Exposure to parental domestic violence and sexual relationship of married women in Nigeria

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Abstract

Background

Intimate partner violence has been documented to be responsible for poor maternal health outcomes. However, limited information exists on how exposure of women to parental domestic violence influences their marital sexual behaviour. Previous studies have failed to investigate the intergenerational implications which exposure to parental domestic violence has on its witnesses. Hence this study examined the influence of exposure of women to parental violence on their marital sexual behaviour in Nigeria.

Method

A cross-sectional survey was conducted. We used data from the 2018 Nigeria Demographic and Health Survey data set. Data were extracted on experience of parental violence, socio-demographic characteristics and number of sexual partners of married women aged 15-49 years. The study analysed data using frequency distribution, Chi-square statistical test and binary logistic regression analysis of women of childbearing age (15–49). This study examined relationship between women who experienced parental domestic violence, controlling for confounding socio-demographic characteristics and their marital sexual relationship. Drawing on resilience theory of strength-based

approach with the main thesis that unique individuals who experienced adversity bounced back and showed positive behaviour, the study tested the hypothesis that women who witnessed parental domestic violence exhibit the attributes of outliers and come out with positive marital sexual behaviour.

Results: Findings showed that women who were exposed to parental sexual violence engaged in extramarital sexual affairs and did not use condom in their last sexual activity. Women who experienced parental violence net of their socio-demographic characteristics, had multiple sexual partners. Policies that promote positive sexual behaviour should be encouraged for women who experienced parental violence.

Background

Intimate partner violence remains a serious public health concern in sub-Saharan Africa (SSA). It is responsible for a number of public health challenges in both developing and developed countries (Monique, 2015; Alhsen, Ray &Sharps, 2015; Bamiwuye & Odimegwu, 2014). A number of public and reproductive health implications are associated with domestic violence, including poor maternal and child health outcomes (Fantasia *et al*., 2012; Laanpere *et al*., 2013). Meanwhile, there is difficulty in the definition of domestic violence and paucity of data in scholarly literature (Compton, 2010). One of the reasons for this challenge is the secrecy in its reports in public domain and lack of one-sentence definition of the concept. It is simply explained as gender-based violence that occurs in marital and/ or non-union relationship perpetrated by people in intimate relationship or former partners and causes physical, emotion and sexual abuse to the victims (Silverman *et al.,* 2017; MacQuarrie *et al*., 2014).

This study adds to the existing body of knowledge on conceptualization of domestic violence considering the intergenerational effects on children that witnessed parental domestic violence and their sexual trajectories in marital union. In this study, experience of parental domestic violence of married women was considered as a moderator of personal characteristics in the context of engagement in sexual behaviour in marital union. Funnily enough, the new perspective, strength-based approach, foregrounds the orientation that prior experiences of adverse conditions build resilience in people to exhibit positive sexual behaviour. The policy implication and message for policy makers is to prospectively build the socio-economic and demographic attributes of young secondary victims and witnesses of adult perpetrators of domestic violence with a view to addressing extramarital affairs in marital sexual relationships. Thus, if results of this study show that women who had witnessed parental domestic violence during youthful age engage in sexual behaviour with their married partners alone, such attributes that built resilience not to engage in extramarital affairs should be strengthened and be the focus of interventions aimed at shaping young people into responsible adulthood.

Furthermore, a growing body of literature has documented existing studies established that domestic violence portends grave consequences not only on the perpetrators but also that the intergenerational effects trickle down to children in custody of adult perpetrators (Musa, Chojenta & Geleto, 2019). There is limited information on studies that considered the trajectories of domestic violence and its intergenerational effects in the life-course perspective. This study is an attempt to situate sexual behaviour of married women in the context of intergenerational transfer of attributes, on the one hand, and their personal characteristics, on the other hand. Most studies on sexual behaviour of married couples have examined the implications of risky sexual behaviour

considering personal attributes such as socio-economic, cultural and demographic characteristics at individual, household and community levels (ref).

Additionally, this study considered the strength-based approach in researching sexual behaviour of married persons in the context of exposure to adversity. As such, this study was anchored on the theoretical foundation that married women who had witnessed adversity of parental domestic violence (secondary victims) have the potential to build strength and exhibit positive sexual behaviour by having sexual relationship with their married partners alone. This is a departure from previous studies that considered the implications of domestic violence from risk perspective and situated extramarital affairs and/or otherwise within marital union (ref). In the same way, the implications of domestic violence are not felt by the perpetrators alone but also the witnesses are affected emotionally and psychologically (Jan, Andline, Angela, Danielle & Deborah, 2015). Thus, this may feed into the behaviour of children whose parents engaged in domestic violence leading to intergenerational transfer of domestic violence and its grave consequences (Wisdom & Wilson, 2015).

Specifically, previous studies have established that domestic violence affects family bonding and that this has grave implications for emotional and psychological development of young people (Foshie *et al*., 2016). The negative implications on the developmental processes notwithstanding, other studies argued that some young people who witnessed parental domestic violence later display positive behaviour when they grow into adulthood (Lanza &Taylor, 2010; Anderson *et al*., 2012; Ali *et al*., 2015; Flores *et al*., 2014). Yet, there is contention in the literature as to whether positive behaviour exhibited after adversity is caused by strength-based theoretical foundation that is couched in resilience theory (Fergus & Zimmerman, 2005) or it is associated with individual socio-demographic characteristics net of parental factors. Resilience research has

begun to gain prominence in contemporary literature and it simply points to the ability of an individual to bounce back and set personal goals after being affected by adversity (Fergus & Zimmerman, 2005; Kliewer & Murrelle, 2007; Jan *et al.,* 2015). Yet, some scholars have critiqued resilience theory that it fails to pin-down or show a clear pathway of influential predictors (Ungar, Ghazinour & Richter, 2013).

There is gap in the literature on factors that predict resilience behaviour for people who were once exposed to parental domestic violence and the behaviour they later exhibit later in life. While studies in other countries are drawing attention to unclear evidence in literature as to whether exposure of young people to family violence influences resilient behaviour or the personal traits of young people stand as confounders, evidence abounds in the literature on the impact of socio-demographic factors of young people on resilient behaviour (Ali, Naylor, Croot & O'Cathain, 2015; Danquah, Wasserman, Meininger & Bergstrom, 2010).

There are mixed results on the influence of socio-demographic factors on resilience behaviour in prior studies. For example, Anderson, Renner and Danis (2012) found socio-demographic characteristics of young people influenced positive sexual behaviour. In like manner, Odimegwu, Somefun and Chisumpa (2018) established that higher education, male-headed household, being employed promoted positive sexual behaviour among young people. In addition, arguing that religiosity promotes resilient behaviour, Somefun, 2019 in her study argued on the primacy of religiosity on positive sexual behaviour. Her study revealed that high frequency of attendance at religious services were associated with positive sexual behaviour- sexual abstinence and single sexual partnership. Yet, Kassis, Arta and Moldenhauwer (2013) established that socio-demographic and economic status of young people promote negative sexual behaviour. Other studies confirmed resilience behaviour in the absence of individual characteristics of young adults

and argued that family violence is the key influential predictor (Monique, 2015; Flores *et al*., 2014). Evidence from these studies is couched in the risk-based perspective to studying sexual behaviour. The main message here is that young adults who were products of unstable home developed defective developmental challenges which later transit to adulthood. In sum, even though studies suggested domestic violence works alongside socio-demographic factors to influence resilient behaviour of people in studies outside Nigeria (Anderson *et al*., 2012; Flores *et al*., 2014), evidence is sparse in Nigeria on the pathways between socio-demographic characteristics of married women who experienced parental domestic violence during youthful age and what becomes of their sexual behaviour in marital union.

Theoretical Framework

The study was anchored on resilience theory. Many studies in developed countries and a handful in developing countries have explored sexual behaviour of youth using resilience theory. In the seminal paper of Sorokin (1950), the trail blazer of strength-based approach in researching sexual behaviour of youth, attention was drawn to considering positive behaviour of youth as a departure from models that focus exclusively on the risk perspective (Jenssen, 1993). Arguing his point for the strength-based approach, Sorokin elucidated that some youth have unique characteristics to overcome adverse conditions and as such display positive attributes against all odds. As a matter of fact, and drawing on experiential knowledge, such youth develop strong mental attributes by engaging the latent giant in them to overcome adverse conditions. Youth with these unique attributes are aptly dubbed outliers who beat the odds and eventually display positive behaviour in adulthood.

As a corollary, there are examples of youth who developed in urban slums with disadvantaged socio-economic gradients such as high violent crimes, robbery, cultism, street fighting, alms solicitation and excruciating poverty but developed resilience and overcame such adversities and succeeded in life (ref). The exponent of resilience theory emphasised the need to use the lens of strength-based approach in studying behaviour and as such having a clearer perspective of negative behaviour (Sorokin, 1950). Critics, however, pointed out the limitation of resilience theory arguing that it has no discernable and clear concepts that can be used to measure resilience behaviour being a burgeoning approach to studying sexual and behavioural health outcomes in the context of developing countries (Babalola *et al*., 2007). This study is an attempt to testing the theory and advancing knowledge in the strength-based approach on sexual behaviour of married people. The main thesis of this paper can be situated in intergenerational transfer of attitudes and behaviour, and the developmental trajectories of their sexual behaviour in marital union.

In this study, we situated sexual behaviour of married women who had faced adverse condition of and/or witnessed parental domestic violence in the lens of intergenerational transfer of attributes to adulthood looking at what factors encouraged positive sexual behaviour. This is a departure from extant studies and an attempt to shift emphasis from a problem-based approach and focus on strength-based. Resilience theory is apt as a framework for this strength-based approach (Zimmerman, 2013). Resilience is the tendency to exhibit positive outcomes despite adverse conditions and ability to bounce back and overcome negative environments (Odimegwu, Somefun & Chisumpa, 2018). This study drew upon resilience theoretical foundation and hypothesised that women who witnessed parental domestic violence, net of their socio-economic and demographic characteristics such as education, religion, employment status, age among others act as protective

factors for women not to engage in extramarital sexual affairs. Women were assumed to exhibit sexual behaviour when they have sexual intercourse with a single partner in marital union. Our hypothesis is that women who were exposed to parental sexual and physical violence are likely to engage in single sexual partnership.

Data and Methods

Study Design

This study employed a cross-sectional descriptive research design. The study drew on data upon the 2018 Nigeria Demographic and Health Survey (NDHS). Data were extracted for married women aged 15-49 years who are sexually active in the last one-year prior to the survey. The weighted sample size is ().

Sampling Technique

The selection of sample was based on clusters and households and this involved a three-staged sampling technique. Nigeria was divided into strata and this consists of all the 36 states and the Federal Capital Territory (FCT). Enumeration Areas (EAs) were created in every state for easy access to the respondents. In the first stage, 896 clusters were randomly selected. The second stage involved a random selection of one EA from most of the clusters and this resulted to the selection of 372 EAs from the urban areas and 532 from the rural areas. A total of 45 households were selected from each rural and urban areas. In all, 40,680 households were sampled for the survey: 23,940 in the rural areas and 16,740 in the urban areas. Complete details of the methods used in the 2013 NDHS have been published elsewhere (NPC & ICF International, 2014).

Data Collection Method

Data were collected through the use of questionnaires that were administered by conducting face-to-face interviews. Information obtained through this process covered socio-economic characteristics, child health, fertility, sexuality, reproductive history, prenatal and postnatal care, nutrition, immunization, domestic violence and HIV/AIDS. Information on domestic violence was derived for one woman per household out of the 45 households in each enumeration areas. Cases of physical, emotional and sexual violence were reported in the survey. Prevalence of domestic violence in Nigeria is 17% (NPC and ICF International, 2019). In the 2018 NDHS, women who witnessed parental violence of all the forms were asked and polar response was recorded, either yes or no.

Outcome variable

We used risk of extramarital sex among married women as the outcome variable. The outcome variable specifically is women who had sex with a single partner in the past 12 months. Women who had sexual intercourse with their partners alone were coded 1 and 0 otherwise. This is a dichotomous binary outcome that allowed the use of binary logistic regression model. The odds of having sex with partners alone was modelled on experience of domestic violence and net of socio-economic and demographic characteristics.

Independent and other control variables

The main independent variable is women who experienced parental various forms of violence – physical, emotional and sexual. The following variables were considered as control namely; age,

sex, education, wealth index, religion, ethnicity, region and place of residence. These variables were selected based on their significance in literature and theory. Women who were married and had had at least a live birth in the last five years preceding the survey were considered for this study. The weighted sample size was 29,864

Statistical Analysis

Data were analysed using descriptive and inferential statistics. The three levels of analysis were employed: univariate, bivariate and multivariate. Frequency distribution, chi-square statistical test and binary logistic regression model were used through STATA 14. Descriptive analyses were used to estimate other independent variables. The inferential statistics on the other hand were used to establish association between women's experience of parental domestic violence, socio-demographic factors and number of sexual partners in marital union using binary logistic regression. Variance Inflation Factor (VIF) was performed to ensure the absence of multi-collinearity among the explanatory variables. This was done using mean benchmark of VIF score of 5 or more which suggests that estimation is wrong. A mean VIF of 3.13 was obtained in this study indicating that the explanatory variables were adequate for the study.

Ethical Considerations

Ethical issues have been addressed in the 2018 Nigeria Demographic and Health Survey being a secondary data. Confidentiality and anonymity were maintained through secured storage of data in the DHS. Participation was voluntary and respondents were told to withdraw any point they feel uncomfortable to continue with the study. This study itself is unlikely to cause any embarrassment or discomfort to study participants because women were not interviewed in the presence of

partners. It may benefit study participants as it has the potential to promote positive sexual behaviour among women who experienced family domestic violence.

Results

Univariate Analysis

Table 1: Percentage distribution of respondents socio-demographic characteristics

Variables	Number	Percentage (%)
Age Group		
15-24	6,198	21.62
25-34	11,312	39.45
35-49	11,163	38.93
Education Level		
No education	12,796	44.62
Primary	4,512	15.74
Secondary	8,623	30.07
Higher	2,742	9.57
Wealth Index		
Low	12,092	42.17
Middle	5,499	19.18
High	11,082	38.65
Religion		
Christianity	11,335	39.53
Islam	17,185	59.93
Traditional	153	0.54
Ethnic Group		
Hausa/Fulani	12,131	54.05
Igbo	3,706	16.51

Yoruba	4,050	18.04
Others **Place of Residence**	2,558	11.40
Urban	11,637	40.58
Rural	17,037	59.42

Bivariate Analysis

Table 2: **Relationship between women's exposure to parental domestic violence and sexual behaviour**

	Sexual Behaviour		p-value
Characteristics	**Multiple sexual partner** **N (%)**	**Single sexual partner** **N (%)**	

Experienced parental domestic violence			0.0000
No	2787 (38.83)	4390 (61.17)	
Yes	441 (50.47)	432 (49.53)	
χ^2			43.0284
Experienced emotional violence			0.0003
No			
Yes	2154 (38.26)	3477 (61.74)	
χ^2	1074 (44.37)	1346 (55.63)	
			25.8285
Experienced physical violence			0.0000
No	2874 (3868)	4556 (61.32)	
Yes	354 (57.07	267 (42.93)	
χ^2			79.0140
Experienced sexual Violence			0.1072
No	3018 (39.84)	4558 (60.16)	
Yes	211 (44.23)	264 (55.77)	
χ^2			3.5205
Age Group			0.0000
15-24	1147 (18.52)	5049 (81.48)	
25-34	4387 (38.78)	6926 (61.22)	
35-49	47.62 (42.66)	6401 (57.34)	
χ^2			1066.3487
Education Level			0.0000
No education	2443 (19.09)	1.0e+04 (80.91)	
Primary	1821 (40.37)	2690 (59.63)	

Secondary	4526 (52.48)	4098 (47.52)	
Higher	1507 (54.94)	1236 (45.06)	
χ^2			3045.5410
Wealth Index			0.0000
Low	2668 (22.07)	9422 (77.93)	
Middle	1968 (35.78)	3532 (64.22)	
High	5661 (51.08)	5422 (48.92)	
χ^2			2095.6968
Religion			0.0000
Christianity	6637 (58.55)	4698 (41.45)	
Islam	3617 (21.05)	1.4e+04 (78.95)	
Traditional	43 (27.66)	111 (72.34)	
χ^2			4141.7578
Ethnic Group			0.0000
Hausa/Fulani	1751 (14.44)	1.0e+04 (85.56)	
Igbo	2035 (54.91)	1671 (45.09)	
Yoruba	2554 (63.06)	1496 (36.94)	
Others	1320 (5159)	1239 (48.41)	
χ^2			4373.7316
Place of Residence			0.0000
Urban	5350 (45.98)	6286 (54.02)	
Rural	4946 (29.03)	1.2e+04 (70.97)	
χ^2			855. 1329

Multivariate Analysis

Table 3: Women's exposure to parental domestic violence, socio-demographic characteristics and sexual behaviour

Model 1 Variables	Odds Ratio	C.I	P-value
Experienced parental domestic violence			
No (RC)	1.000		
Yes	0.622	0.518 - 0.750	0.000
Experienced emotional violence			
No (RC)	1.000		
Yes	0.885	0.765 - 1.024	0.103
Experienced physical violence			
No (RC)	1.000		
Yes	0.497	0.401 - 0.618	0.000
Experienced sexual violence			
No (RC)	1.000		
Yes	1.116	0.891 - 1.398	0.338
Model 3 **Experienced parental domestic violence**			
No (RC)	1.000		
Yes	0.930	0.731 - 1.182	0.554
Age Group			
15-24 (RC)	1.000		
25-34	0.485	0.401 - 0.588	0.000
35-49	0.398	0.328 - 0.484	0.000
Education Level			
No education (RC)	1.000		

Primary	0.995	0.765 - 1.295	0.971
Secondary	0.793	0.625 - 1.006	0.056
Higher **Wealth Index**	0.924	0.667 - 1.280	0.634
Low (RC)	1.000		
Middle	1.087	0.878 - 1.345	0.443
High **Religion**	0.779	0.607 - 0.999	0.049
Christianity (RC)	1.000		
Islam	1.694	1.314 - 2.183	0.000
Traditional **Ethnic Group**	0.736	0.318 - 1.703	0.473
Hausa/Fulani (RC)	1.000		
Igbo	0.323	0.224 - 0.466	0.000
Yoruba	0.193	0.147 - 0.254	0.000
Others **Place of Residence**	0.273	0.195 - 0.382	0.000
Urban (RC)	1.000		
Rural	0.896	0.730 1.100	0.295

Discussion

Conclusion and Policy Implications

Declarations

Ethics approval and consent to participate

Authors confirm that all methods employed were performed in accordance with the appropriate guidelines. The study analysed secondary data extracted from 2018 Nigeria Demographic and Health Survey (NDHS). Approvals of the 2018 NDHS protocol were obtained in the United States by through the ICF Review Board (ICF IRB FWA00000845), and also in Nigeria through the National Health Research Ethics Committee of Nigeria (NHREC/01/01/2007). During the survey, participants provided written and verbal consent. Authors submitted a brief concept of the study to Measure DHS, which granted permission to download and analyse the data through a document from ICF. No additional ethical approval was needed since the dataset are available in the public domain. Also, the analyses performed were in anonymous form.

Consent to publish

Not Applicable

Availability of data and materials

The dataset analysed is available in public domain. Interested persons could accessed it online at

https://dhsprogram.com/data/dataset/Nigeria_Standard-DHS_2018.cfm?flag=1

Competing Interests

The authors declare no competing interests.

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Authors' contributions

OMA developed the concept. OMA, OYO and OJO reviewed the literature. OJO and OMA performed data analysis. OMA discussed the findings. All authors proof-read the manuscript for spelling and grammar. All authors approved the submitted manuscript.

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