



# **■** Original Research Article

Prevalence and Types of Gender-Based Violence Among Secondary School Students in Southwest, Nigeria.

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#### **ABSTRACT**

**Background:** Gender-based violence (GBV) continues to be a significant public health issue. Although it is preventable, its recurrence presents teenagers with several negative implications that may extend into the future. Globally, one in every three women has experienced some violence. Young people are particularly vulnerable; a total of 73 million males and 150 million females are being considered to be impacted. Aims: This study examined the prevalence and types of Gender-based Violence (GBV) among students in public and private secondary schools in Ibadan. Settings and Design: This study was a cross-sectional study and the study site was selected public and private secondary schools in Ibadan North local government. Methods and Material: A multistage sampling technique was used to recruit 909 in-school students from 6 secondary schools (3 public and 3 private) in Ibadan North LGA, Oyo State, Nigeria between May to July 2023. A pretested semi-structured self-administered questionnaire, with close- and openended questions was used for data collection. Statistical analysis: Data was analyzed using IBM SPSS version 25. The level of significance was p-value≤ 0.05. Results: The modal age group was 12-14 years (54.7%). The overall prevalence of GBV was 65.5%, males (66.1%) and females (64.9%) are almost equally affected, with the majority occurring among females in private schools (67.4%, p=0.119). Verbal violence was the most common form of GBV experienced by adolescents (55.9%). Conclusions: GBV occurs among adolescents. Both males and females are affected and the spectrum of types of violence is similar to older individuals; thus, a need to help this group. There is a need for supportive services within secondary schools, early and genderresponsive interventions to promote gender equality, prevent them from being victims of violence, and school authorities to actively prevent the experience of GBV among students.

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### INTRODUCTION

Gender-based violence (GBV) is any act of violence resulting in or may result in physical, sexual, or psychological harm or suffering to women whether occurring in public or private life<sup>1</sup>. It is a consequence of the uneven power dynamics between the male and

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female genders, which are exacerbated by a system of deeply ingrained patriarchal ideas that sees women as less valuable than males and is associated with poverty, illiteracy, and poor social status for women<sup>2</sup>. GBV affects people of both genders, it commonly involves a male perpetrator and a female victim<sup>3</sup>. It is a global challenge with no economic, social,

geographical, cultural, ethnic, or national boundaries and one of the biggest threats to human rights and public health affecting the physical, sexual, mental, and social well-being of at least one in three women globally<sup>4</sup>,<sup>5</sup>.

Worldwide, approximately 30% of women living with their partners have experienced physical and sexual violence with a higher prevalence of 37% in Africa, East Mediterranean, and South East Asia<sup>6</sup>. The highest prevalence of physical or sexual intimate partner violence (65.64%) was reported in the African region, predominantly in Sub-Saharan Africa7. According to the 2018 National Demographic Health Survey (NDHS), 33% of women aged 15-49 in Nigeria have experienced physical or sexual violence; 24% have experienced only physical violence, 2% have experienced only sexual violence, while 7% have experienced both physical and sexual violence8. Zubairu Iliyasu et al suggested exposure to GBV among secondary school students with an overall prevalence of 58.8%9.

Among ever-partnered women when stratified by age, the prevalence of exposure to violence was 29.4% among respondents 15-19 years of age<sup>10</sup>. These records affirm that violence does not only occur in adulthood but begins early in the relationship. Thus, adolescents in intimate relationships are at risk. Globally, 150 million adolescent females and 73 million adolescent males are affected by GBV. This is due to their age and gender, they are subjected to different harmful cultural customs, including forced marriage, female genital mutilation, slavery, sexual misconduct, harassment, and destitution, 11,12. GBV also occurs in educational settings, and it is common in the Sub-Saharan African educational system, lowering girls' educational attainment, and increasing absenteeism, and dropout rates13. In Nigeria, adolescents in secondary school experience various forms of GBV such as verbal, physical, sexual, and psychological<sup>14</sup> with a negative impact on the victims, families, friends, and communities 15.

According to the CDC, in 2022, Survivors of GBV are more likely to suffer from various reproductive health conditions, STIs, unintended pregnancies, feelings of hopelessness, inappropriate coping techniques including substance abuse, trauma, and wounds 16. Trauma experienced by adolescents can result in behaviors such as truancy for safety reasons, low academic performance, suicidal thoughts or actions, unsafe sexual misconduct, being overweight or obese, depression, or negative feelings. GBV among young people at school may be perpetuated by teachers and students<sup>17</sup>. It is underreported because victims are afraid of the consequences. Hence, the violence goes unseen, untreated, and unchecked.

Nigerian studies show that students who attend government-owned schools experienced several forms of violence compared to private schools with the commonest forms being verbal abuse at 87.2% and

62% and physical assaults at 53.3% and 28.7% at government-owned and private schools respectively<sup>14</sup>. David A.N., et al., explained that 28.8% of in-school adolescents who mentioned that they experienced a sexual form of GBV have never reported the incidence formally<sup>12</sup>. There is a need to prevent GBV to make the learning environment safe for all students

Despite growing recognition as a public health issue, gender-based violence is still a burden. It is among the main factors that contribute to the global threat that is affecting the overall intellectual and psychosocial growth of adolescents and young people in school, even in Nigeria<sup>18,19,15</sup>. Specifically, adolescents who have suffered GBV are more likely to experience it repeatedly or become perpetrators with a detrimental impact on their cognitive health and quality of life <sup>20</sup>.

Few studies have looked at GBV among adolescents but not deep into the root causes. However, there is a need to understand it in the context of perception and experience. To identify targeted interventions, specific to their needs and characteristics to prevent all forms of GBV and reduce rates among youths, <sup>12</sup>. Given this, this study examined the prevalence and types of Gender-based Violence (GBV) among students in public and private secondary schools in Ibadan.

#### MATERIALS AND METHODS

This study was a descriptive design cross-sectional study among in-school secondary school students. It was conducted at selected public and private secondary schools in Ibadan North local government. A total of 3 public and 3 private secondary schools were selected based on location and socioeconomic area they are located. A private and public secondary school was randomly selected from each location; location A: University of Ibadan/Agbowo area, location B: Samonda/Sango area, and Location C: Ojeigosu/Yemetu. A multi-level sampling technique was used to select 909 respondents and proportionate sampling was done to spread the sample size across the schools. Participants were informed that participation is voluntary and they will not suffer any consequences if they choose not to participate.

Data was collected from eligible consenting in-school adolescents aged 12 to 19 with the ability to comprehend/understand the content questionnaire while exclusion criteria included declined and non-consent students. Participants and school authorities were counseled on the purpose and procedure for the study on the first visit. Permission to participate was obtained from the parent/guardian by the school. A written consent form was administered to all participants before enrollment into the study and confidentiality of participants' data was ensured throughout the study as participants were identified using serial numbers. After selection, all the information collected was treated with the utmost confidentiality and was kept secured throughout and after the research. Interviewers were trained on how to ensure the confidentiality of the participants and interviews were conducted in a safe space where inschool adolescents easily and freely filled the questionnaire and received needed help when the need arose.

Data collection was over 2 months (May and July 2023). The questionnaire was pretested at a site different from study sites and the study instrument was modified for the study. The questionnaire was a semistructured self-administered questionnaire school. The questionnaire contained close- and some open-ended questions. Data was collected using information on socio-demographic characteristics, prevalence, and pattern of GBV among in-school secondary school students. Data collated were analyzed using Statistical Product for Service Solution (SPSS) version 25. Frequency distribution tables and charts were generated from variables while cross-tabulation and test statistics were done where applicable. Chi-square was used to test the association for categorical variables. Student T-test was used to determine the association between the continuous variables. The level of significance was set at p-value < 0.05.

### **RESULTS**

This study examined the prevalence and types of Gender-based Violence (GBV) among students in public and private secondary schools in Ibadan, 909 students responded to the study. Table 1 shows the socio-demographic and awareness of respondents about GBV. The respondents were mostly 497 (54%) aged 12 and 14 with a median age of 16 years. Most 487 (53.6%) of the respondents were females, and more than half 461 (50.7%) were Junior secondary students. About 505 (55.6%) of the adolescent students were from private schools and slightly below half (44.4%) attended public school. More than half of the respondents 571 (62.8%) have between 4 - 6 siblings. In addition, almost 758 (82.8%) of the adolescent students were from a monogamous setting while majority 669 (73.6%) lived with both parents.

The majority of the adolescent students 547 (60.2%) were not aware of GBV. Approximately half of the respondents 439 (48.3%) had the perception that female adolescents are more likely to experience GBV than their male counterparts, a few of the respondents 83 (9.1%) perceived that males are at risk of GBV while one-third of the respondent 387 (42.6%) were not certain of the gender at risk. In addition, the majority of the respondents 414 (45.6%) do not perceive themselves to be at risk of GBV.

The respondent's knowledge, awareness, and experience of GBV are shown in Figure 1. About 133 (14.6%) of the respondent had a correct description of what GBV is, based on their knowledge of it while more than half 521 (57.3%) could not describe what GBV is.

Table 1: Socio-demographic characteristics and Awareness of Respondents About GBV.

VARIABLES	FREQ	(%)
	(n=909)	
School		
facility		
Public	404	44.4
Private	505	55.6
Age (years)		
12-14	497	54.7
15-17	389	42.8
>17	23	2.5
Sex		
Male	422	46.4
Female	487	53.6
Class		
JSS	461	50.7
SSS	448	48.9
Religion		
Christianity	525	57.8
Islamic	381	41.9
Traditional	3	0.3
Family type		
Monogamous	753	82.8
Polygamous	156	17.2
Family size		
(group)		
1-3	205	22.6
4-6	571	62.8
> 6	133	14.6
Living with		
Both parents	669	73.6
Father	42	4.6
Mother	135	14.9
Others	63	6.9
Aware of		~
GBV		
Yes	362	39.8
No	547	60.2
At risk of		
GBV		
Yes	104	11.4
No	391	43.0
Don't	414	45.6
know/No		.5.0
response		
Gender at risk		
of GBV		
Male	83	9.1
Female	439	48.3
Don't	387	42.6
know/No	307	12.0
response		
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Approximately two-thirds of the respondents

591 (65.0%) were not aware of any form of GBV, nor

Table 2: Experience of Different Types of Gender-Based Violence

FREQ (p=909)	PERCENT (%)
(11-909)	(70)
121	46.6
	53.4
812	89.3
1.60	47.6
	17.6
/49	82.4
205	12.5
	43.5
514	56.5
	42.4
524	57.6
	55.2
407	44.8
310	34.1
220	24.2
379	41.7
89	9.8
75	8.3
14	1.5
16	1.8
134	14.7
	4.5
	7.5
	2.1
	.7
	47.39
117	17.57
207	22.8
	31.5
	45.8
410	43.6
7	0.7
	15.7
	4.6
	2.4
695	76.5
	28.6
	39.5
	5.7
31	19.7
10	6.4
1	
<u> </u>	
299	32.9
299 173	32.9 19.0
173	19.0
173	19.0
173	19.0 48.1
173 437	19.0
	(n=909)  424 485 812  160 749  395 514  385 524  502 407  310 220 379  89 75 14 16 134 41 68 19 6 447  207 286 416  7 143 42 22 695 45 62 9 31

the dimension any of the form could take. Only 318 (35.0%) were aware and could identify the various forms of GBV in their terminology namely: Verbal: body shaming, bullying, name-calling, abuse, and insult. Sexual: sexual harassment, rape, forced to watch pornography, beating sexual part.

Psychological: threat, blaming, treating males more important than females. Physical: hitting, beating of women, husband beating wife, physical abuse. The most common form of violence known to the respondents was sexual violence 109 (12.0%). Most of the respondents 595 (65.5%) had experienced at least one of all the types of GBV and only a few of the respondents 101 (11.1%) had experienced all the forms of GBV.

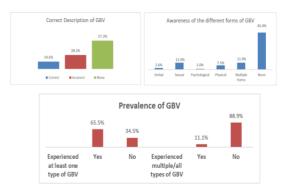


Figure 1: Respondent's Knowledge, Awareness, and Experience of GBV

Respondents' experience of different types of GBV is shown in Table 2. Out of all the forms of GBV experienced by all the 909 respondents, verbal violence is the most experienced form of violence of which more than half of the respondents 502 (55.2%) had experienced and the least form of violence ever experienced. Three hundred and ten of the respondents (34.1%) had male perpetrators, 220 (24.2%) had female perpetrators and 379 (41.7%) did not respond.

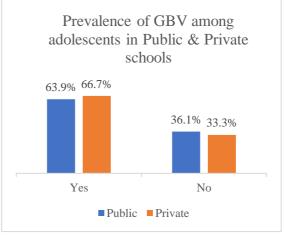


Figure 2: Prevalence of GBV among adolescents in Public & Private schools

Of all the respondents who had experienced GBV,

almost half 447 (47.4%) signified that the perpetrators were unknown persons, fathers 89 (9.8%), mothers 75 +(8.3%), brothers 14 (1.5%), sisters 16 (1.8%), friend 134 (14.7%), neighbor 41 (4.5%), students 68 (7.5%), teachers 19 (2.1%), extended family and 6 (0.7%).

The prevalence of GBV among adolescents in Public & Private schools is shown in Figure 2. The result from this study revealed that respondents in private secondary schools had a higher experience of 337 (66.7%) of various forms than the respondents who attended public secondary schools 258 (63.9%) (Figure 4).

About 286 (31.5%) of the respondents who experienced violence did not report the incidence while approximately 62 (39.5%) made it known that they did not report the incidence because they were afraid.

#### DISCUSSION

This study evaluated the prevalence and types of gender-based violence among 909 adolescent students across public and private secondary schools in Ibadan North Local Government area, Ibadan, Southwest Nigeria.

The main findings of this study were that over a third of the respondents had ever heard of GBV while a small proportion of participants (2.6%) had correct knowledge of GBV. About two-thirds of the respondents experienced GBV in various forms. Furthermore, verbal violence was reported as the most prevalent form of GBV experienced by about half of the respondents. This also depicts that two in every three in-school adolescents sampled had been a victim of GBV with almost half of the perpetrators being unknown persons.

Respondents were in-school adolescents in the age range 12-19 years, the adolescents in the age group 12-14 years accounted for more than half with a near-equal split between genders, and slightly over half of the respondents were females. This is similar to the findings of David et al., in Lagos among in-school adolescents where the majority were within the age range of 14-16 years, and a nearly equal proportion of male-to-female participants<sup>12</sup>. However, Onyinye et al. reported a higher proportion of 89.9% of female respondents<sup>21</sup>. This may be explained by a difference in the study settings. The majority of the respondents were from monogamous family settings and lived with both parents. Similarly, Fawole et al., reported that the majority of the students came from monogamous family settings and lived with both parents<sup>20</sup>.

In this study, slightly more than a third of the respondents were aware of GBV, and only a few could correctly explain or describe the concept of GBV. This is consistent with the finding of poor knowledge and awareness of GBV across studies<sup>22,23,12</sup>, which is an indication that without adequate knowledge and understanding of GBV, it may be difficult for adolescents to identify, prevent and report any case of

violence against them or others. Hence, this could lead to a continuous cycle of violence experience among adolescents. As regards the different types of GBV stated by the adolescents, the study found that the commonest form of GBV known to the adolescents was sexual violence as reported by about one in ten adolescents (12.0%), followed by physical (7.5%), verbal (2.6%), and psychological violence (1.0%). About one in ten of the respondents had multiple responses while approximately two-thirds of the respondents were not aware of any form of violence. This is contrary to the findings of Alemu et al., where psychological violence was reported as the most common form of violence<sup>24</sup>. The difference in geographical location, settings, socioeconomic status, and age of respondents in both studies may explain the variation in the commonest forms of GBV reported.

About half of the respondents perceived that female adolescents have a higher chance of experiencing GBV than their male counterparts. This is lower than the findings of David et al., who reported that more than two-thirds of the respondents believed that females are more likely to suffer GBV $^{4,12.}$ 

About two-thirds of the respondents in both public and private secondary schools had experienced at least a form of GBV with a prevalence of 65.5%. This is lower than 71% reported in Ethiopia by Belay et al. and higher than 47%, 47.2%, 43.4%, 47% and 58.8% reported in Ethiopia, Zimbabwe, Uganda, and Nigeria respectively<sup>25,26,24,27,28,9</sup>. This is an indication that GBV is a common experience among adolescent students in secondary schools. This study also revealed that the prevalence of GBV is slightly higher among respondents in private secondary schools (66.7%) than respondents in public secondary schools (63.7%). Similarly, another study reported a higher prevalence of GBV among students of private secondary schools (89.1%) and public schools (84.8%) (20). This signifies that violence does not only occur among public school students but also private secondary school students with higher prevalence. The high prevalence of GBV among in-school adolescents in Nigeria is alarming with long-term consequences on adolescents and potential implications for public health impact.

Nearly half of the adolescents revealed that they had been victims of GBV and about a third of the perpetrators were male. Additionally, evidence from UNICEF 2020 supports this finding, stating that though GBV occurs in both genders, the majority of the victims are females, and males are often the perpetrators<sup>3.</sup> This study also identified that teachers in schools were perpetrators of GBV, with both male and female students being victims. Badri AY, also reported that the respondent identified teachers as perpetrators of GBV<sup>17</sup>. This may be due to power imbalance, fear of failure for students with poor academic status, and threats from the teacher to the students.

Verbal violence is the most experienced form of violence among adolescents in more than half of the

respondents in this study. This is similar to the findings of Afolabi. et al., but different from the finding from Fawole et al., where psychological violence was reported as the commonest form of violence experienced<sup>14,20</sup>. The variance in the different forms of GBV most experienced by in-school adolescents may be due to underreporting, study settings, and societal stigma.

Age was found to be significant with the experience of GBV (0.034), respondents in the age group 12-14 years were significantly more likely to experience GBV than respondents in the age group >17 years (OR = 2.73, 95% CI = 1.10-6.79). Additionally, respondents in the age group 15 - 17 years were significantly more likely to experience to experience GBV than those in the age group >17 (OR = 2.51, 95% CI = 1.01-6.23).

The result from this study reveals the need for supportive services within secondary schools, early and gender-responsive interventions to promote gender equality and prevent them from being victims of violence, such as sensitization, teaching on making healthy choices, coping skills, empowerment for adolescents to be part of the solution to addressing GBV, mentoring, and leadership programs and counseling. Especially for adolescent to identify and be aware of the various forms that violence could take, and learn to seek appropriate support when needed either within school premises or in their respective communities.

#### Strength of the Study

The study had a large sample size of 909 adolescent students across public and private secondary schools in Ibadan which provided a substantial sample size across different socioeconomic status. The study highlighted that teachers can be perpetrators of GBV, which can inform targeted interventions and policy changes within educational settings.

## Weakness of the Study

The study used some operational words that may have been poorly understood by adolescent students and, hence may affect their response and information provided. Future research should explore common words and expressions used among adolescents and young people/the use of simple language that is understandable to the target population. This study did not explore the reasons for poor knowledge and awareness of GBV among the participants, which is an important area for future research.

# Limitations of this Study

The limitation of this study includes sampling frame, limiting the study to students in secondary schools excluded teachers and school authority. This study

concludes that adolescents experienced verbal violence as the most common form of GBV but could not identify it as the commonest form of GBV because they were not aware of it to be part of the forms of gender-based violence that should not be experienced but be addressed.

**Declaration of Conflict of Interest:** The authors declare no competing interest.

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