



# Combating intimate partner violence in Africa: Opportunities and challenges in five African countries

L. Olayanju<sup>a</sup>, R.N.G. Naguib<sup>a,\*</sup>, Q.T. Nguyen<sup>a</sup>, R.K. Bali<sup>a</sup>, N.D. Vung<sup>b</sup>

<sup>a</sup> Biomedical Computing and Engineering Technologies (BIOCORE) Applied Research Group, Health Design Technology Institute and Faculty of Engineering & Computing, Coventry University Technology Park, Puma Way, Coventry CV1 2TT, United Kingdom

<sup>b</sup> Department of Demography, Institute for Preventive Medicine and Public Health, Hanoi Medical University, 1 Ton That Tung Street, Dong Da District, Hanoi, Viet Nam

## ARTICLE INFO

### Article history:

Received 27 February 2012

Received in revised form 3 November 2012

Accepted 6 November 2012

Available online 13 November 2012

### Keywords:

Gender-based violence

Women

Spouse

Risk factors

Reproductive health

## ABSTRACT

Recent research results emerging from Africa show a worrying situation regarding the levels of intimate partner violence (IPV) in various countries in the continent – levels that are quite high and place great financial burden on individuals and governments. This paper explores the magnitude, nature, and risk factors of IPV in five African countries, namely, Morocco, Nigeria, Namibia, Uganda, and Tanzania. The focus of the paper is to explore issues of IPV in these countries by considering the opportunities in each country that could assist in the prevention of violence, and also to identify inherent challenges that may pose threats to efforts in reducing the high IPV prevalence. As there are only limited studies on IPV in developing countries, new insights provided by this paper would afford relevant stakeholders a better understanding of the issue.

© 2012 Elsevier Ltd. All rights reserved.

## Contents

1.	Introduction	102
2.	Intimate partner violence	103
3.	Intimate partner violence in Africa	103
3.1.	Morocco	103
3.1.1.	Overview	103
3.1.2.	Education	104
3.1.3.	Employment	104
3.1.4.	Reproductive health	104
3.1.5.	Access to mass media	104
3.1.6.	Socio-cultural context of gender relations	104
3.1.7.	IPV magnitude and dimensions	104
3.2.	Nigeria	105
3.2.1.	Overview	105
3.2.2.	Education	105
3.2.3.	Employment	105
3.2.4.	Reproductive health	105
3.2.5.	Access to mass media	105
3.2.6.	Socio-cultural context of gender relations	105
3.2.7.	IPV magnitude and dimensions	105
3.3.	Namibia	106
3.3.1.	Overview	106
3.3.2.	Education	106
3.3.3.	Employment	106
3.3.4.	Reproductive health	106

\* Corresponding author.

E-mail addresses: olayanjil@coventry.ac.uk (L. Olayanju), r.naguib@coventry.ac.uk (R.N.G. Naguib), nguyentq@coventry.ac.uk (Q.T. Nguyen), r.bali@coventry.ac.uk (R.K. Bali), ndvung755@yahoo.com (N.D. Vung).

3.3.5.	Access to mass media . . . . .	106
3.3.6.	Socio-cultural context of gender relations . . . . .	106
3.3.7.	IPV magnitude and dimensions . . . . .	106
3.4.	Uganda . . . . .	107
3.4.1.	Overview . . . . .	107
3.4.2.	Education . . . . .	107
3.4.3.	Employment . . . . .	107
3.4.4.	Reproductive health . . . . .	107
3.4.5.	Access to mass media . . . . .	107
3.4.6.	Socio-cultural context of gender relations . . . . .	107
3.4.7.	IPV magnitude and dimensions . . . . .	107
3.5.	Tanzania . . . . .	108
3.5.1.	Overview . . . . .	108
3.5.2.	Education . . . . .	108
3.5.3.	Employment . . . . .	108
3.5.4.	Reproductive health . . . . .	108
3.5.5.	Access to mass media . . . . .	108
3.5.6.	Socio-cultural context of gender relations . . . . .	108
3.5.7.	IPV magnitude and dimensions . . . . .	108
4.	Country-by-country opportunities and challenge analyses . . . . .	109
4.1.	Morocco . . . . .	109
4.1.1.	Opportunities . . . . .	109
4.1.2.	Challenges . . . . .	109
4.2.	Nigeria . . . . .	109
4.2.1.	Opportunities . . . . .	109
4.2.2.	Challenges . . . . .	109
4.3.	Namibia . . . . .	110
4.3.1.	Opportunities . . . . .	110
4.3.2.	Challenges . . . . .	110
4.4.	Uganda . . . . .	110
4.4.1.	Opportunities . . . . .	110
4.4.2.	Challenges . . . . .	110
4.5.	Tanzania . . . . .	110
4.5.1.	Opportunities . . . . .	110
4.5.2.	Challenges . . . . .	110
5.	Discussion and conclusions . . . . .	110
	References . . . . .	111

## 1. Introduction

Intimate partner violence (IPV) is a phenomenon that pervades all societies around the globe (Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002; WHO, 2010) and is associated with a number of immediate and long-term health issues, as well as being a drag on economic development as it comes with serious financial consequences (Duvvury, Grown, & Redner, 2004).

As an issue that has great impact on the victims, their families, the immediate environment in which it occurs, and even on the future generations (as it is deemed to have intergenerational effects (WHO, 2010)), IPV is a well recognized problem that has a central place in the political, social, and economic realms of developed countries such as the UK, US, and Canada. On the other hand, it has received very little attention in the developing world — most especially in developing countries in Africa — probably due to cultural barriers, level of poverty, lack of social support, absence of relevant state laws and institutions, or due to some other reasons. A common misconception of IPV in these areas that, perhaps, has contributed to its high level is the belief that such violence or related issues are private family matters that need to be treated or solved domestically within the family without interference from outsiders. In other words, IPV is considered as a normal occurrence that takes place in a domestic sphere where personal or customary rules predominate and, as a result, the state and social machinery tend to disincite to intervene.

Although a reasonable number of research studies have been conducted in developed (high-income) countries, and which have resulted in numerous theories explaining the occurrence of IPV, the dearth of

research in low- and middle-income countries has prevented the exploration of how these theories explain the prevalence of violence in the developing world. Resko (2010) stated that 'theories are important because they influence the actions chosen to address a problem and frame the general population's understanding of a social issue'. Perhaps this explains why many of the developing countries are yet to have specific programs targeted at reducing IPV, and why populations of these countries still lack the necessary awareness of the issue (WHO, 2010).

Based on the above, it becomes apparent that to critically explore and address this multifaceted phenomenon of IPV in developing African countries endemic of the violence, one must be able to understand how the available theories could help explain the occurrence of IPV in these countries. This paper takes a theoretical look at the issues of IPV in Africa, by considering five such countries: Morocco, Nigeria, Namibia, Uganda, and Tanzania. The selection of these countries is not to slight their respective societies, but mainly based on geographical spread (i.e., North, West, South and East) as well as to respond to the limitation of space and dearth of comparable data.

The paper starts by succinctly discussing IPV from a general perspective, touching on the theories available to explain IPV occurrence. It then moves on to issues of IPV in Africa, before considering the violence in the context of the selected African countries. Subsequently, the study provides a detailed analysis to explore the violence in each country. The analysis is performed by using the available theories explaining how socio-demographic variables, such as education, employment, access to mass media, reproductive health and socio-cultural context of gender relations, that could lead to IPV occurrence in each country and their respective IPV status. As a conclusion, the paper discusses the identified

Download English Version:

<https://daneshyari.com/en/article/94639>

Download Persian Version:

<https://daneshyari.com/article/94639>

[Daneshyari.com](https://daneshyari.com)