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PREVALENCE, PREDICTORS AND COPING STRATEGIES OF DOMESTIC VIOLENCE AMONG EVER-MARRIED INDIVIDUALS IN MOTOWOH COMMUNITY LIMBE

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ABSTRACT

Background: Domestic violence is a major public health issue, defined as any act within a formal or informal union that results in physical, sexual, or psychological harm. This study aimed to assess the prevalence, predictors, and coping strategies of domestic violence among ever-married individuals in the Motowoh community, Limbe, Fako Division of the South West Region of Cameroon.

Methods: This community-based study was conducted over eight months (November 2024 to June 2025). Data were collected from couples who had experienced violence using questionnaires. Data analysis was performed using the Statistical Package for Social Sciences version 28.0.

Results: Data analysis revealed a high prevalence of domestic violence of 63.3%, with verbal abuse being the most common form (62.0%). Relationship instability and the age of the relationship were predictors of domestic violence among the study participants with p values of 0.002 and <0.001 respectively. All victims reported discussing their experiences with family or friends as a coping mechanism.

Conclusion: The current study recommends national and regional interventions to promote gender equality through educational campaigns and community-based awareness programs to reduce domestic violence and support affected individuals.

Keywords: Prevalence, Predictors, Domestic Violence, Coping strategies, Couples, Limbe, Cameroon

INTRODUCTION

Domestic violence commonly used when there is a close relationship between the offender and the victim is a significant public health problem [1]. It is usually meted on women and is the most common and prevalent type of violence against women worldwide. Violence against women remains one of the world's most persistent and under addressed human rights crisis with little progress in two decades. It is experienced by over a third of all women worldwide, necessitating immediate action [2]. In Cameroon, it is reported that nearly one in every three women have experienced partner or sexual violence during their life time [3].

The Least Developed Countries have the highest lifetime prevalence of domestic violence among women aged 15–49 years. The highest rate of lifetime domestic violence is in Southern Asia (35%) and Sub-Saharan African countries (33%) [4]. It is reported that 16% of young women aged 15 to 24 years encounter domestic violence in a year, and nearly 1 in 4 adolescent girls in the 15–19 years age cohorts are believed to have experienced physical and/or sexual abuse at the hands of an intimate partner [5]. It has substantial immediate, medium, and long-

term implications on the well-being of women, children, and families [6]. Domestic violence can cause injuries, homicide or suicide, sexually transmitted infections like HIV, stillbirth, pre-term delivery, low birth weight, depression, post-traumatic stress disorder, and other anxiety disorders [7].

According to the United Nations Population Fund, Africa's high rate of violence against women and girls (VAW) is due to the continuation of detrimental gender norms, alcohol consumption, and overall increased poverty and conflict. Over the last three decades, many global consensus papers and regional conventions have issued forceful appeals to abolish violence against women. For instance, the sustainable development goals (SDG) 3 and 5, under their respective targets 7 and 2, respectively, set an agenda for the "elimination of all forms of violence against all women and girls in the public and private spheres, including trafficking, sexual and other types of exploitation, achieving gender equality, and empowering all women and girls. However, there is limited availability of data in our setting on the prevalence and coping strategies of domestic violence.

METHODS

Study Area and Setting

This study was conducted at Motowoh community. A local community found in Limbe, Fako Division of the South West Region of Cameroon.

Study Design and Duration

This study combines a hybrid study which was a descriptive cross-sectional for the prevalence and prospective study design for the associated risk factors and coping strategies which was carried out for a period of Eight months (November 2024 to June 2025).

Study Population and Sampling

A total of 79 ever married individuals leaving in the community were included in this study. The study participants were selected using a consecutive sampling technique. The study excludes participants who willingly turn down the option to participate in the study and also partners who were seriously sick at the time of data collection and those who were co-habituating.

Data Collection and Techniques

The study data was collected using a pretested semi-structured questionnaire. The

questionnaire was divided into four sections, namely: section A: Socio demographic data of participants, section B: Prevalence of domestic violence, Section C: predictors of domestic violence and section D assessed the coping strategies.

Data Analysis

Data analysis was performed using the Statistical Package for Social Sciences (SPSS) Version 28.0 for windows. Results were presented on frequency distribution tables and pie charts.

RESULTS

Socio-demographic description of study participants

The mean age of participants was 35.23 ± 7.74 years and most (27.8%) were within the age range 36-42 years. Also 27.8% have attained a tertiary level of education, 67.1% have been in their relationship for over 5 years. As regards the stability of the relationship, 52 (65.8%) mentioned their relationship was moderately stable and 02 (2.5%) mentioned they were leaving in an abusive relationship (Table 1).

Table 1: Socio-demographic description of study participants, Motowoh Limbe, May 2025 (n=79)

Characteristic	Frequency	Percentage %
Age range/years		
22-28	20	25.3
29-35	20	25.3
36-42	22	27.8
43-49	17	21.5
Highest level of education completed		
Primary (FSLC)	20	25.3
Secondary (O/L)	17	21.5
High school (A/L)	20	25.3
Tertiary (HND, BSc)	22	27.8
Age of relationship/years		
1-3	19	24.1
3-5	07	8.9
>5	53	67.1
Description of relationship		
Moderate stable	52	65.8
Abusive	02	2.5
Conflictual	25	65.8

Prevalence of domestic violence among ever married individuals at Motowoh Community (2025)

A total of 50 participants reported to have experience domestic violence giving a prevalence of 63.3% (95% CI: 52.7-73.9%). The type of violence experienced as reported by participants include verbal abuse (62%), manipulations (56%), slapping (34%), threats (6%) and hitting (2%) (Figure 1).

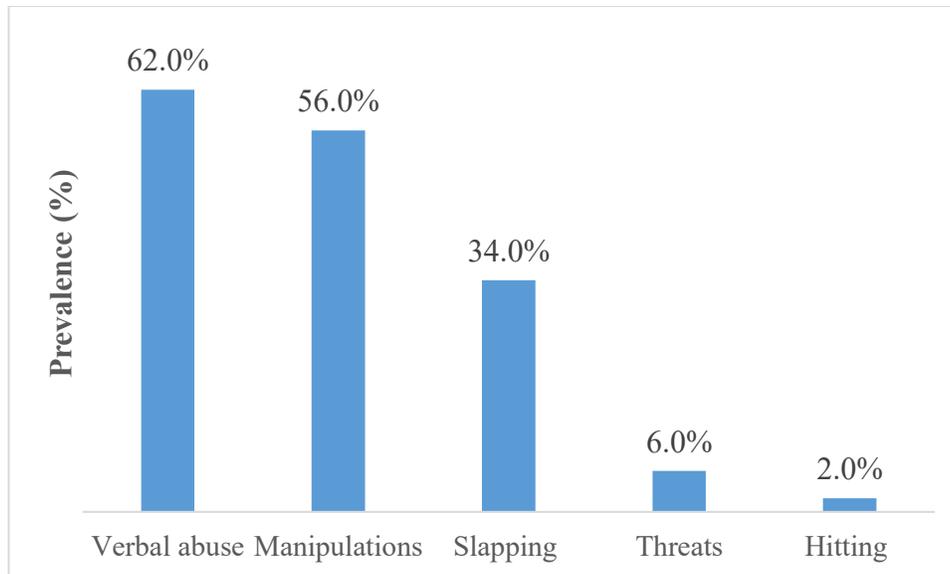


Figure 1: Prevalence and types of domestic violence among ever married individuals at Motowoh Community (n=50)

Predictors of domestic violence among ever married individuals at Motowoh Community

The prevalence of domestic violence was statistically associated with the stability of the relationship ($p=0.002$) and the age of the relationship ($p < 0.001$). Other factors including family history of violence, history of alcohol consumption and mental issues were not statistically associated (P value > 0.05) with the occurrence of domestic violence (Table 2).

Table 2: Predictors of domestic violence among ever married individuals, Motowoh Limbe May 2025 (n=79)

Variable	Experience violence		P value
	Yes n= 50 (%)	No=29 (%)	
Stability of relationship			
Abusive	01 (2.0)	01 (3.4)	0.002
Conflictual	23 (46.0)	02 (6.9)	
Moderately stable	26 (52.0)	26 (89.7)	
Age of relationship/years			
1-3	06 (12.0)	13 (44.8)	<0.001
3-5	02 (4.0)	05 (17.2)	
>5	42 (84.0)	11 (37.9)	
History of violence			
Yes	17 (34.0)	04 (13.8)	0.05
No	33 (66.0)	25 (86.2)	
History of drug/alcohol consumption			
Yes	45 (90.0)	24 (82.8)	0.35
No	05 (10.0)	05 (17.2)	
Mental health issues			
Yes	02 (4.0)	01 (3.4)	0.90
No	48 (96.0)	28 (96.6)	
Cultural norms			
Yes	02 (4.0)	00 (0.0)	0.41
No	48 (96.0)	29 (100.0)	

P values <0.05 are statistically significant

Coping strategies of domestic violence among ever married individuals in Motowoh Community

Among the 50 women who have experience domestic violence, the coping strategies reported include discussing with family members/friends (100%), utilization of specific techniques to calm partner (86%), relaxation activities (86%) and seeking for professional counselling (5%) (Figure 2).

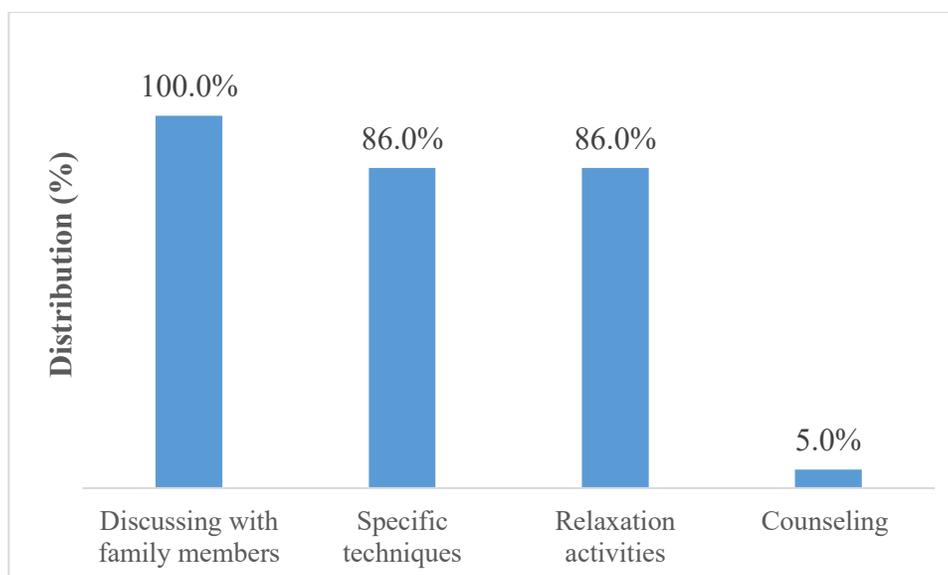


Figure 2: Coping strategies of domestic violence among ever married individuals, Motowoh Limbe, May 2025 (n=50)

DISCUSSION

Domestic violence remains a significant public health concern across the globe. Its adverse consequences on the physical, psychological and social wellbeing of individuals especially women are not to be under looked at. The current study examined the prevalence, associated risk factors and coping strategies of domestic violence among ever married women in the Motowoh community.

The study found that 63.3% of the participants had experienced domestic violence. The high prevalence signals a serious concern for the

community and indicates the need for targeted interventions. The findings of this study are consistent with those of other studies in Sub-Saharan Africa where WHO reported that over 60% of women in this region have experienced intimate partner violence [8]. Our findings were higher than those reported by Wado *et al* (2021) where they reported the prevalence of domestic violence elsewhere in Cameroon to be 49.7% [9]. However, the findings of the current study were lower than the 73.3% prevalence of domestic violence reported by Oluwole *et al* (2020) among women in Lagos, Southwest Nigeria [10]. The difference in the findings may be due to a

difference in the study settings suggesting the environment might likely influence the occurrence of domestic violence.

Verbal abuse (62%) was the most common reported type of domestic violence. This finding agrees with the Jewish family service take on domestic violence where they stated that verbal abuse most especially in the early stages of the relationship was the most common type of domestic violence [11]. Also, Rivas *et al* (2017) in their study reported that the prevalence of verbal abuse in their study was 95.3% [12].

In the current study, the stability of the relationship and the age of the relationship were factors associated with the occurrence of domestic violence. Women in conflictual or abusive relationships were significantly more likely to experience domestic violence. Also, women in long term relationships (>5 years) had significant higher rates of reported violence. In line with the findings of the current study where a history of alcohol consumption was not significantly associated with the occurrence of domestic violence, Oluwole *et al* (2020) also did not find any relationship ($p=0.06$) between history of alcohol consumption by partner and the occurrence of domestic violence [10]. In contrast to the observation of this study which did not find any association between a history

of domestic violence and the occurrence of domestic violence, Adjah *et al* (2016) reported that the prevalence of domestic accident was higher in relations where the partners father ever beat the partners mother [13]. The difference could have been due to a difference in the cultural environment.

In the current study, 100% of domestic violence victims reported discussing their situation with family members or friends. In line with our findings, the National Institute for Healthcare reported that domestic violence victims primarily turn to family members or friends for support rather than seeking for professional counselling as observed in this study. Also, Nurul *et al* (2023) reported that victim partners turn to the couple's family members and close friends to seek for psychological protection and assistance [14].

Conclusion

This study reported a high prevalence (63.3%) of domestic violence among ever-married women in Motowoh community, with verbal abuse being the most common form. Domestic violence was significantly associated with relationship instability and longer relationship duration. Most of victims coped by talking to family and friends, while few sought professional helps. These findings highlight the need for targeted community

interventions and support systems for women in vulnerable relationships.

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Conflict of interest

The authors declare no conflict of interest

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