



Prevalence of Domestic Violence against Married Women: A Case Study of Oiji Ward, A Rural Setting in North Central Nigeria.

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KEYWORDS

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ABSTRACT

Background: In Nigeria, some provisions in the penal code still allow cultural acceptance of some forms of domestic violence, thereby providing avenue for many in the society to accept domestic violence as an accepted fact of life and as such many people live with it without feeling that it was anything wrong. In recent years, however, it has begun to be viewed as a criminal problem, as the case is increasing and is raising lot of concern especially regarding the victims. This study assessed the prevalence of domestic violence among married women in Oiji ward, a rural setting in Benue State, north Central Nigeria.

Methodology: The study was a cross-sectional community-based descriptive survey of 384 married women selected by systematic sampling technique using structured interviewer administered questionnaire. Data was analyzed using SPSS version 20, with level of significance set at $p < 0.05$. Multiple logistic regression models were performed to investigate independent predictors that had significant chi-square by controlling for possible confounders.

Results: Two hundred and fifty eight (67.2%) had experienced domestic violence of different types, ranging from physical assaults (19.5%), to emotional/mental torture (30.2%). The age of the women (OR= 3.191, (95% CI = 2.002-5.087) $p=0.000$), age at marriage (OR= 1.027, (95% CI= 0.508- 2.073), forced marriage (OR= 0.0136 (95% CI = 0.084-0.221) $p=0.000$), monthly income (OR= 1.665 (95% CI = -1.081- 2.564) $p=0.001$), and freedom of sex expression (OR= 3.917 (95% CI = 1.999 - 7.676) $p=0.000$) were the main predicting factors.

Conclusion: Married should be not being forced and women empowerment, Gender based violence awareness campaigns and legal protection of women should be encouraged in the rural areas.

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INTRODUCTION

Violence against women is defined as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to woman, including threats of such acts, coercion or arbitrary deprivation of liberty”.¹ In order words, it refers to any abusive treatment to women, thus violating the law of basic human rights. In most instances, the overall purpose is to establish a wield of power and control over women by their partners.^{2,3,4} Globally, at least one in three women has experienced some form of gender-based violence

by her partner during her life time.⁵ The most common injuries suffered by victims range from battering by intimate partners and others, sexual abuse of children, marital rape, traditional practices that are harmful to women, bruises or broken bones of the victims to depression, anxiety and social isolation.⁶

Historically violence against women in the home has been part of human life^{7,8,9} but the degree to its prevail differs across communities/societies.¹⁰ Similarly, at what point societies came to terms with the repugnancy of domestic violence against women

also varies.¹¹

In many societies, it has been an accepted fact of life and as such many people lived with it without feeling that it was anything wrong.³ For instance, wife beating was tactically accepted in many countries and the police and courts may rarely take action.^{12,13} Rape victims often face unsympathetic legal systems as it's often directed towards female and youths who lack the economic and social status to avoid it.¹³ Because of these reasons, women who have been subjected to domestic violence, in some instances learn to accept it giving its perpetuity. Some women victims, for the fear of repeated attacks by perpetrators, refused to even to report to the police.³

On the strength of universal declaration of Human Rights, the international community through the instrumentation of the United States facilitated a number of conventions and other rules of international laws to enhance and protect the rights of individuals.^{14,15} But the struggle to abolish domestic violence started first in western societies and later in other parts of the world including Nigeria, all tied to the enhancement of women's rights.¹¹ To this extent, domestic violence has been interpreted as a violation of women's right.^{2,11}

In Nigeria, the social context of violence against women is related to the traditional African patriarchal society that defines the gender power structure.⁷ However, Nigeria as a nation domesticated most of the international convention and treatise on rights of women; probably with the view to promote human rights for women.^{5, 7, 13} In addition; the 1963, 1979, 1989 and 1999 constitution of the Federal Republic of Nigeria have distinctly and clearly provided for and guaranteed the rights of women, but under the guise of cultural or customary rule or practices, emotional violence has been meted out to women under different circumstances.^{3,13}

Some provisions in the penal code still allow cultural acceptance of some forms of domestic violence, thereby providing avenue for many in the society to accept domestic violence as an accepted fact of life and as such many Nigerians live with it without feeling that it is anything wrong.¹⁶ For example the Section 55 (1) (a) of the penal codes applicable in the northern parts of the country provides that:

“nothing is an offence which does not amount to infliction of grievous hurt upon any person and which is done by(d) a husband for the purpose of correcting his wife if such husband and wife being subject to any native law or custom on which such correction is recognized as lawful”.³

This simply implies that, concern for family image and other reasons that portray conservativeness may prevent people from reporting incidences of domestic violence. Many battered female victims will try to solve the problem by talking it out with the abuser, by fighting back, or by trying to change their behavior to meet the demands of the abuser (of course, then the demands change). When they fail to stop the abuse, women may become passive, which may reduce the immediate danger, or may go into a state of emotional withdrawal. In the end, abuse may push a woman to see only two options: suicide or homicide.¹⁷

In recent years, however, violence against women in Nigerian has begun to be viewed as a criminal problem, as the case is increasing and is raising a lot of concern especially regarding the victims.^{18,19}

The objectives of this study is to assess the prevalence of domestic violence and its socio-demographic correlates as it applies to married women in Oiji ward, a rural setting in Benue State,

north central Nigeria.

MATERIALS AND METHODS

Study location

Oiji ward is one of the eleven political district/wards in APA LGA of Benue State, Nigeria. The ward is made up 4 settlements (Jos-Oiji, Ipole-Oiji, Efu-Oiji and Idada). The three settlements in Oiji are headed by a village head, while Idada is another village headed by another village head. The ward is bounded by Edikwu - Oladoga in the north, Iga-Ologche in the east, Iga-Okapaya in the south and Omogidi and Entekpa in the west. The ward has an estimated population of 9648 (projection from 2006 population census), with the women of the reproductive age group constituting approximately 2122 (22.0%). The people are predominantly peasant farmers and civil servants and Christianity is their predominant religion. The predominant language is their native dialect, Idoma. There are two primary health care facilities in the ward, one at Idada and one at Oiji; providing health care services to the people. Other health care providers include formal private providers, informal private providers, patent medicine vendors, traditional healers and faith healers. There are two public and three private primary schools, and two private and two public secondary schools in the ward. There is also a post-secondary, school of health technology in Efu-Oiji. The villages are connected to the national grid of electricity which runs across the length and breadth of the Village. Major sources of water are well and Okpokwu stream.

Study population and design

A cross-sectional community-based descriptive study design was employed for the study. The study populations were all women in the district/ward. Those who had never been married at the time of the study and those who did not consent were

excluded.

Sample size estimation A minimum sample size of 306 was arrived at using the formula

$$\left\{ n = \frac{Z^2 P_0 q_0 / d^2}{1 + (Z^2 P_c q_c / N d^2)} \right\}^{20}$$

with assumption of 63.4% of married women in a community experiencing domestic violence from a previous study¹³ and 5% tolerable margin of error at 95% confidence interval. Considering attrition rate of 20%, the calculated sample size was adjusted to 382.5. The number was brought to a round figure of 384.

Sampling technique

The World Health Organization (WHO) multistage sampling techniques used for Lot Quality Assurance Sampling (LQAS) to assess Oral Polio Vaccine (OPV) coverage in Nigeria in 2011 were adopted for the survey. The villages were mapped and numbered based on household levels. In the first stage, all the four settlements were selected. In the second stage, ninety six (96) households were selected from each of the settlements to arrive at the total minimum sample size of 384. A household is defined as people eating from a common pot. A compound may include many households. The first household was selected using a table of random numbers and the subsequent households were selected by systematic method. To ensure that the sample is spread across the settlements, once a household is selected three households next to the surveyed one was excluded and the movement was maintained continuously to the right side. In situation where the research assistance arrived at the same house again, they turn to the left and continue sampling until the maximum 96 households for each of the settlements was obtained. Where there are more than one household in a compound only one was selected by simple random sampling using table of random numbers households²¹. In situations

where an eligible household member was absent, a repeat visit was conducted by research assistants for three consecutive times before a replacement would be considered. Such households were revisited at specified periods when they were probably assumed to be present.

Data collection

The research was conducted through administration of structured interviewer administered questionnaire to the married women per household from 11th – 21st December, 2014. Eight trained female data collectors were involved. Four items containing information on socio-demographic variables, knowledge of domestic violence and experiences of domestic violence in the three months preceding the study were obtained.

Data analysis

All analyses were conducted using the Statistical Package for Social Sciences (SPSS) version 20. Information's sorted were categorized, summarized and presented in exploratory formats as frequency tables. Chi-square (χ^2) test was used for test of association between the socio-demographic variables and the main outcome of the study (gender-based violence), with statistical significance set at p-value of 0.05. Linear relationship between the predictor variable and the outcome (criterion variable) was further performed for selected independent predictors that have significant chi-square, using multiple logistic regression models by controlling for possible confounders.

Ethical issues

Ethical approval for the study was obtained from the ethical committee of Benue University Hospital Makurdi, before the study was conducted. An informed written consent was also obtained from the village heads. Verbal consent of the

respondents was also sought.

Limitations of the study

Since the inclusion was based on marital status, the women who may have not have been married but have intimate partner may be excluded, and that may affect decision making since they constitute a significant proportion of the population.

RESULTS

Socio-demographic characteristic of respondents

Table I shows the breakdown of the distribution of the socio-demographic characteristic of the respondents.

All the married women recruited for the study were interviewed and the questions asked were completely answered, making a response rate of 100.0%.

The mean age of the respondents was 32(\pm 2.41) years. The predominant age group of the respondents was 21-30 years (44.2%). Of all respondents, 365(95.1%) were Christians, and 109 (28.4%) had no formal education. Among 275 (71.6%) respondents who had formal education, those with secondary education predominates (35.4%), followed by primary education (20.6%), while those with tertiary education constitutes 15.6%. Farming (28.1%) was the predominant occupation of the respondents. Majority of the respondents, 204 (53.1%) earned less than five thousand naira as monthly income. Some respondents reported that their age at first marriage was 11 years, but in all the median age at marriage was 23.5 (\pm 5.48) years.

Prevalence of domestic violence among the respondents and the perceived reasons for

Table I: Socio-demographic characteristics of respondents (n=384)

Socio-demographic characteristics	Frequency	Percent
Age (Years)		
11-20	10	2.6
21-30	170	44.2
31-40	127	33.1
41-50	42	10.9
>50	35	9.1
Religion		
Christianity	365	95.1
Islam	19	4.9
Highest Educational qualification		
No formal education	109	28.4
Primary	79	20.6
Secondary	136	35.4
Tertiary	60	15.6
Occupation		
Farmer	108	28.1
Civil servant	99	25.8
Traders	92	24.0
Housewife	58	15.1
Others	27	7.0
Monthly income (#)		
≤4999	204	53.1
≥ 5000	180	46.9
Age at first marriage		
11-20	98	25.5
21-30	247	64.3
>30	39	10.2

Mean age: 32 (± 2.41) years

Mean age at first marriage: 23.5 (± 5.48) years

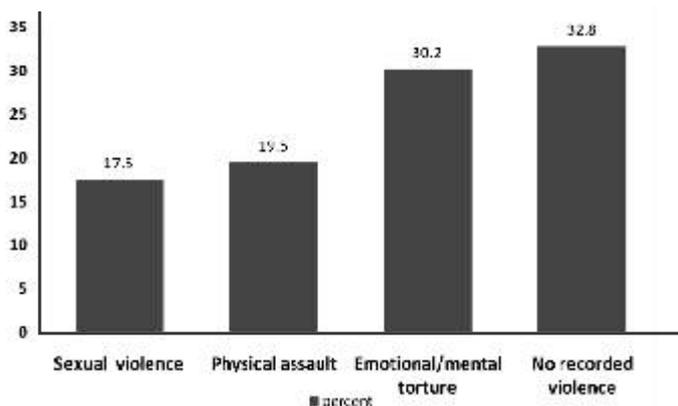


Figure 1: Prevalence of domestic violence among respondents

domestic violence

The summary of pattern of domestic violence ever had by the respondents and the perceived reasons for husband inflicting violence on the respondents is shown in figure 1 and Table II.

Of all the respondents interviewed, 258 (67.2%) had experienced domestic violence of different types, ranging from sexual violence 67(17.5%), through physical assaults 75(19.5%) to emotional/mental torture 116 (30.3%) [Figure1].

Regarding perceived spouse's reasons of domestic violence, there were multiple responses from the respondents. Of all the reasons cited, the most common was husband not having money; this was cited by 44.8% of the respondents.

Other commonly cited reasons were: husband perceived to having psychological disorder 100(26.0%), husband taking alcohol 99(25.8%), lack of love by husband 56 (14.6%), woman disobeying the husband or family elders 51(13.3), cultural acceptability of violence 47(11.7%), inability to give birth 19 (4.9%), suspected infidelity by women and women's refusal of sex (8.5% each).

The woman's use of contraception without permission or suspected sexual transmitted infections were less frequently cited reasons for violence (1.9% and 1.4% respectively) (Table II).

Correlates of domestic violence among the respondents

The results of bivariate and multivariate analysis between domestic violence against marriage women and the selected independent factors are presented in Tables III and IV. In the bivariate analysis (Table III), the relationship between the age of the patient, age at marriage, monthly income and freedom of sex expression between spouse were all statistically significant ($p < 0.05$).

Domestic violence among the respondents who do not have children was higher as compared to those who had children, but the relationship between infertility and all the forms of domestic violence was not statistically significant ($p=0.208$).

Table II: Respondents perception of husband's reasons for all forms of domestic violence

Reasons cited for violence	Frequency	Percent
Husband not having money	172	44.8
Husband having Psychological disorder	100	26.0
Alcohol consumption	99	25.8
Lack of love from husband	56	14.6
Woman disobeyed husband/elders	51	13.3
Cultural acceptability	45	11.7
Women's refusal of sex	22	8.5
Suspected infidelity by women	22	8.5
Infertility (Inability to give birth)	19	4.9
Women used contraceptives without permission	5	1.9
Women suspected to have STIs	4	1.6

In the multivariate analysis (Table IV), the risk of violence among woman that are less than 30 years old is about three times higher than women that are above 30 years of age {OR= 3.191,(95% CI = 2.002-5.087) p=0.000}.

Married women whose monthly income was less than five thousand naira were also at risk of domestic violence statistically {OR= 1.665, (95% CI = 1.081- 2.564) p=0.001}. Women who were given

Table III: Distribution of socio-demographic characteristics by pattern of domestic violence among respondents

Characteristics	Domestic violence (n= 258)			p -value
	Physical assault (n=75)	Sexual assault (n=67)	Emotional (n=116)	
Age (years)				
11 -20	3(4.0)	7(10.4)	6(5.2)	
21 -30	38 (50.7)	32(47.8)	60(51.7)	
31 -40	19 (25.3)	12(17.9)	30 (25.9)	
41 -50	9(12.0)	13 (19.4)	10 (8.6)	
>50	6(8.0)	3 (4.5)	10 (8.6)	0.000
Educational status				
No formal education	40 (53.3)	29(38.6)	28(24.1)	
Primary	9(12)	32 (42.7)	24(20.7)	
Secondary	6(8.0)	8 (10.7)	29 (25.0)	
Tertiary	20(26.6)	6(8.0)	35 (30.2)	0.090
Monthly income				
<5000	46 (61.3)	42 (62.7)	53 (45.7)	
>5000	29(38.6)	25(37.3)	63 (54.3)	0.013
Age at marriage				
11 -20	6(8.0)	0(0.0)	3 (2.6)	
21 -30	51(68)	39 (58.2)	56 (48.3)	
>30	18 (24.0)	28 (41.7)	57 (49.1)	0.003
Infertility				
Yes	10 (32.3)	6(19.4)	15(48.4)	
No	50(22.0)	77(33.9)	100(44.1)	0.208
Freedom of sexual expression				
No	62(41.3)	51(34.0)	37(24.7)	
Yes	35(32.4)	19(17.6)	54(50.0)	0.000

Table IV: Multivariate Analysis of Violent behaviour and selected Variables

Predictor	AOR	All forms of violence 95% CI	P -value
Age (years)			
< 30	3.191	2.002 – 5.087	
>30	Reference		0.000
Monthly income			
<5000	1.665	1.081 - 2.564	
>5000	Reference		0.001
Age at marriage			
<30	1.027	0.508 – 2.073	
>30	Reference		0.041
Marriage type			
Forced marriage	0.136	0.084 – 0.221	
Love marriage	Reference		0.000
Freedom of Sexual expression			
No	3.917	1.999 – 7.676	
Yes	Reference		0.000

out for marriage at younger age (less than 30 years), and those who were married out forcefully without genuine love with their spouse are more likely to be inflicted with all forms of domestic violence ($\{OR=1.027, (95\% CI= 0.508-2.073) p=0.041\}$ and $\{OR=0.0136 (95\% CI = 0.084-0.221) p=0.000\}$ respectively).

Freedom of sex expression was a strong predictor for all forms of domestic violence against women as the respondents who do not have freedom of expression of sex are about four times more likely to be inflicted with domestic violence of all types $\{OR= 3.917 (95\% CI= 1.999-7.676 p=0.000)$.

DISCUSSION

In this study, the prevalence of all forms of domestic violence among the marriage women in Oiji ward was 67.2% and the predominant pattern was emotional torture. This abuse was commoner in women before their thirties (Tables III and IV). These findings are consistent with a similar study in Benue State where the prevalence of 63.4% was reported.¹³ However, the finding is comparably higher than the finding in a similar study from South Africa (31.0%) ,²² Butajira and Ethiopia (15.1%).²³ The preponderance of emotional/psychological torture in this study could be explained probably due to the fact that emotional torture on its own could occur as a result of physical or sexual violence.

The findings of this study with respect to the perceived reasons of the women's perception concerning their spouses are consistent with the documented global epidemiology of domestic violence reported by some authors.^{13,25} In this study, a high proportion of the married women who had ever suffered domestic violence opined that anytime their husband does not have money they stand the risk of being inflicted. Some reported that they suffered domestic violence due to infertility and use

of contraceptives without permission from husbands. This is probably due to the fact that, majority of the women in this study earned less than five thousand naira monthly (Table I). By implication, women, on their own, do not have decision in birth control. In a situation where the family size which is invariably determined by the husband increased, the women stand the chance of being inflicted; most especially if her monthly income is low. The finding in this study is comparable to reason giving by Utulu regarding domestic violence against women.¹³ In that report, it was thought that women that have many children were at higher risk of domestic violence¹³ and some researchers also reported that domestic violence limits women ability to control sex and the use of contraception.²⁵ In this study, since the decision for birth control is not done by women alone and refusal to have sex or infertility could result to domestic violence it does appear to us that when a woman must have had some children if not all, she may be neglecting certain things which may be provoking violence. Women empowerment in terms of finance, education and decision making is therefore needed to mitigate the effect of domestic violence in rural community. Other reasons like drinking status of the husbands cited in this study are in line with other studies.^{5,17,24}

In this study, majority of the women got married thirty years and some of the women got married as early as 11 years, with the mean age at marriage standing at 23.5 (± 5.48) years. Furthermore, early marriage identified among women in this study was significantly associated with all forms of domestic violence as Women who married before age of 30 years were more likely to experience domestic violence as compared to their counterparts above 30 years $\{OR = 1.027 (95\% CI= 0.508- 2.564) p=0.041\}$. The findings in this study are consistent

with the global finding and the national average reported by other authors.²⁵⁻²⁹ By implication, when there is serious age gap between the husband and the wife. That may eventually lead to women powerlessness with respect to sexuality and reproductive decision and hence violence. The early marriage in this study may be the probable reason for the high level of illiteracy among the married women. A culture of delayed marriage promote girl child education which lead to more responsible family relationship that will be devoid of domestic violence against married women.

In this study women who were forcefully married out without genuine love were more likely to experience domestic violence ($\{OR= 1.027, (95\% CI= 0.508- 2.073) p=0.041\}$). This is further supported by the association between freedom of sex expression and domestic violence demonstrated in this study. Women who do not have freedom of expression of sex are about four times more likely to be inflicted with domestic violence of all types $\{OR= 3.917 (95\% CI= 1.999-7.676 p=0.000$. By implication, women who are marriage without their consent stand the chance of experiencing domestic violence since they are not empowered to negotiate in decisions on anything that has to do with the family. Early marriage is also an indication of forced marriage which this study has also demonstrated. About 55.5% of women who were forced into marriage in this study are more likely to have had domestic violence of all forms as compared to the women who were married out of love. Since majority of the women were forcefully married out, it implies that their first sexual intercourse were forced.

CONCLUSION

The prevalence of domestic violence among married women in Oiji ward is high. The

determinants of domestic violence include age at marriage, forced marriage, monthly income and freedom of sex expression. It was concluded that marriage should be not be forced and women should be free to express themselves in sexual relationships on the basis of love and women empowerment, Gender based violence awareness campaigns and legal protection of women should be encouraged in the rural areas.

REFERENCES

1. UNGASS. The UN General Assembly on HIV/AIDS. Declaration of commitment on HIV/AIDS, Secretary General report of the UNGASS, "the gender inequalities fuelling the epidemic must be explicitly addressed" (para 88). 2001.
2. Booth C. "Women's Right are Human Rights" paper presented at Access to Justice, organized by the British Council, Abuja with support by DFID, 2004.
3. George G. Domestic violence and women's Right Nigeria: In Perspectives on violence against women in Nigeria, 1st edn Aboki publishers, 2005; pg 57-69.
4. Shija MT. "Domestic violence and its Impact on women Rights" paper presented at consultative forum of stakeholders to Discuss Domestic Violence Draft Bill in Benue State held at Gbihi Hotel 4th -5th August, 2004.
5. PATH/UNFPA. Violence against Women: Effects on Reproductive Health, Outlook, 2002; Vol 20 (1): 1-8 (Accessed at www.path.org/publications/files/EOL20_on_8th_April_2014)
6. Annie M. Understanding Domestic Violence: Definitions, scope, impact and response, The Annie E Casey Foundation, 2009; Pg 2.

7. Odimegwu CO. Couple formation and domestic violence among the Tiv of Benue State, Nigeria. Paper presented at the International Colloquium Gender, Population and Development in Africa organized by UAPS, INED, ENSEA, IFORD, Abidjan, 2001
8. Ushie MA, Eneji CVO, Ugal DB, Anyaoha BA, Ushie BA, Bassey JE. Violence against women and reproduction health among African women: The case of Bette women of Obudu in Cross River State, Nigeria, *International Journal of Sociology and Anthropology* 2011; Vol. 3(2):70-76.
9. Finkler K. Gender, domestic violence and sickness in Mexico. *Social Science and Medicine* 1997; 45(8): 1147-1160.
10. UN. Copyright. "Shattering the silence of violence against women" in UN, 2002; Vol. 1, no. 1. UN Chronicles Vol. 35, issue 1.
11. Angya AC. "Introduction to Women's Right", paper presented at a consultative Forum of Stakeholders to discuss the Domestic Violence Draft Bill in Benue State held at Gbihi Hotel, 4th to 5th August, 2004
12. UNICEF. Children's and women Right in Nigeria. A wake-up call: Assessment and analysis, 2001.
13. Utulu SN, Utulu RE. Pattern of Violence against Married women in tertiary institution in Makurdi. In *Perspectives on violence against women in Nigeria*, 1st edn Aboki publishers, 2005; pp 37-69.
14. CEDAW. "Convention on Elimination of All Forms of Discrimination Against Women" UN, 1997.
15. TransAfrica Forum. Africa and Diaspora Women Fact Sheet Series. Domestic violence, 2009: Washington DC: 20006.
16. Odey MO. Violence against women in Nigeria: A casual analysis of Domestic Violence: In *Perspectives on violence against women in Nigeria*, 1st edn Aboki publishers, 2005; pg 71-92.
17. Okpe OO Jr. Re-conceptualizing violence against women: A critique of existing perspectives and their implications for sustainable development. In *Perspectives on violence against women in Nigeria*, 1st Edn. Aboki publishers, 2005; pg 15-36.
18. Aihie ON (2009). Prevalence of Domestic Violence in Nigeria: Implication for Counseling. *Edo Journal of Counseling*, 2(1) 1-6.
19. Okpe OO Jr. Society and violence against women: An Analysis of a Neglected Critical Aspect of the Women Question in Nigeria, in *Review of Gender Studies in Nigeria*, Maiden Issue, March 2002; pg 20-29.
20. Singa P. Introductory test on Biostatistics. Abdullahi Bello, Debco Investments Ltd, Kaduna, 3rd Edn, 2002. Pg 203-207.
21. WHO, *Lot Quality Assurance Sampling (LQAS) to Assess OPV Coverage Nigeria, Operational Manual*, 2012.
22. Hoque M, Hoque ME, Kader S. "Prevalence and experience of domestic violence among rural pregnant women in KwaZulu-Natal, South Africa," *Southern African Journal of Epidemiology & Infection*, vol. 24, no. 4, pp. 34-37, 2009.
23. Workneh D, Gender Based Violence and the Risk of HIV Infection among Women Attending Antenatal Care Service at HIV Sentinel Surveillance Sites in Addis Ababa, Addis Ababa University, Addis Ababa, Ethiopia, 2007.
24. Garcia M, Jansen H, Ellsberg M, Heise L,

- Watts C. WHO Multi-Country Study on Women's Health and Domestic Violence against Women: Initial Results on Prevalence, Health Outcomes and Women's Responses, World Health Organization, Geneva, Switzerland, 2005.
25. UNFPA. Early Marriage in Nigeria. (Accessed *nigeria.unfpa.org/nigeirachild.htm* on 16th Oct. 2014).
 26. UNICEF and Innocenti Research Center . "Early Marriage, Child abuse" Innocenti Digest 7, March, 2001.
 27. Iyabode O. Child Bride and Child Sex: Combating Child Marriages in Nigeria. African Journal Online (AJOL) Accessed at www.ajol.info/index.php/naujilj/article/download/82389/72544 on 4th April, 2013).
 28. Gimba VK, Joseph A. The Socio-Economic Effect of Early Marriage in North Western Nigeria, *Mediterranean Journal of Social Sciences*, 2014; Vol 5 No 14: 582-592.
 29. Janvier R, Julius K. "Exploring educational and socio-economic effects of early marriage: A grounded theory study of the cultural practice of semi-nomadic pastoralist cultures in rural Tanzania", Early Marriage Tragedy in Maasai Society Foundation, 2013.