

Full Length Research Paper

Assessment of prevalence and forms of violence against married men in Olorunda Local Government of Osun State, Nigeria

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Very little is known about the actual number of men who are in domestic relationship in which they are abused or treated violently by women especially in a developing country like Nigeria. Globally, at least one in six men has experienced some form of gender-based abuse during his lifetime. Men and boys who have experienced physical, sexual or psychological violence suffer a range of health problem, often in silence. This study aims to determine the perception, existence and experience of domestic violence against men among married men in Olorunda Local Government Area, Osun state. It was a descriptive cross-sectional survey with 211 married men selected by multi-stage sampling technique using semi-structured questionnaire. Only 16 (7.6%) have ever heard about the term "Violence against Men" while 109 (51.7%) have heard of the term "Violence against Women". Verbal abuse is the commonest form (82%), though physical and sexual forms were also present. About a third experienced intolerable form of violence, more than 60% did not report the incident. Polygamy, educational status and consumption of alcohol by either or both partners were significant determinants of behaviour. Public enlightenment as well as advocacy by governmental and non-governmental organizations is a necessary strategy to improve report and control this menace in the society.

Key words: Violence, men, married, prevalence, forms.

INTRODUCTION

Background information

Violence against men (VAM) defined as any act of gender-based violence that results in or is likely to result in physical, sexual, emotional or mental harm to men including threat of such acts, coercion or arbitrary deprivation of liberty whether occurring in public or private life (Dutton and Starzomski, 1993) is a major health and human concern. Very little is known about the actual number of men who are in domestic relationship in which they are abused or treated violently by women especially in a developing country like Nigeria.

Violence against men as a global and regional problem

In 100 domestic violent situations, approximately 40

cases reportedly involve violence by women against men (Dekerserdy and Schwartz, 2005). In United States, roughly 300,000 to 400,000 men are said to be treated violently by their wives or girlfriends (Bensley, 1998). VAM is usually claimed to be associated with self-defence but research shows that it is not always so (Dutton and Starzomski, 1993; Fiebert and Gonzalez, 1997). Globally, at least one in six men has experienced some form of gender-based abuse during his lifetime (Nicholls and Dutton, 2001). Another survey indicates that 10-15% of men have experienced some form of gender-based physical abuse by an intimate partner in

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their lifetime (Kessler et al., 2001). Preliminary results from a World Health Organization (WHO) multi-country study on men's health and domestic violence indicate that in some parts of the world, as many as 20% of men have experienced domestic violence (Claudia et al., 2005).

What hurts a man mentally and emotionally differs; for some men, being called a coward, impotent or a failure can have a negative psychological impact as men are said to be more deeply affected by emotional abuse than physical abuse (Dutton and Starzomski, 1993). Violation of human rights that are gender based is a serious problem and yet, little attention has been paid to its serious health consequences of abuse and health needs of abused boys and men as compared to violence against the female gender. Men and boys who have experienced physical, sexual or psychological violence suffer a range of health problem, often in silence.

The incidence of domestic violence against men reported appears to be so low that it is hard to make reliable estimates. Women are advocated for (and are) supported and encourage to report domestic violence against them but virtually nothing has been done to encourage men to report abuse. The idea that men could be victims of domestic abuse and violence is so unthinkable that many men will not even attempt to report the situation. The counselling and psychology experts including non-governmental organizations have responded to domestic abuse and violence against women but there has been very little investment in resources to address the issues of domestic abuse and violence against men. Although, few studies exist in the United States and Europe, studies in Africa and other developing countries are scarce.

Rationale for this study

In studies of victims of domestic violence among married couples, it was found that 96% of wives reported to be victims at the hands of their husbands while only 4% of men reported to have been abused by their wives (Schwartz, 1987). Anomaly is that the focus of many governments has been that of conceptualizing wife assault as a crime, and considering violence against men as inconsequential, even to the extent of police reluctance to arrest (Brown, 2004). The combination of police as well as men's reluctance to acknowledge victimization raises the question of whether men would perceive female-violence against them as crime (Bensley, 1998; Brown, 2004). According to another report (Walby and Allen, 2004), the male respondents were less likely to have told anyone about the victimization than were women and about 3% of the men sampled did not perceive what occurred to them as a crime (Schulman, 1979; Straus, 1997). VAM research has been long neglected whereas psychological, physical and sexual violence against men by men and women is

known to take place at home, workplace, streets, prisons, police custody, schools, etc (WHO, 2012). Nevertheless, VAM is currently gaining some attention in industrialized countries and some developing countries especially among few non-governmental agencies and media advocates. This study aims to determine the perception, existence and experience of domestic violence against men among married men in Olorunda Local Government Area of Osun State.

METHODOLOGY

Description of the study area

This study was conducted in Olorunda Local Government Area which is one of the 30 LGAs in Osun State. The LGA covers a total land area of 97 sq km. The projected population from the estimated national census of 2006 for the LGAs population is 131,761 people.

Study design

The study design applied in this study was the cross sectional descriptive survey of married men in the LGA.

Study population

The population studied was the married men residing within the LGA. All ever-married men were included in the study.

Sampling method

The sampling method employed for this study was the multistage sampling method which includes 5 stages. At stage 1, the LGA was stratified into urban and rural wards. Four wards of the eleven wards within the LGA were selected randomly with three from the urban and one from the rural wards. Then, from each of the selected wards, one enumeration area (EA) was randomly selected by balloting based on the listings of the EAs by the National Population Commission (NPC). From each of the selected EAs, a street was randomly selected by balloting from the list of streets located within the EAs. Utilizing the systematic random sampling method, alternate houses were selected depending on the sampling size proportionately allocated to the wards. One married man was selected per household for interview but where there is more than one married man in a household, one respondent was selected by simple random sampling.

Sampling size determination

The minimum sample size (N) was therefore determined using Fisher's formula for populations greater than 10,000, that is, $N = Z^2 pq / d^2$ where $p = 0.075$; $N = 107$.

Research instrument

A semi-structured interviewer and self-administered questionnaire with four sections was employed in the survey. The first section seeks socio-demographic information of the respondents. The second section was on the collection of information on awareness of the respondents with respect to VAM. The third section was on the collection of information on the attitude and experience of the respondents as related to VAM, while the fourth section seeks information on the prevalence of VAM. The survey was conducted within a five day period in each of the selected wards. Pre-testing of the questionnaires was among married men of Erin-osun in Orolu Local Government, Osun State.

Data collection and management

Two hundred and sixty questionnaires were distributed, of which 246 questionnaires were collected and 211 were appropriately and completely filled and thus considered valid for data analysis.

Data analysis

Data were manually collated by research group, edited and imputed into a computer. Frequencies and measures of central tendencies were generated on relevant variables for univariate analysis and the chi-square test was utilized to test for associations between related variables on the bivariate analysis. Levels of significance was set at <0.05 and results presented with the use of simple frequency tables, cross-tabulated tables for the outcome measures, graphs and simple text for elaboration.

Outcome measures

For knowledge outcome, scores were computed on eleven knowledge variables. A correct response was scored 1 while an incorrect response was scored 0. The mean score was determined and participants were categorized as having poor, fair and good knowledge of VAM with score of 0-3, 4-7 and above 7 respectively. For attitude assessment, participants were categorized as having negative or positive attitude of VAM. A score of 1 was allocated for correct response and 0 for an incorrect response while a score of between 1 and 5 was allocated for the Likert scale. The highest score obtainable was 19 and lowest was 10. The scores below the mean was said to have negative attitude and scores up to and above the mean was said to have a positive attitude. For the experience assessment, respondents were categorized as having mild or severe experience of VAM. On each VAM experience, experience with any instrument or that could cause trauma was considered severe while otherwise was considered mild form of violence.

Ethical consideration

Permission to conduct the survey was sort and obtained from the LGA. The respondents were briefed about the purpose of the study and then interviewed appropriately. The respondents were assured of confidentiality and more so, a respondent was interviewed one at a time. Anonymity was strictly ensured as the respondents were not required to put down their names.

Limitation of the study

The interview was conducted only among the men; interviewing the women to determine the practice of VAM perpetrated by them would have thrown more light to the study.

RESULTS

A total of 211 respondents were included in this study. Table 1 shows the distribution of socio-demographic characteristics. The mean age was 38.0 ± 10.5 years and most were found between the age groups of 31-40 (40.8%). A higher proportion, 184 (87.4%), of the respondents were found to be in monogamous marriages. Most of the respondents were formally educated (94.8%) and employed (95.3%). Only 63 (29.9%) of the respondents consume alcohol and 32 (15.2%) smoke cigarette. Salary or estimated monthly incomes of the majority of the respondents were between ₦10,001 and ₦50,000 (59.3%). Majority of the married respondents, 178 (93.7%), had wives who were educated with only 4.1% as unemployed. Most of the respondents' wives (78.2%) neither take alcohol nor smoke (87.2%).

Respondents' awareness and knowledge of VAM is shown in Table 2. Although all the respondents agreed to the existence of maltreatment of men by partners, only 16 (7.6%) have ever heard about the term "Violence against Men" while 109 (51.7%) have heard of the term "Violence against Women (VAW)", the commonest source of information being the media. Awareness about VAM issues among respondents was highest for verbal abuse with 173 (82.0%), followed by husband biting, sexual harassment, etc. Respondents' perceived reasons why women maltreat their partners include the woman's poor home training 128 (60.1%), bad company 110 (52.1%) as well as the man's irresponsibility in the family 151 (71.6%). Factors relating to both partners include alcoholism, promiscuity, polygamy and sexual problems. Overall, 170 (86.8%) of the respondents have at least a fair knowledge of VAM.

While majority of the respondents condemned VAM (Table 3), varied proportions of them maintained that some form of rough treatment could keep some men in check and that men reporting violence against them by a woman indicate a sign of weakness. Some also mentioned that it is normal to give preferential treatment

Table 1. Socio-demographic characteristics of respondents.

Variable	Frequency	(%)
Age in years (n = 211)		
18-20	4	1.0
21-30	56	26.4
31-40	86	40.8
41-50	45	21.4
> 50	20	10.4
Level of education of respondents (n=211)		
None	11	5.2
Primary	24	11.5
Secondary	53	24.9
Post-secondary	123	58.3
Occupational status of respondents (n=211)		
Professional	43	21.8
Skilled	81	38.4
Unskilled	49	23.2
Unemployed	28	1.9
Student	10	1.9
Religion of respondents (n=211)		
Christianity	115	54.5
Islam	93	44.1
Traditionalist	3	1.4
Spouse's educational status (n=190)		
None	12	6.3
Primary	20	10.5
Secondary	47	24.7
Post-secondary	111	58.4
Spouse's occupation (n=191)		
Professional	39	28.0
Skilled	92	43.1
Unskilled	52	22.3
Unemployed/Students	8	6.6
Alcohol intake (n=63): How often?		
Daily/often	27	43.6
Occasionally	36	56.4
Smoking (n= 32): How often?		
Daily/often	17	53.1
Occasionally	15	46.9
Monthly income in N* (n=177)		
<10 000	22	12.4
10 000 – 50 000	105	59.3
50 000 – 100 000	42	23.8
>100 000	8	4.5

* ₦160 = \$1.

Table 2. Respondents' awareness and knowledge of violence against men.

Knowledge variables	Frequency (%)
Awareness (n=211)**	
Aware that men face maltreatment	211 (100.0)
Ever Heard of the term VAM	16 (7.6)
Ever Heard of the term VAW	89 (42.2)
Sources of awareness of maltreatment (n=211)**	
Television	91 (43.1)
Radio	165 (78.2)
Newspaper/Magazine	74 (35.1)
Family and friends	37 (17.5)
Self study/Internet/Books	12 (5.7)
Level of awareness of maltreatment (n=208)*	
High	142 (68.3)
Low	66 (31.7)
Understanding of VAM (n=211)**	
Preferential treatment of female to male	108 (51.2)
Husband beating/biting	165 (78.2)
Verbal abuse/Cursing	173 (82.0)
Sexual Denial	133 (63.0)
Sexual harassment/Rape	138 (65.4)
Intimidation at work	137 (64.9)
Withholding of economic support	137 (64.9)
Others	70 (33.2)
Perceived reasons for VAM (n=211)**	
Relating to the woman	
Poor Training of the women from childhood	128 (60.6)
Bad Company	110 (52.1)
Claiming Equal Authority/Pride	118 (55.9)
Self defence/Retaliation	129 (61.1)
Relating to the man (n=211)**	
Irresponsibility of the men in the family	151 (71.6)
Promiscuity	122 (57.8)
Relating to both partners (n=211)**	
Polygamy	105 (49.8)
Financial Problem	179 (84.8)
Misunderstanding/argument	137 (64.9)
Sexual problem (excessive demand/inadequate provision)	62 (29.4)
Alcoholism	158 (74.8)
Extended family Issues	43 (20.4)
Level of knowledge (n=196)*	
Good	55 (28.1)
Fair	115 (58.7)
Poor	26 (13.3)

* Singular response; ** Multiple responses.

Table 3. Respondents' attitude toward violence against men.

Variable	S.D	D	N	A	S.A
Unrestrained VAM could be an obstacle to development	2 (0.9%)	8 (3.8%)	12 (5.7%)	89 (42.2%)	85 (40.3%)
Harsh treatment could put men in check	30 (14.2%)	83 (39.3%)	27 (12.8%)	40 (19.0%)	11 (5.2%)
Enact law to stop VAM	7 (3.3%)	23 (10.9%)	46 (21.8%)	78 (37.0%)	40 (19.0%)
Women should be treated more fairly than men	15 (7.1%)	64 (30.3%)	25 (11.8%)	69 (32.7%)	20 (9.5%)
Harder punishment for men for same offence	30 (14.2%)	87 (41.2%)	23 (10.9%)	35 (16.6%)	18 (8.5%)
Lower qualification for women for same post	30 (14.2%)	109 (51.7%)	21 (10.0%)	24 (11.4%)	10 (4.7%)
Woman cannot overpower a man	50 (23.7%)	86 (40.8%)	16 (7.6%)	28 (13.3%)	15 (7.1%)
Some women are domineering	6 (2.8%)	11 (5.2%)	11 (5.2%)	78 (37.0%)	86 (40.8%)
VAM do not need special attention	29 (13.7%)	91 (43.1%)	37 (17.5%)	25 (11.8%)	11 (5.2%)
Female preferential treatment is normal	9 (4.3%)	54 (25.6%)	38 (18.0%)	67 (31.8%)	26 (12.3%)
Family matters including assault should not come to a 3rd party	23 (12.0)	36 (18.7)	14 (7.2)	62 (32.3)	57 (29.7)
It is sign of weakness for a man to report assault on him by partner	21 (10.9)	80 (41.7)	24 (12.5)	31 (16.1)	36 (18.8)
It is normal for a woman to fight back if abused by partner	45 (23.7)	92 (48.4)	15 (7.9)	22 (11.6)	16 (8.4)
Women should use only verbal abuse to retaliate	27 (13.9)	51 (26.6)	76 (39.2)	31 (16.0)	9 (4.6)
Spousal relationship can be absolutely free of discord	42 (21.4)	88 (44.9)	24 (12.2)	30 (15.3)	12 (6.1)
Serious and crude form of conflict are avoidable	29 (15.1)	44 (22.9)	35 (18.2)	28 (14.6)	56 (29.2)
Some domestic violence can be life threatening or cause permanent disability	46 (23.5)	29 (14.8)	11 (5.6)	42 (21.4)	68 (34.7)

to women and that when men and women compete for same position, qualification for the women should be lower. Whereas most of the respondents agreed that some form of disagreement and minor expression of displeasure are unavoidable in relationships, unwarranted impudent behaviour is avoidable.

Sixty-four representing 30.3% of the respondents reported to have ever experienced intolerable violence or been assaulted by their partner and 34 (16.1%) reported such experience in the last 12 months (prevalence) out of which 2.4% were assaulted once, 2.8% twice and others more than twice (Table 4). Forms of violence reported were persistent nagging, brawling, sexual denial, verbal abuse, and object thrown at them. Other forms were sexual harassment, refusal to communicate with or cook. Out of those who ever experienced violence, between 30 and 34% experienced mild forms while between 28 and 32% experienced severe forms of violence. As many as 62.5% of the respondents did not report assault on them anywhere, while most of those who ever reported sometimes told it to a religious leader, to respondents' or wives' relatives. None however reported to the police and none warrants hospitalization.

The number of respondents' wives and spouses' educational status including respondents' employment status and income were significant factors in occurrence, reoccurrence and severity of VAM while number of

children and wives' income were not found to be associated (Table 5). Furthermore, alcohol consumption in the respondents or their partners was also statistically significant in prevalence of violence against men.

DISCUSSION

In this study, we sought to determine the prevalence and forms of VAM in Olorunda Local Government. The fact that very few of the respondents reported having heard of the terminology "Violence against men" despite that fact that they were all well aware of the existence of the practices of maltreatment of men is not unexpected because the term seems to be an emerging issue unlike violence against women which has been well proclaimed. Over the years, there has been so much attention and advocacy against violation of women's right; in fact, gender based violence, to many, seems to equate girl child and women violence ignoring the attacks on the boy child and the men (Dutton and Starzomski, 1993; Claudia et al., 2005). This is obviously due to the long-time disadvantage the female gender has faced.

The issues that our respondents reported as constituting VAM are similar to previously documented studies (McLeod, 1984). As in previous studies (Dutton and Starzomski, 1993; Fiebert and Gonzalez, 1997; Nicholls and Dutton, 2001; Dekerserd and Schwartz,

Table 4. Experience of violence by partner among respondents (n=64).

Experience	N (%)
Forms of violence ever experienced**	
Persistence nagging/Intentional pestering/Shouting on (Mild)	54 (84.4)
Brawling/Scuffling/Tussling with (Mild)	42 (65.6)
Humiliate about financial status (Mild)	15 (23.4)
Bitten by wife (Severe)	10 (15.6)
Pushed/Kicked/slapped by wife (Mild)	16 (25.0)
Object thrown at by wife (Severe)	24 (37.5)
Threatened/Attempted/Actual use of sharp instrument (Severe)	11 (17.2)
Verbally abused by wife in front of others (Mild)	46 (71.9)
Sexually harassed by wife /Forced to have sex (Mild)	14 (21.9)
Denied sex by wife (Mild)	24 (37.5)
Failure to cook meal (Mild)	35 (54.7)
Failure to communicate with (Mild)	28 (43.8)
Origin of last attack* (n=54)	
In self-defence of physical attack	24 (44.4)
In protest of non-physical act/attack	30 (55.6)
Reporting of attack	
Ever made a report (n= 24)**	
To Religious leaders	15 (62.5)
To Relatives/Friends of Respondents	10 (41.7)
To relatives/Friends of Partner	15 (62.5)
To neighbours	6 (25.0)
To police	0 (0.00)
If no report, why (n=40)*	
It indicates weakness	10 (25.0)
Partner usually apologized	15 (37.5)
Neighbours' intervention	5 (12.5)
Not necessary/I can handle it	8 (20.0)
No reason supplied	2 (5.0)

2005), most of the respondents considered harsh treatment of men by women as a way of demanding and defending their right being permissible. Demand of rights, self-defence or revenge is not to be seen as an excuse for violence. In most parts of the world, violence against men by women in self-defence is hardly seen as wrong whereas when men react to women in self-defence, it is counted as VAW. The notion expressed that men should not be physically assaulted by their spouse for any reason and that wives should not enforce their sexual needs on their husbands is also supported by other reports (Dutton and Starzomski, 1993; Claudia et al., 2005) because it will be tantamount to human right violation. The support that some respondents showed for women in agreeing with them to demonstrate any form of harsh treatment to their spouse could be attributed to solidarity due to the various age-long abuse and

discrimination of defenceless women by some men. More than 2/3rd of respondents however were assessed to have overall favourable attitude toward VAM.

It is thought-provoking to find out the presence of VAM in this environment having a current prevalence of 16% but life-time occurrence of 30%. This study confirms the existence of VAM in the western region of Nigeria as already reported in more developed countries. The prevalence however than the 5-10% in developed countries, 3.6% in Namibia and 13.4% in Tanzania but lower than the 20% reported in Peru (WHO, 2003). A paper presentation in Ondo State (Fayankinnu and Rutledge, 1990) reported that about 80% of the men surveyed had experienced violence at one point or the other but this included maltreatment from people apart from their spouses. Of all spousal violence, 25-40% is said to be from woman to man (Gelles, 1993; Corry et al.,

Table 5. Distribution of selected socio-demographic characteristics of respondents with experience of violence against them.

Socio-demographic characteristic	Experience			Total	X²	p-value
	None (%)	Mild (%)	Severe (%)			
No of wives						
1	127 (74.3)	25 (14.6)	19 (11.1)	171		
2-3	8 (40.0)	4 (20.0)	8 (40.0)	20	17.10	0.0019
>3	6 (54.5)	1 (9.1)	4 (36.4)	11		
No. of children						
0-2	59 (67.0)	13 (14.8)	16 (18.2)	88		
3-5	53 (67.1)	18 (22.8)	8 (10.1)	79	7.06	0.1329
>5	5 (41.7)	3 (25.0)	4 (33.3)	12		
Educational status						
Non-educated	0 (0.0)	0 (0.0)	9 (100.0)	9	Not valid (fishers' exact)	0.0000
Educated	135 (73.0)	6 (3.2)	44 (23.8)	185		
Employment status						
Employed	114 (73.5)	25 (16.1)	16 (10.3)	155		
Non-employed	24 (63.2)	4 (10.5)	10 (26.3)	38	6.89	0.0319
Income (₦/month)						
<10,000	7 (35.0)	8 (40.0)	5 (25.0)	20		
10,001-50,000	92 (80.7)	12 (10.5)	10 (8.8)	114	25.76	0.0000
> 50,000	20 (50.0)	14 (35.0)	6 (15.0)	40		
Respondents' alcohol consumption						
Yes	21 (33.3)	15 (23.8)	27 (42.9)	63	62.59	0.0000
No	116 (88.5)	6 (4.6)	9 (6.9)	131		
Wives' educational status						
Educated	109 (66.5)	33 (20.1)	22 (13.4)	164	19.35	0.0000
Non-Educated	4 (36.4)	0 (0.0%)	7 (63.6)	11		
Wives' income (in ₦/month)						
< 10,000	4 (50.0)	1 (12.5)	3 (37.5)	8	5.30	0.2581
10,001-50,000	39 (63.9)	10 (16.4)	12 (19.7)	61		
>50,001	28 (65.1)	11 (25.6)	4 (9.3)	43		
Wives' alcohol consumption						
Yes	2 (10.0)	7 (35.0)	11 (55.0)	20	34.06	0.0000
No	108 (72.0)	25 (16.7)	17 (11.3)	150		

2001; Brinkerhoff and Lupri, 1988). Although females are more frequently regarded as the victims of domestic violence, it is important to recognize that both men and women may be victims of gender based violence.

The forms of violence found in this study were not too much at variance with earlier studies with verbal abuse and nagging topping the list (Fayankinnu and Rutledge, 1990). Although, rape was not reported among our

respondents as in other studies (Fayankinnu and Rutledge, 1990; Fiebert and Gonzalez, 1997; Population Council, 2003), sexual harassment and denial were reported. Use of weapons from blunt to sharp object in this study as in others (Schwartz, 1987; Corry et al., 2001) is evidence that legal action against VAM is necessary. Furthermore, it has been documented that women more than men are likely to use weapon in

domestic violence (McLeod, 1984; Corry et al., 2001) possibly because of perceived less strength (weaker vessel) of the female gender. The perceived less strength and the assurance of civil protection have been reported to be other reasons that some women take as advantage in violence because they feel the man could protect himself which is however detrimental to his health if he fails or charged for assault on the woman if he hits her in defence (Brinkerhoff and Lupri, 1988; Fiebert and Gonzalez, 1997).

Men are usually seen as instigating violence, however, this study revealed that in more than half of the cases, the woman initiated the attack as also reported in previous study which reported that women initiate and carry out physical assault on their partners as often as men do (Straus, 1997). Another study yet showed that less than 20% of VAM by women was in self-defence (McLeod, 1984; Carrado et al., 1996) and another survey reported that half of the violence was mutual (Cook, 1997). Low turnout of report of VAM in this area is due to the fact that men are reluctant to acknowledge victimization while others do not see it as a crime but rather as shame and insult on man's masculinity (Broom, 1998) and this corresponds to a previous research on men unwillingness to report abuse on them (Schulman, 1979; WHO, 2012). Even when they report, it is to their family members and religious heads with the view of amicably settlement rather than legal issues whereas women are swift to make police report with even false allegation to get a divorce (Gardner, 1992).

This study showed that the higher the numbers of wives of the respondents, the more likely they experience violence. Polygamy has the tendency to increase occurrence of misunderstanding and dispute with the resultant effect of physical assault. Polygamy in African setting has been documented to cause envy among women who in turn take revenge from the husband especially when a women feels she or her children are being ignored in attention, finance or sex (Fayankinnu and Rutledge, 1990). Likewise, educational status of the respondents as well as that of their wives is a significant factor on experience of VAM and this is not unexpected as educated people are assumed to be more reasonable and responsible. Finance is another factor that can bring about misunderstanding that may lead to strife in families and this study revealed a similar thing because the income of respondents, but not that of their wives which was found to be associated with VAM Alcohol (in both the violated and the perpetrator), is also a known factor for violence whether domestic or otherwise (Population Council, 2003). This study similarly showed that experience of VAM is more common among respondents whose wives consume alcohol (Markowitz, 2000). The resultant effects when both partners consume alcohol also contribute to the violence experienced as this study showed a clear correlation between the man and his spouse's alcohol consumption. Alcohol could both initiate

as well as increase aggressiveness in people (Brinkerhoff and Lupri, 1998).

Education and public enlightenment on VAM via media and other means need to be intensified. Men should be encouraged to make formal report on violence especially when injuries are sustained either physically or sexually. The public health providers must lead further researches in this field which may provide an approach to develop interventions including enactment of law.

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