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Knowledge and Prevalence of Gender-Based Violence Among Adolescents in Molete High School Ibadan, Oyo State

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Abstract

Gender-based violence among adolescents is a critical public health issue, as its prevalence and the level of knowledge about it significantly influence efforts to address and prevent it. This study assessed the knowledge and prevalence of gender-based violence (GBV) among adolescents at Molete High School, Ibadan, Oyo State, with a focus on identifying influencing factors. Theory of Routine activity was adopted. A cross-sectional design was employed, and data were collected from 100 purposively selected questionnaire. structured using validated a questionnaire socio-demographic data, addressed prevalence, and factors influencing GBV. Descriptive statistics was used to analyse the data. Results revealed that 83% of respondents were aware of GBV, with varying knowledge of its forms, including emotional abuse (85%) and denial of basic rights (88%). The prevalence of GBV was concerning, with 21% of respondents reporting inappropriate touching, though rape was not reported. The main perpetrators were friends (20%), and underreporting was attributed to factors such as fear and shame. Influential factors included gender inequality (41%), poverty (43%), peer influence (47%), and lack of comprehensive sexuality education (53%). The findings underscore the urgent need for targeted interventions to address GBV among adolescents. Enhanced awareness campaigns, policy measures to reduce socio-economic disparities,

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comprehensive sexuality education are recommended. This study highlights the importance of creating a supportive environment for victims to report GBV and fostering societal attitudes that deter such violence.

Keywords: Adolescents, Gender-Based Violence, Knowledge,

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Introduction

Worldwide, gender-based violence (GBV) is an escalating public health issue. Adolescents are especially vulnerable, with around 150 million girls and 73 million boys impacted globally. The majority of these youngsters are girls in Africa (WHO, 2023). Gender-based violence is perpetuated by ignorance and detrimental cultural or religious ideas and practices. Approximately 30% of women who have been in a relationship have encountered physical or sexual violence, with a heightened regional frequency of about 37% in Africa, the Eastern Mediterranean, and Southeast Asia (Decker, et al.,2020). The age-disaggregated prevalence of violence exposure among teenagers who have ever been in a relationship was 29.4% in the 15-19 age group, indicating that violence often begins early in partnerships among women (WHO, 2023). Reports indicated that 7% of unpartnered women have encountered sexual violence (WHO, 2022). The UN Secretary-General's Global Study on Violence against Children revealed that while the prevalence of violence against adolescents is difficult to quantify due to its clandestine nature, approximately 150 million girls and 73 million boys have experienced sexual abuse (Badri, 2019).

The World Health Organisation defines gender-based violence (GBV) as "the deliberate application of force, power, or authority, whether threatened or actual, against oneself, another individual, or a group or community, potentially leading to injury, death, psychological harm, or other forms of deprivation" (Lundgren, et al., 2020). Gender-based violence is a worldwide issue that transcends geographical, cultural, social, economic, ethnic, and other borders. It is a manifestation of violence enacted due to gender disparities (Emergency Violence Against Women Act, 2019). Adolescents globally face challenges including female genital mutilation, child trafficking, forced marriage, sexual assault, child work, bullying, and various forms of hardship. Adolescents are vulnerable to both intimate relationship violence and non-partner sexual violence, which are kinds of gender-based violence (Pitpitan, et al., 2020). Both genders are vulnerable to various types of sexual violence, albeit to disparate and differing extents. Females are generally more vulnerable to sexual abuse than males (UN, 2020).

Violence perpetrated by women against men exists, however it is rarely studied and frequently minimised, complicating men's ability to seek assistance (UNFPA, 2019). In African contexts, norms and traditions often prioritise male children over female children within the familial sphere, fostering gender inequity, diminishing the self-esteem of adolescent girls, and exacerbating violence against them (Mosavel, et al., 2019). Substance addiction and alcohol consumption are acknowledged elements that can influence an individual's mental state and behaviour, resulting in aggressive actions (Mosavel, et al., 2019). Violence may manifest within domestic settings, educational institutions, religious establishments, and the broader community. Parents, siblings, foster parents, guardians, uncles, aunts, neighbours, acquaintances, and strangers bear responsibility for domestic violence. Disadvantaged children, including orphans, street children, child refugees, and disabled children, are generally more vulnerable within the community. In many instances, the assailants are familiar to the victims, and incidents often go unreported owing to ignorance, inexperience, fear imposed by the offender, threats, stigma, humiliation, or the assailant being a close family member (WHO, 2023).

According to the WHO (2020), 35% of adolescent females globally had encountered either physical or sexual violence from intimate relationships or sexual violence from non-partners. Worldwide, 7% of teenagers have experienced sexual assault by an individual other than their

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spouse (WHO, 2023). Possessing adequate knowledge and an accurate understanding of gender-based violence is a crucial measure to mitigate this age-related issue in society. Adolescence is a pivotal phase between childhood and adulthood characterised by significant biological, physical, and psychological developmental changes (Heise, et al., 2020). Any traumatic experience during this period might establish the groundwork for future manifestations in the individual; therefore, it is imperative to promote optimal physical and psychological well-being in adolescence (Mamoud, 2019). The repercussions of violence can provide both immediate and enduring detrimental effects, adversely impacting an individual's emotional, physical, sexual, and reproductive health. Individuals exposed to trauma often exhibit suicidal tendencies, depression, post-traumatic disorders, hazardous sexual behaviour, and substance abuse (Adika, et al., 2021).

Females may experience the consequences of unintended pregnancy and susceptibility to HIV and other sexually transmitted illnesses. Adolescent females who experienced childhood sexual abuse are more prone to engage in risky sexual behaviours and have several sexual partners (UN, 2020). Adolescents exposed to domestic abuse are more likely to perpetrate violence against others. High school adolescents are vulnerable to numerous forms of violence and assault, which often go unreported due to their limited comprehension of the concept of violence. The majority of gender-based violence incidents are perpetrated by individuals familiar to the victims (UN, 2019). Conducting GBV investigations in environments potentially devoid of perpetrator influence, such as educational institutions, may mitigate the issue of underreporting. Most research on gender-based violence in Nigeria primarily examines the adult demographic, resulting in a scarcity of data regarding the patterns, trends, and rates of gender-based violence among adolescents in Nigeria (UN, 2023). The aim of the study is to assess the Knowledge and Prevalence of Gender-Based Violence among Adolescents in Molete High School Ibadan, Oyo State. The study specifically were to:

- 1. assessed the knowledge of adolescents on gender-based violence in Molete High School Ibadan, Oyo State;
- 2. determined the prevalence of gender-based violence among adolescents in Molete High School Ibadan, Oyo State; and
- 3. identified factors influencing gender-based violence among adolescents in Molete High School Ibadan, Oyo State.

Materials and Methods

The study employed a descriptive cross-sectional research design, the study population comprised all senior secondary school students (SSS1 to SSS3) at Molete High School, with a total of 207 students distributed across SSS1 (101 students), SSS2 (56 students), and SSS3 (50 students). The sample size was determined using Taro Yamane's formula, which calculated the required number of participants as 136. Attrition was taken care of making the final sample size to 151 whereby 50% of the calculated population. from each class was selected which amounted to 100 students. These participants were selected using a purposive sampling technique, ensuring that only students who met the inclusion criteria were recruited and had signed informed consent forms. Data collection was facilitated through a validated structured questionnaire designed to gather information on socio-demographic characteristics, knowledge, prevalence, and factors influencing gender-based violence. The instrument was divided into four sections: Section A, B, C and D. The questionnaire underwent validity testing and reliability coefficient of 0.8. Exploratory factor analysis was

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conducted to enhance clarity and ensure the instrument accurately measured the intended constructs.

Data was collected with obtained written informed consent. Participants were assured of confidentiality, and their participation was voluntary, with no coercion or penalties for refusal. A total of 100 questionnaires were distributed, and participants were given time to complete them. One hundred (100) completed questionnaires were collected, coded, and prepared for analysis. Thus, analysis was done on the correctly filled and collected questionnaire.

The data was analyzed using IBM SPSS version 25. Descriptive statistics were employed to summarize socio-demographic characteristics and other variables. The research objectives guided the analysis, with frequencies and percentages used to assess knowledge, prevalence, and influencing factors. Inferential statistics, specifically chi-square tests, were used to test hypotheses and determine relationships between variables. Significance was set at p<0.05. Findings were presented in frequency tables and charts for clarity and ease of interpretation. Ethical considerations were paramount throughout the study. Approval was obtained from relevant authorities, and the principles of confidentiality and non-maleficence were strictly upheld.

Results

Table 1: Analysis of Demographic Characteristics of the Respondents

Socio-demographic Data	Frequency	Percentage (%)
Age		
12-15	70	70
16 – 19	30	30
Total	100	100%
Class Level		
SSS1	42	42
SSS2	30	30
SSS3	28	28
Total	100	100%
Religion		
Christianity	44	44
Islam	46	46
African Traditional	10	10
Others	0	0
Total	100	100%

Table 1 above shows the demographic variables of respondents, age range 70% were within 12-15 years and 30% were within 16-19 years. 42% were in SSS1, 30% were in SSS2, and 28% were in SSS3. 44% were practicing Christianity religion, 46% were practicing Islamic religion, and 10% were practicing Traditional religion.



Table 2: Analysis of Knowledge of Adolescents on Gender-Based Violence

S/N	Items	YES	NO
-		F(%)	F(%)
1.	Have you heard of Gender Base Violence?	83	17
		(83%)	(17%)
2.	Verbal abuse	77	23
		(77%)	(23%)
3.	Physical abuse	81	19
		(81%)	(19%)
4.	Emotional abuse	85	15
		(85%)	(15%)
5.	Psychological	74	26
		(74%)	(26%)
6.	Sexual abuse	79	21
		(79%)	(21%)
7.	Denial of rights to food	88	12
		(88%)	(12%)
8.	Denial of rights to shelter	80	20
		(80%)	(20%)

Table 2 above shows the Knowledge of Adolescents on Gender-Based Violence. 83% have heard of Gender-Based Violence. As regards various forms of Gender-Based Violence, the respondents identified verbal abuse 77%, physical abuse 81%, emotional abuse 85%, psychological 74%, sexual abuse 79%, denial of the rights to food 88%, denial of the rights to shelter 80%.

Table 3: Analysis of Prevalence of gender-based violence among adolescents

S/N	Items	YES	NO
		F(%)	F(%)
1.	I have been raped before	0	100
			(100%)
2.	My breast has been touched forcefully before	9	91
		(9%)	(91%)
3.	I have been touched in the private parts before	21	79
		(21%)	(79%)
4.	I have been forcefully kissed before.	16	84
		(16%)	(84%)
5	Perpetrators of the assaults are:		
A.	Friends	20(20%)	
b.	Teachers	5(5%)	
c.	Relations	8(8%)	
d.	Neighbors	6(6%)	
e.	Strangers	7(7%)	
6.	Did you ever make formal report about the assault?	10(10%)	

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	If No why?	
a)	Shame	7(7%)
b)	Threats	6(6%)
c)	Fear	7(7%)
d)	Stigma	4(4%)
e)	Discrimination	5(5%)
f)	The fact that parents will be disappointed	4(4%)
g)	The notion that the authorities will not act	3(3%)

The table summarises the prevalence of gender-based violence among adolescents. None of the respondents reported having experienced rape, but other forms of sexual violence were noted. Specifically, 9% reported having their breasts touched forcefully, 21% revealed they had been touched in their private parts, and 16% indicated they had been forcefully kissed. In terms of the perpetrators, 20% identified friends as the assailants, while 5% pointed to teachers, 8% to relatives, 6% to neighbours, and 7% to strangers. Despite these incidents, only 10% of respondents formally reported the assault. Among those who did not report, fear (7%) and shame (7%) were the most cited reasons for remaining silent, followed by threats (6%), discrimination (5%), stigma (4%), fear of disappointing their parents (4%), and the belief that authorities would not take action (3%).

These findings highlight the underreporting of gender-based violence and the various sociocultural and psychological barriers that prevent adolescents from seeking help. It also underscores the need for enhanced support systems and awareness campaigns to address these barriers and provide a safe environment for victims to report such incidents.

Table 4: Analysis of Factor influencing gender-based violence among ac S/N ITEMS Strongl Agree Undecide Str						
S/N	HEMS	_	Agree		Strongl	Disagre
		y Agree	F(%)	d E(0/)	у	e E(0/)
		F(%)		F(%)	Disagre	F(%)
					e	
					F(%)	
	Factors influencing GBV					
	among adolescents are:					
1.	Gender inequality	41	20	9	16	14
		(41%)	(20%)	(9%)	(16%)	(14%)
2.	Poverty	43	22	0	20	15
		(43%)	(22%)		(20%)	(15%)
3.	Low self esteem	39	21	8	16	16
		(39%)	(21%)	(8%)	(16%)	(16%)
4.	Mental health issues	40	20	0	25	15
		(40%)	(20%)		(25%)	(15%)
5.	Media influence	45	16	0	19	20
		(45%)	(16%)		(19%)	(20%)
6.	Peer influence	47	13	0	22	18
		(47%)	(13%)		(22%)	(18%)
7.	Alcohol abuse	51	20	0	19	10

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		(51%)	(20%)		(19%)	(10%)
8.	Lack of comprehensive	53	23	0	24	0
	sexuality education	(53%)	(23%)		(24%)	
9.	Limited economic opportunity	46	21	10	23	0
	for female adolescents	(46%)	(21%)	(10%)	(23%)	
10.	Cyber-bulling	44	20	5	11	20
		(44%)	(20%)	(5%)	(11%)	(20%)
11.	Online harassment	50	21	0	20	9
		(50%)	(21%)		(20%)	(9%)
12.	Lack of legal protection	54	20	6	12	8
		(54%)	(20%)	(6%)	(12%)	(8%)
13.	Exposure to violence	43	21	6	15	15
		(43%)	(21%)	(6%)	(15%)	(15%)
14.	Social and cultural believes	40	30	0	27	3
		(40%)	(30%)		(27%)	(3%)
15.	Substance abuse	51	19	0	17	13
		(51%)	(19%)		(17%)	(13%)
16.	History of abuse	42	22	11	10	15
		(42%)	(22%)	(11%)	(10%)	(15%)

The table highlights the factors influencing gender-based violence among adolescents based on participants' responses. A significant proportion of respondents identified key factors contributing to gender-based violence. Among them, gender inequality was recognised as a major factor, with 41% strongly agreeing and 20% agreeing. Similarly, poverty was noted as an influence, with 43% strongly agreeing and 22% agreeing. Other significant factors included low self-esteem (39% strongly agreeing and 21% agreeing) and mental health issues (40% strongly agreeing and 20% agreeing). The media was also considered a notable influence, with 45% strongly agreeing and 16% agreeing. Peer pressure was another major factor, with 47% strongly agreeing and 13% agreeing. Additionally, alcohol abuse was highlighted by 51% of respondents strongly agreeing and 20% agreeing, while lack of comprehensive sexuality education had 53% strongly agreeing and 23% agreeing.

Economic factors were also noted, with 46% strongly agreeing and 21% agreeing that limited economic opportunities for female adolescents contribute to gender-based violence. Cyberrelated issues, such as cyber bullying (44% strongly agreeing and 20% agreeing) and online harassment (50% strongly agreeing and 21% agreeing), were also highlighted. Furthermore, lack of legal protection was identified by 54% strongly agreeing and 20% agreeing as a critical factor. Other important influences included exposure to violence (43% strongly agreeing and 21% agreeing), social and cultural beliefs (40% strongly agreeing and 30% agreeing), substance abuse (51% strongly agreeing and 19% agreeing), and history of abuse (42% strongly agreeing and 22% agreeing). Collectively, these factors underscore a complex interplay of personal, social, and systemic issues that contribute to gender-based violence among adolescents.

Discussion of Findings

The study highlights the demographics and prevalence of gender-based violence (GBV) among adolescents, with respondents predominantly aged 12–15 years and distributed across different stages of secondary school education. Christianity and Islam emerged as the

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dominant religions, with a smaller proportion practicing traditional religion. Most respondents (83%) have heard of GBV, indicating significant awareness. They identified various forms of GBV, including verbal, physical, emotional, psychological, and sexual abuse, as well as the denial of rights to food and shelter. These findings align with Badri (2019), who reported high awareness levels of GBV but noted gaps in understanding specific forms.

Regarding prevalence of GBV, none of the respondents reported rape, but some had experienced inappropriate touching or forceful kissing. Perpetrators were identified as friends, teachers, relatives, neighbors, and strangers. Reporting rates were low, with barriers including fear, shame, threats, stigma, and skepticism about authorities' actions. These results are consistent with David (2019), who found a similar prevalence of sexual assault, low reporting rates, and significant barriers to disclosure.

Respondents identified various factors influencing GBV. Many linked it to gender inequality, poverty, low self-esteem, mental health issues, and substance abuse. Media influence and peer pressure were also highlighted as contributors. Additionally, respondents noted the role of limited economic opportunities, lack of comprehensive sexuality education, and inadequate legal protections in exacerbating GBV. Online harassment and cyber bullying were recognized as significant contributors to GBV in the digital age. Social and cultural beliefs and exposure to violence were also acknowledged as perpetuating factors. These findings are in agreement with David (2019), who identified similar factors, including gender inequality, poverty, and substance abuse, as key drivers of GBV among adolescents.

Conclusion

In conclusion, examining the awareness and incidence of gender-based violence (GBV) among teenagers offers significant insights into the complex nature of this widespread phenomenon. Comprehending adolescents' understanding of gender-based violence and the incidence of violence in their communities is crucial for formulating targeted interventions and support services. Addressing information gaps, challenging stereotypes, and implementing evidence-based prevention methods are critical for establishing safer and more supportive environments for adolescents, free from gender-based violence. Ongoing research, campaigning, and intersectoral collaboration are essential to successfully tackle the underlying causes of gender-based violence and to advance gender equality and safety for all adolescents.

Recommendations

Based on the researchers' findings, the following recommendations were made;

- 1. Establish comprehensive sexuality education programs in educational institutions and communities to furnish teenagers with precise information regarding gender, relationships, consent, and healthy sexuality. These initiatives must focus on raising awareness of gender-based violence, implementing preventative techniques, and providing support services.
- 2. Formulate peer education and support groups that enable teenagers to candidly address gender-based violence, exchange experiences, and obtain peer assistance. Peer-led efforts can effectively contest detrimental norms and enable teenagers to champion change within their social circles.
- 3. Facilitate training for healthcare professionals, particularly nurses, to enhance their expertise in recognising, addressing, and assisting adolescents impacted by gender-based violence (GBV). This training must prioritise trauma-informed treatment, confidentiality, and referral paths to specialised providers.

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- 4. Execute community-oriented initiatives that involve adolescents, families, educational institutions, and local organisations in efforts to avoid gender-based violence. These interventions may encompass awareness campaigns, workshops, and community discussions aimed at addressing social norms, attitudes, and behaviours associated with gender-based violence (GBV).
- **5.** Advocate for policy reforms and legal protections that prioritize the rights and safety of adolescents, particularly girls and marginalized populations, who are disproportionately affected by GBV. This includes strengthening laws against GBV, ensuring access to justice for survivors, and promoting gender equality in all sectors.
- **6.** Invest in research and data collection initiatives to better understand the factors influencing GBV among adolescents and evaluate the effectiveness of prevention and intervention programs. This includes collecting disaggregated data by age, gender, socioeconomic status, and other relevant demographics to inform evidence-based policies and interventions.

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