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Benue State University Makurdi,
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Abstract

Intimate Partner Violence (IPV) is a significant yet preventable public health problem that affects millions of people regardless of age, economic status, race, religion, ethnicity, sexual orientation, or educational background. Victims of Intimate Partner Violence may have a lifelong consequence, including emotional trauma, lasting physical impairment, chronic health problems and even death. The study examined the Psychosocial effect of Intimate Partner Violence on Non Academic Staff of Federal university of Agriculture, Abeokuta in Ogun State.

The study employed a simple random sampling technique to select 320 members of non-academic staff from a total of 1320.

The result showed that there was a statistically significant relationship between intimate partner violence and low productivity at work ($\chi^2 = 110.962$, $N = 310$, $p < 0.001$); ($\chi^2 = 84.114$, $N = 308$, $p < 0.001$). Statistically significant relationship also existed between intimate partner violence and depression ($\chi^2 = 144.475$, $N = 310$, $p < 0.001$). There was also a statistically significant relationship between Intimate partner violence and anti-social personality ($\chi^2 = 126.855$, $N = 306$, $p < 0.001$); ($\chi^2 = 114.836$, $N = 310$, $p < 0.001$); ($\chi^2 = 125.144$, $N = 310$, $p < 0.001$), and between intimate partner violence and anger and hostility ($\chi^2 = 144.893$, $N = 310$, $p < 0.001$).

The study concluded that efforts must be geared toward sensitizing the public especially couples on the dangers inherent in this form of violence.

Key words: psychosocial; intimate; partner, violence, Intimate Partner Violence; Non-Academic; staff

Introduction

Intimate Partner Violence (IPV) forms part of the umbrella, gender-based violence and it is defined as any behavior within an intimate relationship by an intimate partner that causes physical, psychological, or sexual harm to those in the relationship (WHO 2002). Most reported cases of IPV are perpetrated by men towards women although men can be victims of IPV. Intimate partner violence is orchestrated as a desire of one party in a relationship to dominate and control the other partner. IPV is a major public health problem and a violation of human rights.

Intimate partner violence is one of the most predominant forms of violence committed by men against women. Its prevalence varies within and between settings ranging from 13% to 71% (Duvvury et al, Callan, Carney, & Raghavendra 2013). IPV affects women globally and is widely prevalent among all socioeconomic, religious, and cultural groups (Ahmad & Jaleel, 2015). Apart from this, Intimate partner violence claims millions of victims worldwide leading to infringement of fundamental human rights, serious physical and mental health consequences and leading behind in its wake broken relationships and affected children. Despite its prevalence, it is still not a well understood phenomenon (Patra et al 2018). Intimate partners violence is experienced by both parties in a relationship (man and woman), though most perpetrators are men and most victims are women. Also, in intimate partners violence, women are the worst hit and with less coping abilities when experienced.

Domestic and intimate partner violence against women is deeply rooted and culturally accepted in most African communities and religions (Uthman, Lawoko & Moradi, 2009). Some women are taught to believe that IPV is a form of love. In some communities, it is believed to be an integral way of enforcing discipline and is the entitlement of men. If a woman is viewed to have disrespected or defied a male's authority that is approved by the community, then the male partner is allowed and encouraged to discipline the woman by way of force or violence.

Some studies show that women in sub-Saharan Africa are more likely than men to justify Intimate Partner Violence against Women (IPVAW) as a response to women's transgressing gender norms (Uthman et al., 2009). Therefore, IPV is a

social construction with complex and multifaceted risk factors. In some cases, women are blamed for having encouraged IPV through their anti-cultural behaviors or lack of discipline and respect toward their spouses (Garcia-Moreno et al., 2006).

In a finding by Benebo, F.O., Schumann, B. & Vaezghasemi, M. (2018), almost one in four women in Nigeria (23.6%) reported experience of any form of intimate partner violence ever, while one in five (20%) reported experience of any intimate partner violence in the last 12 months preceding the survey. Also, emotional violence was the most experienced.

IPV has significant negative effects physically and mentally, not only on women as individuals but society as a whole. Coker et al. (2002) noted that it has significant physical health consequences and recommended screening by physicians to reduce the range of health consequences associated with Intimate Partner violence. These violent occurrences are viewed as separate events that occur in the private realm of relationships beyond the influences of other family members, health care providers, and legal authorities. In several developing countries, IPV is protected by secrecy and a culture of silence. Due to shame and stigma, fear of a husband's retaliation, protection of family prestige and privacy, love and affection to the husband, as well as levels of cultural acceptance, IPV remains hidden and invisible (Ahmad &Jaleel, 2015;). The health impacts of IPV on women of reproductive age include physical trauma and decline in reproductive health (Ellsberg et al. 2008; Garcia-Moreno et al. 2006.) Psychological outcomes of IPV include depression, post-traumatic stress, and suicidal ideation (Ellsberg et al. 2008). The causes of intimate partner violence are not entirely clear and it is difficult to research due to inconsistencies in previous studies and in the causes of violence. Women are afraid of being honest in surveys and of coming forward and reporting abuse (WHO, 2012). The combined effect of social, cultural, individual and circumstantial factors is believed to cause abuse in intimate relationships (WHO, 2012).

Given the prevalence of intimate partner violence and the reality that most adults spend a significant amount of time at work, we can surmise that this known risk area cannot be overlooked on the job. Victims come from a mixed range of background so do abusers. Studies indicate that domestic violence happens to a wide variety of individuals, regardless of socioeconomic and education levels, age, race, sexual orientation, or religion (Lee, 2005).

Therefore, this research aims at finding out the psychosocial effect of intimate partner violence on The Federal University of Agriculture, Non-academic Staff, Abeokuta, Ogun State.

Statement of problem

The effects of IPV range between psychological, emotional, social and physical health problems. According to Shavers (2013), studies have shown chronic pain, sleeping difficulties and irritable bowel syndrome (IBS) are all associated with long term health effects on women victims of violence. The effects on health may be direct and immediate or appear later on in life, even after the violence has past. The severity and frequency of abuse usually determines the impact on the woman's physical and mental health (WHO 2012.).

Intimate partner violence is gradually becoming a pandemic globally and it is a public health problem. It affects more than one third of all women globally (Femi-Ajao, 2018). In Nigeria, about one every four women has at one time or the other reported having experienced intimate partners violence and it has a far-reaching consequences for the physical, reproductive, and mental health of women.(Bonebo et al. 2018).

The effect of this phenomenon can never be overemphasized as it also has impact on the productivity of the victims. Survivors of IPV perceived the workplace as less supportive and less accommodating than employees who did not report IPV (Shanti Kulkarni & Ticola C. Ross,2016).

Also, Christopher Blodgett & Jane Lanigan (2018) noted that the cumulative effects of IPV as well as active victimization contribute to negative workplace consequences with significant numbers of employees reporting workplace consequences.

It is against this backdrop that the study seeks to find out the psychosocial effect of intimate partner violence among the Non-academic staff of Federal University of Agriculture, Abeokuta, Ogun state.

Objectives of the study.

1. To find out the relationship between intimate partner violence and depression among the nonacademic staff of the university
2. To find out if any relationship exists between intimate partner violence and antisocial behavior among non-academic staff of the university
3. To find out if any relationship exists between intimate partners' violence and aggressive or delinquent behaviors

Hypothesis H01: There is no significant relationship between intimate partner violence and depression H02: There is no significant relationship between intimate partner violence and anti-social personality H03: There is no significant relationship between intimate partner violence and aggressive or delinquency behavior

Methodology

Study Area: This study was conducted at the Federal University of Agriculture, Abeokuta (FUNAAB), Ogun State. It is one of the universities of Agriculture in Nigeria. Located in Abeokuta, Southwestern part of Nigeria.

Research Design: The research design for this research was a descriptive one. The essence of this research is to carefully observe and record information concerning the psychosocial effects of intimate partner violence on The Federal University of Agriculture, Non-academic Staff, Abeokuta, Ogun State.

Sample: Population of the study consisted of non-academic staff of Federal university of Agriculture, Abeokuta which was put at 1350 which consisted of both Males and females. A Simple random sampling technique was used to select 320 participants of the study. **Instrument:** A self-developed questionnaire was used to elicit information from the participants. The instrument was divided into 4 sections A, B, C, D. Section A requires the socio demographic data of the participants while B, C, D require information on the variables selected for the study.

Facial and content validity of questionnaire was ascertained by professional colleagues in Social Work and their inputs were added before the final print of the questionnaire. To establish the reliability of the instrument, twenty (32) copies of the instrument was pretested on respondents who are not part of population of study in The Federal University of Agriculture, Abeokuta, Ogun State. The reliability tests of the instrument were ascertained using Crobach alpha method which reveals a result of 0.96.

Data Analysis: The responses gathered from the respondents were analyzed using descriptive analysis using frequency distribution tables and percentages. A correlation analysis was conducted between variables of interest to determine the significant relationship that exist using the statistical package for social sciences (SPSS), version 21. The essence of the correlation statistical test is to determine the strength of the relationship between the main variables. **Ethical Consideration:** Approval was obtained from the Research ethics committee of the University before the research was carried out. Participants were treated with high level of respect and were assured of the highest level of confidentiality

Result Frequency and percentage of demographic distribution

140 170	45.2 54.8
100 126 69 14	32.4 40.8 22.3 4.5
98 206 42	31.6 66.5 1.4 0.6
73 188 27 9 12	23.6 60.8 8.7 2.9 3.9
22 21 284	0.6 0.6 6.8 91.9

Results showed that Majority of the respondents are females (54.8%). 32.4% were between 25 and 35 years, 40.8% were between 36 and 45 years 22.3% were between 46 and 55 years while only 4.5% were above 56 years. This implies that majority of the respondents are between 36 and 45 years. There are more female participants in the study (54.8%) than the male participants.

Result also showed that 60.8% of the respondents are married and 23.6% are single. 8.7% are separated while 2.9% are divorced. Level of education of respondents showed that 91.9% of the participants in the study had tertiary education.

Analysis of Research Hypotheses

H01: There is no significant relationship between intimate partner violence and depression

Table 1: Relationship between intimate partner violence and depression

Yes	No
144.475	<0.001
46 (88.5%)	6 (11.5%)
52 (78.8%)	14 (21.2%)
7 (35.0%)	13 (65.0%)
13 (14.3%)	78 (85.7%)
9 (11.1%)	72 (88.9%)

Table 1 above showed that there was a statistically significant relationship between intimate partner violence and depression ($\chi^2 = 144.475$, $N = 310$, $p < 0.001$). This means that the relationship between depression and intimate partner violence did not occur by chance but that intimate partners' violence has a significant effect on depression. Therefore, the result rejected the null hypothesis while the alternate hypothesis was accepted which states that there is a significant relationship between intimate partner violence and depression. H02: There is no significant relationship between intimate partner violence and anti-social personality

Table 2: Relationship between intimate partner violence and anti-social personality

Yes	No
126.155	<0.001
52 (89.7%)	6 (10.3%)
36 (76.6%)	11 (23.4%)
7 (33.3%)	14 (66.7%)
19 (17.4%)	78 (82.6%)
11 (15.5%)	60 (84.5%)
114.836	<0.001
37 (80.4%)	9 (19.6%)
42 (85.7%)	7 (14.3%)
11 (47.8%)	12 (52.2%)
30 (27.3%)	80 (72.7%)
7 (8.5%)	75 (91.5%)
125.144	<0.001
54 (85.7%)	9 (14.3%)
48 (67.6%)	23 (32.4%)
3 (15.8%)	16 (84.2%)
11 (13.8%)	69 (86.3%)
11 (14.3%)	66 (85.7%)

Table 2 above showed that there was a statistically significant relationship between intimate partner violence and anti-social personality ($\chi^2 = 126.855$, $N = 306$, $p < 0.001$); ($\chi^2 = 114.836$, $N = 310$, $p < 0.001$); ($\chi^2 = 125.144$, $N = 310$, $p < 0.001$). This means that the relationship between anti-social personality and intimate partner violence did not occur by chance but that intimate partners violence has a significant effect on antisocial personality. Therefore, the result rejected the null hypothesis while the alternate hypothesis was accepted which states that there is a significant relationship between intimate partner violence and anti-social personality.

Table 3: Relationship between intimate partner violence and aggressive or delinquent behavior

Yes	No
110.208	<0.001
32 (88.9%)	4 (11.1%)
44 (83.0%)	9 (17.0%)
10 (40.0%)	15 (60.0%)
31 (27.4%)	82 (72.6%)
10 (12.0%)	73 (88.0%)
81.929	<0.001
32 (88.9%)	4 (11.1%)
30 (81.1%)	7 (18.9%)
8 (34.8%)	15 (65.2%)
37 (33.6%)	73 (66.4%)
20 (19.2%)	84 (80.8%)

Table 3 above showed that there was a statistically significant relationship between intimate partner violence and aggressive or delinquent behavior ($\chi^2 = 110.208$, $N = 310$, $p < 0.001$); ($\chi^2 = 81.929$, $N = 310$, $p < 0.001$). This means that intimate partner violence has a significant effect on aggressive or delinquent behavior. Therefore, the result rejected the null hypothesis while the alternate hypothesis was accepted which states that there is a significant relationship between intimate partner violence and aggressive or delinquent behavior.

Discussion of findings.

Violence against women is a universal problem in many countries. Intimate partner violence occurs at an alarming rate worldwide and remains a problem of

public health importance. The demographic data of the study showed that majority of the participants in the study are between the ages of 36-45. There are more female participants in the study (54.8%) than the male participants. Result also showed that 60.8% of the respondents are married and 23.6% are single. 8.7% are separated while 2.9% are divorced. Level of education of respondents showed that 91.9% of the participants in the study had tertiary education.

Findings from the research showed that there is significant relationship between Intimate partners violence and depression. This means that victims of intimate partners violence are prone to develop depression. This is also in line with Tanko S. Tanimu, Stephen Yohanna and Suleiman Y. Omeiza (2016) that apart from being a cause of psychiatric illness in women, Intimate partners violence is an established risk factor for depression.

Also Coker et.al (2002), in examining the mental consequences of intimate partner violence submitted that the latter is associated with chronic mental illness and depressive symptoms.

Bonomi et al. (2013) observed that women who had experienced intimate partner violence more than 5 years ago are still currently at increased risk of having depressive or severe depressive symptoms. Anderson, Saudners. Yoshihama, Bybee & Sullivan (2003) also confirmed depression as one of the predominant adverse effects of violence against women.

The finding is also supported by Pico-Alfonso et al. (2016) who noted that severe depression, post-traumatic stress disorder (PTSD), state anxiety (short-term anxiety) and thoughts of suicide are seen in abused women.

Also findings from the research showed that there was a statistically significant relationship between intimate partner violence and anti-social personality. This is in consonance with the submission of Pico-Alfonso et al. (2008) who stated that women victims of intimate partner violence have symptoms of personality disorders, some of which are schizoid, avoidant, antisocial, narcissistic, aggressive, passive-aggressive disorders. This is not all. As opined by Lignet Chepuka et. al, (2014), in a study conducted in Malawi, antisocial behaviors such as Anxiety, low self-esteem and depression were described as negative consequences of Intimate partners violence. He added that suicidal ideation and suicide were also identified by respondents in the study, Alcohol use was seen as both as a consequence and as a trigger of violence. In addition to the above, Gina Dillon (2013) also identified self-harm, psychological distress, post-traumatic stress disorder and self-perceived mental health as impacts of intimate partners violence. Evidence suggests that women who are abused by

their partners suffer higher levels of depression, anxiety and phobias than non-abused women (Heise et al 2002). In the WHO multi country study, reports of emotional distress, thoughts of suicide, and attempted suicide were significantly higher among women who had ever experienced physical or sexual violence than those who had not (Garcia-moreno C et al 2005) The research explored the psychosocial effect of intimate partner violence, the study concluded that intimate partner violence does occur but it is minimal among non-academic staffs of FUNAAB, the study also concluded that depression has a significant effect on intimate partner but anger and hostility is not significant with intimate partner violence.

Conclusion.

Intimate Partner violence is not a new phenomenon though it's still not well understood. It affects more women than men and has severe psychological impacts on the victims. It was ascertained that Depression, antisocial Personality, aggressive behaviors are all consequences of intimate partner violence and this have severe effect on the non-academic staff. This will also obviously have direct negative effect on the job productivity. With this in mind, this problem of intimate partner violence should not be addressed in all its forms.

Recommendations.

Based on the findings of this research, the following recommendations are made 1. Strategic communication plans to increase awareness of IPV among non-academic staffs should be developed. A short-term goal of the plan should be to raise awareness and educate staffs about IPV, specifically to recognize what IPV looks like in real-life situations and to understand the severity of IPV.

2. There is need to help the abused women, the need to support family and friends to offer appropriate responses to abused victims as friends and family are the main sources of informal support that women first turn to for help when abused. 3. The need for public awareness on the dangers of Intimate partner violence should be looked into by relevant agencies.

4. Resources that contain information outlining what are the helpful responses and providing practical strategies should be widely distributed to the wider community to ensure that family and friends are enabled to provide appropriate assistance when women communicate with them about the violence.

5. Public awareness campaigns can be carried out and this information should also be made available through support agencies.

References

- Ahmad, A., & Jaleel, A. (2015). Prevalence and Correlates of Violence against Women in Nepal: Findings from Nepal Demographic Health Survey, 2011; *Advances in Applied Sociology*, 2015(5), 119-128.
- Ann L Coker, Keith E Davis, Ileana Arias, Sujata Desai, Maureen Sanderson, Heather M Brandt & Paige H Smith (2002). Physical and mental health effects of intimate partner violence for men and women. *American Journal of Preventive medicine*, 23(4), 260-268.
- Benebo, F.O., Schumann, B. & Vaezghasemi, M. (2018). Intimate partner violence against women in Nigeria: a multilevel study investigating the effect of women's status and community norms. *BMC Women's Health* 18, 136 .
- Bonomi, A. E., Thompson, R. S., Anderson, M., Reid, R. J., Carrell, D., Dimer, J. A., & Rivara, F. P. (2006). Intimate partner violence and women's physical, mental, and social functioning. *American journal of preventive medicine*, 30(6), 458–466.
- Blodgett, C., & Lanigan, J. D. (2018). The prevalence and consequences of intimate partner violence intrusion in the workplace. *Journal of Aggression, Maltreatment & Trauma*, 27(1), 15-34
- Campbell, J., Jones, A. S., Dienemann, J., Kub, J., Schollenberger, J., O'Campo, P., Gielen, A. C., & Wynne, C. (2002). Intimate partner violence and physical health consequences. *Archives of internal medicine*, 162(10), 1157–1163.
- Coker, A. L., Davis, K. E., Arias, I., Desai, S., Sanderson, M., Brandt, H. M., & Smith, P. H. (2002). Physical and mental health effects of intimate partner violence for men and women. *American journal of preventive medicine*, 23(4), 260–268. [https://doi.org/10.1016/s0749-3797\(02\)00514-7](https://doi.org/10.1016/s0749-3797(02)00514-7)
- Duvvury, N., Callan, A., Carney, P., & Raghavendra, S. (2013). Intimate partner violence: Economic costs and implications for growth and development (Women's Voice, Agency, and Participation Research Series No. 3). Washington, DC: World Bank.
- Ellsberg, M., Jansen, H. A., Heise, L., Watts, C. H., Garcia-Moreno, C., & WHO Multi-country Study on Women's Health and Domestic Violence against Women Study Team (2008). Intimate partner violence and women's physical and mental health in the WHO multicountry study on women's health and domestic violence: an observational study. *Lancet (London, England)*, 371(9619), 1165–1172. [https://doi.org/10.1016/S0140-6736\(08\)60522-X](https://doi.org/10.1016/S0140-6736(08)60522-X)
- Femi-Ajao, O. (2018). Intimate partner violence and abuse against Nigerian women resident in England, UK: a cross-sectional qualitative study. *BMC*

- Women's Health 18, 123. <https://doi.org/10.1186/s12905-018-0610-4>
- Faith O. Bonebo, Barbara Schumann & MasoudV aezghasemi (2018). Intimate Partner violence against women in Nigeria: a multilevel study investigating the effect of women's status and community norms. *BMC Women's Health*. 18(1) 1-17
- Garcia-Moreno, C., Jansen, H. A., Ellsberg, M., Heise, L., & Watts, C. H. (2006). Prevalence of intimate partner violence: Findings from the WHO multi-country study on women's health and domestic violence. *The Lancet*, 368, 1260-1269. doi:10.1016/s0140-6736(06)69523-8
- Gina Dillon, RafatHussain, Deborah Loxton, SaifurRahman (2013). Mental and PhysicalHealth and Intimate Partner Violence against Women: A review of the literature. *International journal of Family medicine*, vol. 2013, Article ID 313909, 15 Pages.
- Heise L, Garcia Moreno C. Violence by intimate partners. In: Krug EG et al., eds. *World report on violence and health*. Geneva, World Health Organization, 2002:87–121.
- Lee, Johnny (2005). *Addressing domestic violence in the workplace*. Amherst: HRD Press.
- LignetChepuka, Miriam Taegtmeyer, Genesis Chorwe-Sungani, Janet Mambulasa, Ellen Chirwa & Rachel Tolhurst (2014). Perceptions of the mental health impact of intimate partner violence and health service responses in Malawi, *Global Health Action*, 7:1, DOI: 10.3402/gha.v7.24816
- Patra, P., Prakash, J., Patra, B., & Khanna, P. (2018). Intimate partner violence: Wounds are deeper. *Indian journal of psychiatry*, 60(4), 494–498. https://doi.org/10.4103/psychiatry.IndianJPsychiatry_74_17
- Pico-Alfonso, M. A., Garcia-Linares, M. I., Celda-Navarro, N., Blasco-Ros, C., Echeburúa, E., & Martinez, M. (2006). The impact of physical, psychological, and sexual intimate male partner violence on women's mental health: depressive symptoms, posttraumatic stress disorder, state anxiety, and suicide. *Journal of women's health* (2002), 15(5), 599–611.
- Pico-Alfonso MA, Echeburúa E, Martinez M. (2008). Personality Disorder Symptoms in Women as a Result of Chronic Intimate Male Partner Violence. *Journal of Family Violence*;23:577–588.
- Shanti Kulkarni & Ticola C. Ross (2016). Exploring employee intimate partner violence (IPV) disclosures in the workplace, *Journal of Workplace Behavioral Health*, 31:4, 204- 221, DOI: 10.1080/15555240.2016.1213637

- Tanko S. Tanimu, Stephen Yohanna, Suleiman Y. Omeiza (2016). The pattern and correlates of intimate partner violence among women in Kano, Nigeria. *African Journal of primary health care and family*, 8(1), Uthman, O.A., Lawoko, S. & Moradi, T (2009). Factors associated with attitudes towards intimate partner violence against women: a comparative analysis of 17 sub-Saharan countries. *BMC Int Health Hum Rights* 9, 14. <https://doi.org/10.1186/1472-698X-9-14>
- W.H.O.(2012): Understanding and addressing violence against women. <https://www.who.int/reproductivehealth/publications/violence/rhr1243/en/retrieved> on the 25th April 2020