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Determinants of domestic violence against men in Kiponzero division, Iringa district council

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Abstract

Using Kiponzero Division as a case, this study aimed at exploring the determinant of Domestic Violence against Men (DVaM) in in Iringa District Council. The study employed quantitative and qualitative research methods where cross-sectional research design was used. Questionnaires and key-informants interview were used for data collection. Data analysed through Statistical Package for Social Sciences (SPSS version 20) computer software, where descriptive statistics was employed to determine frequencies and percentages. The study revealed that DVaM were attributed by higher level female's level of income, with 67.5% of the victims claimed so while 55% of victims said that excessive alcohol uses was associated with DVaM. Based on the findings, the study concluded that DVaM mostly occurs in situations where a husband cannot provide for the family, either of being not able to earn more or spend out family's needs and excess use of alcohols of both partners. It is recommended that provision of education to people on issues related to family affairs, duties and responsibilities, has to be given the most priority, to create sustainable families. Moreover, victims of DV has to be encouraged to reports their incidents to the respective organs.

Keywords: Domestic violence, Domestic violence against men, human right, Iringa District Council, Tanzania

1. Introduction

Domestic Violence (DV) is among social problem the world is facing, within a context where in many parts of the world, DV is mostly seen as synonymous with violence against female, with most men victims continued to suffer in silence (Adebayo, 2014) ^[1]. Citing Man Kind Initiative (2016), Obe (2017) ^[20] found that while 59% of men victims would more likely ignore DV incidences as compared to 40% of female victims. In such a context, Medzan (2013) ^[17] noted that most African societies are predominantly patriarchal, a man who report abuse are seen to be weak. This explains the reasons why DV is commonly studied and understood from perspective of female as victims

DV includes sexual, emotional, economic or psychological action that influences another person. It also includes any behaviour that frightens, intimidates, terrorizes, manipulates, hurts, humiliates, blames, injuries or wounds someone (Peggy, 2011). DV can be categorized into psychological, physical, sexual, financial and emotional abuse (NICE, 2016 cited by Obe, 2017) [20]. Most studies on DV in Africa focused on female as victims and men as perpetrators, with few cases which include both sexes as either victims or perpetrators (Anderson, *et al.*, 2007; Kaminer, *et al.*, 2008; Zungu, Salawu and Ogunbanjo, 2010, Gass *et al.*, 2011 and Jankey, Próspero and Fawson, 2011) [2, 9, 27, 6]. The prevalence of female as perpetrators in Sub-Saharan Africa ranges from fairy low 25% in South Africa (Kaminer *et al.*, 2008) [9]; to 34% in Kenya. Between the year 2014 and 2017, in Iringa District Council, there were 62 reported DVaM cases (Police Gender Desk Report of 2014/2017). This might be underestimation, as most men, feel ashamed to report. Along the same view, Musune (2015) [19] argues that DVaM remains largely unreported as it is considered as a taboo subject, and often men opt to keep quiet (Gross 2002a cited by Lawrence, 2003) [5]

Most studies on DV focused on violence against women and not on DVaM, probably on the context that most African societies are predominantly patriarchal, where women are victims. It was against these realities, using Kiponzero Division as a case, this study intended to determine factors associated with DVaM in Iringa District Council (IDC). The study is in line with the National Plan of Action on Gender Based Violence (GBV) (2010-2014) provided for DVaM to be recognised as a fundamental violation of human rights.

1.1 Theories on determinants of domestic violence against men

There are several theories about the determinants of domestic violence against men that are relevant for this study. Culture of violence theory which is focuses on gender related norms that permit use of violence by a dominant group to others. Domestic violence against men is seen more frequently in societies where women are considered superior and dominant (Levinson, 2011). The theory emphasise the increases risk of violence in societies where violence has become integrated into the culture.

Power theory takes this a step further by pointing specifically to the influence of power in violent relationships. The study identified four element of power. Economic inequality between men and women, use of domestic violence to control the family, men's authority; decision making powers and bureaucracy in the divorce process as determinants of domestic violence. However in societies where women's status is very high or very low, the level of domestic violence may low since violence has no role in reinforcing male authority. Where sanctions are strong and functional (legal or cultural), domestic violence can decrease because of controlled violence within those societies. Social learning theory focuses on the social contexts where behaviour is a result of observational learning, modelling and imitation. Women violence behaviours are a results of their own previous experience of violence or of having witnessed their fathers being abused (Mihalic SW, 1997) [18].

The ecological model offers a comprehensive understanding of biological and personal history factors that increase the likelihood of becoming a victim or perpetrator of violence. Some of these factors are age, education, income, substance use, or history of abuse. Prevention strategies at this level promote attitudes, beliefs, and behaviors that prevent violence. Specific approaches may include conflict resolution and life skills training, social-emotional learning, and safe dating and healthy relationship skill programs. The theory has a clear link with the study because the study findings revealed that DVaM mostly occurs in situations where a husband cannot provide for the family, either of being not able to earn more or spend out family's needs and excess use of alcohols of both partners.

2. Material and Methods

2.1 Descriptions of the Study Area

The study was carried out in IDC, Iringa Region in Tanzania. IDC is located between Latitude 7.000 and 9.300 South of the Equator and 35.00 - 37.00 Longitudes East of Greenwich. IDC had a total population of 254,032 where by males were 123,243 females 130,789 (URT, 2013). The study was conducted in 4 villages of Kiponzero Division that include Wasa, Ifunda, Usengelindete and Ufyambe villages.

The selection of Kiponzero Division based on being high incidences of DVaM compare to other areas within the district (Police Gender Desk Report of 2014/2017).

2.2 Research Design

A cross-sectional research design which allowed data to be collected at one point at a time was adopted for the study. This design is suitable for this research because of its cost-effectiveness, less time consuming and ability to collect a lot of information in a relatively convenient time. Moreover, the design was appropriate for determining the relationship between and among variables of this research.

2.3 Population of the Study, Sample Size and Sampling Techniques

2.3.1 Population of the study

The population of this proposed study included men who were victim of DV from four (4) villages and key-informants that included village leaders, Police desk officers and District Social Welfare Officers (DSWOs).

2.3.2 Sample size

Sample size of this study was 40 men victims who were used to represent the study population.

2.3.3 Sampling technique

Purposive sampling was used to obtain 4 villages of Kiponzero Division and key-informants. Furthermore, 40 men who experienced DV were obtained through purposive and snowball sampling. In Purposive sampling, it was easy to reach those victims through village leaders who had information about them and to get other victims, the snowball sampling technique was used to obtain victims through mention their fellow victims in the village.

2.4 Data Collection Method

The study used both primary and secondary data.

2.4.1 Primary data

Questionnaire was employed to get information from men who experienced DV while Key-informants interview was used to collect information from village leaders, DSWOs and police desk officers so as to get detailed information.

2.4.2 Secondary data

Secondary data included journals, research reports, dissertation, internet, census reports, books and office reports which were related to this study.

2.5 Validity and Reliability of Research Instruments 2.5.1 Validation of instruments

To ensure validity of this study, the internal validity approach was established, through ensuring trust between a researchers and respondents, giving respondent's awareness of the research topic and by initiating interview and questionnaire.

2.5.2 Reliability of data

In order to control the reliability of this research, pre-testing of interview guide and questionnaire were done in order to check if they were comprehensive enough to collect the required data. After the pre-testing, modifications and improvements of research instruments were made.

2.6 Data Analysis

2.6.1 Qualitative analysis

In qualitative data analysis, content analysis was used where by views; perceptions and opinions of the key informants were included to obtain detail information. This involved reading through the notes of each interview and identifying response relevant to the main research objective.

2.6.2 Quantitative analysis

In quantitative, data was organised, coded, summarized and analysed through Statistical Package for Social Sciences (SPSS Version 20) computer software. Descriptive statistics was employed to obtain frequencies and percentages. Then, findings were presented in tables.

2.7 Ethical Considerations

In this study, the researchers followed the University of Iringa protocol for approval of research process. The respondents were informed that the study was for academic purposes, were ensured a high level of confidentiality and anonymity and participation in the study was voluntary.

2.8 Limitation of the Study

Based on the nature of the study, the study relied on the views of men who were experiencing DV and key-informants.

3.0 Results and Discussion

3.1 The Influence of Spouses' Income on DVaM

The findings (Table 1) indicate that most respondents (72%) confirmed that their spouses were earning more income than them while only 27.5% of the respondents were earning more income than their spouses. Of the respondents, 36 (90%) testified that they are earning not more than Tshs 100,000 per month while 4 (10%) of respondents stated that they earned between Tshs 100,001 and 500,000. Results also show that half of the respondents (50%) testified that their spouses were earning between Tshs 1,000,001 to 2,000,000 per month, while 27.5% of respondents stated that, their spouses earned between Tshs 100,000 to 500,000 per month. Nevertheless, 15.5% of respondents said their spouse earning is between Tshs 500,001 to 1,000,000 per month, whereas, 7.5% of respondents said that, their spouses were earning Tshs 2,000,000 and above per month.

Table 1: Income and DV against men

Variable	Categories/response	Frequency	Percent (%)
Earner of more income	Husband	11	27.5
	Wife	29	72.5
	Total	40	100
	1-100,000	36	90
Income of respondents per month	100,001- 500,000	4	10
	Total	40	100
Income of spouse per month	100,000-500,00	11	27
	500,001-1,000,000	6	15
	1,000,001-2000,000	20	50
	2,000,000 and above	3	7.5
	Total	40	100
Influence of women's income on DV	Yes	27.5	67.5
	No	13	32.5
	Total	40	100
Situatio	ons influencing DVaM		
Failure to provide food for the family		17	42.5
Failure to pay school fees for the children		12	30
Failure to contribute for development		8	20
Violence occurred due other reasons		3	7.5
Total	Total	40	100

Source: Researcher (2018)

The research also found that most women in villages were mostly involved in different economic activities; and being members of Village Community Banks (VICOBA), that might have contributed to their more income. It worth noting that these incomes were based respondents" estimation as in most case people do not keep records.

Results (Table 1) further revealed that, most of respondents (67.5%) agreed that they have been victims of DVaM because their spouses had more income while 32.5% of respondents claimed that income is not the reasons DVaM. One village leader, in Wasa village claimed that most of DVaM incidents where attributed by income in a family. He added that, most women were engaging in different income generating activities through their groups, hence they earn more money as a results they see their husbands as useless. Men are facing a lot of DV. DVaM cases he has been receiving included sexual denials and room separation, insult and their wives cheating on them with other lovers.

According to a DSWO; majority of victims complained that

was due to their spouse's income. She added women's greedy for money and age difference, were linked to love affairs with individuals. An interview with Police Gender Desk Officer revealed that DVaM cases were mostly influenced by financial difficulties of husband to the extent of failing to meet family needs. One of the victims informed the Police officer that "he has been humiliated sometimes before hi children because I am useless, I can't provide for the family". The study findings suggest that women with high income in a family were perpetrators of DVaM. Moreover, a Marriage Act Section 63 (a), husbands are required to provide for their families; therefore, their financial difficulties might lead to inferiority complex and instigate for DV. In his study Mashiri (2013) also found that economic elements such as income push women into appropriators of DV, especially when a wife earns more than her husband. Similar findings were also reported by (Carney et al., 2006; Medzani, 2013 and Musune, 2015) [3, 17].

Results (Table 1) show that majority of the respondents

(42.5%) declared that DVaM occurred once husbands failed to provide food, 30% of respondents declared that DVaM happened when they were unable to pay school fees for their children while 20% and 7.5% of respondents declared that actions of DVaM were due failed to support development and due to other reasons such as; late coming at home, extremely alcohol use and men perceived infidelity respectively.

A village leader in Ufyambe claimed that in cases a husband fails to provide for his family he is more likely to be a victim of DV. He added that one man confessed to him that since he fell sick and being incapable to work, he has been experiencing DV. The victim added that he thinks his wife was tired of providing everything to me: she insults me every day and sometime she left without providing food, he added. Despite, Section 63(b) of the law of Marriage Act of Tanzania of 1971, revised edition of 2002, state that "it shall be the duty of every wife who has the means to do so, to provide in similar manners for her husband if he incapacitated, wholly or partially from earning a livelihood by reasons of mental or physical injury or ill-health. However, studies show that many women opt to die in silences. A study in Zambia by Musune (2015) [19] found that lack of employment or failure to provide for the family was another reason for DVaM: wives often used demeaning and abusive language.

3.2 Alcohol Uses and DVaM

Results (Table 2) show that 75% of respondents were drinking alcohol while 25% were not drinking alcohol. Of the respondents, 82.5% claimed that their spouses were drinking alcohol, while only 17.5% of spouses were not drinking alcohol. Results further revealed that almost half (47%) of respondents were drinking alcohol to the extent of losing control, while 30% of the respondents had normal alcohol drinking and 22% of respondents were drinking for leisure. Of respondents, (32%) claimed that their spouse's were drinking to an extent of losing control, while 40% of the respondents revealed that their spouses had normal drinking and 27% of respondents emphasized that their spouses were drinking for leisure.

Results indicate that 79 % of both men and their spouses were drinking alcohol to an extent of losing control, 70% were drinking alcohol normally while 47% of both men and their spouses were drinking alcohol for leisure. Contrary to the finding of Francis *et al.* (2015) that use of alcohol to men in most developing countries is more accepted than for women; results in this study indicate the alcohol consumption is almost similar to both men and women. Probably, this might be attributed culture and the area being one of areas where there is high production of local alcohol brewed from bamboo juice, called ulanzi.

Table 2: Husbands and Spouses use, and extent of drinking alcohol

Dagmanga	Husbands	Spouses
Response	<u>F (%)</u>	<u>F (%)</u>
Husbands and Spouses use of alcohol	hol 20 (75%) 22 (82 5%)	
Yes	30 (75%)	33 (82.5%)
No	10 (25%)	7 (17.5%)
Total	40 (100%)	40 (100%)
Extent of alcohol between husband and	l spouses	
Drink and lose control	19 (47.5%)	13 (32.5%)
Normal drinking	12 (30%)	16 (40%)
Drinking for leisure	9 (22.5%)	11 (27.5%)
Total	40 (100)	40 (100)
Association between DVAM and alcohol use	(21) 52.5	(19) 47.5
Being a victim of DVAM associated with alcohol use	(22) 55	(18) 45

Source: Researcher (2018). Note: number in bracket are respectively frequencies and % = percent

Of the respondents, 52.5% declared that there was a link between alcohol use and DVaM while 47.5% claimed that there is no such a link between alcohol use and DVaM. Of the respondents, (55%) claimed to be victim of DV due to caused by alcohol use while 45% of the respondents claimed that their being victim DV was not due to alcohol use.

The above results were supported by what the village leader said: insult and shouting to some women against their husband has become a normal action, with some women after being drunk became aggressive to their husband it has been done in public. The leader added that "one time the women of this village decided to demonstrate against their fellow woman for the action of humiliation against her husband.

Woman for the action of humiliation against her husband. The study also found that sometimes victims of DV instigate violence themselves because of excessive alcohol drinking to the extent became irresponsible to their families, a behavior that most of women were not ready to tolerate. A Police Gender Desk Officer added that: other men do not drink at all but their wife drink too much and they perceive this as abuse because through drinking their wives were not be able to fulfil their duties and responsibilities to their husband. The

study revealed excessive use of alcohol instigates DV among spouses. Similarly to Musune (2015) [19] in his study found that appropriators of DVaM when they were drunk than sober and; do not tolerate drunkards husband that provide nothing to the family and who always take household items in exchange of alcohol, of which it is the wife who have provided (Kubai, 2014) [11]. Moreover, excessive use of alcohol can contribute to DVaM as a failure of a partner to fulfil sexual desire of his or her partners, which instigate infidelity. For example, On June 28, 2014, the East African Newspaper reported the negative implications of alcohol abuse as per interviews with TFDA and quoted the TFDA official as saying "...in men, alcohol can cause difficulties getting and maintaining an erection - while women may experience reduced lubrication, find it harder to have an orgasm, or have orgasms that are less intense and have behind a number of failed marriages in the popularly known district of Kilimanjaro Region". According to Sharma et al. (2016) [23] alcohol should not be used as an excuse for those who perpetrate DV; neither should its influence be ignored.

3.3 Spouse's Exposure to DV during Childhood and DVaM $\,$

The results (Table 3) indicate that 45% of the respondents established that their spouses were exposed to DV during their childhood while 55% of the respondents claimed that their spouses were not exposed to DV during their childhood. Results further show that most of respondents (67.5%) agree that their being victim of DV is not related with their spouses' background while 32.5% of the respondents agreed that there were some elements of truth on the link between being victims of DV and their spouses upbringing. Both DSWO and leader were of the view that.

Some women are just revenging to their partners. DSWO also added that: in one case one of the woman claimed that her partner seek sympathy here but he had been abusing me previously now he had nothing he claims me to abuse him. Despite most of victim of DV claimed that there was no association between DV and exposure of an individual to DV during childhood, the literature shows that exposure to DV upbringing is one of the most important contributing to ones being perpetrators of DV. Several studies asserted that upbringing and DV could result from DV during one's adulthood (Malley-Morrison and Hines, 2007; Kongsakon and Pojam, 2008; Laeheem, 2013; Laeheem and Boonprakarn, 2014; Musune, 2015) [115, 10, 12, 19]. It is against the above findings and literature, the study put it that exposing children to DV builds influence DV once children become adult.

Table 3: Spouses' exposure to DV during childhood and DVaM

Response	Frequency (n=40)	Percent (%)
Spouse' exposure to DV during childhood		
Yes	18	45
No	22	55
Total	40	100
Exposure to DV during childhood and DVaM		
Yes	18	32.5
No	22	67.5
Total	40	100

Source: Researcher (2018)

3.4 Reported DVaM Actions

Results (Table 4) show that most of respondents (80 %) said that they did not report DV actions to either family or any government organs while only 20% claimed to have reported to the families but no successful measures were taken. An interview with Police Gender Desk Officer and DSWO both revealed most of cases were reported by woman as victims, though sometime we came to revealed that some women were appropriators as they mistreat their husbands. From what we have been doing we come to understand that DVaM in the society is persisting but men are not encouraged to report violence to the responsible authorities as they feel ashamed, she added. Also, village leader in Usengelindete said that; DVaM cases are many but men are not ready to report because they feel ashamed, embarrassed and look like weak in front their wives.

Table 4: Reported violence actions

Response	Frequency(n=40)	Percent (%)
Yes	32	80
No	8	20
Total	40	100

Source: Researcher (2018)

In their study Cook (2009) and Hogan et al. (2012) put that men are not reporting the DV incidents as they feel ashamed, weak and embarrassed and therefore will not admit what has happened to them. Similarly, Citing Walby and Allen (2004), Hall (2016) [7] reported that male victims were even less likely to report abuse than females; with reasons for not reporting is the idea that it makes them feel ashamed whilst also damaging their masculine status (Migliaccio, 2001 cited by Hall, 2016) [7]. It is culturally believed that men are physically superior and therefore should be able to defend themselves especially in private, domestic matters (Finley, 2013 cited by Hall, 2016) [7]. DVaM remains largely unreported suggesting that the number of such cases might be higher than the statistical show (Shutler, 2010; Musune, 2015 [19] and Mankind initiative, 2016 cited by Obe, 2017) [20]. In such cases the statistics on DVaM might be underestimation of the actual incidences.

4. Conclusions and Recommendations

4.1 Conclusions

It against the study findings, it concluded that: first, DVaM was mainly determined t is mostly happens; where husbands cannot provide to their families and when women earns more than their spouses. Second, excessive alcohol use to either men or their spouses not only instigate DV but also contributes to failure of spouses to fail to meet their duties and responsibilities that also contributes to DV. Lastly, there might many cases of DVaM as most victims opt to be silence.

4.2 Recommendation

Based on the study findings, the following recommendations are provided

Firstly, economic empowerment should be gender based in order to minimize DVaM as a result of one sex to be economically weak.

Secondly, education on impacts on extensive and excess alcohol use should be provided to community members in order to avoid unnecessary DV and humiliation among couples.

Thirdly, there should be creation awareness among males to report DV from their spouses to avoid infusion of such behaviour to their children.

Fourthly, Governments and other stakeholders should create awareness on gender rights, law enforcement and revise discriminative law: Marriage Act, Section 63 of 1971, revised 2002 on the role and responsibilities of spouses in family affairs.

5. Policy Implications

Despite the Government has been pioneering gender equality and gender rights, efforts to address the gender gap between men and women should be gender-based rather than sexbased, women in this matter, as it creates another equality.

6. Authors' Contributions

Elizabeth. G. Wakolela, Sosthenes Ruheza and Amos Ansigary Msambila conceptualized the research idea. Both authors wrote the draft of the manuscript. The final manuscript was read, edited and approved by both authors.

7. Conflict Of Interest

Authors have no conflict of interest with the study and the study findings, and the study was for academic purpose.

8. Funding Statement

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