Influence of media on behaviour modification: Way forward. *Journal of Media Violence*., 2011;6(2):71-5.
14. Odebode A, Oniye A O, Akangbe Z. Patterns of Domestic Violence as Expressed By Married People in Ilorin Metropolis Nigeria: Implications for Marital and Health Counsellors. *Huria*. 2018;25(1):55-75.
15. Folasade M O. A Global Trend of Child trafficking Among Girls Experiencing Violence and Neglect in the Yoruba Ethnic group in Nigeria: Transnational Feminist Approach: Oregon State University; 2019.
16. Intimate Partner Violence in Rural America. America: National Advisory Committee on Rural Health and Human Services.; 2015. p. 1-10.
17. Ogbonna A L, Anthony I C, Onubiwe N P, Boniface N, Paul E. Comparison of domestic violence against women in urban versus rural areas of southeast Nigeria. *International Journal of Women's Health*. 2014;6 865-72.
18. Mshweshwe L. Support for Abused Rural Women in the Eastern Cape: Views of Survivors and Service Providers: University of Johannesburg; 2018.
19. Jimoh LA. The journey so far. Ilorin: Atoto Press Ltd;; 1994.
20. National Population Commission (NPC) [Nigeria] and ICF International. Nigeria Demographic and Health Survey 2013 Abuja, Nigeria, and Rockville, Maryland, USA 2013. Available at <https://nationalpopulation.gov.ng>. Last accessed on 12/02/2022
21. Creswell J W. Research design; Quantitative, Qualitative, and Mixed Methods Approaches. Thousand Oaks, California: Sage Publications; 2014.
22. Okolo C, Okolo C. PW 0246 Gender based violence in Nigeria: a study of Makurdi Metropolis in Benue, Nigeria. *BMJ Injury Prevention*. 2018;24(2).
23. Abu A. The Effect of Domestic Violence on Women's Health and Agricultural Activities in Otukpo Local Government Area of Benue State, Nigeria: Lund University; 2017.
24. National Bureau of Statistics. Demographic Statistics Bulletin in Nigeria, 2017. Available at
25. Zubairu Iliyasu, Isa S Abubakar, Hadiza S Galadanci, Zainab Hayatu, Aliyu MH. Prevalence and Risk Factors for Domestic Violence Among Pregnant Women in Northern Nigeria. *Journal of Interpersonal Violence*. 2012;28(4):868-83.
26. Owusu Adjah E S, Agbemafle I. Determinants of domestic violence against women in Ghana. *BMC Public Health*. 2016;16(1):368. Available at <https://link.springer.com>. Last accessed on 12/19/2025
27. Economic stress and domestic violence. [database on the Internet]. 2009 [cited Accessed on 4/6/2022]. Available at: VAWnet http://www.vawnet.org/applied-research-papers/print-document.php?doc_id=2187 Last accessed on 12/02/2022
28. Nigeria Demographic and Health Survey. Abuja, Nigeria 2018. p. 15. Available at cs-sunn.org/wp-content/uploads/2018/10/NDHS-2018.pdf. Last accessed on 31/02/2022
29. World Health Organization. WHO multi-

- country study on women's health and domestic violence against women: summary report of initial results on prevalence, health outcomes and women's responses. 2005.
30. Sarkar N N. The impact of intimate partner violence on women's reproductive health and pregnancy outcome. *Journal of Obstet Gynaecol.* 2008;28(3):266-71.
 31. Federal Office Statistics. Annual abstract of statistics 1999 edition. Abuja 1999. Available at
 32. Gillioz L, De Puy J, Dueret V. Domination et violence envers la femme dans le couple. 1997.
 33. Umana J E, Fawole O I, Adeoye IA. Prevalence and correlates of intimate partner violence towards female students of the University of Ibadan, Nigeria. *BMC Women's health.* 2014;14(131).
 34. Odimegwu C O, Okemgbo C N. Women against women; women's perception of girl-child status in Abakiliki area of Nigeria. *Inter J Soc Policy Stud.* 2001;4(2):73-84. Available at <https://www.ajrn.info/index/php/ajrh/article/download/1157/935>. Last accessed on 11/26/2022.
 35. ILika A L, Okonkwo P I, P A. Intimate partner violence among women of child bearing age in a primary health care centre in Nigeria. *Afr J Reprod Health.* 2002;6(3):53-8. Available at <https://scirp.org/reference/referencepapers.aspx?referenceid=1398391>. Last accessed on 11/26/2022.
 36. Audu O, Ishaku B, AA J, CO O, Ogbeyi g, AO O, et al. Prevalence of Domestic violence Against Married Women: A Case Study of Oji Ward, A Rural Setting in North-Central Nigeria. *Community Health and Primary health.* 2015;27(2):209.
 37. Intimate Partner Violence in Rural America. America: National Advisory Committee on Rural Health and Human Services.; 2015. p. 1-10.
 38. Ogbonna A L, Anthony I C, Onubiwe N P, Boniface N, Paul E. Comparison of domestic violence against women in urban versus rural areas of southeast Nigeria. *International Journal of Women's Health.* 2014;6 865-72.
 39. Lohmann N, Lohmann R. Rural social work practice .New York: Columbia University Press; 2005. Available at <http://cup.columbia.edu/book/rural-social-work-practice/9780231129336> Last accessed on 10/02/2021
 40. Mueller KJ, Mackinney AC. Care across the continuum: Access to health care services in rural America. *Journal of Rural Health.* 2006;22:43-9. Available at <https://onlinelibrary.wiley.com/doi/full/10.1111/j.1748-0361.2006.00010.x>. Last accessed on 10/02/2021
 41. Lanier C. Intimate partner violence and social isolation across the rural/urban divide. *Violence Against Women* 2009. Available at <https://pubmed.ncbi.nlm.nih.gov/19755628> Last accessed on 10/02/2021
 42. National Population Commission (NPC) [Nigeria] and ICF International. Nigeria Demographic and Health Survey 2013 Abuja, Nigeria, and Rockville, Maryland, USA 2013.
 43. Obi S, Ozumba B. Factors associated with domestic violence in Southeast Nigeria. *Journal of Obstetrics and Gynaecology.* 2007;27(1):75-8. Available at <https://pubmed.ncbi.nlm.nih.gov/17365465>. Last accessed on 31/02/2022
 44. Ntaganira J, Muula A S, Masaisa F, Dusabeyezu F, Siziya S, Rudatsikira E. Intimate partner violence among pregnant women in Rwanda. *BMC Women's health.* 2008;8(17). Available at <https://www.researchgate.net/publication/23311509-intimate-partner-violence-among-pregnant-women-in-Rwanda> Last accessed on 11/27/2022).
 45. Modiba L M, Baliki O, Mmalasa R, Reineke P, Nsiki C. Pilot survey of domestic abuse amongst pregnant women attending an antenatal clinic in a public hospital in Gauteng Province in South Africa. *Midwifery.* 2011;27(6):872-9. Last accessed on 11/27/2022.
 46. Efetie E R, Salami H A. Domestic violence on

- pregnant women in Abuja, Nigeria. *J Obstet Gynaecol.* 2007;27(4):379-82. Last accessed on 11/27/2022.
47. Binder RL. Why women don't report sexual assault. *J Clin Psychiatry.* 1981;42(11):437-8. Available at pubmed.ncbi.nlm.nih.gov. Last accessed on 12/10/2022.
48. Okemgbo C N, Adekunbi K O, Odimegwu O C. Prevalence, Patterns and Correlates of Domestic Violence in Selected Igbo Communities of Imo State, Nigeria. *African Journal of Reproductive Health.* 2002;6(2):101-14.
49. Deveci S E, Acik Y, Gulbayrak C, Tokdemir M, A A. Prevalence of domestic violence during pregnancy in a Turkish community, South East Asia. *Southeast J Trop Med Public Health.* 2007;38(4):754-Last accessed on 11/27/2022.
50. Rakovec-Felser Z. Domestic violence and abuse in intimate relationship from public health perspective. *Health Psychology Research* Available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4768593/> Last accessed on 12/10/2022. 2014.