



Volume 28 | Number 1

Article 12

1-15-2023

Context and Indigenous Structures for Managing Family Violence in a Yoruba Community

Oluwasayo Bolarinwa Ogunlade Dr Obafemi Awolowo University, Ile-Ife, Nigeria., bolaogunlade@gmail.com

Adekemi E. Olowokere Dr. Obafemi Awolowo University, Ile-Ife

Ojo M. Agunbiade Dr Obafemi Awolowo University, Ile-Ife

Aanuoluwapo O. Olajubu Dr. *Obafemi Awolowo University, Ile-Ife*

Oyeyemi O. Oyelade Obafemi Awolowo University, Ile-Ife

See next page for additional authors

Follow this and additional works at: https://nsuworks.nova.edu/tgr

Part of the Quantitative, Qualitative, Comparative, and Historical Methodologies Commons, and the Social Statistics Commons

Recommended APA Citation

Ogunlade, O. B., Olowokere, A. E., Agunbiade, O. M., Olajubu, A. O., Oyelade, O. O., & Irinoye, O. O. (2023). Context and Indigenous Structures for Managing Family Violence in a Yoruba Community. *The Qualitative Report, 28*(1), 177-199. https://doi.org/10.46743/2160-3715/2023.5310

This Article is brought to you for free and open access by the The Qualitative Report at NSUWorks. It has been accepted for inclusion in The Qualitative Report by an authorized administrator of NSUWorks. For more information, please contact nsuworks@nova.edu.



Context and Indigenous Structures for Managing Family Violence in a Yoruba Community

Abstract

Most investigations on domestic violence in family relationships have centered around men as the perpetrators of violence without exploring the context of violence occurrence from a gender lens and other social factors. This study explored the meanings associated with family violence, the contexts for its occurrence, and the indigenous approaches to managing such conflicts among the Yoruba ethnic subgroup in southwest Nigeria. This was an exploratory cross-sectional study guided by an interpretative constructivist approach in which 20 community stakeholders were recruited through purposive sampling. The data were collected via in-depth interview (IDI) and focus group discussion (FGD). Findings from the study showed that both men and women in family relationship contribute to the occurrence of family violence, although the forms perpetrated differ by gender. Religious leaders were identified as key indigenous structure for effective management of family violence among other indigenous structures (extended family mediation and community/royal father interventions). The study showed that these groups of people are also affected by societal male dominance belief which has contributed to occurrence of family violence. The study concluded that an indigenous intervention that will help control family violence among this group must focus on strengthening community structures; most importantly, the religious institutions on how to instill mutual respect among couples and train them on conflict resolution skills as family violence in the group is seen as issue that should not be taken out of the community structures.

Keywords

intimate relationship, violence, gender, qualitative study, indigenous intervention

Creative Commons License



This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 4.0 International License.

Acknowledgements

The authors wish to express sincere gratitude to NMCN-MCPDP Southwest zone Committee for providing financial support for the data collection and analysis. Prof. Omolola Irinoye, of the Department of Nursing Science, Obafemi Awolowo University is acknowledged for assisting with the review of the concept note and the instruments used for the study.

Authors Oluwasayo Bolarinwa Ogunlade Dr, Adekemi E. Olowokere Dr., Ojo M. Agunbiade Dr, Aanuoluwapo O. Olajubu Dr., Oyeyemi O. Oyelade, and Omolola O. Irinoye Professor						



Context and Indigenous Structures for Managing Family Violence in a Yoruba Community

Oluwasayo B. Ogunlade¹, Adekemi E. Olowokere¹, Ojo M. Agunbiade², Aanuoluwapo O. Olajubu¹, Oyeyemi O. Oyelade¹, and Omolola O. Irinoye¹
¹Department of Nursing Science, Obafemi Awolowo University, Ile-Ife, Nigeria
²Department of Sociology and Anthropology, Obafemi Awolowo University, Ile-Ife, Nigeria

Most investigations on domestic violence in family relationships have centered around men as the perpetrators of violence without exploring the context of violence occurrence from a gender lens and other social factors. This study explored the meanings associated with family violence, the contexts for its occurrence, and the indigenous approaches to managing such conflicts among the Yoruba ethnic subgroup in southwest Nigeria. This was an exploratory cross-sectional study guided by an interpretative constructivist approach in which 20 community stakeholders were recruited through purposive sampling. The data were collected via in-depth interview (IDI) and focus group discussion (FGD). Findings from the study showed that both men and women in family relationship contribute to the occurrence of family violence, although the forms perpetrated differ by gender. Religious leaders were identified as key indigenous structure for effective management of family violence among other indigenous structures (extended family mediation and community/royal father interventions). The study showed that these groups of people are also affected by societal male dominance belief which has contributed to occurrence of family violence. The study concluded that an indigenous intervention that will help control family violence among this group must focus on strengthening community structures; most importantly, the religious institutions on how to instill mutual respect among couples and train them on conflict resolution skills as family violence in the group is seen as issue that should not be taken out of the community structures.

Keywords: intimate relationship, violence, gender, qualitative study, indigenous intervention

Violence is a significant social and global health problem. The World Health Organisation defined violence as denoting physical force, aggression, purposeful intent, the direction of intent, and the possibility of actual physical or psychological harm (World Health Organisation, 2002). Violence occurs at different spheres of human interaction, but it is more pronounced in family settings (Xu et al., 2019). Family violence in its various forms remains a public health problem that is primarily seen as a gendered phenomenon, with men primarily as perpetrators and women as victims (Stith & McCollum, 2011). Evidence has shown that one in three women throughout the world will experience a form of family violence such as physical or sexual violence from a partner or non-partner in her lifetime (World Health Organisation, 2018). This has been associated with the unequal power relations between men and women either from the visible physical strength or patriarchy-reinforced power imbalance among spouses (Makama, 2013, Shore, 2019). It has, however, been reported that men also have their share of adverse consequences of domestic violence (Oladepo et al., 2011).

The growing burden of physical, emotional, and sexual family violence in Africa appears more distressing in the sub-Saharan part where most cases are unreported and often unknown to the public until a partner is dead or gravely injured. Nigeria is one of such countries in sub-Saharan Africa where under-reporting of family violence remains a challenge (Obagboye, 2019)). Most investigations of domestic violence in family relationships have centered on men as the perpetrators of violence; however, this is not to deny that cases of men being victims of domestic violence do not exist (Oladepo et al., 2011).

Across different African communities where patriarchal ideas are dominant, married individuals (mostly in heterosexual relationships) are socialised into the prevailing norms, values, and practices that are considered functional to maintaining harmonious interactions with their partners and in-laws. Conformity or compliance with these social expectations is sometimes interpreted as functional and perhaps useful in building and sustaining cooperation, cohesion, and harmonious interactions. From a functional stance, a close-knit family provides emotional support, promotes economic well-being, and increases the overall health of its family members (Fosco et al., 2012). In contrast, a dysfunctional family is characterised by conflict and violence with negative influences on the physical and psychological health of its family members (Barthassat, 2014).

In any case, whether a family is experiencing harmony and is less vulnerable to tension and violence, or perhaps the opposite, the boundary between harmonious and violence-prone family relations remains fluid and is driven by the intersections of structurally, communally, and individually-orientated factors. However, the fluidity in the occurrence of family violence, the structures that are considered functional and effective in addressing its occurrence and how to mitigate its impacts on individuals and other stakeholders in a family are better understood within contexts. Evidence has shown that couples in marriages are active co-constructors of factors that affect the quality of their relationships and their family members (Knudson-Martin & Huenergardt, 2015).

Results from earlier pockets of small-scale studies across different locations in the southwestern part of Nigeria documented a high prevalence of partner violence ranging from 32% to 48% across different households (Alo et al., 2012; Mapayi et al., 2013). The results from these studies portrayed family violence as a recurring phenomenon, but with gaps in the data, given that it was gathered mostly from women victims of partner violence with minimal consideration for the context of occurrence of violent episodes. Hence, it is pertinent to explore the contexts, meanings attached to family violence, and preferred mechanisms of addressing this reality from a community lens among the Yoruba ethnic subgroup of Nigeria. This study provides some fresh insights into contextual issues that might be contributing to occurrence of violence in family relationships and possible intervention to prevent or reduce it.

Theoretical Foundation for the Study

This study was underpinned by the family system theory (Johnson & Ray, 2016), which holds that individuals within families are intricately connected to one another and that experiences in one part of the system affect all other parts of the system as well. The model conceives family violence as multidimensional in both causality and possible impacts, and as such, family violence occurs based on the intersection of individual, family, and sociocultural factors. The interconnectedness of these factors becomes meaningful when the various social actors that are involved in a relationship interpret an event or challenge to facilitate the occurrence of violence. The theory views violent behaviours as socially-learned behaviors, including the hierarchical relationship that exists in heterosexual relations in patriarchal settings. The model acknowledges the existence of asymmetrical relationships between and among members of a family unit. For instance, the relationship between husband and wife in

patriarchal settings propels a gendered feeling and expectation in heterosexual relationships. The theory does not have a unidirectional view of men as perpetrators and women as victims of family violence (Yllo, 2005); it rather posits multiple contributing factors (e.g., role expectations, communication patterns, power status) from multiple sources [e.g., child to parent, parent to child, husband to wife or wife to husband (Murray, 2006)].

Positionalities of the Researchers

The conceptualization of the study is from the interactions of the authors in association with the beliefs and perspectives about violence in relationships among this sub-population.

The authors are from the Yoruba ethnic subgroup and are nurses (except the third author, who is a sociologist). The authors had lived primarily among this ethnic group with their families in heterosexual marriages and practiced as community/public health and mental health nurses among this sub-population. This enabled the authors to collect and interpret data easily because of their in-depth understanding of the Yoruba language including their unsaid meanings and inferences with its cultural implications associated with the marriage institution. This allows for the positioning and contextualization surrounding family relationships.

During interviews, further clarifications were sought with probes to ensure expressed intentions and responses were ascertained and not misinterpreted.

Methods

Research Design

An interpretive constructivist approach and cross-sectional design was utilised to explore the context and indigenous structure for managing family violence in a Yoruba community. The interpretive tradition is premised on the position that all social realities are dynamic and fluid yet have meanings and interpretations that can be captured within a context. This core assumption underpins all forms of knowledge building or evidence gathering within the interpretative constructivist orientation to research (Schwandt, 1994). Family violence is a psychosocial phenomenon that is embedded in relationships and structures. As social actors, individuals make meanings out of what qualifies as violence or otherwise in everyday lives, which are indissoluble from their network of relationships within social structures. These interpretations are fluid despite being influenced by socio-cultural values, beliefs, and practices within historical epochs (Hattery & Smith, 2018). The literature on interpersonal violence has a somewhat consensus with the need for contextual understanding of the meanings, contexts, and terminologies that are associated with family violence (Hattery & Smith, 2018). Such knowledge has considerable implications for theorising, policy designs, implementations, and practice (Pocock et al., 2019). The context of a cross-sectional design involves the researcher obtaining data on both outcome and exposure from participants at the same time (Setia, 2016). The cross-sectional design accommodates the collection data from only the sampled participants from the study (Zheng, 2015). The family violence occurrences, available structures, and outcomes were assessed among different participants within the community at the same time. Data was collected using focus group discussion and in-depth, face-to-face interviews. FGDs capitalize on group dynamics to stimulate discussion (Guest et al., 2017). FGD is also appropriate to capture collective opinions and perceptions about issues of discuss with the meaning of such views (O. Nyumba et al., 2018) mostly within an homogenous group. The in-depth interviews provided a rich and critical approach to capture the experiences, views, and positions of individuals and social actors on family violence.

Study Setting

The study location is Ile-Ife, an ancient town and the cradle of the Yoruba race (Falola & Akínyemí, 2017) located in Osun State, in the southwest region of Nigeria. This region is predominantly inhabited by the Yoruba ethnic group which is one of the largest ethnic groups in Nigeria. The communities in this region have a common Yoruba dialect known as the "Yoruba ajumolo." The last population estimate of the ancient town of Ile-Ife was placed at 167,204 (Nigerian National Population Commission, 2010). The family structure in Ile-Ife and most Yoruba communities reflects nuclear and polygyny family arrangements with a mix of communal and extended family ties. The average household in most Yoruba communities will have a relative or distant relation living with a nuclear family. The social arrangement also provides platforms for the extended family to nurture and support the nuclear families in diverse ways (Akinyemi, 2016). Due to gender roles, males as husbands are socially expected to act as breadwinners, while women are saddled with child rearing and other domestic activities (Falola & Akínyemí, 2017).

Participants and Sampling Approach

The study participants consisted of individuals and groups that are of the Yoruba extraction who live in Yoruba communities (Ilare, Enuwa, and Iremo) in Ile-Ife, Osun State, Nigeria. The inclusion criteria for participants were marital status, residence in the study location, and Yoruba ethnicity. Inclusion criteria for community and religious leaders were residence in the study location, ethnicity (Yoruba) and recognition by members of the community as a religious leader.

There were two categories of participants in this research; the first were community and religious leaders. The community and religious leaders are often considered elders within the Yoruba culture with leadership responsibilities including family dispute resolution. Religious and community leaders are often considered as "agbaa," which literarily means elder. An elder in this sense is a leader, irrespective of age, and they are saddled with many responsibilities including dispute resolution (Fayemi, 2009). It was in this sense that the views of religious and community leaders are indispensable in exploring the notions of family violence, their involvement as arbiters, and their roles in minimising occurrence and suggestions on complicated cases. The second consisted of married male and female residents within the selected communities. These males and females were not necessarily paired couples but were in married or cohabiting relationships with children and can give information about the occurrence of family violence within a family unit.

The purposive sampling approach was adopted in the recruitment of the first set of participants. The first set of participants that met the inclusion criteria then guided the recruitment of others. The recruitment started with identifying married males and females that are of the Yoruba extraction. The first set of participants that met the inclusion criteria then guided the recruitment of others considering the inclusion criteria. The same approach was adopted in the recruitment of community and religious leaders. A total of seven married men, seven married women, three community leaders, and three religious leaders participated in the study. The married men and women were different married individuals and not couples, with many years of marital experience. Details of the socio-demographic profiles of the participants are as stated in Table 1 and Table 2. The mean age for the FGD participants was 45.9±19.9 while that of the interviewees was 54.5±5.2.

Table 1Sociodemographic Characteristics of Focus Group Participants

Participants	Age	Religion	eligion Educational Occupation	
	(Years)		Status	
Married Men				
1	35	Christianity	Secondary	Trader
2	45	Christianity	Secondary	Herbalist
3	25	Islam	Secondary	Student
4	25	Christianity	Secondary	Mechanic
5	53	Islam	Secondary	Driver
6	45	Islam	Secondary	Mechanic
7	27	Christianity	Secondary	Vulcaniser
Married Women		-	-	
1	38	Christianity	Primary	Food vendor
2	71	Christianity	Secondary	Trading
3	84	Islam	No education	Trading
4	73	Christianity	Secondary	Trading
5	67	Islam	Secondary	Trading
6	20	Christianity	Secondary	Trading
7	35	Islam	Primary	Trading

Table 2
Sociodemographic Characteristics of Interviewees

Interviewees	Age	sex	Marital	Religion	Education	Occupation
	(Years)		Status			
Religious Lead	er					
1	57	Male	Married	Muslim	Tertiary	SCS
2	45	Male	Married	Christian	Secondary	JCS
3	58	Female	Married	Christian	Tertiary	ART
Community Le	eaders					
1	60	Male	Married	Christian	Tertiary	SCS
2	50	Female	Married	Muslim	Secondary	JCS
3	57	Female	Married	Muslim	Tertiary	ART

SCS- Senior Civil Servant; SCS - Senior Civil Servant; ART- Artisan

Data Collection Procedure

The community leader of the selected community was the entry source for the study to facilitate selection and cooperation of potential participants. This person serves as the gatekeeper and plays an essential role in the generation of good research data (Singh & Wassenaar, 2016). The community leader was contacted through a co-worker residing within the community after the initial identification of the study location. We visited the community leader and briefed him about the research aims and objectives, the voluntariness of participation, and withdrawal without prejudice. The data collection methods for this study were focus group discussions (FGDs) and face-to-face in-depth interviews. The males and females participated in two FGDs separately, with the understanding that intimate relationships such as marriage are private issues with less public discussions in the study setting.

The focus group sessions were conducted by gender and questions were framed to explore the perspectives of participants among couples without expressing direct personal experiences. This is with the caveat that females may not be allowed to express themselves freely to strangers in the presence of males.

Face-to-face, in-depth interviews were conducted with the community and religious leaders to explore their opinions and experiences about the meaning and context of the occurrence of family violence and accessible managing structures within the community.

The FGD and in-depth interview guides were developed and pretested to modify, simplify, or remove vague questions. Both the FGD and in-depth interview guides had 19 questions. Both the individual interviews and group discussions commenced with an opening question to stimulate reflections on what social expectations in marriage entail and their possible outcomes. Three among the key thematic questions that were focused on are highlighted below:

- i. What are the views and perspectives of the Yoruba sub-ethnic group on family violence?
- ii. What is the context of occurrence of family violence?
- iii. What are the strategies for management of family violence?

The interviews helped in capturing experiences, views, and terms that are associated with family violence within the study setting. The group interview provided cues to understanding societal norms, expectations, and sentiments around marital relations, and the forms, patterns, and dynamics of family violence among the Yoruba people. The FGD participants spoke in Yoruba language based on consensus. There was a moderator and a note-taker during the FGDs. The FGD among the men lasted 77:02 minutes and that of the women lasted 52.31 minutes. All six face-to-face in-depth interviews were conducted in Yoruba language, religious leaders at their offices but community leaders at their homes. The interview was conducted within 50-76 minutes. The two FGDs and six face-to-face in-depth interviews were audio-recorded.

Rigor

Trustworthiness was achieved through the principles of credibility, conformability, and dependability (Holloway & Wheeler, 2013). Credibility was ensured by presenting the research proposal, IDI, and FGD guides to experts in family violence, sociology, and family nursing for content validation which includes the appropriateness, clarity, and level of congruence of the content and set objectives. The comments were retrieved, reviewed, and adjustments were made based on their suggestions. Confirmability was exercised by the interviewers checking with the participants of each interview and FGD after each session with the summary of notes as taken by a research assistant for clarity, correction, and further clarifications where necessary. Dependability was ensured by conducting the interviews in a preferred and common Yoruba dialect among the interviewees. In this sense, the participants are motivated to contribute irrespective of their educational backgrounds and to ensure that translation of actual meanings and descriptions of the phenomenon of family violence in the Yoruba language are better assured. All the interview sessions were audio-recorded and transcribed verbatim. The Yoruba transcriptions were translated back-to-back by two experts in Yoruba and English languages to minimize the loss of meanings and interpretations.

Data Analysis

A thematic approach was adopted in analysing the data, taking cues from Terry et al., (2017). Familiarisation with the data, which is the first phase, had begun from data collection while listening, transcribing, and reading the transcripts over. Generation of codes began with the second phase, and coding was completed by reading and re-reading all the documented

information during discussion and interview and listening and re-listening to recorded discussions. Similar codes were clustered as categories and categories constructed into themes. The data was systematically examined to identify dominant themes through the categorisation of phrases and terms most frequently mentioned to bring out key concepts relating to family violence and its management. All the transcripts were stored and analysed using ATLAS.ti qualitative software. Excerpts were used to provide more contexts and to retain participants' views in each theme and subtheme that emerged from the data.

Ethical Consideration

The Institutional Review Board of the Institute of Public Health, Obafemi Awolowo University, Ile-Ife ethically approved this study (HREC NO: IPH/OAU/12/1190). Community heads gave their consent for conducting the study and participants gave their informed consent. The participants were recruited after the purpose of the research was explained to them and assured of their right to withdraw from the study at any point. Participants were assured of confidentiality and that their personal identifiers would not be revealed. Participants in the focus group discussion were encouraged to keep the discussion within the group members and not to share any information that cropped up during the discussion with a third party et al., 2008). Despite the confidentiality challenge, most of the participants gave their individual informed consent in writing and a few submitted thumb prints to give their consent. The individual and group interviews were conducted in participants' preferred locations.

A counsellor was detailed to attend to the special needs of participants that had any emotional breakout from being involved in the discussion.

Findings

In this study, three major themes were generated: (i) Meaning and context of family violence, (ii) structures available for managing family violence, and (iii) levels of management of family violence. The summary of the themes and corresponding categories are as stated in Table 3.

Table 3
Themes and Corresponding Categories

Theme	Category
Meaning and context of family violence	 Indigenous word that represent violence Family violence seen as physical violence in family relationship Contributory factors to family violence Perpetrators and victim of family violence
Indigenous structures versus Formal structure	 Family as structure Religious institutions as structure Community and Royal Fathers as structure Health care institution Law enforcement agencies & Judiciary institution Non-governmental Organisations
Levels of management	 Primary management strategies Secondary management strategies

Theme 1: The Meaning and Context of Family Violence

As a construct, the participants described violence in Yoruba language using descriptions and terms such as "Ija" or "awoo" (fight, including physical and all other forms of fighting that may involve verbal abuse) and it is the most occurring term among the participants, "Ilo kulo aya tabi oko eni" (misuse of one's spouse), "iwa ipa si oko tabi aya eni" (being too domineering of one's spouse) and "lilo aya eni tabi oko eni bi eru" (enslavement of one's spouse). These terms were conceived to exist as latent and manifest forms and contexts such as abusive use of authority, affront from couples including children, conflict within the home, misunderstanding between the couple or among children and the couple. Other descriptors and contexts that emerged included obstinacy manifesting as abusive words, diverse forms of physical violence, and controlling behaviours by those who have more powers at the home front. Such powers are achieved or sometimes ascribed to individuals that are the breadwinners, adult children, and other family members that are valued and respected.

Against the foregoing, the interviewees and FGD participants shared a consensus on what constitutes family violence. For the participants, such violence entails all forms of physical acts of beating, slapping, stabbing, and other forms of physical injuries but did not consider other forms of violence (sexual, emotional, economic) as violence in a family relationship. In the words of one of the interviewees, most members of the community share common denominators around what qualifies as family violence and the contexts of occurrence amongst families. In the words of a community leader and a participant in one of the FGDs, physical violence exemplifies what family violence represents and the individuals that indulge in such actions have a clear motive of inflicting pains on others, including those they had claimed to be their loved ones:

The community around here considers violence as a physical act of beating or causing physical harm or injury to another person... (57-year-old, male, religious leader).

Family violence is causing physical harm to one's partner as a result of a misunderstanding in a family relationship... (38-year-old, married woman).

The excerpts demonstrate an emphasis on physical violence and were less overt to other forms of violence like sexual and emotional types. The switch is understandable, bearing in mind the dominance of patriarchal values, beliefs, and expectations of heterosexual relationships and marriages in Yoruba culture. The participants argued that sexual violence such as marital rape occurs as a result of denying one's spouse's sexual requests, and its associated emotional outbursts are difficult to quantify or tagged as problems among couples. There was consensus that there could be a problem only when sexual violence such as rape occurs between individuals that are not couples.

Contexts of occurrence play critical roles in the conceptions of what qualifies as violence and what appears contentious to quantify or qualify as violence. In espousing the place of contexts, the participants argued that family violence is fluid and dynamic.

People here don't read meaning to violence relating to sexual activities especially when it occurs between married couple. It became a problem when such actions are perpetrated by a stranger or person other than the woman's spouse (60-year-old, male, community leader).

There are warning signs that precede the occurrence of family violence. In this direction, the societal expectation is that these warning signs are observable and can be mitigated when couples adhere or comply with the norms and values that are presumed functional for harmony at home. Example of such warning signs are captured in these excerpts from two community leaders:

Most time verbal abuse often leads to violence in family relationship and this is more prevalent among women but not considered as something so out of hand until it turns to physical battering by men. This is because verbal abuse from women can heap up emotion of men most especially when the abuse affects their ego (50-year-old, female, community leader).

As espoused by some of the participants, family violence was conceived as inevitable in any marital relationship. However, individuals and couples have the capacity to avoid it in their marriages, though not absolute control. For the avoidable ones, the willingness to recognise and appreciate the patriarchal boundaries and expectations of marital relationships appeared dominant in the two FGDs and four out of the individual interviews. These warning signs are reminders that couples need to appreciate and interrogate from a gendered lens.

Probing further, the participants identified and described other factors as contributory factors to family violence among different homes in their communities. Their position echoes some of the known predictors, but further situates these factors and the contexts that provide and promote their predictive powers. Some of the participants in the FGDs mentioned an inability to measure up to the social standard of breadwinner by men and limited opportunities to earn reasonable income as key factors. Four interviewees also shared similar views as they argued that the inability to perform such roles often creates tension and violence among couples. According to the participants, frustration on the part of such men may lead to indulgence in alcohol while the women may be unfaithful to their spouses. This may trigger violence in family relationship:

If the husband is not performing his roles and responsibilities the man's sexual advances may be rejected and may lead to physical assault by the man, hence men should be up to their responsibilities to prevent violence in the home (35-year-old, married woman).

Some caring men naturally misbehave under the influence of alcohol or drugs which could make them do the things they would not naturally do if they were not under the influence of drugs or alcohol (20-year-old married woman).

Also, factors such as age, educational status, and socio-economic status of either spouse were contributory factors mentioned by participants in FGDs and the in-depth interviews. In the two FGDs and three of the interviews, the views were consistent. In describing how these factors played such roles, the participants mentioned that differences in age most especially when the wife is older, educational status between spouses - when wife has upper edge, and income differentials most especially when the woman is wealthier are in themselves insufficient to precipitate violence. The interpretations of these differences vary and also depend on other supporting factors such as religious inclination, positive disposition from extended family members, and how such women treat and perceive their husbands. The absence of negative interpretations around such advantaged positions implies that such household would experience less family violence:

Age is not a factor. The man is the head of the family in our society irrespective of the age of the wife. If I marry a woman old enough to be my mother, I will control her. Finance may not be a factor if there is respect, agreement and understanding between us (45-year-old married man).

Having higher educational status by a woman may not necessary cause violence in the family if couple have mutual respect for each other. I have seen families where the wife has low educational status compare with the husband and yet there is no peace in the house. What matters most is mutual respect between couples (67-year-old married woman).

Nevertheless, men that equate their masculinity with a higher educational or social economic status than their wives but actually have lower educational status or income than their spouses would often find faults in such women. As argued by one of the religious leaders, the patriarchal descriptions around what is expected of a husband and a wife are difficult to erode. The clergyman cited age differentials as one, most especially when the gap is wide. He also opined that some men would consider their loss of economic power to their wives as abnormal and perhaps some signs of spiritual and social backwardness. Men or husbands with such mentality would find meanings in the age and economic differentials and thus exhibit violence even when uncalled for:

Age disparity can be a factor when the difference in age is much. Also, if the woman's socio-economic status is much higher than that of the man, it may cause violence because our people believe that men should naturally be of higher socio-economic status than women (57-year-old male religious leader).

Beyond gender stereotyping, some of the participants were quick to mention women, children, and any other family members as potential perpetrators. Women are becoming violent as well, as cases of attacks by women on their husbands were mentioned. The explanation by most of the participants was that most of the violent acts that are perpetrated by men are often reactions to abuse or insults from women. In this regard, men earned the title as lead perpetrators of physical violence, while women were tagged as lead perpetrators of verbal and emotional abuse in some instances. As argued by a male religious leader:

Males may be suffering emotional torture or abuse from the females but may not voice it out because of ego. Some violence attributed to the men may be for self-defence from verbal abuse or other forms of insults perpetrated by women (45-year-old male religious leader).

Children can also be perpetrators of violence within the home. According to the participants, this happens when the children are trying to take advantage of the parents' lack of trust or misunderstanding in their relationship.

Do you know that sometimes, violence in the family is caused by children who want to create misunderstanding between the parents in order to take advantage of them to extort money from both parents (50-year-old female community leader).

The ripple effects of family violence on other household members were cited as possible reasons for the emerging cases of children as perpetrators. Citing constant abuse and

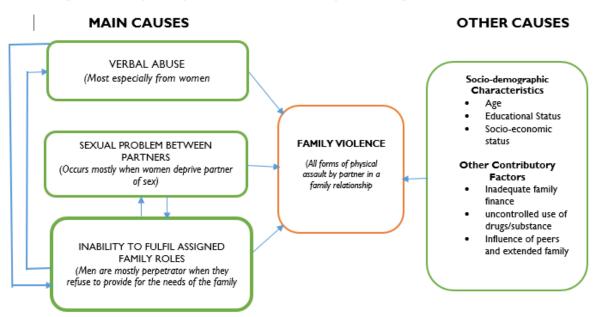
violence from fathers, the participants argued that some children have reacted violently in defence of their mothers. Though such cases are few, nonetheless, the position of the participants was that the ripple effects of family violence on children and other family members were noteworthy. One of the participants stated that:

Most time when a man perpetrates physical violence against the wife in the family, the woman and the children often become devastated. Often, the children see their father as a monster and take side with the mother. This perception may affect the children's relationship with their father or give them emotional disturbance which also may have an effect on their health or performance in school (45-year-old married man).

Figure 1 provides a summary of participants' submission regarding the concept of family violence and its causes.

Figure 1

Conceptualization of Family Violence and its Causes by the Participants



Theme 2: Indigenous Structure versus Formal Structure for Management of Family Violence

Indigenous Structure

Family violence resolution was anchored on two forms of structures: indigenous and formal structures. The participants described the indigenous structure as widely acceptable and patronised at least once in the lifetime of a couple. Indigenous structures were described as informal, less structured, and built on trust and patronage. The key actors in the indigenous framework are immediate and extended family, the religious leaders, community, and traditional leaders. Family members within this network perform critical roles by mediating in conflicts and the search for solutions. The roles of these members are ascribed through the norms around marital relations and the common social goal of maintaining harmony at home. In diverse ways, these roles are expected and appreciated among couples and family members:

Most time, family members from both sides help in settling violence between couples (71-year-old married woman).

Religious leaders are critical stakeholders in the indigenous structures of resolving family violence. In fact, most of the participants positioned religious bodies as an important structure that could help in resolving family violence. Similar functional roles were ascribed to the traditional institution, including key actors within this institution such as the royal fathers and their representatives within the communities. The consensus across the groups and individual interviews was that religious and traditional institutions are indispensable in achieving sustainable peace and harmony at the home front.

Issues of family violence are resolved when a well-respected member of the family tries to intervene. Even, when you listen to news on radio or read newspapers, you find out that most of this law enforcement agencies still refer the couples back to the family or community for peaceful resolution most especially when children are involved (57-year-old female community leader).

Men of God are like mini gods that people love to obey. Most time family violence is easily handled by them because the people hold them in high esteem I mean as representative of God on earth (53-year-old married man.)

The preference for indigenous structures to family violence resolution was connected to norms, values, and beliefs around marriage and the social expectations that couples and family members must work towards unification rather than divorce

Formal Structure

Law enforcement agencies such as the police and the judiciary are also involved in family violence resolution. Patronage of this structure is often a last resort measure when there are contentious positions or perhaps ineffective measures that can resolve such violence using the familial approach. Examples of contexts when the formal structure becomes preferred include situations where there are threats to life. The participants reiterated the position that formal structures are less patronised and often the last resort:

Couples don't arrest themselves they resolve it within, when it is at the extreme of murder the police are involved (57-year-old female community leader).

Sometimes the case may be taken to court when one of the partners can harm the other. Even many of these situations are still referred back to the community structures for peaceful resolution and this is why we have many partners killing each other when such issues arise. This could have been averted if they were allowed to go their separate ways under the law (73-year-old married woman).

These excerpts portray family violence as a reality that places responsibilities and expectation on victims, relatives, community members, the judiciary, and law enforcement agents. The consciousness that family violence is better handled within the indigenous structures again shows the relevance of cultural beliefs, values, and norms on how individuals comport themselves in marriages. Nonetheless, not every couple follows this direction, especially when there are threats to life and a redress through legal means becomes inevitable.

Theme 3: Levels of Management of Family Violence

Similar to the family violence resolution structures, the management strategies were classified into primary and secondary approaches. By primary measures, participants considered strategies in this category as pro-preventive techniques that are useful in mitigating family violence. The ability to recognise and deploy a potential primary strategy in managing family violence differs from one couple to the other. Open communication and regular dialogue emerged as one of the common strategies that can be deployed. The presumption was that the strategy could facilitate mutual understanding between couples and peaceful dealings with each other when such issues arise. One of the participants stated,

Violence between a couple could be prevented when couples have prior understanding of each other and discuss issues that could lead to violence and the best way they will like to address them (67-year-old married woman).

Other strategies that came up during the discussion that are related to primary prevention include sensitisation measures that are accessible through various forums such as pre-marital counselling for adults on positive interpersonal relationship skills, reorientation of family members about family values and acceptable family non-violating culture, and family cohabitation that encourages parents to be good role model for the children.

To many of the participants (all interviewees and ten of the FGD participants), these latter strategies could achieve the desired result when the religious leaders are used as a medium for disseminating such information. Participants' responses were best captured by one of the participants:

For me, the religious leaders are well respected in our society and this part of the world. Any strategies that will help prevent and manage family violence will produce a better result if the religious leaders are actively involved and trained to empower couples in their institutions (53-year-old married man).

Similar to some of the primary strategies, a series of secondary measures were also prescribed as workable in managing family violence. These strategies include the use of conflict resolution skills by the couple, prayer and counselling by religious leaders, mediation by dependable friends, children, and extended family, empowerment and enlightenment on positive family relationships, family rehabilitation through appropriate institutions, and separation and divorce through the service of law enforcement agents and the judicial process. Responses from participants revealed that couples resolve family conflict within the relationship by using skills such as being indifferent to and avoidance of things that could cause violence.

I learnt about conflict resolution through a friend. It will be useful for all intending couples to go for this training. It has been very helpful in my relationships (35-year-old married woman).

Counselling of the couples with or without prayer by the religious leaders was part of the approaches identified. This was emphasised in the groups because of reverence for these leaders. A wide acceptance of this approach could be observed in the FGD groups as many of the participants were seeing nodding their heads while others were responding to the questions raised.

The way many people reverence their pastors, and imams and obey their word is amazing in this part of the world. Training religious leaders will improve their capacity to prevent and manage family violence effectively... (50-year-old female community leader)

You know I have observed that during marriage ceremony, the religious leaders are often one sided most especially on the side of the men and that is why many homes are in trouble today. These religious leaders need to learn how to balance their sermon and to counsel couples... (38-year-old female married woman).

Mediation by respected extended family members, in-laws, dependable friends, religious leaders, and community leaders was also mentioned by all the participants. Grown up children, too, were identified as interveners in facilitating resolution of conflicts between parents.

Interventions by formal agencies such as the judiciary system, law enforcement agency, and non-governmental organisations were also mentioned by participants as management strategies that are rarely utilised in the study settings. From the discussion, it appears that there was emphasis on the option of out-of-court resolution if cases of family violence are taken to court:

You see there are many institutions that could help intervene in the issues of family violence but the problem is they are rarely used in our society because issues relating to intimate violence are seen as issue that should not be taken outside of the existing structure within the family and community for solving them (60-year-old male community leader).

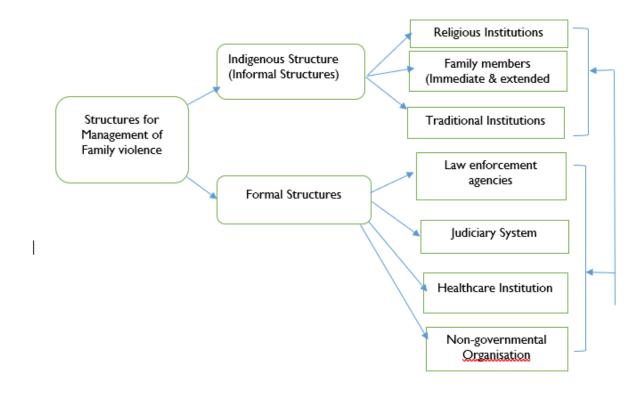
Marriage is often considered as an issue between two families which is seen as things beyond two people in marriage. We rarely take cases of family violence to court. In fact, most times when they are taken to court, are usually withdrawn from the court based on family decision to settle it out-of-court (84-year-old married woman).

The excerpt below reveals that health care institution is a place where either of the couples that sustained injury is taken to for management most especially when it is beyond what can be managed at home.

Partners take each other to the hospital when an injury sustained during violence is beyond what can easily be managed in the home (45-year-old married man).

Generally, the findings revealed that most of the time, the formal settings are not commonly utilised because it is believed that family violence is a family issue and strangers such as these formal settings should not be involved. Separation and divorce were considered a last resort, most especially when children are involved; however, when the relationship is becoming life-threatening, divorce could be obtained. The summary of the key structures for management of family violence are as presented in Figure 2.

Figure 2
Structure for the Management of Family Violence



Discussion

This study explored married men and women, religious and community leaders' views and interpretations of family violence, and possible mechanisms for minimising its occurrence as well as resolution when it occurred. The construct of family violence attracts different meanings and descriptions that have rich theoretical, methodological, and policy relevance. With the dearth of evidence on contextual understanding of family violence, this study showed that family violence exists among the Yoruba people in southwestern Nigeria just like anywhere else across the globe. The findings revealed family violence as a reality that attracts multiple meanings and exists in diverse forms with physical violence being the most common. Asymmetrical gendered dispositions emerged in the adoption of measures and mechanisms that could minimise conflict occurrence or resolution. Largely, informal or indigenous approaches and mechanisms were favoured above formal mechanisms such as patronising professional counselling or the legal system.

Despite being inevitable and universal in existence, there is no single word that describes family violence in Yoruba language, unlike the English language. The absence of such words and the limited research attention on how family violence is conceived among the Yoruba people might have hindered what is known and possible interventions that might be effective. The findings showed that words and phrases that revolved around physical violence and misunderstanding were predominant among the participants. A word that occurred frequently among the participants was "ija" or "awoo," both of which are synonyms capturing misunderstanding, quarrelling, and fighting in relationships. However, the notions of ija or awoo and the possible implications of their occurrence in marital relations and other forms of relations transcend the English language notions of misunderstanding, quarrelling, or fighting. Ija or awoo can occur in any social relations, whether intimate or not, and include all forms of

misunderstanding, quarrelling, fighting, and bitterness in the physical or spiritual realm of life (Philips, 2011).

From the findings, family violence, which was popularly described as *ija* or *awoo* in the family, had physical violence as the dominant form. Other forms that were mentioned, which include verbal, emotional, and sexual violence, were described as precursors to physical violence.

The intersections among the different forms of family violence provided some insight into the web of factors that are connected before violence can occur in a family. This sense of multicausal links was also invoked in the explanations around who are the perpetrators of family violence. Without denying the predominance of men as the leading perpetrators of physical violence (National Population Commission (NPC) [Nigeria] and ICF, 2019; Orpin et al., 2020) in Nigeria, the consensus around females as more involved in the perpetration of verbal forms of violence was noteworthy. Existing evidence has shown that women are sometimes vocal and quick to respond in words (perpetrating emotional violence) when in a state of disagreement with their spouses (Lövestad & Krantz, 2012). Such utterances could touch on the ego, pride, and masculinities of their spouses and thus stimulate violent reactions in any of the known forms from the man (Ifeanyichukwu et al, 2017). The overshadowing view that men are culprit in family violence may be clouding our sense of women's subtle but critical roles in triggering violent reactions that might be evitable among couples.

The controlling behaviours as exhibited in this patriarchy culture also encourage the display of masculinity through acts of physical violence towards the wife (Abayomi, 2014). The findings from this study showed that family violence demands a balanced view by calling for interventions that can address how gendered actions that fuel family violence can be addressed.

The findings showed a condemnation of family violence among couples. In contrast, violence acts relating to fulfilling sexual intimacy within family relationship was partially condemned. Partly, it was difficult for the participants to reconcile the wrongness in having access and placing sexual demands on their wives. Adhering to sexual obligations and fulfilment of such responsibility within marriage was considered necessary to minimize sexual violence among couples. This view is an acceptable cultural belief, and worst still, the laws of Nigeria disregard sexual violence in marriage as a crime, with marital rape exemptions (Emeka & Emejuru, 2015). Justification of violence relating to avoidance of sexual intimacy in family relationship and its associated discomforts raise a major concern in this study because it violates the right and reinforces the subordination of the victims to the perpetrator. This belief is deeply rooted in the cultural tradition and socialisation of the Yoruba people (Antai, 2011; Bakare et al., 2010). The stereotyped expectations around marital obligations revolve around and reflect power differentials which vary by gender among family members (Oladepo et al., 2011). Non-fulfilment of assigned gender roles and responsibilities by either husband or wife within families thus appeared significant in the explanations of key contributory factors to family violence.

The link between substance use and family violence was also affirmed among the participants. Though causal link cannot be established, the explanation of the participants was that alcohol intake can influence men's dispositions towards family violence. In expatiating further, socio-economic factors can trigger the temptation to engage in alcohol consumption and the possible consequences of engaging in violence. There is evidence within and outside the study settings portraying the unintended consequences of high alcohol consumption on violence in intimate relationships (Bakare et al., 2010). In addition, substance abuse has been linked to physical violence against women, whether the perpetrators are family members or otherwise (World Health Organisation, 2012).

Mixed findings were observed on the role of education and socio-economic status on family violence. Women with higher socio-economic status might experience violence from their husbands, especially when they do not treat their husband with respect or fulfil their assigned roles as wives within the patriarchal structure of family relationship. This contrasts the dominant result from surveys that women with higher education have protective influence over family violence (Ackerson, et al, 2008; Boyle, et al, 2009). The findings from this study partly supports this general view despite the possible interpretations that such women might appear as threats to men with lower education and income.

Findings around help-seeking in the face of family violence showed preference for informal sources and the patronage of such sources has some cultural connotations (National Population Commission, 2018). Family violence appeared normative and hardly spoken of in the public due to stigma and the willingness to avoid unnecessary interference from third parties. The normative expectation is that both the perpetrator and the victim must tolerate each other when going through any form of family violence but should seek help from their significant others for amicable resolutions. In this sense, the participants recommended seeking help from family members such as parents, parents-in-law, and significant others from their family of origin. This family and friend structure has been documented to provide frequent and easily accessible emotional support (Rose et al., 2010).

The findings also showed that religious actors play critical roles in family violence resolution and in the preference of the participants. Existing literature portrays religion as often-used informal support by victims of family violence (Rose et al., 2010). Religious norms, values, and beliefs have critical influence on expectations and outcomes from relationships, including that of marital union (Falola & Akínyemí, 2017). From the participants' points of view, the religious leaders are at a vantage point to ensure that intending couples are exposed to training that could help them resolve their conflict before it degenerates to violence. Sometimes religion plays some unintended roles that might be dysfunctional to harmonious resolution of family violence or perhaps the aversion of crises in some marriages. For instance, a review has shown that the two dominant religions in Nigeria (Islam and Christianity) have not been especially helpful in liberating Nigerian women from gender discrimination imposed on them by cultural practices (Bakare et al., 2010). It therefore becomes inevitable to train religious and community leaders on family violence management and resolutions. Such intervention could promote balance handling and sharing of information to families, as well as discussing with family members issues of mutual respect, reduction of power misuse, and control.

Victims of family violence only go to hospitals when there are bruises or wounds sustained during violent act that cannot be managed somewhere other than the hospital. Nurses as frontline healthcare providers need to show understanding of the culture of silence around family violence by creating an enabling environment of trust, empathy, and respect that can help facilitate disclosure. Nurses can play an important role in screening and identifying victims of family violence for appropriate support and referral. Previous studies have documented that nurses are critically positioned to perform roles such as identification, care for patients' physical health needs, safety attention, and referrals for family violence victims (Guruge, 2012). Family violence, if not identified and victim-supported as appropriate, could affect family functioning, care of children, and psychosocial health status of the victim and the entire family.

The formal structures and services identified from the result of this study were rarely used by the people in the study setting. This finding had been previously documented by Ashimolowo and Otufale (2012). Most of the time, when these agencies are involved, the relatives or community prevailed on the victim to withdraw such cases and settle out of the police station and courts. This could be linked to the value that the Yoruba ethnic subgroup has

placed on the sanctity of family relationship and how it should be handled. In addition, indigenous structures are enshrined in tradition and norms of not taking family issues to court. For example, there is a Yoruba proverb that says "a ki ti kootu de se ore," meaning individuals can never be friends after litigation over an issue.

This study identified multiple factors and the context for the occurrence of family violence as posited by the family system theory as against a unidirectional view of men as the cause of family violence in some theories. In summary, the findings of the present study have shown that indigenous intervention is more prevalent in managing family violence. Future research should focus on strengthening the capacity of indigenous structures to effectively prevent and manage family violence by finding ways to make changes to norms and cultural beliefs that fuel the occurrence of family violence and to identify the point when formal services will be needed.

Recommendations

The following recommendations are therefore made based on the findings of the current study:

- Reorientation of individuals about better ways of handling issues before
 degenerating to family violence can be done by involving relevant stakeholders
 in appraising the religious and socio-cultural norms fueling family violence.
- Reappraisal of socio-cultural norms undermining individual rights under the pretence of fulfilling gender roles.
- Strengthening of indigenous community structures to help prevent and manage family violence more effectively and to recognise the point at which formal structure services will be inevitable.
- Intervention addressing violence among couples should be family-focussed, and not unidirectional.
- Family-focussed intervention should also target intending couples to build their capacity on skills that could help them prevent or minimise occurrence of violence
- Public awareness to intimate the community with what family violence means, possible contributing factors, its impact on the family, and when, where, and how to seek help.
- A family-focussed training manual on family violence prevention and management could be developed and disseminated through a training of trainers workshop that will focus mostly on religious leaders and senior citizens or community leaders.
- Since couples go to the hospital for the management of injuries sustained from violence, nurses and other healthcare professionals should create time to screen all cases of injury or physical wounds for IPV and provide appropriate intervention and referrals.

Limitation of the Study

Data was not gathered from the identified formal structures in this study. This might have helped to confirm the assertion of the community members about not utilising the formal structures for managing family violence. Subsequent studies may look at the meaning and context of family violence by involving all the relevant stakeholders for a more robust view. Furthermore, the sensitivity of the topic may limit the depth and accuracy of information that

participants were willing to openly discuss. This study, however, was designed to minimize the reluctance of openly discussing issues around family violence. Nonetheless, the possibility of such issues must be acknowledged. The generalisation of this study is limited by its design. The study however, produced evidence based on the exploration of some individuals. In this study, few younger men and women participated, which might have limited the perceptions of violence captured in the study. However, some of their experiences were captured by older married men and women and community and religious leaders who often help in resolving family violence among the younger married couples.

Conclusion

We concluded that indigenous structures consistently seem to be the most acceptable approach for preventing or resolving family violence among the Yoruba ethnic subgroup studied. Religious institutions have been identified to be a strong structure for family violence management. Results from the current study emphasised the need for community-based and family focussed interventions targeting relevant social actors involved in violence management and the family.

References

- Abayomi, A. A. (2014). Sociological implications of domestic violence on children's development in Nigeria. *Journal of African Studies and Development*, 6(1), 8–13. https://doi.org/10.5897/JASD2013.0237
- Ackerson, L. K., Kawachi, I., Barbeau, E. M., & Subramanian, S. V. (2008). Effects of individual and proximate educational context on intimate partner violence: A population-based study of women in India. *American Journal of Public Health*, *98*(3), 507–514. https://doi.org/10.2105/AJPH.2007.113738
- Akinyemi, A. I. (2016). Nigeria, families in. *Encyclopedia of Family Studies*, 1–4. https://doi.org/10.1002/9781119085621.wbefs077
- Alo, O. A., Odusina, E. K., & Babatunde, G. (2012). Spousal violence in Southwest Nigeria: Prevalence and correlates. *Journal of Women's Health 1*(2), 1–8. https://doi.org/10.4172/2167-0420.1000110
- Antai, D. (2011). Controlling behavior, power relations within intimate relationships and intimate partner physical and sexual violence against women in Nigeria. *BMC Public Health*, 11(1), 1-11.
- Ashimolowo, O. R., & Otufale, G. A. (2012). Assessment of domestic violence among women in Ogun State, Nigeria. *Greener Journal of Social Sciences*, 2(3), 102-144. https://doi.org/10.15580/GJSS.2012.3.GJSS1223
- Bakare, M. O., Asuquo, M. D., & Agomoh, A. O. (2010). Domestic violence and Nigerian women- A review of the present state. *Nigerian Journal of Psychiatry*, 8(2), 5-14. https://doi.org/10.4314/njpsyc.v8i2.57620
- Barthassat, J. (2014). Positive and negative effects of parental conflicts on children's condition and behaviour. *Journal of European Psychology Students*, 5(1), 10–18. https://doi.org/10.5334/jeps.bm
- Boyle, M. H., Georgiades, K., Cullen, J., & Yvonne, R. (2009). Community influences on intimate partner violence in India: Women's education, attitudes towards mistreatment and standards of living. *Social Science and Medicine*, 69(5), 691–697. https://doi.org/10.1016/j.socscimed.2009.06.039
- Demographic, N. (2019). *Health Survey 2013*. National Population Commission (NPC)[Nigeria] and ICF International. Abuja, Nigeria, and Rockville, Maryland, USA:

- NPC and ICF International
- Emeka, O. C., & Emejuru, C. T. (2015). An appraisal of the jurisprudence of spousal rape in Nigeria. *Donnish Journal of Law and Conflict Resolution*, *1*(1), 1-9.
- Falola, T., & Akínyemí, A. (2017). *Culture and customs of the Yorùbá*. Pan-African University Press.
- Fayemi, A. K. (2009). Agba (elder) as arbitrator: A Yoruba socio political model for conflict resolution-A review of Lawrence O. Bamikole. *Journal of Law and Conflict Resolution*, *1*(3), 060–067. https://doi.org/10.1.1.1069.6715&rep=rep1&type=pdf
- Fosco, G. M., Stormshak, E. A., Dishion, T. J., & Winter, C. E. (2012). Family relationships and parental monitoring during middle school as predictors of early adolescent problem behavior. *Journal of Clinical Child and Adolescent Psychology*, 41(2), 202–213. https://doi.org/10.1080/15374416.2012.651989
- Guruge, S. (2012). Nurses' role in caring for women experiencing intimate partner violence in the Sri Lankan context. *International Scholarly Research Notices*, 2012. https://doi.org/10.5402/2012/486273
- Hattery, A., & Smith, E. (2018). Social dynamics of family violence: Setting the stage. In *the social dynamics of family violence* (pp.1-19). Routledge. https://doi.org/10.4324/9780429494345-1
- Holloway, I., & Wheeler, S. (2016). *Qualitative research in nursing and healthcare*. John Wiley & Sons
- Ifeanyichukwu, O. B, Christopher, P. S., & Kizito, D. T. O. (2017). The emerging trend in culture of domestic violence in Nigeria: Causes, theoretical assumptions and implications. *Research Journal of Humanities, Legal Studies & International Development*, 2 (1), 1-11. http://internationalpolicybrief.org/images/2017/APRIL/RJH/ARTICLE6.pdf
- Johnson, B. E., & Ray, W. A. (2016). Family systems theory. *Encyclopedia of Family Studies*, 1-5. https://doi.org/10.1002/9781119085621.wbefs130
- Kaur, R., & Garg, S. (2008). Addressing domestic violence against women: An unfinished agenda. *Indian Journal of Community Medicine: Official Publication of Indian Association of Preventive & Social Medicine*, 33(2), 73-76. https://doi.org/10.4103/0970-0218.40871
- Knudson-Martin, C., & Huenergardt, D. (2015). Bridging emotion, societal discourse, and couple interaction in clinical practice. In C. Knudson-Martin, M. Wells, & S. Samman (Eds.), *Socio-emotional relationship therapy* (pp. 1-13). Springer, Cham. http://doi.org/10.1007/978-3-319-13398-0
- Lövestad, S., & Krantz, G. (2012). Men's and women's exposure and perpetration of partner violence: an epidemiological study from Sweden. *BMC Public Health*, *12*(1), 1-10. https://doi.org/10.1186/1471-2458-12-945
- Makama, G. A. (2013). Patriarchy and gender inequality in Nigeria: The way forward. *European Scientific Journal*, 9(17), 115–144. https://doi.org/10.19044/esj.2013.v9n17p%25p
- Mapayi, B., Makanjuola, R. O. A., Mosaku, S. K., Adewuya, O. A., Afolabi, O., Aloba, O. O., & Akinsulore, A. (2013). Impact of intimate partner violence on anxiety and depression amongst women in Ile-Ife, Nigeria. *Archives of Women's Mental Health*, *16*(1), 11–18. https://doi.org/10.1007/s00737-012-0307-x
- Murray, C. E. (2006). Controversy, constraints, and context: Understanding family violence through family systems theory. *The Family Journal*, 14(3), 234-239.
- Nichols, M. P., & Schwartz, R. C. (2009). *The essentials of family therapy*. Pearson/Allyn and Bacon Publishers.
- Nigeria National Population Commission. (2019). Nigeria demographic and health survey

- 2018. NPC, ICF.
- Obagboye, T. G. (2019). Low reporting of rape cases in Nigeria: Challenges and prospects. *African Journal of Law and Human Rights*, 3(2), 68-78.
- Obarisiagbon, E. I., & Omage, M. I. (2019). Emerging trend in the culture of domestic violence against men in southern Nigeria. *International Journal of Humanities and Social Sciences*, 9(3), 50-56. https://doi.org/10.30845/ijhss.v9m3p7
- Oladepo O., Yusuf, O. B., & Arulogun, O. S., (2011). Factors influencing gender-based violence among men and women in selected states in Nigeria. *African Journal of Reproductive Health* 15(4), 78-86.
- O. Nyumba, T., Wilson, K., Derrick, C. J., & Mukherjee, N. (2018). The use of focus group discussion methodology: Insights from two decades of application in conservation. *Methods in Ecology and evolution*, 9(1), 20-32.
- Orpin, J., Papadopoulos, C., & Puthussery, S. (2020). The prevalence of domestic violence among pregnant women in Nigeria: A systematic review. *Trauma, Violence, and Abuse*, 21(1), 3–15. https://doi.org/10.1177/1524838017731570
- Philips, O. F. (2011). Peacemaking and proverbs in Urhobo and Yoruba marital conflicts. *African Conflict and Peacebuilding Review*, 1(2), 122–135. https://doi.org/10.1353/acp.2011.0022
- Pocock, M., Jackson, D., & Bradbury-Jones, C. (2019). Intimate partner violence and the power of love: A qualitative systematic review. *Health Care for Women International*, 41(6), 621-646. https://doi.org/10.1080/07399332.2019.1621318
- Rose, L. E., Campbell, J., & Kub, J. (2010). The role of social support and family relationships in women's responses to battering. *Health Care for Women International*, 21(1), 27–39. https://doi.org/10.1080/073993300245384
- Schwandt, T. A. (1994). Constructivist, interpretivist approaches to human inquiry. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (pp. 118-137). SAGE.
- Setia, M. S. (2016). Methodology series module 3: Cross-sectional studies. *Indian Journal of Dermatology*, 61(3), 261-264. https://doi.org/10.4103/0019-5154.182410
- Shore, J. (2019). The role of patriacrchy in domestic violence. Retrieved from https://www.focusforhealth.org/the-role-of-patriachy-in-domestic-violence
- Singh, S., & Wassenaar, D. R. (2016). Contextualising the role of the gatekeeper in social science research. *South African Journal of Bioethics and Law*, 9(1), 42-46.
- Stith, S. M., McCollum, E. E., Amanor-Boadu, Y., & Smith, D. (2011). Systemic perspectives on intimate partner violence treatment. *Journal of Marital and Family Therapy*, 38(1), 220–240. https://doi.org/10.1111/j.1752-0606.2011.00245.x
- Terry, G., Hayfield, N., Clarke, V., & Braun, V. (2017). Thematic analysis. In C. Willig & W. S. Rogers, *The SAGE handbook of qualitative research in psychology* (pp. 17-37). https://doi.org/10.4135/9781526405555
- Wiles, R., Crow, G., Heath, S., & Charles, V. (2008). The management of confidentiality and anonymity in social research. *International Journal of Social Research Methodology*, 11(5), 417–428. https://doi.org/10.1080/13645570701622231
- World Health Organisation. (2002). *World report on violence and health: Summary*. Retrieved from http://www.who.int/violence_injury_prevention/violence/world_report/en/summary_e n.pdf.
- World Health Organization. (2012). *Intimate partner violence: Understanding and addressing violence against women*. https://doi.org/10.2307/1319341
- World Health Organization. (2018). *WHO: Violence against women.* http://www.who.int/mediacentre/factsheets/fs239/en/
- Xu, X., Sunil, T., Edelblute, H., Madden, E., & Sirisunyaluck, B. (2019). Intergenerational

transmission of family violence and depressive symptoms in urban Thailand. *Journal of Marriage and Family*, 81(4), 1004–1015. https://doi.org/10.1111/jomf.12576

Yllo, K. A. (2005). Through a feminist lens: Gender, diversity, and violence: Extending the feminist framework. In D. R. Loseke, R. J. Gelles, & M. M. Cavanaugh (Eds.), *Current controversies on family violence* (2nd ed, pp. 19-34). SAGE. https://doi.org/10.4135/9781483328584

Zheng, M. (2015). Conceptualization of cross-sectional mixed methods studies in health science: A methodological review. *International Journal of Quantitative and Qualitative Research Methods*, 3(2), 66-87. https://doi.org/10.13140/RG.2.2.24477.33763

Author Note

Dr. Oluwasayo Bolarinwa Ogunlade is a community/public health nurse with preference for family health. She is a registered nurse, midwife and public health nurse in Nigeria. Her research interest is in family nursing and family violence. Dr. Ogunlade is a member of the Sigma Theta Tau International. She has several years of experience as a nurse-midwife in various capacities and as a community health nurse. She is currently a clinical instructor and online facilitator at the Department of Nursing Science, Obafemi Awolowo University Ile-Ife. Please direct correspondence to bolaogunlade@gmail.com.

Dr. Adekemi Eunice Olowokere RN, RM, RPHN, BNSc, PhD, is a registered nurse, midwife, and public health nurse with the Federal Republic of Nigeria. She obtained bachelor's, master's, and PhD degrees in nursing science. Dr. Adekemi E. Olowokere is a senior lecturer with over ten years' experience as a teacher and researcher at the Department of Nursing Science, Obafemi Awolowo University, Ile-Ife, Osun State Nigeria. She teaches community health nursing (with focus on community midwifery), research, and biostatistics. As a nurse researcher, Dr. Olowokere has initiated and collaborated with people to conduct over 25 community-based studies that focused on alleviating maternal and child vulnerability, debility, and mortality in Nigeria. Before she joined the service of the University, Dr. A.E. Olowokere had ten years' experience in public health programming as a Senior Programme Officer with a national non-governmental organization that focuses on developing and implementing sexual and reproductive health programmes at the grassroots level. She was involved in the training of community-based organizations across the six geopolitical zones of Nigeria to implement sexual and reproductive health programmes. Dr. Olowokere is versatile in the use of statistical software such as SPSS and Stata.

Dr. Ojo M. Agunbiade, PhD, is a senior lecturer in the Department of Sociology and Anthropology, Obafemi Awolowo University. Ojo has a PhD in Sociology of Health from the University of the Witwatersrand in South Africa and two MSc degrees, one in sociology and anthropology at the Obafemi Awolowo University, Nigeria, and the second one in gerontology from the University of Southampton in the United Kingdom. Ojo teaches both undergraduate and postgraduate courses in gerontology, medical sociology, sociological theory, and social research methods. Ojo has adopted mixed method designs in researching ageing, gender and development, reproductive health, and African traditional medicine.

Dr. Aanuoluwapo Omobolanle Olajubu is a community-public health nurse with several years of experience. She lectures in the Department of Nursing Science, Obafemi Awolowo University, Ile-Ife, Nigeria. Her research interests and activities are in the areas of nursing informatics and sexual & reproductive health across the lifespan, with a particular emphasis on vulnerable populations such as women, adolescents, and young adults.

Oyeyemi Olajumoke Oyelade is a lecturer I at Obafemi Awolowo University, Ile-Ife. She holds a doctoral degree from the University of Witwatersrand, South Africa and obtained

a certificate of merit in qualitative research from the University of KwaZulu-Natal where she also obtained her master's degree. She is a public speaker, a qualitative research analyst and an upcoming scholar with 15 publications. She is the Founder of a non-governmental organization (M-Health Pal Mobile Rehabilitation Initiative – Registered with Nigeria CAC Registration Number 167571) that is passionate about rehabilitation and has developed a practice guide for the rehabilitation of individuals with chronic mental illnesses.

Professor Omolola O. Irinoye is a professor of nursing at Obafemi Awolowo University, Ile-Ife, Nigeria. She is a community/public health nurse with research interests in sexual-reproductive health, violence, and family health. She is an active contributor to policy, capacity building for care and support of vulnerable groups, particularly orphans and vulnerable children, adolescents, and women. She is actively involved in human resource and capacity development for health in Nigeria and other African countries.

Acknowledgements: The authors wish to express sincere gratitude to NMCN-MCPDP Southwest zone Committee for providing financial support for the data collection and analysis. Prof. Omolola Irinoye, of the Department of Nursing Science, Obafemi Awolowo University is acknowledged for assisting with the review of the concept note and the instruments used for the study.

Copyright 2023: Oluwasayo B. Ogunlade, Adekemi E. Olowokere, Ojo M. Agunbiade, Aanuoluwapo O. Olajubu, Oyeyemi O. Oyelade, Omolola O. Irinoye, and Nova Southeastern University.

Article Citation

Ogunlade, O. B., Olowokere, A. E., Agunbiade, O. M., Olajubu, A. O., Oyelade, O. O., & Irinoye, O. O. (2023). Context and indigenous structures for managing family violence in a Yoruba community. *The Qualitative Report*, 28(1), 177-199. https://doi.org/10.46743/2160-3715/2023.5310