

Archives of Epidemiology & Public Health Research **Research Article** 

# Knowledge and Incidence of Gender-Based Violence among Young Adults in the South-South Region of Nigeria: A Comparative Study

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### Abstract

Background: Gender-Based Violence (GBV) entails fundamental violation of human rights and a violence that occurs due to normative role expectations attributable to one's gender. It also includes all activities that facilitate an unbalanced power distribution between genders. These acts are likely to result in physical, sexual or emotional suffering which is usually meted out directly or indirectly through deceit, seduction, threat, coercion or any other means on the victim with the aim of intimidating, punishing or humiliating them.

Methodology: The study was carried out in Cross River and Akwa Ibom States, South-South Region of Nigeria. A communitybased cross sectional and descriptive approach was used, incorporating qualitative and quantitative techniques. A total number of 426 copies of the questionnaire were administered to respondents by the research team. Analysis was performed on the received data from the questionnaires, using Statistical Package for Social Sciences software (SPSS).

Results and Discussion: Majority of the respondents 343(83.1%) have heard about gender-based violence, with Radio/TV 214(51.8%) being the highest source of information. A greater population, 325(78.7%) accepted that maltreatment to a person on the basis of gender which can cause harm to him or her describes gender-based violence. The study further showed that 72.9% young adults could identify the various forms of gender-based violence. Analysis of responses revealed that 198(47.9%) young adults in the study area have experienced at least, one form of gender-based violence in their lifetime. Further analysis showed that physical violence 140(33.9%) and sexual violence 108(26.2%) were the most reported forms of gender-based violence experienced by respondents.

Conclusion: The study showed a significant knowledge of gender-based violence among young adults, since 72.9% could clearly describe the subject matter. Despite this good knowledge, there was a high 47.9% occurrence of gender-based violence in the study area. Our findings and recommendations could impact GBV programming and policy decisions at the individual, community and national levels. Communities should be encouraged to work towards changing various narratives including the domineering attitude of men and encouraging female empowerment as these were linked to reducing incidences of genderbased violence. Campaigns to increase female education should be incorporated into the policies at the national level, as lower levels of education were associated with occurrence of GBV.

**Keywords:** Gender-based violence; Young adults; Violence; Women health; Africa

### **Background**

The World Health Organization described GBV as "the intentional use of force, power or authority which can be threatened or actual against oneself, another person, or against a group or community which may result in injury, death, psychological damage or any other form of deprivation" [1]. Power in the above context is the capacity to make decisions or the ability to influence control. Gender-based violence is any form of violence directed towards a person based on gender, including acts that inflict physical, mental or sexual harm or threat of such acts, coercion or other forms of deprivation of freedom [2]. Current estimates of gender-based violence indicate that 70% of women have been abused sexually or suffered physical assault by a male partner at least once in their lifetime [3]. United Nation Girls Initiative defined gender-based violence as a fundamental violation of human rights and a violence that occurs due to normative role expectations attributable to one's gender and an unbalanced power distribution between genders [4]. Gender-based violence is extreme manifestation of gender inequality that usually affects women and girls because of their subordinate social status in the society [5]. Gender-based violence however is less documented as compared to other types of violence in general and seems to even be trivialized. Despite such trivialization, gender based- violence often remains a taboo issue which when reported poses more challenges for the victim and making it almost impossible to be identified, recognized, dealt with and have the perpetrators prosecuted [6]. This study, therefore, aimed to determine the socio-demographic characteristics of young adults in Akwa Ibom and Cross River States Nigeria, to determine the knowledge level GBV among young adults, to determine the knowledge level GBV among young adults, to determine the proportion of Young adults that have suffered Gender-based violence and to determine the number of young adults that have suffered Gender-based violence in Cross River State Nigeria.

# MATERIALS & METHODS

### **Study Setting**

The study was carried out in Cross River and Akwa Ibom States of Nigeria the study was done in the state capital of the two states i.e., Calabar for Cross River and Uyo, for Akwa Ibom State. Officially, Calabar is partitioned into Calabar Municipal and Calabar South Local Government Areas. Calabar Municipality local government constitutes of 11 Electoral wards while Calabar south has 12 electoral wards. The total population of Calabar as of census 2006 was 371,022 [7]. Uyo is the capital of Akwa Ibom State and has 11 electoral wards with a population of 1,135,7757

### **Study Design**

The study was a community-based cross-sectional descriptive study with both qualitative and quantitative approach. The study population comprised young adults (males and females) aged between 15-39 years in Cross River and Akwa Ibom States. This included selected young adults in the 21 electoral wards (10 in Uyo, 11 in Calabar Municipality LGA) who gave their consent to partake in the study.

The sample size for the study was determined using Bluman's formula [8].

$$n = \frac{z^2 pq}{d^2} = \frac{z^2 p(1-p)}{d^2}$$

Where n =sample size for the population

z= Level of confidence which is 1.96 (i.e. 95% confidence interval)

p= Set at 51.7% (0.517) Prevalence of GBV in Southern Nigeria [9].

q= probability of non-occurrence (1-P = 0.483)

d= margin of error which is 5% (0.05)

Therefore, sample size was:

$$n = \frac{1.96^2 0.517 \times 0.483}{0.0025} = 383.716 \approx 384$$

The sample was increased by 10% to account for non-response.

$$n = \frac{384}{0.9} = 426.6 \approx 427$$

Number to enroll = Response rate Therefore, sample size (n) = 427

### **Study Description**

This Qualitative part of the study employed purposive sampling to conduct 2 Focus Group Discussions involving 10 participants in each of the study locations (FGDs) and conducted 12 Key Informant Interview comprising the 2 Village heads (or their representatives), 2 Women leaders, 2 youth leaders, 2 Medical Superintendents of the secondary healthcare institutions and 2 Community Health Extension workers (CHEW) in charge of the Primary health care centers in the selected communities. These were chosen based on the fact that they are believed to be resident or work in the community as well as holding leadership roles and hence have knowledge of GBV and occurrences among young people dwelling in the selected communities. Participation was be voluntary with each respondent giving informed verbal consent prior to the study.

# Pre-testing of the Instruments

The questionnaire was pre-tested with 10% of the sample size in Akpabuyo Local Government Area, a close Local Government to Calabar Metropolis, Cross River State. This was done to ensure that the instruments for data collection are reliable and measure what they are designed for. A multi-staged sampling technique was used to select 42 young adults for the pretest. This was done to ensure reliability of the instrument. The Instrument was also validated by the Gender Focal Person/ Program officer for Heartland Alliance International, a USAID Funded organization that implements GBV services for Key populations. Findings and feedback from the pretest was used to restructure the self-administered questionnaire.

# **Methods of Data Collection:**

### **Ouestionnaire**

A total number of 426 copies of the questionnaire were administered to respondents by the principal researcher and three (3) field assistants. The field assistants were trained by the principal researcher on public relations, cultural sensitivity, questionnaire dissemination and data collection to ensure completion, consistency and accuracy.

### **Focus Group Discussion (FGD)**

This was used to obtain in-depth understanding of the topic of study. The guides were administered to purposively selected individuals in the study area who are concerned or have vast knowledge of the subject of discussion. The principal researcher was the facilitator of the FGD, while research assistants were assigned the role or note-taker and observer respectively. FGD was conducted in a serene environment to avoid distraction, safe, accessible and convenient place for the respondents. FGD was recorded using tape recorder and all process ensured confidentially.

# **Key Informant Interview Guide**

The guide was used to administer questions to the purposively selected individuals in the study area who are concerned or have vast knowledge of the subject of discussion. The principal researcher was the facilitator of the KII, while research assistants were assigned the role of note-taker and observer respectively. Twelve (12) sessions of KIIs were conducted in the two State capitals. Adequate and appropriate, information of the research and research team, voluntary participation, confidentiality and anonymity were provided to the respondents and informed consent sought before the interview.

### **Methods of Data Analysis**

The data from the questionnaire were analyzed with the use of the Statistical Package for Social Sciences software (SPSS) version 22. Likert scale of 0-4 were used to score response to the questions as follows; "undecided" was 0, "strongly agree" was 4, "agreed" was 3, "disagree" was 2 and "strongly disagreed "was 1. For questions that have Yes and No options, scores were ranged from 0-3; where "No response" was 0, "I don't' know" was 1, "No" was 2 and "Yes" was 3. For negatively stated questions in the questionnaire, reverse scoring will be used. Simple descriptive statistics which includes mean, median and mode, standard deviations and frequencies were used for all continuous variables. For instance, a total knowledge, score was calculated for each respondent. The mean value for the continuous variables was used to determine cut off point points to determine levels. For instance, all respondents with knowledge values below the mean score were considered to have low knowledge levels, those with mean scores were considered to have moderate knowledge levels and those with scores above the mean were considered to have high knowledge levels. Chi-squared analysis was used to test the hypothesis.]

Respondent's knowledge of gender-based violence was calculated by assigning scores to each response in the related sections of the questionnaires. Scores were summed up to get a total score for each individual. Scores that ranged between 0-6 represented poor knowledge, scores within the range of 7-12 represented moderate knowledge while scores that ranged between 13-18 represented good knowledge respectively. The minimum recorded score was 0 and the maximum score was 18 out of a possible total of 18 points.

Qualitative data from the focus group discussions and key informant interview collected from the field were transcribed verbatim. The data were coded and analyzed manually to derive themes associated with factors influencing gender-based violence among young people in Cross River and Akwa Ibom States Nigeria.

# Results

Table 1: Socio-demographic characteristics of respondents

Variables	Frequency (N = 413)	Percentage (%)					
Age							
15-19	39	9.4					
20-24	152	36.8					
25-29	141	34.1					
30-34	53	12.8					
35-39	28	6.8					
Sex							
Male	199	48.2					
Female	214	51.8					
Marital Status	Marital Status						
Single	255	61.7					
Married	89	21.5					
Divorced/separated	26	6.3					
Widowed	10	2.4					
Cohabiting	33	7.9					

Religion				
Christianity	317	76.8		
Islam	35	8.5		
African traditional	31	7.5		
Parents Occupation				
Civil Service	99	24		
Business	122	29.5		
Self-employed	75	18.2		
Farming	15	3.6		
Unemployed	102	24.7		
<b>Highest Education Level</b>				
Primary	28	6.8		
Secondary	106	25.7		
Tertiary	235	57		
Vocational Studies	31	7.5		
No Formal Education	13	3.1		

As shown in Table 1, a total of 413 questionnaires were properly filled and returned, giving a response rate of 96.7%, with 214(51.8%) female and 199(48.2%) male respondents. A greater proportion of respondents 152(36.8%) were within the age bracket of 20-24 years, followed by those within the bracket of 25-29 years, having 141(34.1%) young adults, those within the age bracket of 35-39 years had the least respondents with 28(6.8%) young adults. The mean age of the respondents was 25.4±4.9 years. Most of the respondents 255(61.7%) were sin-

gle while 89(21.5%) and 33(7.9%) were married or cohabiting respectively. Analysis of the occupation of respondents' parents/ guardians revealed that the majority, 122(29.5%) were business persons with civil servants and farmers accounting for 99(24.0%) and 15(3.6%) respectively [Table 1]. Most of the respondents 235(57.0%) had tertiary level education, there were 106(25.7%) and 31(7.5%) young adults who had secondary and vocational studies education respectively with 13(3.1%) respondents who had no formal education.

Table 2: Summary of the knowledge level of gender-based violence among young adults N=413

Knowledge Level	Range	Frequency (N = 413)	Percent (%)	Mean Score
Poor Knowledge	0-6	45	10.9	
Moderate Knowledge	7-12	177	42.9	$12.02 \pm 4.35$
Good Knowledge	13-18	191	46.2	
Total	18	413	100	

### **Knowledge of Gender-Based Violence Among Young Adults**

The majority of the respondents 343(83.1%) have heard about gender-based violence, with Radio/TV 214(51.8%) being the highest source of information, a greater population, 325(78.7%) accepted that maltreatment to a person on the basis of gender which can cause harm to him or her describes gender-based violence. There were 301(72.9%) who could identify the various forms of gender-based violence; young adults responded that intimate partner violence 220(53.5%) emotional/psychological abuse 181(43.8%), verbal abuse 189(45.8%), forced sex/rape 242(58.6%) and harmful traditional practices 172(41.6%) were the forms of gender-based violence. 20.3% of the respondents indicated that Lecturers/Teachers are the commonest perpetrators of gender-based violence with 127(30.8%) respondents stating that teenage girls are the most affected by gender-based violence. Table three shows that 45(10.9%) respondents had poor knowledge of gender-based violence, 177(42.9%) persons had moderate knowledge and 191(46.2%) respondents had good knowledge of gender-based violence. On a general note, respondents in the study area had a mean score of knowledge 12.02  $\pm$ 

4.35 which connotes moderate knowledge of gender-based violence with an average score of  $12.02 \pm 4.35$  out of 18 possible points.

# Key Informant Interviews on The Knowledge Of GBV

Key informants correctly defined GBV and stated clearly that GBV is wrong and has the potential of working against the progress of a community

"I understand that gender-based violence is any act of deprivation or battering of any person because the person is either male or female. Both men and women perpetrate this and can be victims too. It is not good, it should be stopped" (Community Head – key informant).

"I am aware in this community of gender abuse to be when people are not given what is their right because they are either male or female. This is very bad but exists in various societies" (Community Leader). Knowledge about acts of GBV among youth was common but the term Gender-based violence was not commonly used.

"There is a young person here who know about gender-based violence and they avoid it. In fact, most of the youths here know about it" (Community Youth Leader).

"Even though we barely have cases of such here, a young person here knows about gender-based violence" (Women Leader).

"Many young persons in this community may really not know it's given name, but they know what gender-based violence is" (Youth Leader).

One of the acts of GBV commonly identified by Key informants was Spousal or intimate partner battering.

"The major cases that I have handled are related to young person's beating their wives or girlfriends. About three cases like that have gotten to me" (Community Head).

"The last case that was brought to us was a young man who had an argument with his girlfriend and he so beat her up. This is usually the most reported to us" (Women Leader).

# Focus Group Discussion with Young Adults Regarding Knowledge of GBV

Key questions were used to elicit information from young adults about gender-based violence, its occurrence, and their views and opinions towards gender-based violence. Several themes emerged including how knowledgeable young persons are about gender-based violence. Some discussants accept that young persons are knowledgeable about the acts but may not know it to be termed gender-based violence.

"I think young people know about these forms and acts that are grouped as gender-based violence but may not know that it is called so" (Male FGD Participants).

"I am sure they know about it, gender-based violence is viral and looks like an act that has come to stay" (Female Participant).

A few others however stated that there is still more need for awareness as not all young persons are knowledgeable about the subject matter.

"I can say for myself that I know about it. However, the other persons may not be enlightened enough to know what gender-based violence is" (Female FGD Participant).

"I don't think they know oh, here, somebody will just touch a lady's breast and they see it as normal" (Male Participant).

# The Proportion of Young Adults Affected by Gender-Based Violence

Table 3: Proportion of young adults affected by gender-based violence

Variables	Frequency (N = 413)	Percentage (%)
Ever experienced GBV		
Yes	198	47.9
No	215	52.1
Form(s) experienced**		
Physical Violence	140	33.9
Sexual Violence	108	26.2
Emotional Violence	98	23.7
Female Genital Mutilation	45	10.9
Socioeconomic Violence	64	15.5
Reported the matter		
Yes	116	58.5
No	82	41.4
No GBV Experienced	215	52
Know someone affected		
Yes	262	63.4
No	85	20.6
Can't Remember	66	16
Persons to whom GBV was reported		
Kept To Self	82	41.4
Religious Leader	9	4.5

Medical Doctor	30	15.1			
Family Member(s)	24	12.1			
Police	29	14.6			
NGO	24	12.1			
Reasons for not reporting**					
Shame	132	32			
Fear Of More Harm	109	26.3			
Stigma/Discrimination	59	14.3			
Family Will Be Disappointed	53	12.8			
Authorities Do Nothing About It	60	14.5			

# \*\*Multiple responses allowed

Analysis of responses revealed that 198(47.9%) young adults in the study area have experienced at least, one form of gender-based violence in their lifetime. This represents a 47.9% proportion of gender-based violence in the study area. Further analysis showed that physical violence 140(33.9%) and sexual violence 108(26.2%) were the most reported forms of gender-based violence experienced by respondents. Majority of the respondents 262(63.4%) further revealed that they know of at least, one person who has experienced a form of gender-based violence. About 116 (58.5%) reported the matter and 82(41.4%) did not report to anyone Responding to the persons young

adults who were victims of gender-based violence reported the matter to, 82(41.4%) kept it to themselves, 9(4.5%)reported to a religious leader, 30(15.1%) reported to a medical doctor, 29(14.6%) and 24(12.1%) reported to the police and their family members respectively and 24(12.1%) respondents reported to a health NGO. The following were indicated as reasons why gender-based violence incidence is not reported: shame 132(32.0%); fear of harm 109(26.3%); stigma/discrimination 59(14.3%); 53 (12.8%) persons indicated that their families will be disappointed and 60(14.5%) indicated that the authorities do nothing about GBV matters when reported.

Table 4: Association between knowledge level of gender-based violence among respondents in Akwa Ibom and selected socio-demographic characteristics N=209

Socio-demographic variables Knowledge Level			Pearson's Chi square (χ2)	p-value		
	Poor	Moderate	Good			
Age Group						
15-19	1 (5.9%)	10 (58.8%)	6(35.3%)		0.32	
20-24	10 (13.9%)	29 (40.3%)	33 (45.8%)			
25-29	5 (6.5%)	33 (42.9%)	39 (50.6%)	9.254		
30-34	0 (0.0%)	14(45.2%)	17 (54.8%)			
35-39	2 (16.7%)	6 (50.0%)	4 (33.3%)			
Total	18 (8.6%)	92 (44.0%)	99 (47.4%)			
Sex						
Male	10 (9.9%)	53 (52.5%)	38 (37.6%)	7.47	0.02*	
Female	8 (7.4%)	39 (36.1%)	61 (56.5%)	7.47	0.02*	
Total	18 (8.6%)	92 (44.0%)	99 (47.4%)			
<b>Level of Education</b>						
No formal Education	3 (75%)	1 (25%)	0 (0%)		0.00003*	
Primary Education	1 (11.1%)	7 (77.8%)	1 (11.1%)	34.99		
Secondary Education	8 (10.4%)	39 (50.6%)	30 (39%)			
Tertiary Education	6 (5%)	45 (37.8%)	68 (57.1%)			
*significant at p<0.05 at 95% confiden	ce interval					

There is no statistically significant difference in the knowledge level of gender-based violence among young adults in Akwa Ibom and selected socio-demographic variables. The knowledge of respondents about gender-based violence showed that the age bracket 25-29 years have the highest knowledge scores with 50.6% respondents having the highest score of good knowledge. This difference in knowledge was not statistically significant when it was tested with Chi-square fit test (P=0.32;  $\chi^2$ =9.254). The study therefore failed to reject the null hypothesis, it was therefore concluded that there is no statistically significant association between the knowledge level of gender-based violence and age of respondents in Akwa Ibom State. In addition, analysis revealed that female young adults were more knowledgeable on gender-based violence with 61 of them showing good knowledge as compared to 38 male young adults who had good knowledge of gender-based violence. This differences when tested with a Chi-square analysis was statistically significant (P=0.02;  $\chi^2$ =7.74). The study therefore rejects the null hypothesis; hence,

it was concluded that there is a statistically significant association between the knowledge level of gender-based violence and sex of respondents in Akwa Ibom State.

Furthermore, educational level showed to increase the knowledge of respondents about gender-based violence. There were no single respondents with no formal education who had good knowledge of GBV. The highest level of knowledge was seen among respondents with tertiary level education, having 45(37.81%) respondents and 68(57.1%) respondents moderate to good knowledge of gender-based violence. Analysis using the Chi-square test showed that this difference was statistically significant (P=0.00003;  $\chi^2$ = 34.99). The researcher rejected the null hypothesis and the conclusion was drawn that there is a statistically significant association between the knowledge level of gender-based violence and the level of education among young adults in Akwa Ibom based.

Table 5: Association between knowledge level of gender-based violence among respondents in Cross River State and selected socio-demographic characteristics N= 204.

Socio-demographic variables	Knowledge	Level		Pearson's Chi square (χ2)	p-value		
	Poor	Moderate	Good				
Age Group							
15-19	3 (13.6%)	11 (50.0%)	8(36.4%)				
20-24	8 (10.0%)	39 (48.8%)	33 (41.3%)				
25-29	10 (15.6%)	28 (43.8%)	26 (40.6%)	12.230	0.14		
30-34	4 (0.0%)	4 (42.8%)	14 (57.2%)	12.230	0.14		
35-39	2 (12.5%)	3 (18.8%)	11 (68.8%)				
Total	27 (13.2%)	85 (41.7%)	92 (45.1%)				
Sex							
Male	12 (12.2%)	37 (37.8%)	49 (50.0%)	1 027	0.20		
Female	15 (14.2%)	48 (45.3%)	43 (40.6%)	1.837	0.39		
Total	27 (13.2%)	85 (41.7%)	92 (45.1%)				
<b>Level of Education</b>							
No formal Education	4 (44.4%)	4 (44.4%)	1 (11.1%)				
Primary Education	2 (10.5%)	8 (42.1%)	9 (47.4%)	10.92	0.91		
Secondary Education	5 (8.3%)	28 (46.7%)	27 (45%)				
Tertiary Education	16 (13.8%)	45 (38.8%)	55 (47.4%)				
*significant at p<0.05 at 95% confid	lence interval						

There is no statistically significant association between the knowledge level of gender-based violence among young adults in Cross River State and selected socio-demographic variables. The knowledge of respondents about gender-based violence showed that the age brackets 20-24 years and 25-29 years have the highest knowledge scores with 33 (45.8%) and 39(50.6%) respondents respectively having the highest score of good knowledge. This difference in knowledge was not statistically significant when it was tested with Chi-square fit test (P=0.14;  $\chi^2$ =12.23). The study therefore failed to reject the null hypothesis, it was therefore concluded that there is no statistically significant association between the knowledge level of gender-based violence and age of respondents in Cross River State. In addition, analysis revealed that male young adults were more knowl-

edgeable about gender-based violence with 49 of them showing good knowledge as compared to 43 female young adults who had good knowledge of gender-based violence. This differences when tested with a Chi-square analysis was not statistically significant (P=0.39;  $\chi^2$ =1.87). The study therefore failed to reject the null hypothesis, hence, it was concluded that there is no statistically significant association between the knowledge level of gender-based violence and sex of respondents among young adults in Cross River State.

Furthermore, educational level showed to increase the knowledge of respondents about gender-based violence. 1 out of 9 respondents with no formal education had good knowledge of GBV. The highest level of knowledge was seen among re-

spondents with tertiary level education, having 45(38.8%) and 55(47.4%) moderate to good knowledge of gender-based violence. Analysis using the Chi-square test showed that this difference was statistically significant (P=091;  $\chi^2$ =10.92). The study

therefore, failed to reject the null hypothesis and the conclusion was drawn that there is no statistically significant association between the knowledge level of gender-based violence and the level of education among young adults in Cross River State.

Table 6: Relationship between knowledge of gender-based violence and occurrence among young adults N=413.

Test variables	Level of Knowledge			df	Pearson's Chi	p-value
	Poor	Moderate	Good	square (χ2)		
Experienced GBV						
Yes	19(42.2)	89(50.3)	90(47.1)	2	1.03	0.597
No	26(57.8)	88(47.9)	101(52.8)			

Figures in parenthesis represent percentages.

There is no statistically significant relationship between the knowledge of gender-based violence and the occurrence of gender-based violence among young adults. The number of those who have experienced any form of gender-based violence increased with an increase in their knowledge of the subject matter. There were 90(47.1%) respondents who had good knowledge of gender-based violence and have experienced the same

as compared to 19(42.2%) respondents who have poor knowledge with experience of a form of gender-based violence. When this was subjected to the Chi-square test, the relationship was not statistically significant (P=0.597; df=2,  $\chi^2$ =1.030). The researcher failed to reject the null hypothesis and it was concluded that there is no statistically significant relationship between the knowledge of gender-based violence and its occurrence among respondents.

Table 7: Difference in occurrence of gender-based violence and location of respondents N=413.

Test variables	Experienced GBV		df	Pearson's Chi	p-value
	Yes	No	square (χ2)		
Location					
Calabar	113(57.1)	91(42.3)	1	8.965	0.003
Uyo	85(42.9)	124(57.7)			

Figures in parentheses represent percentages.

The occurrence of gender-based violence was reported to be more among young adults in Cross River 113(57.1%) than that reported among respondents in Akwa Ibom 85 (42.9%). Analysis using the Chi-square showed that this association was statistically significant (P=0.003; df=1,  $\chi$ 2=8.965). The researcher, therefore, rejected the null hypothesis and the conclusion was drawn that there is a statistically significant difference in the occurrence of gender-based violence among respondents who live in Calabar than those who live in Uyo.

### **Discussions**

# **Knowledge of Gender-Based Violence Among Young Adults**

Findings from the study showed that majority (83.1%) of respondents have heard about gender-based violence and 78.7% of respondents could clearly describe gender-based violence as the maltreatment of a person on the basis of gender which could cause harm to him or her. Possessing adequate knowledge of gender-based violence is a crucial step toward curbing this long-standing menace in many societies. This is corroborated by the report from the study carried out in Ghana where it is found that 85% of young persons in the area have heard about gender-based violence and violence against women9. This report further documented that over 60% of the respondents could

clearly indicate the definition of gender-based violence. This is in tandem with findings in a similar study whose respondents showed a satisfactory knowledge of gender-based violence with over 69% scoring above average as they could clearly describe gender-based violence [10, 11]. This study further showed that 72.9% of young adults could identify the various forms of gender-based violence with 20.3% indicating that lecturers and teachers are the commonest perpetrators of gender-based violence. A similar study in Lagos, Nigeria contrast this finding, it showed that young adults in the study did not have adequate knowledge and right perceptions about gender-based violence and although 65.3% claimed to have heard about it, only 1.8% could define it, also, a significant proportion could not identify the various forms of gender-based violence correctly [12]. On the other hand, the study by Osuna-Rodrigues et al showed that young persons in the University of Cordoba had sufficient knowledge of gender-based violence and showed the right perception to it [13]. Their results further revealed that the perception of gender-based violence was higher in female students. Another report on GBV Studies in 2011 revealed that only 58% of respondents scored above 60% in the overall rating of the questions to assess knowledge of gender-based violence [10]. Finally, this study showed that generally, respondents had a moderate knowledge of gender-based violence with an average of 12.02 out of 18 points.

<sup>\*</sup>Statistical significance based on p<0.05

<sup>\*</sup>Statistical significance based on p<0.05

# The proportion of young adults affected by gender-based violence

Findings from this study showed that 47.9% of young adults in the study had experienced gender-based violence. Further analysis showed that 33.9% of respondents have experienced physical violence while 26.2% have experienced sexual violence. Having an underlining illness, such as HIV or Tuberculosis increases the chances of experiencing GBV [13]. The findings from this study are comparable to findings reported in Ethiopia which showed a 37.2% and 56.3% prevalence of sexual and physical violence among young persons, respectively [14]. A study in Southern Nigeria reported a 51.7% prevalence rate of gender-based violence and this is consistent with findings from this present study [15]. Another study in Northern Nigeria showed 58% high prevalence of gender-based violence among young students where 22.8% of them experienced physical assault [16]. This study also revealed that 18.2% of victims did not report to anyone about when they experienced GBV while 19.9% indicated that if they were to experience gender-based violence, they would keep it to themselves.

The qualitative and quantitative data collection showed that stigma/discrimination, fear, and weak enforcement of laws were some of the reasons why victims do not report cases of gender-based violence. Reports from a study on gender-based violence among young adults in Lagos, Nigeria is congruent with this finding, where he reported that some of the reasons why victims do not report cases include the stigma attached, trying to protect the family name, and the fact that the perpetrator may be an influential person [14]. The general trend of not reporting cases of gender-based violence is also an obstacle to an accurate determination and proper documentation of consequent burden and prevalence. Findings from research on reporting patterns of GBV showed that most participants in the study did not report cases of gender-based violence, instead, they tried to justify and these cases with inappropriate behavior or clothing and the lack of personal preventive measures against gender-based violence as causes [15].

### Conclusion

The study determined the level of knowledge of gender-based violence among young adults and ascertained the proportion of young persons affected by gender-based violence and also examined the association between the knowledge and occurrence of gender-based violence with socio-demographic characteristics of young adults. A total of 427 young adults were randomly recruited for the quantitative study and semi-structured questionnaires were used as a tool for quantitative data collection with a 96.7% response rate (413 respondents), ten (10) key informants were interviewed, and two (2) focus group discussion comprising of seven (7) young adults each were conducted with the structured key informant and focus group discussion guide as a qualitative data collection tool. The outcome of the study showed that young adults in the study area had moderate knowledge about gender-based violence since 325(78.7%) could describe it and 301(72.95) could clearly identify the various forms of gender-based violence. A good proportion of young adults, 198(47.9%) in the area have experienced a form

of gender-based violence, with physical 140(33.9%) and sexual violence 108(26.2%) being the most experienced form of gender-based violence. Findings showed that shame 135(32.7%) and fear/anxiety 95(23.0%) were the most reported health/ psychological outcomes of gender-based violence. The study showed a significant knowledge of gender-based violence among young adults. It was observed that 72.9% of the participants could clearly describe the subject matter. While 42.9 % had a moderate knowledge of Gender-based violence. Despite the moderate knowledge, there was a high 47.9% occurrence of gender-based violence in the study area. The association between knowledge of gender-based violence and its occurrence showed no statistically significant relationship when tested with the Chi-square (P=1.030). The location of respondents and level of education were statistically associated with the occurrence of gender-based violence (P<0.05).

# Recommendations Individual level

Individuals should be educated by health and social workers about gender-based violence with a strong emphasis on its various forms. There is a need for continuous education to individuals on the available authorities/persons to report to in the case of any form of gender-based violence.

### Community/socio-cultural level

Communities should be encouraged by health, social and government workers to acknowledge gender-based violence as a challenge - since the findings showed that some communities do not frown at gender-based violence. Communities should work towards changing various narratives including the domineering attitude of men and encouraging female empowerment as these were linked to reducing incidence of gender-based violence.

### National/policy level

Gender-based violence laws should be enforced by law enforcement agents. This is because most victims of gender-based violence from the study did not report since there is weak enforcement of gender-based violence. The government should invest in formal education as education enables a high socio-economic status of women, which is linked to the occurrence of gender-based violence. From this study, a lower level of education was associated with occurrence of gender-based violence.

### **Limitations and Further Studies:**

The study captured GBV among young adults in urban settings. This may limit the true picture of gender-based violence the region of study as the prevalence of occurrence of GBV in rural settings or among older women were not considered. There is need for a further study to investigate why respondents in Cross River State experienced more gender-based violence than those in Akwa Ibom State.

### **Conflict of interest:**

The authors declared no conflict of interest.

# **Ethical Approval:**

Ethical approval was obtained from the Cross-River State Ministry of Health with the Ethical Approval number: CRS/MOH/RP/REC/2020/127

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