

# Sexual Violence against Men Students in Tertiary Institutions in Ibadan, South-West Nigeria

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## Abstract

**Background:** The experience of violence to men in Africa has been under-researched, because culturally it is not believed that men may be victims of abuse.

**Purpose:** This study determined the prevalence and factors associated with experience of Sexual Violence (SV) to men students in tertiary institutions in a metropolitan city, South-West Nigeria.

**Method:** Using multistage sampling technique, 600 men students were randomly selected from two tertiary institutions in Ibadan, Nigeria.

**Result:** With the level of significance set at 5% ( $p < 0.05$ ) and confidence interval at 95% (C.I- 95%), prevalence of SV was 58.3%. Partners were the main (59.4%) perpetrator of SV. Approximately 18.0% victims ever sought help following abuse. Schooling level, family background, current relationship status, alcohol consumption, and smoking status, were significantly associated with experience of SV ( $p < 0.05$ ).

**Conclusion:** Intervention programs that addresses SV and which target students in the lower levels of tertiary education, particularly those from polygamous families and who smoke and drink is necessary in tertiary institutions in Ibadan and possibly other institutions in Nigeria.

**Keywords:** Sexual violence, Men students, Intimate partner violence (IPV), Ibadan

## Introduction

Sexual violence is any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting (Krug *et al.*, 2002). It includes rape, defined as the physically forced or otherwise coerced penetration of the vulva or anus with a penis, other body part or object. It is motivated by the desire to acquire power and control over the partner and demeans, humiliates or instigates feelings of shame or vulnerability, particularly in regards to the body, sexual performance or sexuality in victims (Krug *et al.*, 2002).

Little is known about coercion among young men as victims or women perpetrators. (Ybarra *et al.*, 2012) Young men, like women, report experiencing a variety of coercive behaviours, ranging from unwanted touch, verbal abuse, unwanted kiss and deception that set the stage for coercion to the use of violent force. In many settings, rape and other physical violent behaviours are not isolated events but usually follow a series of attempts to persuade or coerce the victim through verbal harassment or unwanted touch and undesirable sexual relations (Reed, 2008).

Over the last few decades there has been an increasing advocacy and programs aimed at the improvement in human rights. However, most of these have been centered around perpetrators of violence against women (Garcia-Moreno *et al.*, 2006). Yet, reports from the National Violence against Women Survey in the United States as for some other countries showed that men are also physically assaulted by an intimate partner (Tjaden, 2000). However there is dearth of data to substantiate proportion of men affected by intimate partner violence in the less developed countries and the factors which make male at risk of violence (Oladepo *et al.*, 2011).

Men may be more vulnerable to sexual violence because they are less likely to report experience of violence, seek redress or health care services. They experience challenges including the stigma associated with being a men victim, the perceived failure to conform to the 'macho' stereotype, the fear of not being believed, the denial of victim status, and the lack of support from society, family members, and friends (Forge, 2007). In most African societies, cultural norms are held in high esteem, thus belief in men dominance and masculinity are strong resulting in power and economic control of women by men.

Many sexually harassed men often choose to suffer in silence instead of reporting or sharing such experience (Breiding *et al.*, 2014). Hence, men sexual abuse by women partners, other women and men remain undetected and unreported (Oladepo *et al.*, 2011).

Young men who had experienced coercive sex reported a range of adverse psychosocial consequences, including poor mental health and suicidal ideation. Evidence also suggests that young men who were exposed to early coercive sex experienced significantly higher subsequent exposure to other forms of violence and abuse compared to others. Adverse health and psychosocial consequences of sexual abuse for men victims include an increase in the incidence of sexually transmitted infection, sexual and reproductive health complications, anxiety about their sexual orientation, crisis of their masculine identity, and in some cases, young men victims are vulnerable to subsequent violence (WHO, 2004; Gass *et al.*, 2011).

As Nigeria and other sub-Saharan African countries look forward to maximizing the demographic dividend, investment in youth sexual and reproductive health is a critical input. In order to fill the data gap on young men experience of sexual violence, this study described the characteristics of victims and identified the factors associated with experience of sexual violence to men students in Nigeria. The study will add to the body of knowledge on level of sexual violence perpetrated against young men in Nigeria. This will guide further actions on gender based policy and sexual and reproductive health in Nigeria.

### Literature Review

In sub-Saharan Africa, research on men experience of violence as victims is long overdue (Conroy & Chilungo, 2014). Researchers interested in the experiences of men victims of severe gender based violence are limited by their inability to access men victims (Hines *et al.*, 2007). Rates of sexual intimate partner violence (IPV) by women toward their men partners are difficult to obtain because they have rarely been systematically investigated (Gass *et al.*, 2011). Men are reluctant to report sexual assaults by women and they are unlikely to report such assaults by other men, even when severe injuries result. Men victims who attempted to seek help have reported that their complaints concerning their women partners' violence have not always been taken seriously, yet more attentions are given to their partner's false accusations during the judicial process (Cook, 1997; McNeely *et al.*, 2008).

It is quite unfortunate that little attention is given to men victims of sexual violence despite the gravity

of violence experienced by them. For instance, a study conducted by Spitzberg where he estimated prevalence of several categories of sexual coercion, including rape and attempted rape by aggregating results from 120 studies that involved over 100,000 men (Spitzberg, 1999). In the study, over 3% of men have been raped, about 25% claimed to have been sexually coerced and to have perpetrated sexual coercion (Spitzberg, 1999).

In a similar study, a high prevalence of sexual victimization among men- comparable to that of women was found (Stemple & Meyer, 2014). The factors identified to perpetuate misperceptions about men sexual victimization were: reliance on traditional gender stereotypes, outdated and inconsistent definitions, and methodological sampling biases that exclude inmates (Stemple & Meyer, 2014)

In the United States, the data collected by National Intimate Partner and Sexual Violence Survey from January-December, 2011 from 12,727 men revealed that an estimated 23.4% of men experienced other forms of sexual violence during their lifetimes, including being made to penetrate, sexual coercion, unwanted sexual contact, and non-contact unwanted sexual experiences (Breiding *et al.*, 2014). The percentages of men who experienced these forms of sexual violence in the 12 months preceding the survey was 5.1% (Breiding *et al.*, 2014). With respect to sexual violence, for men victims, the sex of the perpetrator varied by the specific form of violence examined. Men rape victims predominantly had men perpetrators, but other forms of sexual violence experienced by men were either perpetrated predominantly by women or split more evenly among men and women perpetrators (Breiding *et al.*, 2014). An estimated 9.5% of men experienced forms of sexual violence by an intimate partner during their lifetimes, while about 2.1% experienced other forms of sexual violence by a partner and many victims of sexual violence were first victimized at a young age. Among raped men victims, about 21.3% were already victimized before age 18 years whereas 71.0% had been raped before age 25 years (Breiding *et al.*, 2014).

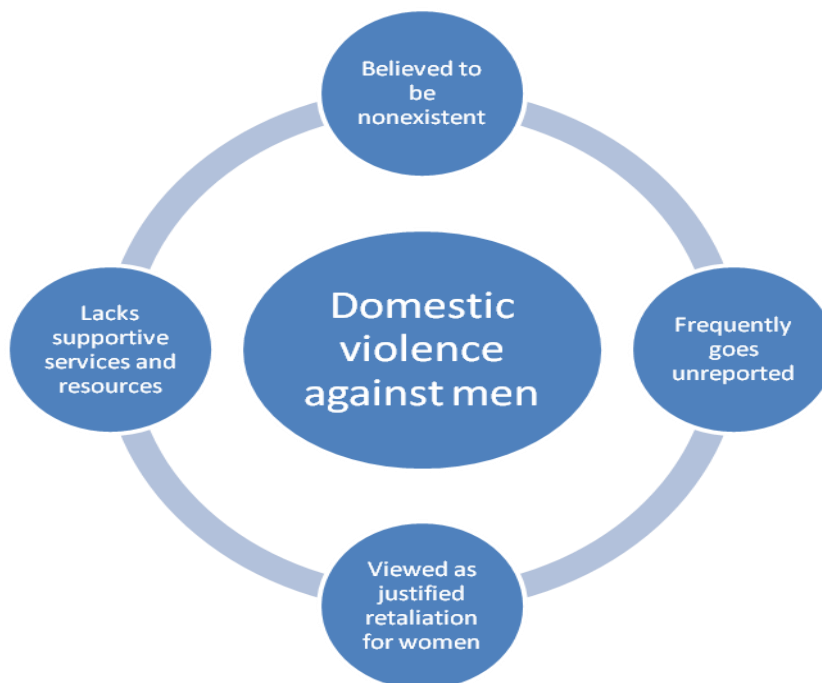
In 2010, cross-sectional data on IPV were collected from a sample of 684 mostly married men in rural Malawi (Conroy & Chilungo, 2014). Over one-tenth of the men reported being a victim of sexual coercion. Men victims of sexual coercion were more likely to be married, older than 24 years, physically abused by a women partner, believed their partners were at higher risk for HIV, and had consumed alcohol in the past month (Conroy & Chilungo, 2014). A study conducted in selected states in Nigeria which determined the factors associated with gender based violence among 3000 men and

women showed higher prevalence of sexual violence among men 7.4% men than women (4.8%) (Oladepo *et al.*, 2011). A lower risk of experiencing sexual violence was found among men who do not drink alcohol than their counterparts who drink alcohol (Oladepo *et al.*, 2011).

### Theoretical and conceptual explanation

In African society where cultural norms are held in high esteem, men dominance and masculinity are strong, giving rise to power and economic control by men. Therefore, husband battering is seen as an impossible ordeal and this might have been responsible for scarcity of data on intimate partner violence among men in Africa. The proportion of men affected by intimate partner violence across Africa cannot be ascertained due to lack or little

empirical data available on the subject matter. (Oladepo *et al.*, 2011). Some people view it as an impossible act- that a man cannot be sexually assaulted by a women and others view it as sexually titillating. The existence of a women perpetrators and men victims confronts many of our most firmly held beliefs about women, men, sexuality, power and sexual assault. The reality that boys are abused either sexually or physically by their opposite sex is not widely accepted, thereby increasing the rate at which male experience childhood abuse (sexually) or as an adult (Kali, 2002).



Pictorial representation of domestic violence against men (Hattie Treadwell Cox, 2011)

### Materials and Methods

**Study area:** The study area was Ibadan. Ibadan is the capital city of Oyo State and the third largest metropolitan area (by population), in Nigeria. It is an ancient city with an estimated population of over 3.2 million inhabitants as at 2006 (National population Census, 2006). The city has two public tertiary institutions, and several primary and secondary schools.

**Study setting:** This study was carried out in the two tertiary institutions in Ibadan. These are: the University of Ibadan and the Polytechnic of Ibadan. Both are well established tertiary education institutions in south west Nigeria. The University of Ibadan is the oldest and one of the most prestigious

Nigerian universities with a student population of 33,481 in the 2013/2014 session, comprising 35% post-graduate and 65% undergraduate. Besides, the College of Medicine, there are eleven faculties within the University: Arts, Science, Agriculture and Forestry, Social Sciences, Education, Veterinary Medicine, Technology, Law, Business studies, Public Health and Dentistry. The University is residential and as such majority of its students reside on the campus (University of Ibadan, 2015). The Polytechnic, Ibadan was established in 1969 as an autonomous public institution. The primary function of the polytechnic is to provide students training and development of techniques in the faculties of Applied Science, Engineering, Education, Environmental

Science and Commerce. The institution is non-residential and had about 10,000 students in 2013/14 (The Polytechnic Ibadan, 2014).

**Study population:** The study population were men students who have ever been in a relationship (whether married or single) from tertiary education institutions in Ibadan. These included Ordinary National Diploma (OND), Higher National Diploma (HND) for the polytechnic, and under graduate (UG), and post graduate (PG) students in the university. In total, 600 students were studied.

**Study design:** This study was an analytical cross sectional survey.

**Sampling strategy:** A multistage sampling technique involving selection of faculties, departments, level of schooling and students was used to select respondents. In stage one; all the faculties in the two institutions were enumerated from which half were selected. Thus of the 16 faculties in UI, 8 faculties were randomly selected, while 4 were selected from the 8 faculties in the Polytechnic. In stage 2, all the departments in the eight faculties were listed. Thirty-two departments were listed from the eight faculties in UI and 20 from the four in the polytechnic. Half (50%) of the departments were selected by systematic random sampling, hence 16 departments were selected in UI and 10 in Polytechnic. In Stage 3, proportionate allocation was used to determine the number of students to be interviewed from each department. The students interviewed were selected by simple random sampling by balloting. In each department the students were proportionally allocated by level of schooling, thus students from years 1 to 7 (UG1-5; PG 6 and 7) were interviewed in UI and years 1 to 4 from (OND 1-2; HND 3-4) the polytechnic. In each class, respondents were selected by balloting.

**Study Instrument:** Data were collected using a 75 item structured self-administered questionnaire. The questionnaire was developed by extracting questions on sexual violence from 'The pilot guidelines on identifying and responding to male intimate partner victimization and perpetration in health care setting' (Family violence prevention fund, 2002) and 'The revised conflict tactics scale' (Straus and Douglas, 2004). The questionnaire was pretested on 60 male students of the Obafemi Awolowo University, Ile Ife, Osun-state. Thereafter, the validity and reliability tests were carried out to ensure accuracy and internal consistency

The questionnaire had seven sections namely:- Respondents socio-demographic characteristics, life

style and social habits, relationship history, personal habits and relationship, physical interaction in relationship, sexuality and relationship, verbal interactions and relationship, and health issues and relationship. The sexuality and relationship section comprised of 14 questions on sexual activities including:- history of unwanted genital contact (yes or no); history of forced or cajoled sexual intercourse (yes or no); type of forced sexual activity (vaginal penetration, genital fondling, kissing, pecking and necking, others); period of occurrence (childhood, adolescence, adulthood); perpetrator (s)(partner, aunty/sister, mother/step mother, neighbor, stranger); decision making on when and how to have sex (both, one partner); partner ever insisted on anal sex (yes or no), partner ever denied respondent sex as a punishment for misbehavior (yes or no); partner ever forced respondent to have unprotected sexual practices (yes or no); partner ever attempted kicking or cutting off respondents' genitals (yes or no); if sexual abuse was reported (parent, police, friends, others), feeling of anger against self after the incident (yes or no), feeling like hurting self on remembering the incident; history of injury or health problems following the sexual abuse. Also, history of forced unprotected sexual activities was documented.

**Data collection:** Data were collected by two trained research assistant and supervised by the investigators. A total of 600 questionnaires were administered, comprising of 470 respondents from the University and 130 from the Polytechnic. The questionnaires were checked daily for completeness. Data were collected in September and October, 2014.

#### **Study variables:**

The dependent variables were experience of sexual violence. The experience of sexual violence was determined from respondents answers to questions on history of unwanted, forced or cajoled sexual contact (rape); forced you to have unprotected sexual intercourse; forced or cajoled to do specific sexual acts against wish; attempt to injure genitals; unwanted touching, kissing or fondling and denied sex as punishment. Rape was defined as the physically forced or coerced penetration of the vulva or anus with a penis, other body part or object.

The independent variables were; age, type of school, educational level, family background (which is the family setup, e.g. monogamy, polygamy, single parent.), relationship status, alcohol intake, partner alcohol use and smoking status. These variables were generated from the conceptual framework on the ecological model of the factors associated with experience of partner violence (Heise, Ellsberg & Gottemoeller, 1999).

**Data management:** Data were analyzed using frequency, Chi-square tests and logistic regression ( $\alpha=0.05$ ).

**Ethical consideration:** Ethical approval was obtained from the Oyo State Ministry of Health Ethical Review Board. Permission to carry out the study was obtained from the management of the two institutions. Written informed consent was obtained from the participants after explaining the purpose of the study to each respondent. Participants were assured of the confidentiality of all responses given. Anonymity was ensured as no names were required of the participants or recorded on the questionnaires. Data obtained from the study was kept in a password protected computer. Based on World Health Organisation Guidelines (WHO, 2001), men who were currently experiencing severe health problems were referred to a health facility for support and care.

## Results

**Socio-demographic characteristics:** Among the respondents 67.2% were aged between 20 and 29 years, while 83.3% were single. Undergraduate's students were 51%, while the ordinary national diploma students were 7.2%. Over three quarter 78% of the respondent's religion were Christians while 62.2% reported that they were currently in a relationship (Table 1).

The percentage of respondents who had experienced gender based violence was, 53.9%, 62.2% and 58.3% for psychological, physical and sexual violence respectively. The respondents' experience of different acts of sexual violence is shown in Table 2. Of the 350 respondents who had experienced sexual violence, 19.0% had ever been cajoled to do sexual things against their wish. The experience of someone touching the genital in a way respondent did not like was by 15.5% compared to 29.1% who reported to have experienced unwanted kissing, while 4.6% experienced forced genital fondling. Of those who had experienced forced sexual encounter, 20.8% had experienced forced vaginal penetrative sex compared to 18.9% who had experienced forced anal sex. The respondent that gave no reply to the questions were 26.0%.

About 26.5% were victimized in adulthood, 21.5% in adolescence and 12.9% in childhood and 7.1% in both childhood and adolescence while 32.0% gave no response. About 36.1% stated that they made a joint decision with their partner on when and how to have sex.

**Perpetrator of sexual violence:** Partners were the

main perpetrator in 59.4% of the cases. Of these, 15.4% were current, 28.9% by ex-partner and 55.7% was perpetrated by both partners. Other perpetrators included neighbours (19.8%), strangers (14.1%) and relatives (6.7%).

**Health Problems following Abuse:** Of those who had experienced sexual violence, 14.3% (50) felt some form of anger against himself after the incident, while 10.3% (36) felt like hurting himself whenever he remember the incident. Only 18.0% of those who experienced violence reported the abuse to someone else. The persons often reported to were parent (63.7% of reported cases and friends/. Only two were reported to law enforcers.

**Factors associated with experience of sexual violence:** On bivariate analysis educational level, family type, being currently in a relationship, alcoholic intake and smoking were all significantly associated with experience of sexual violence ( $p<0.05$ ). Students in the lower levels of schooling reported higher proportion of sexual violence (81.4% for OND versus 59.1% for PG ( $p<0.05$ ); those from polygamous more than those from monogamous unions (62.4% versus 59.1%), students currently in a relationship (63.4% versus 50.2%) compared to those out of a relationship reported more experience. Also, students who consumed alcohol (68.9% versus 53.9%) or who were regular alcohol users (79.3% versus 50.8%) reported more experience of violence; and those who smoked (100% versus 56.7%) reported more sexual violence.

On multivariate analysis, the OND students from the polytechnic were more likely to experience sexual abuse (aOR 3.0, 95%CI 1.9-4.9) than the postgraduate students from the university. Also, alcohol users are more likely to experience violence (aOR 3.3, 95%CI 1.5-4.6) while students from monogamous families were less likely than polygamous (aOR 0.4, 95%CI 0.2-0.9) to be sexually violated.

## Discussion

This study reported the prevalence and described the factors associated with sexual violence among a sample of men students in the two tertiary institutions in Ibadan. Contrary to popular belief, considerable percentage of young men experienced sexual violence. The high prevalence was due largely to experience of unwanted kissing, necking and pecking. These and others similar forms of sexual violence are not as pleasurable or harmless as they are often perceived, psychological complications

were reported by victims (Gass *et al.*, 2011).

It is noteworthy that some of the students were victims of childhood sexual abuse. Parents have the primary responsibility to protect their children from victimization. This highlights the need for improved parent assessment of child(ren)'s risk of abuse and the need to be more cautious even with familiar adults (Ige & Fawole, 2011). It is also important for parents to be reoriented regarding perpetrators of abuse so that children can be taught to be aware of the possibility of being coerced or lured into sexual activity, even by a trusted adult (Njoku, 2001). For children in sub-Saharan Africa, apart from physical and psychological problems of childhood sexual abuse, there is the added factor of HIV/AIDS infection (Airhihenbuwa & Webster, 2004; Lalor, 2004). Also, many persons who experience IPV while young stand the risk of continuation of such encounter into adulthood (Black *et al.*, 2011).

The risk of HIV/AIDS is further heightened for victims because of the forced penetration for vaginal intercourse; some of the students also had experienced forced anal intercourse. Engagement in anal intercourse has been associated with HIV-related sexual risk behaviour such as sex with two or more men sex partners; exchanged sex for money or drugs; sex with intravenous drug user; sex with HIV-positive person; sex with two or more women sex partners (Nasrullah *et al.*, 2015). However, information was not requested on whether intercourse was insertive or receptive intercourse was not obtained.

Perpetrators of sexual violence were persons well known to the students. These were majorly women partners, particularly former partners. The abuse might have led to the separation alternatively the circumstances surrounding the break up may be aggressive and have deteriorated into sexual violence. Other researchers have reported that perpetrators of violence on young men victims are men, and are known persons not strangers. Perpetrators may include peers, steady or casual men partners, men relatives, older students or friends, and older men as well. A smaller number of young men reported sexual coercion by women. A range of perpetrators were mentioned, including intimate partners, sexually experienced women and girlfriends. Subtle forms of coercion were used, including undressing, touching or commenting on the young men penis, or taunting his lack of virility. When the perpetrator was a women, most men regarded the incident far less seriously and more as "pressure" to have unwanted sex rather than rape, and some male even reconstructed such experiences as pleasurable (Neal & Edwards, 2015).

Students in the polytechnic were more vulnerable

to violence, this was probably because they were non-residential hence control and discipline will be more difficult to institute among the students. In the University on the other hand most of the students reside on campus. Obviously, Students currently in relationship were more vulnerable to sexual violence than those who were on their own. This is unsurprising since partners were the major perpetrators. The consumption of alcohol may facilitate development of relationship discord due to having multiple sexual partners and the cost of the drink and treating the associated morbidities, which may result in physical and sexual intimate partner violence (Coleman and Carter, 2008).

Most of the victims did not report the abuse to anyone but preferred to be silent. This was consistent with results from other studies that have reported that reluctance of young men victims to seek redress because of the perceived failure to conform to the macho-stereotype, the fear of not being believed, the denial of victim status and the lack of support from the society, family members and friends (McNeely *et al.*, 2008). Hence the victim takes up the responsibility for repairing the damage and internalizes the blame (Anderson *et al.*, 2009). The implication of this is that the prevalence reported may be an underestimate because many victims may be too embarrassed to admit experience of violence. This might be responsible for the use of alcohol as a coping mechanism. Alternatively alcohol abuse may also have resulted in the sexual abuse in the first place. However this indicates the need to strengthen young people understanding of their sexual rights in the context of the right of young men control of their own bodies and promote refusal skills among young boys and men.

The study had a few limitations. Non response to some questions was high, due to the sensitive nature of the study. Also, some respondents may have given socially desirable responses to some of the questions. In addition, there may have been recall bias to questions which documented childhood experience of sexual abuse. This paper could not evaluate the in-depth health consequences of sexual abuse on the victims. Future research could explore this and make useful recommendations for preventive and interventional health actions.

## Conclusion

Sexual violence was a common experience among the students in relation to the research conducted. Former partners were the main perpetrators of abuse. Experience of violence had psychological consequences on victims. Type of school and level of schooling, relationship status, alcohol use, and partner smoking status, including type of family were

factors which influenced the experience of sexual violence in the students.

There is an urgent need for educational programs (targeting adolescence to have a foundational knowledge on sexual violence, preventing stigmatization ) for students in both institutions, especially in the polytechnic and such program should target students in the lower levels of schooling and those from polygamous home, who smoke or drink. In addition, there should be radical awareness targeted at sensitization of parents, religious and community leaders to the subtleness of young male to been sexually abused through media and social

programs. Awareness and advocacy campaigns are necessary investments in the sexual and reproductive health of young men and women so that they can effectively contribute to the much anticipated demographic dividend in Nigeria.

**Table 1: Respondents Socio-demographic characteristics (n=600)**

Characteristics	Frequency	Percentages (%)
<b>Age group (years)</b>		
≤ 19	47	7.8
20-29	403	67.2
30-39	110	18.3
40-49	28	4.7
≥ 50+	12	2.0
<b>Marital status</b>		
Single	500	83.3
Married	94	15.7
Separated/Divorced	6	1
<b>Level of education</b>		
Ordinary national diploma	43	7.2
Higher national diploma	87	14.5
Undergraduate	306	51
Postgraduate	164	27.3
<b>Religion</b>		
Christianity	468	78
Islam	115	19.2
Traditional	17	2.8
<b>Ethnicity</b>		
Yoruba	477	79.5
Igbo	90	14.9
Hausa	33	5.6
<b>Place of residence</b>		
Urban	408	68
Peri-urban	147	24.5
Rural	45	7.5
<b>Family type</b>		
Monogamous	418	69.7
Polygamous	125	20.8
Single parent	57	9.5

**Table 2:** Respondents experience of acts of sexual violence (n=350)

Characteristics	Number (n)	Percent (%)
Ever been forced to perform a sexual act against wish	257	73.4
Rape (forced vaginal or anal sex)	139	39.7
Vaginal Penetration	73	
Anal penetration	66	
Unwanted touching of genital in a way you do not like	93	26.6
Ever been forced or cajoled to do sexual things against wish	114	32.6
Ever been forced /insisted to have anal sex	75	21.4
Ever been denied sex as punishment	133	38.0
Ever been forced you to have unprotected sex	94	26.9
Ever had forced fondling of genitals	16	4.6
Attempt ever made to cause injury to genitals	29	8.3
Kissing, pecking and necking	102	29.1

**Table 3:** Experience of respondents who experienced sexual violence (n=350)

Characteristics	Frequency	Percentages (%)
<b>Period of experience</b>		
Childhood	45	12.8
Adolescence	75	21.4
Adulthood	93	26.5
Childhood & adolescence	25	7.1
<b>Perpetrator</b>		
Partner	126	36
Relative	16	4.6
Neighbor	43	12.3
Stranger	37	10.6

**Table 4:** Respondents socio-demographic characteristics by their experience of sexual violence

Characteristics	Total (n=600)		X <sup>2</sup> p-value
	Yes (n=350)	No (n=250)	
<b>Age Group (yrs)</b>			
≤ 19	26(55.3)	22(44.7)	48
20-29	227 (56.5)	175 (43.5)	402
30-39	68(61.8)	42(38.2)	110
≥40	29 (72.5)	11 (27.5)	40



<b>Schooling</b>				
OND/HND	81 (68.1)	39 (31.9)	119	
Under graduate	162 (52.9)	144 (47.1)	306	14.8; 0.002
Post graduate	97 (59.1)	67 (40.9)	164	
<b>Family Type</b>				
Monogamous	229 (59.1)	188 (45.1)	417	
Polygamous	78 (62.4)	47 (37.6)	125	9.7;0.008
Single parent	43 (75.4)	15 (24.6)	58	
<b>Currently in a relationship</b>				
No	114 (50.2)	114 (49.8)	228	
Yes	236 (63.4)	136 (36.6)	372	10.1; 0.001
<b>Sex of partner</b>				
Women	306 (58.3)	219 (41.7)	525	
Men	7 (70)	3 (30)	10	0.6;0.8
Both	37(58.6)	27 (41.3)	64	
<b>Alcohol use</b>				
Yes	168(68.9)	76(31.1)	244	
No	191(53.9)	165(46.1)	356	11.6; 0.001
<b>Alcohol intake</b>				
Regularly	23(79.3)	7(20.7)	30	
Occasionally	147(68.4)	68(31.6)	215	22.3<0.001
None	180(50.8)	175(49.2)	355	
<b>Smokes</b>				
Yes	24(100)	0(0)	24	17.8<0.001
No	326(56.7)	250(43.3)	575	

Table 5: Predictors of sexual violence among the respondents

Characteristics	Odds Ratio	O.R 95% C.I.	P value
<b>Level of Education</b>			
Postgraduate (ref)			
OND	3.0	1.9 - 4.9	0.009
HND	1.3	0.5 - 1.6	0.4
Undergraduate	0.8	0.4 - 1.0	0.2
<b>Relationship status</b>			
None (ref)	1		
Currently	2.5	1.9 - 7.2	0.002
<b>Family type</b>			
Single parent (ref)			
Monogamy	0.4	0.2 - 0.9	0.004
Polygamy	0.5	0.2 - 1.0	0.09
<b>Alcohol consumption</b>			
Non-users (ref)			
Regularly	3.7	1.5 - 9.3	0.005
Occasionally	2.1	1.5 - 3.0	0.000

Note: Ref- reference group

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