

ORIGINAL ARTICLE

Prevalence and Predictors of Sexual Abuse among University Undergraduates in Benin City, Edo State, Nigeria

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ABSTRACT

Background: Sexual abuse is a public health problem that poses serious challenge to health and wellbeing of young persons, globally. This study assessed prevalence and predictors of sexual abuse among undergraduate students in the University of Benin, Benin City, Nigeria in order to develop appropriate preventive intervention

Methods: An analytical cross-sectional study was carried out among 500 undergraduate students of the University of Benin, Benin City, Edo State. Respondents were selected using multi-stage sampling technique. Selfadministered questionnaires were utilized for the study. Data was analyzed using the Statistical Package for Social Sciences (SPSS) version 25 and statistical significance was set at p < 0.05.

Results: The mean age of the respondents was 21.4 ± 2.8 years and 300 (60%) were females. Awareness of sexual abuse was 98.0%. Lifetime and period (one year) prevalence of sexual abuse was 320 (64.0%) and 200 (62.5%) respectively. Determinants of sexual abuse were female sex (OR=2.234, CI= 1.532 - 3.527, p<0.001), room sharing (OR=2.637, CI= 0.416 - 0.977, p = 0.039), self-support in school (OR = 2.587, CI= 0.416 - 0.977, p = 0.036), history of previous sexual abuse (OR = 6.043, CI= 3.689 – 6.238, p = 0.001) and history of abusive relationship (OR = 5.010, CI = 1.321 - 3.234, p = 0.023).

Conclusion: Sexual abuse is prevalent among study population, with more females than males affected. The University of Benin Management should develop preventive measures that will aid prompt identification and reporting of sexual abuse with anonymity to appropriate authority

Keywords Prevalence; Pattern; Predictors; Sexual abuse; Undergraduates:

INTRODUCTION

Sexual abuse is a social vice that has attracted the attention of researchers and society.1-2 Sexual abuse is a public health problem that cuts beyond continents, countries, social classes, cultures, tribes and has infiltrated the fabrics of higher institutions posing a serious challenge on university campuses.2,3

World Health Organization describes sexual violence as any sexual act, attempt to obtain a sexual act, unwanted sexual comment or advances, or acts to traffic, or otherwise directed, against the sexuality of

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a person using coercion, threats of harm or physical force by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work.4-5 The fundamental word in the definition is coercion which refers to the use of force or deception to persuade a person into unwanted sexual activity without their consent. This includes but not restricted to bodily harm, emotional compulsion or blackmail and other forms of threat (such as threat of physical harm, of being fired from a job, threats of squashing benefits such as a raise or a good grade, and of not being able to secure a desired job).4,6 In such circumstances, agreement is not the same as freely granted consent.4

In certain occasions, where the victim is incapable of giving consent that is, individuals who are unable to comprehend the meaning and the significance of the act or of expressing their consent or refusal 4 as in the event of incapacitation due to alcohol, influence of drug, or mental illness, any sexual activity with such individual is considered an offence.⁶ The "unwanted and coercive or disruptive quality" of the act which could be repetitive as in sexual harassment distinguishes sexual abuse from consensual behavior that is desired and reciprocal 7-9

Various forms of sexual abuse have been documented among university undergraduates with varying degree of frequency, extent and lenght.9 These include rape; gang rape, prison rape, date rape (attempted or completed), unwanted sexual advances. harassment, demanding sex in return for favor, sexual abuse of mentally or physically disabled people ,pornography, internet sexual abuse, caressing and touching of sensitive body parts, trafficking for sexual exploitation, cat calling, slut shaming and female genital mutilation. 10,11,12 Sexual abuse can also be classified into contact and non-contact abuse. Contact forms include; sexualized kissing, fondling, digital or object penetration of vagina and anus, oro-genital, genital-genital and anal genital intercourse while non-contact types are producing or viewing pornography, forced prostitution, inappropriate observation of an individual while dressing, bathing.13

Research has shown that both sexes are affected, with male perpetrators accounting for the majority (80-95%), and female victims accounting for the majority of victims. Although there are isolated instances where females are the perpretrator.9 In contrast to popular notion that the majority strangers, perpetrators are widespread research has revealed that more often the abuser is someone known to the victim such as intimate partners, friends, family members, acquaintance, a date, former intimate partner, colleague, casual partner, supervisor/ teachers/lecturers, spiritual leaders and management personnel.4,7,9

Although the exact prevalence of sexual abuse is unknown globally due to widespread underreporting, Globally, it is reported that one in five women and one in sixteen men is a victim of sexual abuse, furthermore sexual abuse is prevalent campuses on university university-aged women are four times more likely to be sexually abused compared with any other age group 7,14-16

Sexual abuse is common in Africa with frequency ranging from 16.0% in Cameroun, 23.0% in Sierra Leone, 34.4% in Ethiopia, 49.0% in Ghana, 65.6% in Zimbabwe and 67.0% in Botswana.15 These findings are similar to the reported prevalence of sexual abuse in Nigeria, which has been reported at 36.7% in the South eastern¹⁷ part of the country while 18.4 - 51.7% from three Southsouthern universities 10-11, 18 of the country. Lower statistics of 22.2% and 6.6% were northern recorded from two Nigerian institutions, respectively. 19

Documented predictors or risk factors that predispose an individual to experiencing sexual abuse include past history of sexual abuse, drug or alcohol use, abusive intimate or dependent relationships, poverty, multiple sexual partners, 20 traditional gender and social norms that approve toxic male superiority. inadequate legal sanctions against sexual violence¹³ age, sex, and social class of women. Academic background of women, living in arrangement, loss of single or both parents, type of family, marital status, younger age at sexual debut, history of forced first sexual exposure, forced first sexual intercourse with relatives and strangers, year of study, kind of living environment of student and being a university student have also been identified as factors. 15 Furthermore. working conditions, hierarchical organizations, a normalization of gender-based violence, toxic academic masculinities, a culture of silence and a lack of active leadership are key features enabling sexual abuse in various institutions. Sexual abuse has significant effect on the victim, affecting their physical, reproductive, social and mental health.21

This study was conducted to assess prevalence and predictors of sexual abuse among undergraduate students in the University of Benin, Benin City, Nigeria in order to develop appropriate preventive interventions.

METHODOLOGY

This study was carried out among students of the University of Benin, Benin City, Edo State. Edo State is one of the 36 states in Nigeria. Benin City is the capital city of Edo State. It is located in the South-South geopolitical zone of Nigeria and has a land mass of about 19,743 square kilometers bounded by Delta State in the south, Ondo State in the west, Kogi State in the north and Kogi State and Anambra State in the east.22 Edo State consists of several ethnic groups including Benin, Esan, Etsako, Owan among other indigenous groups in addition to a pool of other ethnic groups resident in the state. The state has several public and private universities.

An analytical cross-sectional study was conducted among 500 university undergraduates between June 2022 and May 2023. Sample size was calculated using Cochran formula²³ based on a prevalence of 22.2% ¹⁹ from a previous study, taking into cognizance a 10% non-response rate with a design effect of 1.5. The respondents were selected multistage using sampling а

techniques involving four stages of selection involving selection of campuses, faculties, department and level with final selection of respondents.

Data collection was by pretested, selfadministered questionnaire. Pre-test was conducted among a comparable group of undergraduates at the Igbinedion University, Okada, Edo State. Data collected was sorted for completeness, coded, subsequently entered and analyzed using IBM SPSS version 21.0 statistical software.

Ethical clearance and approval were applied for and obtained from the Ethics and Research Committee of the University of Benin Teaching Hospital, with ethical protocol number of ADM/E22/A/VOL.VII/14831145.

Institutional approval at the educational institution was also applied for and obtained before questionnaire administration. Anonymity of respondents was assured in the study, while health education sessions were conducted to respondents following questionnaire administration.

RESULTS

Among the 500 respondents studied, 300 (60.0%) and 200 (40.0%) were males and females respectively, with mean age of 21.4 ± 2.8 years. Four hundred and seventeen (83.4%) and 83 (16.6%) were from non-medical and medical faculty respectively. The highest proportion of respondents 157 (31.4%) studied were in 300 level. (Table 1)

Almost all respondents 490 (98.0%) studied were aware of the term sexual abuse. Lifetime prevalence of sexual abuse among respondents was 320 (64.0%) while 200 (40.0%) had experienced recent history sexual abuse in the past one year. (Figure 1)

Table 1: Sociodemographic characteristics of respondents

Variables	Frequency (n=500)	Percent	
Age group (years)	\$100 miles (100 miles	CORPORATI	
16-20	212	42.4	
21-25	255	51.0	
26-30	29	5.8	
>30	4	0.8	
$Mean \pm SD = 21.4 \pm 2.7$			
Sex			
Female	300	60.0	
Male	200	40.0	
Ethnic group			
Edo State indigene	232	44.4	
Non-Edo indigene	268	53.6	
Religion	(77) (T) (T) (T)	700-711-700-72	
Christianity	468	93.6	
Islam	23	4.6	
Atheist	6	1.2	
ATR	3	0.6	
Marital status	1679.01	11/2710/073	
Never married	497	99.4	
Ever married	3	0.6	
Family structure			
Monogamous	447	89.4	
Polygamous	53	10.6	
Family type			
Nuclear	447	89.4	
Extended	53	10.4	
Faculty			
Non-medical	417	83.4	
Medical	83	16.6	
Level			
100	38	7.6	
200	67	13.4	
300	157	31.4	
400	143	28.6	
500	58	11.6	
600	37	7.4	
Residence	95.M	830083	
Outside campus	303	60.6	
Within campus	197	39.4	

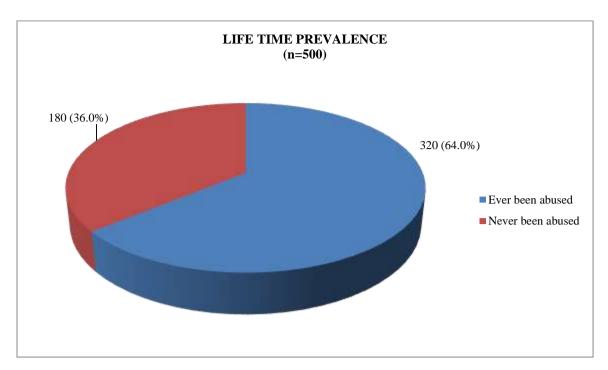


Figure 1: Lifetime prevalence of sexual abuse among respondents

In relation to factors associated with lifetime prevalence of sexual abuse, being female (p<0.001), sharing room (p=0.038), self-support in school (p=0.035), previous history of sexual abuse (p<0.001) and past abusive relationship (p<0.001) were identified as significant factors associated with sexual abuse. Finally, age, religion, marital status, family type and structure, faculty, level of students, residence, alcohol and substance use were not identified as factors associated with sexual abuse among respondents studied. (Table 2)

In relation to predictors of prevalence of sexual abuse females female sex (OR=2.234, CI= 1.532 -3.527, p<0.001) were found to be 2.2 times more likely to have experienced sexual abuse compared to males; respondents in 200 level (OR = 4.667, CI = 1.491 - 14.604, p = 0.008) and 300 level (OR = 4.570, CI= 1.603 - 13.030, p = 0.004) level 4.7 and 4.5 times respectively more likely to experience sexual abuse compared to those in final year; respondents who shared rooms (OR = 2.637, CI= 0.416 - 0.977, p = 0.039) were found to be 2.6 times more likely to have experienced sexual abuse compared to those did not; respondents who self-support in school (OR = 2.587, CI= 0.416 - 0.977, p = 0.036) were found to be 2.6 times more likely to have experienced sexual abuse compared to those did not. Furthermore, respondents with history of previous sexual abuse (OR = 6.043, CI = 3.689 - 6.238, p = 0.001) were found to be 6.0 times more likely to have experienced sexual abuse compared to who did not have such history; respondents with history of abusive relationship (OR= 5.010, CI= 1.321 - 3.234, p =

0.023) were found to be 5.0 times more likely to have experienced sexual abuse compared to those who did not have such history. Finally, faculty, family type, family structure, marital status, religion and age of respondents were not identified as predictors of sexual abuse. (Table 3)

DISCUSSION

The study identified that majority of respondent studied had high level of awareness of the term sexual abuse, this could be to type of respondents who participated in the study who were university undergraduate. This category of respondents ate exposed to a lot of information on the internet and various social media platforms.

Factors found to influence prevalence of sexual abuse in this study were sex of respondent, room sharing, self-sponsorship in school, history of previous sexual abuse and past abusive relationship. The male students were less likely to be sexually abused compared to the female students although the proportion of male student who reported sexual abuse was also high (one-third). This aspect of sexual abuse needs to be further explored as it is usually underreported. This study further identified the female sex as being more at higher risk of sexual abuse compared to males which is in keeping with existing literature. 4,7,9,14,15 Similar patterns have been reported in previous studies among Chilean and South African undergraduate students which showed that women were sexually abused more frequently than men.²⁴⁻²⁵

Table 2: Factors associated with lifetime prevalence of sexual abuse among respondents

Variables	Lifetime prevalence of sexual abuse				
	Yes No		Test statistics	P value	
	n=320	n=180	(x2)		
	Freq (%)	Freq (%)			
Age group (years)			1.702*	0.657	
16-20	141 (66.5)	71 (33.5)			
21-25	160 (62.7)	95 (37.3)			
26-30	17 (58.6)	12 (41.4)			
>30	2 (50.0)	2 (50.0)	1.1.150		
Sex	0.1.0 (20.2)	00 (00 0)	14.468	<0.001	
Female	212 (70.7)	88 (29.3)			
Male	108 (54.0)	92 (46.0)			
Religion	005 (60 5)	171 (06.7)	2.059*	0.600	
Christianity	297 (63.5)	171 (36.5)			
Islam	15 (65.2)	8 (34.8)			
Atheist	5 (83.3)	1 (16.7)			
ATR	3 (100.0)	0 (0.0)			
Marital status	040 (51.5)	450 (25 2)	1.232*	0.295	
Never married	319 (64.2)	178 (35.8)			
Ever married	1 (33.3)	2 (68.7)			
Family structure			0.484	0.487	
Monogamous	289 (64.5)	159 (35.5)			
Polygamous	31 (59.6)	21 (40.4)			
Family type			0.107	0.744	
Nuclear	285 (63.8)	162 (36.2)			
Extended	35 (66.0)	18 (34.0)			
Faculty			0.001	0.976	
Non-medical	267 (64.0)	150 (36.0)			
faculties*					
Medical faculties	53 (63.9)	30 (36.1)			
Level			10.590	0.060	
100	23 (60.5)	15 (39.5)			
200	41 (61.2)	26 (38.8)			
300	93 (59.2)	64 (40.8)			
400	102 (71.3)	41 (28.7)			
500	32 (55.2)	26 (44.8)			
600	29 (78.4)	8 (21.6)			
Residence	,	,	0.157	0.692	
Outside campus	196 (64.7)	107 (35.3)			
Within campus	124 (62.9)	73 (37.1)			
Sharing room	. ()	- ()			
Yes	257 (66.4)	130 (33.6)	4.311	0.038	
No	63 (55.8)	50 (44.2)			
Self-support in	- ()	()			
school					
Yes	69 (73.4)	25 (26.6)	4.444	0.035	
No	251 (61.8)	155 (38.2)		2.000	
Past abusive					
rast abusive relationship					
Yes	9 (100)	0 (0.0)	5.155*	<0.001	
No	311 (63.3)	180 (36.7)	0.100	\0.001	
	311 (03.3)	100 (30.7)			
Previous sexually					
abused	40 (07 7)	1 (0.2)	02 1555	∠0.001	
Yes	42 (97.7)	1 (2.3)	23.1555	<0.001	
No	278 (60.8)	179 (39.2)			
Alcohol use	21 (50.6)	01 (40 4)	0.404	0.407	
Yes	31 (59.6)	21 (40.4)	0.484	0.487	
No	289 (64.5)	159 (35.5)			
Drug abuse	7 (70 6)	2 (20 6)	0.1504	0.000	
Yes 	7 (70.0)	3 (30.0)	0.159*	>0.999	
No	313 (63.9)	177 (36.1)			

^{*}Fisher's exert

Table 3: Predictors of sexual abuse among respondents

Predictor	Regression coefficient (β)	Odd ratio	95% CI for OR		p value
			Lower	Upper	į
Age					
16-20	-1.507	0.222	0.23	2.178	1.670
21-25	-1.222	0.295	0.31	2.763	1.145
26-30	-1.334	0.263	0.26	2.711	1.190
>30*		1			
Sex					
Female	0.843	2.234	1.532	3.527	0.001
Male*		1			
Residence					
Within campus	0.297	1.321	0.886	1.971	0.172
Outside campus*		1			
Religion					
Christianity	1.386	3.998	0.433	36.943	0.222
Islam	1.304	3.684	0.316	42.980	0.298
ATR	-10.589	0.000	0.000	,,,,,	0.999
Atheist*	10.005	1	0.000		0.555
Marital status		-			
Ever married	1.772	5.881	0.438	78.888	0.364
Never married*		1	0,.00	. 0.000	0.00.
Family structure		-			
Monogamous	-0.211	0.810	0.368	1.785	0.810
Polygamous*	0.211	1	0.500	1.700	0.010
Family type		1			
Nuclear	0.363	1.437	0.656	3.147	1.437
Extended*	0.000	1.107	0.000	0.117	1.107
Faculty		1			
Medical faculties	0.444	1.559	0.866	2.807	0.139
Non-Medical faculties*	0.777	1.339	0.000	2.007	0.109
Level		1			
100	1.624	5.073	1.477	17.416	0.100
200	1.540	4.667	1.477	14.604	0.100
300	1.520	4.570	1.603	13.030	0.004
400	1.029	2.799	0.980	7.997	0.055
500	1.406	4.081	1.397	11.917	0.100
600*		1			
Sharing room	0.450	0.607	0.416	0.077	0.000
Yes	0.450	2.637	0.416	0.977	0.039
No*		1			
Self-support in school	0.500	0.505	0.056	0.06	0.006
Yes	0.533	2.587	0.356	0.967	0.036
No*		1			
History of previous abuse					
Yes	3.297	6.043	3.689	6.238	0.001
No*	· ·-	1			
History of abusive					
relationship					
Yes	2.123	5.010	1.321	3.234	0.023
No*	4,140	1	1.021	0.201	0.020
*Reference category		*			

^{*}Reference category

This could be explained further by the fact that women may be more predisposed to sexual abuse than men due to socio-cultural and socioeconomic vulnerability issues. This study identified a higher but not significant proportion of respondents of Benin ethnic extraction had experienced sexual abuse compare to other ethnic groups. This could be probably due to the study location as the Benin constitute the predominant ethnic group.²⁶ Similar pattern of

finding was reported in Sokoto metropolis, Northwest, Nigeria where respondents of Hausa, the major ethnic group were more sexually abused than other tribes27 but in contrast to findings from Imo state, Southeast, Nigeria which showed that the non-Igbo students were more sexually abused compared to Igbo students.9 Undergraduate students who shared room with colleagues were more likely to be sexually abused compared to those who did not

share their room with anybody. This finding is similar to reports from an Imo State, Nigeria study9 were students who shared room with female friends were more likely to have been abused. This could be due to the fact that most of those who shared rooms resided in outside school hostel apartment which are usually mixed sex (with increased risk for sex abuse) as opposed to school hostel apartment which as usually segmented for same sex and other security measures (with decreased risk for sex abuse).

Furthermore, students who fend for themselves while in school and had history of previous abuse or abusive relationship were more likely to have experienced sexual abuse than others. This finding was similar to a study in Port Harcourt, Nigeria 11 and New York, USA28 where students who had experienced prior sexual victimization and pre-college sexual assault were more likely to experience another form of sexual abuse. The study in Iceland reported increased likelihood of sexual abuse experiences among undergraduates from low affluent families.29 The reason for increased likelihood of sexual abuse experiences among students who had to self-support themselves in school could be due to low financial status of their families thus, predisposing them to sexual exploitations. Being previously abused or in probably render relationship could individual vulnerable to further abuse and such would benefit from counselling services and support structures to help persons who have been victims of such traumatic experiences to recover and supported to prevent reoccurrence.

Conclusion

The study identified that sexual abuse remains prevalent in tertiary educational institutions studied with females significantly affected compared to males. University Management should develop comprehensive education and programs on the prevention, identification, and reporting of sexual abuse while also holding perpetrators of sexual abuse accountable for their actions. Finally, systems should be developed to protect anonymity and enhance reporting of sexual abuse incidences to the appropriate authorities.

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