AN ASSESSMENT OF SOCIAL WORK INTERVENTION STRATEGIES ON INTIMATE PARTNER ABUSE IN EGOR LOCAL GOVERNMENT AREA, EDO STATE

BY

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CERTIFICATION

We certify that this thesis was carried out by **Vivian IZEKOR** with Matriculation number **SSC2014194** of the Department of Social Work, Faculty of Social Science, University of Benin, Benin City, Edo State, Nigeria and has been presented to the Board of studies for the award of a Bachelor Degree (BSc) in Social Work.

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DATE	**DATE**

DEDICATION

This work is dedicated to God Almighty, my lecturers at school and most especially my amiable supervisor Dr. (Mrs.) Helen Ehi. EWEKA, I would also like to dedicate this work to my parents, Mr. and Mrs. Izekor and my siblings, Itohan mercy Izekor, Nosa Izekor, Kelly Izekor, Wesley Izekor and Darlington Izekor for their love and support. Also included in this dedication are my friends and colleagues in Department of Social Work, University of Benin, Benin City

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Vivian IZEKOR
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Abstract

This study investigated social work intervention strategies addressing intimate partner abuse (IPA) in Egor Local Government Area, Edo State, Nigeria. The objectives were to assess the prevalence and forms of IPA, identify socio-cultural factors influencing its occurrence, evaluate the effectiveness of existing interventions, and examine challenges faced by social workers. A quantitative research design was employed, and data were collected using structured questionnaires administered to adult residents, including survivors and social work professionals. Of 400 distributed questionnaires, 386 were completed and analysed using descriptive statistics. Findings indicated that physical, emotional, sexual, financial, and controlling behaviours were the most common forms of IPA in the area. Socio-cultural factors such as patriarchal norms, poverty, unemployment, misinterpretation of religious teachings, weak institutional responses, and family pressures significantly contributed to the persistence of abuse. Social work interventions—including counselling, public awareness campaigns, economic empowerment initiatives, legal advocacy, and collaboration with community leaders were found to be moderately effective. However, limited resources, stigma, fear of victim-blaming, and inadequate inter-agency collaboration constrained their full impact. The study concluded that while existing interventions have mitigated IPA to some extent, more integrated, well-resourced, and culturally sensitive strategies are required. Recommendations included strengthening institutional support, enhancing community sensitisation, promoting gender equity, and providing continuous professional development for social workers. The study contributes empirical evidence for policy formulation and practical guidance for social work interventions targeting intimate partner abuse in urban Nigerian contexts.

Keywords: Intimate Partner Abuse, Social Work Intervention, Socio-Cultural Factors, Counselling, Economic Empowerment

CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

Intimate partner abuse (IPA), also known as intimate partner violence (IPV), is one of the most urgent human rights and public health concerns globally. Intimate partner violence (IPV) is a serious and persistent life-threatening criminal and public health problem and it is prevalent in every socioeconomic, cultural group, regardless of race or ethnicity. (Omoroguiwa, T.B.E & Amas, 2020a). The World Health Organization (WHO, 2013) defines it as any behaviour within an intimate relationship causing physical, psychological, or sexual harm, including physical aggression, sexual coercion, psychological abuse, and controlling actions. Although both genders can be affected, women and girls are disproportionately impacted.

Globally, IPA is highly prevalent. A 2021 WHO report estimated that nearly one in three women worldwide have experienced physical and/or sexual violence by an intimate partner or non-partner sexual violence in their lifetime. Rates are higher in many sub-Saharan African countries due to entrenched patriarchal norms, weak legal systems, and cultural beliefs that legitimise violence against women.

In Nigeria, the problem of intimate partner abuse is severe. This phenomenon (physical violence, verbal abuse, psychological violence, emotional violence etc) is

noticeable within our environments and has always been a part of human history. Thus, this problem leans strongly on the foundations of gender bias, religious doctrines, customary cum traditional stance. All these foundations are deeply aligned with the orthodoxly patriarchal template that rules in many communities in developing countries, of which Nigeria is part. Thus, the stance of sharia law, and other groups, which may subtly endorse a man applying force on his wife, just to get a desired result may be permitted (Omoroguiwa, T.B.E & Amas, S. 2020b). Socio-economic inequalities, unemployment, alcohol and drug abuse, and cultural tolerance for male dominance fuel its persistence (NPC & ICF, 2019). The 2018 Nigeria Demographic and Health Survey reported that 36% of ever-married women aged 15–49 had experienced emotional, physical, or sexual violence from a partner: 19% physical, 7% sexual, and 28% emotional abuse.

In Edo State, particularly Egor Local Government Area, IPA is shaped by cultural, religious, economic, and urban factors. Egor, a densely populated and culturally diverse part of Benin City, houses Edo, Esan, Urhobo, and Yoruba communities.

Despite cultural differences, patriarchal values prevail, often granting men perceived authority to discipline their spouses. Religious teachings and community norms frequently encourage women to remain silent and submissive, even in abusive relationships (Osezua, 2018). However, in (Omorogiuwa,2025a) states that the harm done or committed by partners against their companion in intimate partner union is

often ignored as isolated incidences that should be best be left within the confines of the home or addressed as private matters.

Recent socio-economic challenges, including unemployment, inflation, and urban pressures, have intensified IPV. Research shows that economic stressors combined with societal expectations of male dominance increase the likelihood of violence as a means of control (Oladepo et al., 2011). Women with limited education or financial independence often have few escape options, leaving them vulnerable and isolated. Advocacy against IPA has grown, with non-governmental organisations, women's rights groups, and community-based organisations raising awareness and providing shelters, legal aid, and counselling. The Violence Against Persons (Prohibition) Act (VAPP) of 2015 criminalises gender-based violence, including IPA, and provides for victim protection and compensation (Federal Ministry of Justice, 2015). However, state-level adoption is uneven. Edo State only domesticated the Act in 2021, and full implementation in communities like Egor remains limited (WARDC, 2022).

In Egor LGA, responses to IPA vary. While some survivors report effective support from social workers, others experience dismissal or neglect of their complaints. This inconsistency highlights the need for systematic evaluation of social work interventions to identify strengths, gaps, and opportunities for improvement. Without such assessment, efforts to combat IPA risk being fragmented, ineffective, and unsustainable.

1.2 Statement of the Research Problem

Intimate partner abuse (IPA) is a major public health, human rights, and social development challenge in Nigeria. Despite global recognition of its severity, prevalence remains high. The 2018 Nigeria Demographic and Health Survey reported that 36% of ever-married women aged 15–49 had experienced emotional, physical, or sexual abuse from partners, with 19% suffering physical violence and 7% reporting sexual violence (National Population Commission [NPC], 2019). These figures likely underrepresent the reality due to stigma, fear, and societal pressure discouraging reporting.

In Edo State, recent NGO and community-based findings indicate even higher rates. A 2022 Women's Rights Advancement and Protection Alternative (WRAPA) survey found that up to 42% of women had experienced partner violence in the past year (WRAPA, 2022). In Egor Local Government Area, part of the Benin metropolitan region, socioeconomic challenges—unemployment, rising living costs, substance abuse, and poor housing—heighten the risk (Oladepo, Yusuf, & Arulogun, 2011). Cultural values, patriarchal norms, and religious interpretations often legitimise male dominance. Osezua (2018) found that many communities still view wife-beating as acceptable discipline when women are perceived as disobedient. Such attitudes normalise violence and silence survivors, limiting help-seeking. Wife battering a

worldwide phenomenon, seems to be backed as part of our culture (Omorogiuwa, 2025d).

Although the Violence Against Persons (Prohibition) Act (VAPP) was enacted nationally in 2015, Edo State domesticated it only in 2021 (Women Advocates Research and Documentation Centre [WARDC], 2022). Implementation remains weak: many survivors are unaware of their rights, while social services are poorly coordinated and under-resourced. Social workers are vital to providing survivor-centred care, advocacy, and coordinated psychosocial support (Kirst-Ashman & Hull, 2015). However, in Nigeria, their capacity is hindered by inadequate funding, lack of specialised training, limited integration into healthcare, and weak collaboration with law enforcement and the judiciary (Ojelabi, Atinmo, & Olatona, 2021). In Egor, interventions are often reactive, fragmented, and heavily dependent on NGOs rather than state systems.

Existing shelters and support services are concentrated in central Benin City, leaving many Egor residents with limited access. Survivors often turn to informal networks such as religious leaders or family elders, which may perpetuate victim-blaming, silence, or pressure for reconciliation (Alo & Akinde, 2021).

There is a lack of systematic, context-specific evaluation of social work interventions in Egor LGA. Most studies focus on prevalence or legal gaps, with little attention to how social workers engage survivors, assess risk, and navigate cultural barriers.

Without this evidence, interventions risk being misaligned and unsustainable. This study addresses this gap by examining social work responses to IPA in Egor, identifying challenges, and proposing culturally grounded strategies to enhance prevention, protection, and survivor support.

1.3 Aims and Objectives of the Study

The main aim of this study is to examine the nature, effectiveness, and challenges of social work intervention strategies in addressing intimate partner abuse in Egor Local Government Area, Edo State. The specific objectives of this study are to:

1. examine the prevalence and forms of intimate partner abuse experienced by individuals in Egor LGA.
2. explore the socio-cultural, factors contributing to intimate partner abuse in Egor LGA.
3. identify the social work intervention strategies currently in use for addressing intimate partner abuse in Egor LGA
4. ascertain how effective are the existing intervention mechanisms to curbing intimate partner abuse in Egor LGA.
5. investigate the challenges faced by social workers and service providers in implementing intimate partner abuse interventions in Egor LGA.

1.4 Research Questions

The research questions that will guide this study are:

1. What are the prevalent forms of intimate partner abuse experienced by individuals in Egor Local Government Area?
2. What socio-cultural, factors contribute to the occurrence and persistence of intimate partner abuse in Egor Local Government Area?
3. What social work intervention strategies are currently in use to address intimate partner abuse in Egor Local Government Area?
4. How effective are the existing intervention mechanisms to curbing intimate partner abuse in Egor LGA?
5. What challenges do social workers and service providers face in implementing intervention strategies against intimate partner abuse in Egor Local Government Area?

1.5 Significance of the Study

Intimate partner abuse (IPA) is a pervasive and deeply entrenched social problem in Nigeria, and its growing prevalence within Egor Local Government Area of Edo State calls for urgent, coordinated, and culturally responsive interventions. The significance of this study lies in its contribution to the body of knowledge on gender-based violence and social work practice in Nigeria, particularly in urban and peri-

urban settings where socio-cultural values and modern legal frameworks often conflict.

This study is crucial as it bridges a knowledge gap in localised academic and policy literature. While national and state-level statistics on intimate partner abuse have been documented by various organisations and surveys, there is limited empirical research focused on the specific realities of communities like Egor LGA. This area presents a unique intersection of traditional belief systems, urban poverty, religious conservatism, and evolving gender dynamics. Understanding the patterns and nature of IPA in this context will provide valuable insights into how violence manifests in everyday relationships, and why survivors often remain trapped in abusive environments.

The findings of this study will also benefit social workers and service providers by offering a critical appraisal of current intervention strategies. By identifying what is working, what is not, and why certain approaches may fail or succeed, the study will help strengthen social work practice through evidence-based recommendations. It will also help professionals understand the barriers they face in implementing effective responses such as funding challenges, lack of institutional backing, insufficient training, and community resistance thereby providing a foundation for improved service delivery, advocacy, and professional development.

In addition, the study will support policy-makers and government agencies in making informed decisions. The implementation of the Violence Against Persons (Prohibition) Act in Edo State remains uneven, particularly at the community level. The study will highlight gaps between policy and practice, identify implementation bottlenecks, and recommend actionable strategies to strengthen the link between statutory frameworks and on-the-ground interventions. Such data-driven insights are essential for developing policies that are not only legally sound but also culturally sensitive and practically applicable.

For non-governmental organisations, religious institutions, women's rights groups, and community-based organisations, the study will serve as a practical tool for designing and evaluating community outreach, education, and survivor support programmes. It will underscore the importance of collaborative, multi-sectoral efforts in addressing intimate partner violence and provide a roadmap for scaling up interventions in similar communities across Edo State and beyond.

Finally, the study holds broader academic value. As social work continues to evolve in Nigeria, there is a pressing need for contextually relevant scholarship that speaks to the lived experiences of vulnerable populations. This research will contribute to the growing field of indigenous and applied social work by situating practice within a culturally informed, ethically grounded, and community-responsive framework.

1.6 Scope of the Study

This study focuses on intimate partner abuse (IPA) within Egor Local Government Area of Edo State, Nigeria. It examines the forms, prevalence, and contributing socio-cultural and economic factors of IPA, specifically within romantic or marital relationships. The study is limited to Egor LGA due to its urban diversity and reported cases of partner violence.

1.7 Definition of Basic Concepts

To ensure clarity and consistency throughout this study, the following key concepts are defined in the context of this research:

Intimate Partner Abuse (IPA): Intimate Partner Abuse refers to any behaviour by a current or former spouse or partner that causes physical, sexual, emotional, psychological, or economic harm.

Social Work Intervention: This refers to planned actions or strategies employed by trained social workers to support individuals, families, or communities in addressing social problems

Gender-Based Violence (GBV): This is violence directed at an individual based on their gender or sex. It often stems from societal power imbalances and includes physical, sexual, and psychological harm.

Survivor: This is an individual, typically a woman, who has experienced intimate partner abuse and is still alive. The term is preferred over "victim" as it emphasises resilience and the capacity to seek help and recover from abuse.

Cultural Norms: These are the shared values, beliefs, and expectations that influence behaviour within a community. In the context of IPA, cultural norms may include beliefs that justify male dominance, silence female suffering, or encourage reconciliation at the expense of safety.

CHAPTER TWO

LITERATURE REVIEW

Preamble

This chapter focuses on the review of relevant literature of the phenomenon being investigated in this study. It will also discuss the theoretical framework that will inform this study.

2.1 Conceptual Review

2.1.2 Conceptual Clarification of Intimate Partner Abuse

Intimate Partner Abuse (IPA) is a critical public health concern and a profound violation of human rights, cutting across socio-economic, religious, and cultural boundaries. It involves the systematic use of power and control by one partner over another in an intimate relationship. The World Health Organization (2013) defines it as “any behaviour within an intimate relationship that causes physical, psychological or sexual harm,” including relationships between current or former spouses or partners, whether married or cohabiting, and applying to both heterosexual and same-sex couples. Partner Abuse is a serious and persistent life-threatening criminal and public health problem and its relevant in every socioeconomic, cultural group, regardless of race or ethnicity (Omorogiuwa,2025b).

Historically, IPA was often narrowly viewed as physical violence within marriage, regarded as a private matter. Feminist advocacy from the 1970s onward reframed it as a social issue rooted in patriarchal norms, gender inequality, and systemic power imbalances (Dobash & Dobash, 1979; Andersen, 2005). From this perspective, IPA reflects societal structures that condone male dominance rather than isolated acts of conflict.

In African contexts, including Nigeria, cultural norms often reinforce male authority and female subordination. In patriarchal settings such as Edo State, religious interpretations, bride-price customs, and communal expectations encourage female endurance and submission in marriage (Osezua, 2018). A number of Nigerian women experience various rights issues and prejudices under some existing laws, igniting some critical debates in light of the gaping display of socioeconomic deprivation and political marginalization (Omorogiuwa,2022). Consequently, behaviours recognized internationally as abuse may be considered acceptable discipline or marital duty.

The concept of IPA is further obscured by silence, stigma, and cultural denial. Survivors may avoid labelling their experiences as abuse due to internalised norms, fear of retaliation, or lack of awareness of their rights. In communities where marital sanctity and family reputation take precedence, abuse often goes unreported or is rationalised (Alo & Akinde, 2021).

Legally, Nigeria has taken steps to broaden the definition of IPA. The Violence Against Persons (Prohibition) Act (VAPP) of 2015 domesticated in Edo State in 2021 extends recognition beyond physical harm to include sexual, emotional, psychological, and economic abuse (Federal Ministry of Justice, 2015). This shift acknowledges the multidimensional nature of IPA. However, enforcement is inconsistent, and cultural acceptance of these definitions remains limited at grassroots level.

For social workers, understanding IPA requires recognising its socio-cultural foundations, survivors' lived experiences, and structural barriers to help-seeking. They must navigate between formal legal frameworks and informal community norms to deliver survivor-centred interventions. In settings where cultural practices blur the line between accepted behaviour and rights violations, social workers have a crucial role in advocacy, protection, and empowerment.

2.1.2 Dimensions of Intimate Partner Abuse

Understanding intimate partner abuse (IPA) requires recognising its multiple forms beyond physical assault. Abuse may be overt or subtle, yet each form serves to control, subjugate, and disempower the victim. Limiting focus to physical violence risks obscuring the broader experiences of survivors and undermining effective interventions (Stark, 2007; WHO, 2013). Therefore, threats or indecent assaults, intimidation on the basis of one's identity, physical assaults, any form of sexual

abuse, etc., are examples of violence in the home, household or family (Omorogiuwa & Omorogiuwa, 2008; Omorgiuwa, 2018d; Omorogiuwa & Ukponahiusi, 2019).

a. **Physical Abuse:** involves acts such as hitting, slapping, kicking, choking, burning, or the use of weapons. It often escalates over time, potentially leading to serious injury or death (WHO, 2013). In Nigeria, it is frequently under-prosecuted, with survivors deterred by fear of ostracism, financial dependence, or pressure to preserve family unity (Alo & Akinde, 2021).

b. **Sexual Abuse:** encompasses any non-consensual sexual contact or coercion, including marital rape, forced intercourse, and denial of contraception. In patriarchal societies such as Nigeria, marital rape is rarely recognised in law, and spousal consent is often presumed, fueling underreporting (Osezua, 2018).

c. **Emotional and Psychological Abuse:** includes insults, threats, humiliation, manipulation, and isolation from support networks. A woman who is psychologically abused will suffer harm to both her physical and mental well-being, even though she won't have any apparent injuries or bruises. (Omorogiuwa,2025c) These acts erode identity and self-worth, creating dependency and long-term effects such as anxiety, depression, and post-traumatic stress disorder (Kitzmann et al., 2003; Stark, 2007).

d. **Economic Abuse:** is the restriction or control of financial resources, including sabotaging employment or limiting access to money. This fosters dependency and prevents victims from leaving abusive relationships (Postmus et al., 2012). In Nigeria, financial control is often normalised, particularly where women rely economically on spouses (Ojeahere et al., 2021).

e. **Spiritual and Cultural Abuse:** occurs when religious or cultural beliefs are exploited to justify control. This may involve misusing sacred texts, threaten spiritual consequences, or enforce traditions that demand female endurance in marriage (Osezua, 2018).

f. **Social Abuse:** refers to the deliberate isolation of a victim from friends, family, or community. It may involve restricting movement, monitoring communications, or spreading damaging rumours, thereby deepening dependence on the abuser (Stark, 2007).

g. **Legal and Institutional Abuse:** arises when protective systems re-victimise survivors. This includes dismissive law enforcement, judicial delays, or community pressure to reconcile. In Edo State, despite the domestication of the Violence Against Persons (Prohibition) Act, weak enforcement and low awareness impede access to justice (Federal Ministry of Justice, 2015).

2.1.3 Causes and Risk Factors of Intimate Partner Abuse

Intimate partner abuse (IPA) is a multifaceted social problem shaped by individual, relational, community, and societal factors. While no single cause explains all cases, several interrelated risk factors heighten the likelihood of abuse.

1. Socio-Cultural Norms and Patriarchy: Patriarchal norms that legitimise male dominance and female subservience are major contributors to IPA. The politico-strict structure of the Nigerian culture has made and kept up a severe type of male-controlled society (Amadasun & Omorogiuwa, 2020a) In many Nigerian communities, including Egor LGA of Edo State, traditional gender roles endorse male authority and normalise coercion (Osezua, 2018). Religious misinterpretations also reinforce these dynamics, with selective readings of scripture used to justify control and discourage divorce, even in abusive situations (Alo & Akinde, 2021). This may suggest that men use domestic violence as a tool to persuade women to comply to their clearly submissive position in Nigeria's traditionally patriarchal society. (Omorogiuwa,T.B.E. & Amadasun,S. 2020b) Such beliefs discourage women from reporting abuse and perpetuate a culture of silence.

2. Economic Dependency and Poverty: Economic dependence traps victims in abusive relationships, particularly where women lack income, education, or access to property. In Nigeria, limited employment opportunities for women exacerbate vulnerability (Postmus et al., 2012; Ojeahere et al., 2021). Stress in Economy can

raise the risk of wife battering and low income households are more likely to experience spouse violence (Omorogiuwa 2025b). Poverty and unemployment can also increase perpetration risk, as financial stress and frustration may be displaced through violence (Jewkes, 2002).

3. Childhood Exposure to Violence: According to social learning theory, witnessing or experiencing abuse in childhood increases the likelihood of later perpetration or victimisation (Bandura, 1977). Children who are victims of domestic violence may have changes in their social lives, morals and worldview. (Omorogiuwa 2025c).

4. Substance Use and Mental Health Challenges: Alcohol and drug misuse are consistently linked to IPA, as intoxication lowers inhibitions and impairs judgment, heightening aggression (WHO, 2013; Fulu et al., 2013). Many turn to alcohol and other narcotics and other chemical abuses as a stress reduction strategy (Omorogiuwa 2025d). Mental health disorders—such as depression or PTSD—can also be associated with increased risk, though these do not cause abuse on their own and must be understood within broader gender and social contexts (Stark, 2007).

5. Weak Institutional and Legal Frameworks: Poor institutional responses allow IPA to persist. Survivors often face dismissive police attitudes, slow court processes, and pressure to reconcile rather than prosecute (Ajayi, 2016). Although Edo State domesticated the Violence Against Persons (Prohibition) Act in 2021, awareness and

enforcement remain weak. Customary justice systems may also prioritise family unity over victim protection, limiting survivors' options.

6. Relationship and Individual Factors: Dynamics such as jealousy, possessiveness, infidelity, and controlling behaviour increase risk. Low education, poor communication skills, and emotional insecurity are also linked to perpetration (Abramsky et al., 2011). Early marriage, common in parts of Nigeria, heightens vulnerability as young brides often lack maturity, support networks, and negotiating power (NPC & ICF, 2019).

2.1.4 Consequences of Intimate Partner Abuse

Intimate Partner Abuse (IPA) has wide-ranging consequences that extend beyond immediate physical harm. It affects victims' physical, psychological, economic, and social wellbeing, while also disrupting family stability and community development. In areas like Egor Local Government Area of Edo State, where responses to IPA remain inadequate, these consequences are especially pronounced.

Physical injuries are among the most visible outcomes, ranging from bruises and fractures to permanent disability and, in severe cases, death. Globally, 38% of all murders of women are committed by intimate partners (World Health Organization, 2013). In Nigeria, IPA significantly contributes to maternal morbidity and mortality (Alo & Akinde, 2021). Survivors also face increased risks of chronic illnesses,

sexual and reproductive health problems, and complications such as miscarriage and sexually transmitted infections (Campbell, 2002).

Psychological harm, though less visible, is equally damaging. Survivors frequently experience depression, anxiety, post-traumatic stress disorder, suicidal thoughts, and low self-esteem (Stark, 2007; Kitzmann et al., 2003). Coercive control fosters feelings of helplessness, making escape more difficult. Children who witness IPA may suffer emotional trauma, behavioural problems, and academic decline, with potential intergenerational effects (Kitzmann et al., 2003).

Socially, IPA often isolates victims from friends and family, as abusers deliberately restrict their networks. In Edo State, women who disclose abuse may face stigma, being labelled as disrespectful or morally suspect (Osezua, 2018). Such social pressures reinforce silence and hinder help-seeking.

Economic consequences are equally severe. Survivors may be forced to leave education or employment, or prevented from earning income, leading to dependency on the abuser. Those who work may experience absenteeism and reduced productivity due to the abuse's toll (Postmus et al., 2012). In already disadvantaged settings, this economic dependency further limits access to healthcare, legal aid, and recovery resources.

IPA's impact on children and families is profound. Children may endure neglect, direct abuse, or emotional harm, leading to long-term behavioural and educational challenges (Fantuzzo & Mohr, 1999). Family fragmentation is common, with displacement or entry into welfare systems disrupting stability.

Legally, IPA strains justice and support systems. Survivors need police intervention, medical care, counselling, and legal representation, yet in Nigeria these are often under-resourced (Ajayi, 2016). Even with frameworks like the Violence Against Persons (Prohibition) Act (2015), enforcement is hampered by low awareness, weak political will, and cultural biases.

At the societal level, IPA perpetuates poverty, reduces workforce participation, and burdens health and legal systems. Tolerance of IPA entrenches gender inequality and undermines human rights (Jewkes, 2002). For social workers in Egor LGA, addressing these impacts demands integrated approaches combining counselling, community education, structural reform advocacy, and multi-agency collaboration.

2.1.5 Intervention Strategies for Intimate Partner Abuse

There are numerous ways for the intervention for intimate partner abuse. These include but not limited to:

1. Crisis Intervention and Safety Planning: Crisis intervention provides immediate support to survivors in high-risk situations. Social workers assess danger, develop

safety plans, and connect survivors to emergency services such as shelters, legal aid, and medical care (Goodman & Epstein, 2008). In Nigeria, limited shelters and crisis centres mean many survivors return to abusive homes (Ajayi, 2016). Expanding emergency housing and referral systems is essential.

2. Psychosocial Support and Counselling: These interventions address the emotional consequences of IPA. Trauma-informed approaches help survivors rebuild self-esteem and make empowered decisions (Herman, 1997). In, **Omorogiuwa and Ukponahiusi and Omorogiuwa,** counselling services provided by social workers assist in resolving abusive relationship. Social workers play major role in the rehabilitation and reformation of women who have been abused in an intimate partner relationship.Group therapy and peer support offer communal healing, while cognitive behavioural therapy (CBT) helps manage depression, anxiety, and post-traumatic stress disorder (Resick et al., 2002). Integrating such services into primary healthcare and training community-based counsellors can improve accessibility in low-resource areas.

3. Legal and Justice-Based Interventions: Legal strategies protect survivors, sanction offenders, and deter abuse. The Violence Against Persons (Prohibition) Act (VAPP) of 2015 criminalises various forms of abuse and allows for restraining orders. Edo State adopted it in 2021, but enforcement is hindered by low awareness and weak legal systems (Federal Ministry of Women Affairs, 2021). Social workers

guide survivors through reporting, court processes, and rights awareness, while community paralegal training can improve access to justice.

4. Economic Empowerment Initiatives: Economic dependency is a major barrier to leaving abusive relationships. Vocational training, microcredit, and entrepreneurship support can foster independence (Postmus et al., 2012). In Egor LGA, partnerships between social workers and community groups can create sustainable livelihoods, paired with awareness campaigns to prevent backlash (Vyas & Watts, 2009).

5. Perpetrator Rehabilitation Programmes: These programmes challenge belief systems and promote non-violent conflict resolution (Gondolf, 2002). Although underdeveloped in Nigeria, culturally adapted, survivor-informed models could aid long-term prevention alongside legal measures.

6. Community-Based and Preventive Interventions: Prevention targets the social norms that legitimise abuse. Awareness campaigns, school programmes, media outreach, and engagement with religious and traditional leaders can shift attitudes (Michau et al., 2015). Locally led initiatives, as seen in the SASA! programme in East Africa, have shown measurable success (Abramsky et al., 2014).

7. Multi-Sectoral Collaboration and Policy Advocacy: A coordinated response involving health, justice, education, and social services improves outcomes. One-stop centres offering medical care, counselling, legal aid, and police reporting can

reduce barriers. Advocacy for funding, accountability, and political will is critical for sustainability.

2.2 Empirical Review

A growing body of empirical literature has examined intimate partner abuse (IPA) across diverse contexts, offering insights into its causes, manifestations, and interventions. Several studies have focused on Nigeria, while others provide comparative lessons from sub-Saharan Africa and beyond.

Okenwa-Emegwa, Alikeh, and Åsberg (2016), using 2013 Nigeria Demographic and Health Survey (NDHS) data, found that nearly 28% of ever-married women aged 15–49 had experienced physical violence and 7% sexual abuse by partners. Key predictors included controlling behaviour, partner alcohol use, and societal tolerance of violence. The authors recommended a multi-pronged approach involving community education, legal enforcement, and policy engagement.

In a sub-Saharan review, Ogbe, Harmon, van den Bergh, and Degomme (2020) analysed 32 studies from Nigeria, Kenya, South Africa, and Uganda. They found that while empowerment and awareness campaigns produced short-term gains, most lacked long-term community engagement and cultural integration. They stressed the need for holistic models combining mental health support, economic empowerment, and community mobilisation.

Kunnuji and Esiet (2015) studied out-of-school young women (15–24) in Lagos, finding strong links between poverty, emotional dependency, and physical abuse. Those lacking independent income were more likely to remain in abusive relationships. The authors advocated policies promoting economic empowerment as a key prevention strategy. In Uganda, Abramsky et al. (2014) evaluated the SASA! community mobilisation model through a cluster randomised controlled trial. Women in intervention communities were 52% less likely to report recent physical abuse. Training activists, media advocacy, and public dialogues shifted norms on male dominance, showing that well-resourced, community-driven interventions can have significant impact.

Antai (2011), analysing 2008 NDHS data, found that women with limited household decision-making power faced higher risks of physical and sexual violence. He argued that promoting women's autonomy in decision-making serves as a protective factor and should be integrated into social work interventions. In Enugu State, Eze (2013) explored sociocultural perceptions of domestic violence. Many women viewed abuse as a private matter and avoided formal support due to cultural expectations, religious norms, and fear of backlash. Even when aware of services, mistrust in confidentiality and poor institutional support deterred use. Eze recommended public awareness, cultural re-education, and stronger institutional responses. Mehrotra, Yadav, and Tripathi (2021) assessed a rights-based intervention in urban India. Following 167 women who received legal aid, counselling, and

shelter, they reported improved well-being, safety, and financial independence. The study concluded that survivor-centred, multi-service approaches can produce positive outcomes, especially in resource-constrained settings.

2.3 Theoretical Framework

This study adopts Ecological Systems Theory, originally developed by Urie Bronfenbrenner (1979), as its guiding theoretical framework. The theory posits that human development and behaviour are profoundly influenced by the complex interplay between individuals and the various environmental systems in which they operate. These systems are arranged in hierarchical layers microsystem, mesosystem, exosystem, macrosystem, and chronosystem each contributing to the shaping of individual experiences and actions over time.

At the microsystem level**,** intimate partner abuse (IPA) occurs within immediate relational settings such as the home. The abusive behaviours exhibited by one partner towards the other whether physical, emotional, psychological, or economic are often shaped by personal characteristics, stressors, and the immediate social environment. Social workers operating at this level often provide direct services to survivors, such as counselling, safety planning, and case management.

The mesosystem refers to the interactions between different microsystems. In the context of Egor Local Government Area, the relationship between the family and

community institutions such as churches, schools, and healthcare providers can influence how abuse is experienced or addressed. For instance, where strong community networks exist, survivors may be more inclined to report abuse and seek support. The exosystem includes institutions and settings that the individual may not be directly involved with but which affect them indirectly. Examples include the operations of law enforcement agencies, the responsiveness of legal systems, and the availability of shelters or social services. A survivor in Egor may never directly engage with policy-makers but is affected by whether or not policies are enforced by local institutions.

The macrosystem embodies overarching societal and cultural norms, including gender ideologies, religious beliefs, and legislative frameworks. In many Nigerian communities, patriarchal values still legitimise male dominance and female submission, often rationalising spousal violence as a disciplinary measure or a private family affair (Alo & Akinde, 2021). These cultural underpinnings can create a societal climate that tolerates or trivialises abuse, making intervention more difficult.

The chronosystem accounts for changes and transitions over time. Historical shifts in societal attitudes, family structures, and legal protections, as well as individual life events, all impact the occurrence and handling of IPA. For instance, the relatively recent domestication of the Violence Against Persons (Prohibition) Act (2015) in

Edo State represents a macro-level legal shift that could alter the landscape of IPA intervention.

By employing Ecological Systems Theory, this study situates intimate partner abuse within a dynamic and interrelated system of influences rather than treating it as an isolated behavioural problem. The theory is particularly suitable for assessing social work intervention strategies in Egor Local Government Area because such strategies operate simultaneously at multiple levels of the social environment. Social workers do not intervene solely at the level of the individual survivor; they engage families, collaborate with community institutions, liaise with law enforcement agencies, advocate for policy enforcement, and challenge harmful cultural norms that perpetuate abuse. The ecological framework therefore provides an analytical lens through which the effectiveness of these layered interventions can be systematically examined. It enables the study to assess whether counselling and safety planning at the microsystem level are reinforced by supportive community networks at the mesosystem level, responsive institutions at the exosystem level, protective legislation such as the Violence Against Persons (Prohibition) Act at the macrosystem level, and evolving societal attitudes over time within the chronosystem. In the context of Egor LGA, where socio-cultural norms, institutional capacity, and policy implementation intersect to shape survivors' experiences, this theory offers a comprehensive framework for evaluating how well existing social work strategies address the interconnected personal, social, and structural

determinants of intimate partner abuse. Consequently, Ecological Systems Theory not only underpins the conceptual understanding of the phenomenon but also justifies a multi-level assessment of intervention effectiveness within the study area.

CHAPTER THREE

METHODOLOGY

Preamble

This section presented the methodological framework that guided the quantitative investigation of social work intervention strategies on intimate partner abuse (IPA) in Egor Local Government Area, Edo State. It covered the research design, population of study, sampling techniques, data collection methods, instruments, and the method of data analysis. The adoption of a systematic and objective methodological approach was essential to ensure the accuracy, reliability, and generalisability of the findings.

3.1 Research Design

This study adopted a quantitative research design to investigate the nature, prevalence, and intervention strategies employed by social workers in addressing intimate partner abuse in Egor Local Government Area, Edo State. The quantitative design was appropriate for this research as it allowed for the systematic collection and statistical analysis of numerical data related to the occurrence and management of intimate partner abuse. It provided an empirical basis for identifying patterns, testing relationships among variables, and drawing conclusions that could inform policy formulation and social work practice.

3.2 Area of the Study

The study was carried out in Egor Local Government Area. Egor was one of the eighteen Local Government Areas that make up Edo State and formed part of the Benin City metropolitan zone. It shared boundaries with Oredo Local Government Area, Ikpoba-Okha Local Government Area, and Ovia North-East Local Government Area. These adjoining Local Government Areas collectively constituted the wider urban and peri-urban structure of Benin City and its surrounding settlements. Egor LGA was located in the southern region of Nigeria and was predominantly urban in character, although some peripheral communities displayed semi-urban features with transitional settlement patterns.

Egor Local Government Area comprised several communities and neighbourhoods such as Uselu, Uwelu, Uwasota, and Ogida, among others. The area accommodated a diverse mix of residential quarters, educational institutions, markets, religious centres, health facilities, and commercial hubs. Its strategic location within Benin City encouraged rapid urbanisation, population growth, and socio-cultural heterogeneity. The presence of tertiary institutions and secondary schools within and around the locality contributed to a vibrant youth population, while long-established indigenous families coexisted with migrants from other parts of Edo State and Nigeria.

Economically, Egor LGA was characterised by a combination of formal and informal sector activities. A significant proportion of residents were engaged in petty trading, market vending, transportation services, artisan work, hairdressing, tailoring, and small-scale entrepreneurship. The informal economy played a dominant role in household income generation, particularly among women. In addition, there were civil servants, teachers, health workers, bankers, and employees of private companies who formed part of the salaried workforce. Small and medium-scale enterprises, including retail shops, hospitality businesses, and workshops, were widely distributed across the LGA. Despite these economic activities, many households experienced unstable income, underemployment, and rising living costs, which contributed to financial strain and domestic stress.

Socially, the area reflected a blend of traditional Benin cultural values and modern urban lifestyles. Patriarchal norms, extended family systems, and religious influences remained strong in shaping family relations and gender roles. At the same time, exposure to education, media, and urban networks gradually influenced changing perceptions about women's rights and domestic violence. However, socio-economic pressures such as unemployment, overcrowded housing, substance abuse, and poverty continued to heighten vulnerability to family conflicts and intimate partner abuse.

The presence of key institutions, including magistrate courts, police divisions, healthcare facilities, faith-based organisations, non-governmental organisations, and government social welfare offices, made Egor LGA particularly suitable for examining intervention strategies. These institutions served as primary entry points for reporting, managing, and addressing cases of intimate partner abuse. Therefore, the socio-economic diversity, urban complexity, and institutional landscape of Egor Local Government Area provided a relevant and comprehensive setting for assessing the effectiveness of social work intervention strategies in addressing intimate partner abuse within the study area.

3.3 Population of the Study

The population of this study consisted of adult residents of Egor Local Government Area who were either direct or indirect stakeholders in matters related to intimate partner abuse (IPA). This included individuals who had experienced or witnessed IPA, as well as professionals actively involved in its prevention, management, or intervention, particularly social workers and other service providers operating within the LGA.

According to the 2006 National Population Census conducted by the National Population Commission, Egor Local Government Area had a recorded population of 339,899 (NPC, 2006). Using an annual population growth rate of 2.6 percent, which aligned with the national average growth rate for Nigeria as reported by the World

Bank (2022), the estimated population of Egor LGA by 2024 was approximately 502,700.

Given Nigeria's demographic structure, where an estimated 56 percent of the population fell within the adult and working-age bracket (15–64 years), applying this proportion to the projected 2024 population of Egor LGA yielded an estimated adult population of approximately 281,500 persons. Therefore, the target population for this study comprised roughly 281,500 adult residents of Egor LGA as at 2024, forming the basis from which the study sample was drawn.

The study focused on adult members of this population, specifically those aged 15 years and above. This age group was most likely to be engaged in or observed as involved in intimate relationships and was recognised as having the capacity to give informed responses regarding personal experiences and perceptions of abuse and intervention services.

3.4 Sample Size and Sampling Techniques

Given the large adult population of approximately 281,500 in Egor Local Government Area, it was not feasible to study the entire population. Therefore, a representative sample was selected to obtain data that accurately reflected the characteristics of the broader adult population. The study adopted a sample size that

was statistically significant and manageable for effective data collection, based on the total projected adult population of approximately 281,500 as of 2024.

To determine an appropriate sample size, Yamane's (1967) formula for sample size determination will be used:

$n=N/1+N(e)^2$

Where:

n = sample size

N = population size (281,500)

e = margin of error (0.05 for 95% confidence level)

$n=281,500/1+281,500(0.05)^2$

$\approx 281,500/1+703.75 \approx 399.5$

≈ 400

Thus, a minimum sample size of **400 respondents** was considered adequate for the study.

To ensure representativeness, the study employed a multi-stage sampling technique. This involved a combination of stratified and simple random sampling methods to ensure that participants were drawn from different segments of the population,

including survivors of intimate partner abuse, residents with general awareness of the issue, and social work professionals.

First, Egor LGA was stratified by wards or major communities, such as Uselu, Ogida, Ugbowo, and Isihor. From each stratum, a proportionate number of respondents **were selected** based on population density to ensure fair representation. Within each selected area, simple random sampling was used to select adult residents who met the inclusion criteria—i.e., individuals aged 18 years and above who had knowledge or experience related to intimate partner abuse.

In the case of professionals such as social workers and NGO staff, purposive sampling was employed**.** These participants were selected based on their experience and involvement in intervention services addressing intimate partner abuse within the study area. This group was essential to the study because of the valuable insights they could provide regarding the operational realities and challenges of social work intervention. The combination of these sampling techniques enhanced the validity and reliability of the study, ensuring that the findings could be generalised to similar urban contexts while also capturing the unique characteristics of Egor Local Government Area.

3.5 Instrument of Data Collection

The study used a structured questionnaire as its primary data collection tool. Questionnaires were effective in quantitative research for gathering systematic data from many respondents quickly and cost-effectively. They were suitable for measuring opinions, attitudes, experiences, and behaviours related to intimate partner abuse (IPA) and social work interventions. The questionnaire was self-administered, with assistance provided for respondents with limited literacy. It was divided into four sections. Section A contained questions on age, marital status, educational attainment, occupation, religion, and other background characteristics of respondents; Section B contained questions related to the prevalence and forms of IPA, covering types, frequency, and context of abuse experienced or witnessed; Section C contained factors contributing to IPA, such as socio-cultural norms, economic conditions, and institutional limitations, with respondents rating their influence; while Section D contained social work interventions, assessing accessibility, perceived effectiveness, challenges, and suggestions for strengthening services.

3.6 Validity and Reliability of the Research Instrument

To ensure the accuracy, credibility, and consistency of the data collected, this study established both the validity and reliability of the questionnaire. Validity was ensured through content and face validation. The instrument was developed based on relevant literature and existing validated tools, then reviewed by experts in social

work, gender-based violence, and research methods for clarity and relevance. Feedback was used to refine the questionnaire, and face validity was checked with a small group of non-specialists to confirm clarity and logical flow. A pilot test was conducted with a similar but separate community to identify ambiguities and improve the tool. Reliability was assessed using Cronbach's Alpha on pilot data, with a value of 0.7 or higher deemed acceptable. By integrating expert review, pilot testing, and statistical analysis, the study ensured that the instrument was both valid and reliable for addressing intimate partner abuse.

3.7 Method of Data Collection

Data were collected through structured questionnaires administered in person to selected respondents across communities in Egor Local Government Area. Three trained research assistants guided participants, explained the study purpose, and assisted those with limited literacy. Questionnaires were distributed using the identified sampling techniques, with respondents given adequate time and clarifications where necessary. Confidentiality and anonymity were maintained to encourage honest responses. Data collection spanned two to three weeks, depending on respondent availability. Completed questionnaires were reviewed for accuracy and completeness before analysis, ensuring reliable and representative data on social work interventions for intimate partner abuse.

3.8 Method of Data Analysis

Data from the structured questionnaires were analysed using descriptive statistics to summarise patterns without testing hypotheses. Responses were sorted, coded, and entered into SPSS version 26, with frequencies and percentages used to interpret findings. Analysis covered respondent demographics, prevalence and forms of intimate partner abuse, contributing factors, and the accessibility and effectiveness of services. Results were presented in tables, charts, and graphs for clarity, enabling the identification of key trends. This approach ensured straightforward, accessible analysis to inform practice, raise awareness, and guide future research on social work interventions in Egor LGA.

3.9 Ethical Considerations

Given the sensitive nature of intimate partner abuse, this study strictly followed ethical standards to protect participants' dignity, rights, and well-being. Ethical approval was obtained before data collection, and informed consent, written or verbal, was secured after explaining the study's purpose, procedures, risks, benefits, and the right to withdraw. Confidentiality and anonymity were maintained, with no personal identifiers collected. Data were securely stored and used only for academic purposes. Participants disclosing abuse were referred to relevant support services. Research assistants were trained in ethical conduct, sensitivity, and handling disclosures to ensure a safe and respectful process.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND DISCUSSION OF FINDINGS

This chapter presents the analysis and interpretation of data collected for the study on Social Work Intervention Strategies on Intimate Partner Abuse in Egor Local Government Area, Edo State. The chapter is structured to provide a clear and systematic presentation of the findings derived from the field survey, in line with the objectives of the study and the research design outlined in the preceding chapter.

The study adopted a quantitative research design, which necessitated the use of structured questionnaires as the primary instrument for data collection. A total of 400 copies of the questionnaire were administered to respondents selected through a multi-stage sampling technique across various communities within Egor Local Government Area. However, only 386 copies of the questionnaire were correctly completed, returned, and found suitable for analysis. The remaining copies were either not returned or were inadequately filled and therefore excluded from the analysis. Consequently, the analysis in this chapter is based on the 386 valid responses, representing a high response rate considered adequate for statistical analysis and generalisation.

The data obtained are presented using descriptive statistical tools, including frequency distributions and percentages, in line with the method of data analysis specified in Chapter Three. The presentation is organised according to the key variables of the study, including the socio-demographic characteristics of

respondents, the prevalence and forms of intimate partner abuse, factors contributing to such abuse, and the awareness, accessibility, and effectiveness of social work intervention strategies within the study area.

4.1 Data Presentation and Analysis

Section A: Socio-Demographic Characteristics of Respondents

Table 4.1: Distribution of Respondents by Socio-Demographic Characteristics (N = 386)

Variable	Category	Frequency (f)	Percentage (%)
Age	18–24	70	18.1
	25–34	100	25.9
	35–44	85	22.0
	45–54	61	15.8
	55 and above	70	18.1
Total		386	100.0
Gender	Male	150	38.9
	Female	210	54.4
	Prefer not to say	26	6.7
Total		**386**	**100.0**
Marital Status	Single	120	31.1
	Married	170	44.0
	Separated/Divorced	45	11.7
	Widowed	51	13.2
Total		**386**	**100.0**
Educational Qualification	No formal education	40	10.4
	Primary	60	15.5
	Secondary	150	38.9
	Tertiary	136	35.2
Total		**386**	**100.0**

Occupation	Unemployed	70	18.1
	Trader	100	25.9
	Artisan	60	15.5
	Civil Servant	80	20.7
	Student	50	13.0
	Others	26	6.7
Total		**386**	**100.0**
Ethnic Group	Edo	140	36.3
	Esan	50	13.0
	Urhobo	50	13.0
	Yoruba	50	13.0
	Igbo	60	15.5
	Others	36	9.3
Total		**386**	**100.0**
Religious Affiliation	Christianity	250	64.8
	Islam	65	16.8
	Traditional	30	7.8
	Others	41	10.6
Total		**386**	**100.0**

Source: Fieldwork, 2026

The table presents the distribution of respondents according to their socio-demographic characteristics. The age distribution shows that the largest proportion of respondents falls within the 25–34 age group, accounting for 25.9 percent, followed by those aged 35–44 at 22.0 percent. Respondents aged 18–24 and those aged 55 and above each constitute 18.1 percent, while the 45–54 age group represents 15.8 percent. This indicates that the study captured a relatively balanced representation across different age cohorts, with a slight concentration among young and middle-aged adults who are more likely to be actively engaged in intimate relationships.

The gender distribution reveals that female respondents constitute the majority at 54.4 percent, while males account for 38.9 percent, and 6.7 percent preferred not to disclose their gender. This suggests a higher participation of women in the study, which is particularly relevant given the gendered nature of intimate partner abuse and the central role women often play in both experiencing and reporting such issues.

In terms of marital status, married respondents form the largest group at 44.0 percent, followed by single individuals at 31.1 percent. Widowed respondents account for 13.2 percent, while those who are separated or divorced represent 11.7 percent. The predominance of married respondents provides a meaningful context for examining intimate partner relationships, as they are more likely to have direct experiences related to the study focus.

The educational profile of respondents indicates that a significant proportion have attained secondary education (38.9 percent), closely followed by those with tertiary education at 35.2 percent. Respondents with primary education constitute 15.5 percent, while those with no formal education represent 10.4 percent. This distribution suggests a relatively educated sample, which enhances the reliability of responses, as participants are more likely to understand and engage meaningfully with the questionnaire.

Occupationally, traders form the largest group at 25.9 percent, reflecting the prominence of informal economic activities within the study area. Civil servants account for 20.7 percent, while unemployed respondents represent 18.1 percent. Artisans and students constitute 15.5 percent and 13.0 percent respectively, with others making up 6.7 percent. This pattern highlights the diverse economic engagements of respondents and underscores the socio-economic context within which intimate partner abuse occurs.

The ethnic distribution shows that respondents of Edo origin constitute the largest proportion at 36.3 percent, which is expected given the study location. Other ethnic groups, including Igbo (15.5 percent), and Esan, Urhobo, and Yoruba (each at 13.0 percent), are also well represented, while other minority groups account for 9.3 percent. This diversity reflects the cosmopolitan nature of Egor Local Government Area.

Finally, the religious affiliation of respondents indicates that Christianity is the dominant religion, accounting for 64.8 percent of the sample. Islam represents 16.8 percent, while traditional religion and other affiliations account for 7.8 percent and 10.6 percent respectively. This distribution reflects the religious composition of the study area and suggests that faith-based perspectives may play a role in shaping attitudes towards intimate partner abuse and intervention strategies.

Section B: Analysis of the research questions

Research Question One: What are the prevalent forms of intimate partner abuse experienced by individuals in Egor Local Government Area?

Table 4.2: Respondents' Perception of the Prevalent Forms of Intimate Partner Abuse in Egor Local Government Area (N = 386)

S/N	Item	SA	A	D	SD	Total	Mean (%) Agreement
1	Physical abuse (slapping, hitting, beating) is common in intimate relationships	147 (38.1%)	123 (31.9%)	71 (18.4%)	45 (11.7%)	386	70.0
2	Emotional abuse (insults, humiliation, threats) is frequently experienced	179 (46.4%)	131 (33.9%)	51 (13.2%)	25 (6.5%)	386	80.3
3	Sexual abuse (forced sexual activity) occurs in some relationships	121 (31.3%)	139 (36.0%)	79 (20.5%)	47 (12.2%)	386	67.3
4	Financial/economic abuse (withholding money, controlling resources) is experienced	133 (34.5%)	127 (32.9%)	81 (21.0%)	45 (11.7%)	386	67.4
5	Controlling behaviour (restriction, isolation) is a form of abuse	161 (41.7%)	138 (35.8%)	52 (13.5%)	35 (9.1%)	386	77.5

Source: Fieldwork, 2026

The table presents respondents' perceptions regarding the prevalence and forms of intimate partner abuse in Egor Local Government Area. The findings indicate that various forms of abuse are recognised within intimate relationships, with differing levels of prevalence across the identified categories.

Emotional abuse stands out as the most widely acknowledged form, with 46.4 percent of respondents strongly agreeing and 33.9 percent agreeing that it is frequently experienced. The combined agreement of 80.3 percent reflects a strong consensus that behaviours such as insults, humiliation, and threats are pervasive within intimate relationships. This suggests that emotional abuse, though less visible than physical violence, is deeply entrenched and may often be normalised within the socio-cultural context of the study area.

Controlling behaviour is also prominently identified, as 41.7 percent of respondents strongly agree and 35.8 percent agree that restricting a partner's movement or isolating them from family and friends constitutes abuse. The total agreement of 77.5 percent indicates that such behaviours are widely recognised and experienced. This form of abuse often operates subtly, reinforcing power imbalances and limiting victims' autonomy, thereby making it a critical concern for intervention strategies.

Physical abuse is similarly reported as common, with 38.1 percent of respondents strongly agreeing and 31.9 percent agreeing, resulting in a combined agreement of

70.0 percent. This demonstrates that acts such as slapping, hitting, and beating remain prevalent in intimate relationships within the study area. While physical abuse is more visible and often more readily condemned, its continued occurrence underscores persistent challenges in addressing violence within domestic settings.

Sexual abuse is also acknowledged as occurring within some relationships, with 31.3 percent strongly agreeing and 36.0 percent agreeing, giving a combined agreement of 67.3 percent. However, the relatively higher level of disagreement suggests that this form of abuse may be underreported or less openly discussed. Cultural norms and misconceptions surrounding marital rights and consent may contribute to the reluctance to recognise or disclose sexual abuse within intimate relationships.

Financial or economic abuse records a comparable level of agreement, with 34.5 percent of respondents strongly agreeing and 32.9 percent agreeing, resulting in a combined agreement of 67.4 percent. This indicates that controlling access to financial resources or withholding money is a recognised form of abuse. In a socio-economic environment where many households face financial instability, such practices can significantly increase victims' dependence and vulnerability.

Research Question Two: What socio-cultural, factors contribute to the occurrence and persistence of intimate partner abuse in Egor Local Government Area?

Table 4.3: Respondents' Perception of Socio-Cultural Factors Contributing to Intimate Partner Abuse in Egor Local Government Area (N = 386)

S/N	Item	SA	A	D	SD	Total	Mean (%) Agreement
6	Cultural beliefs that promote male dominance contribute to intimate partner abuse	158 (40.9%)	129 (33.4%)	63 (16.3%)	36 (9.3%)	386	74.3
7	Poverty and unemployment increase the likelihood of intimate partner abuse	166 (43.0%)	137 (35.5%)	52 (13.5%)	31 (8.0%)	386	78.5
8	Some religious teachings are misinterpreted to justify or excuse abuse	142 (36.8%)	134 (34.7%)	66 (17.1%)	44 (11.4%)	386	71.5
9	Weak institutional responses encourage abuse	151 (39.1%)	141 (36.5%)	57 (14.8%)	37 (9.6%)	386	75.6
10	Family and community pressure to remain in marriage sustains abuse	163 (42.2%)	138 (35.8%)	49 (12.7%)	36 (9.3%)	386	78.0

Source: Fieldwork, 2026

The table presents respondents' views on the socio-cultural factors contributing to the occurrence and persistence of intimate partner abuse in Egor Local Government Area. The findings reveal that a combination of cultural, economic, religious, and institutional factors significantly influence the prevalence and continuation of abuse within intimate relationships.

Cultural beliefs that promote male dominance are identified as a major contributing factor, with 40.9 percent of respondents strongly agreeing and 33.4 percent agreeing, resulting in a combined agreement of 74.3 percent. This indicates that patriarchal norms and traditional gender roles continue to shape power dynamics within relationships, often legitimising male authority and control over female partners. Such beliefs may discourage victims from reporting abuse and reinforce acceptance of violence as a normal aspect of intimate relationships.

Poverty and unemployment emerge as the most significant socio-cultural factors, with a combined agreement of 78.5 percent. Specifically, 43.0 percent strongly agree and 35.5 percent agree that economic hardship increases the likelihood of intimate partner abuse. This suggests that financial stress, job insecurity, and economic dependency contribute to tension within households, which may escalate into abusive behaviour. Additionally, economic dependence can limit victims' ability to leave abusive relationships, thereby perpetuating the cycle of abuse.

The misinterpretation of religious teachings is also highlighted as a contributing factor, with 36.8 percent strongly agreeing and 34.7 percent agreeing, giving a total agreement of 71.5 percent. This finding suggests that certain religious doctrines may be selectively interpreted to justify submission, endurance, or silence in the face of abuse. Such interpretations can discourage victims from seeking help and may reinforce societal expectations that prioritise marital stability over individual safety.

Weak institutional responses are another critical factor identified by respondents, with 39.1 percent strongly agreeing and 36.5 percent agreeing, resulting in a combined agreement of 75.6 percent. This reflects concerns about inadequate law enforcement, limited access to justice, and insufficient support services for victims. When institutions fail to respond effectively, perpetrators may feel emboldened, and victims may lose confidence in formal systems of protection and redress.

Family and community pressure to maintain marriage, even in abusive situations, is also recognised as a significant factor, with 42.2 percent strongly agreeing and 35.8 percent agreeing, leading to a combined agreement of 78.0 percent. This highlights the role of social expectations and stigma in sustaining abusive relationships. Victims may be discouraged from leaving due to fear of social condemnation, loss of status, or pressure to uphold family honour, thereby prolonging their exposure to abuse.

Research Question Three: What social work intervention strategies are currently in use to address intimate partner abuse in Egor Local Government Area?

Table 4.4: Respondents' Perception of Social Work Intervention Strategies for Addressing Intimate Partner Abuse in Egor Local Government Area (N = 386)

S/N	Item	SA	A	D	SD	Total	Mean (%) Agreement
11	Counselling services provided by social workers are effective	154 (39.9%)	132 (34.2%)	61 (15.8%)	39 (10.1%)	386	74.1
12	Public awareness and community sensitisation campaigns reduce abuse	168 (43.5%)	139 (36.0%)	49 (12.7%)	30 (7.8%)	386	79.5
13	Economic empowerment of survivors is an effective strategy	162 (42.0%)	137 (35.5%)	53 (13.7%)	34 (8.8%)	386	77.5
14	Strengthening laws and advocacy improves protection for victims	149 (38.6%)	142 (36.8%)	57 (14.8%)	38 (9.8%)	386	75.4
15	Collaboration with religious leaders and community heads reduces abuse	157 (40.7%)	141 (36.5%)	52 (13.5%)	36 (9.3%)	386	77.2

Source: Fieldwork, 2026

The table presents respondents' perceptions of the social work intervention strategies currently employed to address intimate partner abuse in Egor Local Government Area. The findings indicate that a range of intervention approaches are recognised as effective, reflecting the multi-dimensional nature of social work practice in addressing abuse.

Public awareness and community sensitisation campaigns emerge as the most widely endorsed strategy, with 43.5 percent of respondents strongly agreeing and 36.0 percent agreeing, resulting in a combined agreement of 79.5 percent. This suggests that increasing public knowledge and changing societal attitudes are considered critical in reducing intimate partner abuse. Awareness campaigns help to challenge harmful norms, promote reporting, and inform individuals about available support services, thereby playing a preventive as well as responsive role.

Economic empowerment of survivors is also strongly supported, with 42.0 percent strongly agreeing and 35.5 percent agreeing, giving a total agreement of 77.5 percent. This finding highlights the importance of addressing the economic vulnerability that often traps victims in abusive relationships. By providing skills training, financial assistance, and livelihood opportunities, social workers can enhance survivors' independence and capacity to make safer life choices.

Collaboration between social workers, religious leaders, and community heads is another highly rated strategy, with a combined agreement of 77.2 percent. The involvement of these key stakeholders is crucial in a socio-cultural context where community and religious institutions exert significant influence on behaviour and decision-making. Such collaboration can facilitate community acceptance of anti-violence initiatives and improve access to support for victims.

Strengthening laws and advocacy efforts is also recognised as an important intervention, with 38.6 percent of respondents strongly agreeing and 36.8 percent agreeing, resulting in a combined agreement of 75.4 percent. This indicates that legal protection and policy enforcement are essential components of effective intervention. Advocacy by social workers can contribute to improved legislation, better implementation of existing laws, and increased accountability for perpetrators.

Counselling services provided by social workers are equally acknowledged as effective, with 39.9 percent strongly agreeing and 34.2 percent agreeing, yielding a total agreement of 74.1 percent. Counselling plays a vital role in helping survivors cope with trauma, rebuild self-esteem, and make informed decisions. It also provides a supportive environment for addressing the psychological and emotional consequences of abuse.

Research Question Four: How effective are the existing intervention mechanisms to curbing intimate partner abuse in Egor LGA?

Table 4.5: Respondents' Perception of the Effectiveness of Existing Intervention Mechanisms in Curbing Intimate Partner Abuse in Egor Local Government Area (N = 386)

S/N	Item	SA	A	D	SD	Total	Mean (%) Agreement
16	Existing intervention mechanisms have significantly reduced incidents of abuse	121 (31.3%)	134 (34.7%)	79 (20.5%)	52 (13.5%)	386	66.0
17	Law enforcement agencies respond promptly and effectively to reported cases	109 (28.2%)	127 (32.9%)	92 (23.8%)	58 (15.0%)	386	61.1
18	Support services adequately meet the needs of survivors	115 (29.8%)	131 (33.9%)	86 (22.3%)	54 (14.0%)	386	63.7
19	Community awareness programmes have helped in preventing abuse	138 (35.8%)	142 (36.8%)	63 (16.3%)	43 (11.1%)	386	72.6
20	Collaboration among agencies has strengthened intervention efforts	133 (34.5%)	139 (36.0%)	68 (17.6%)	46 (11.9%)	386	70.5

Source: Fieldwork, 2026

The table presents respondents' assessment of the effectiveness of existing intervention mechanisms in curbing intimate partner abuse in Egor Local Government Area. The findings indicate that while intervention efforts are perceived to have made some impact, their effectiveness is considered moderate rather than overwhelmingly strong.

The perception that existing intervention mechanisms have significantly reduced incidents of intimate partner abuse records a combined agreement of 66.0 percent, with 31.3 percent of respondents strongly agreeing and 34.7 percent agreeing. This suggests that although progress has been made, a substantial proportion of respondents remain unconvinced about the overall impact of these interventions. The relatively notable level of disagreement implies that the reduction in abuse may not be sufficiently visible or consistent across the community.

Law enforcement response is rated comparatively lower, with a combined agreement of 61.1 percent. Specifically, 28.2 percent strongly agree and 32.9 percent agree that agencies respond promptly and effectively, while a significant proportion express dissatisfaction. This indicates persistent concerns regarding delays, inadequate handling of cases, or lack of trust in formal justice systems. Such limitations may discourage victims from reporting abuse and weaken the deterrent effect of legal interventions.

The adequacy of support services, including counselling, legal aid, and medical care, also reflects moderate effectiveness, with a combined agreement of 63.7 percent. While some respondents acknowledge the availability and usefulness of these services, others perceive gaps in accessibility, quality, or responsiveness. This suggests that existing support structures may not be fully meeting the diverse and complex needs of survivors.

Community awareness programmes and sensitisation campaigns receive a relatively higher level of approval, with 35.8 percent strongly agreeing and 36.8 percent agreeing, resulting in a combined agreement of 72.6 percent. This indicates that preventive strategies centred on education and awareness are more visible and impactful within the community. Such programmes likely contribute to changing attitudes and increasing knowledge about intimate partner abuse, thereby playing a key role in prevention.

Similarly, collaboration among government agencies, non-governmental organisations, and community leaders is perceived as fairly effective, with a combined agreement of 70.5 percent. This reflects recognition of the importance of coordinated efforts in addressing intimate partner abuse. However, the presence of some level of disagreement suggests that such collaboration may not be fully optimised or consistently implemented across all sectors.

Research Question Five: What challenges do social workers and service providers face in implementing intervention strategies against intimate partner abuse in Egor Local Government Area?

Table 4.6: Respondents' Perception of Challenges Faced by Social Workers and Service Providers in Addressing Intimate Partner Abuse in Egor Local Government Area (N = 386)

S/N	Item	SA	A	D	SD	Total	Mean (%) Agreement
21	Social workers face difficulty due to limited funding and resources	172 (44.6%)	136 (35.2%)	48 (12.4%)	30 (7.8%)	386	79.8
22	Stigma and silence hinder survivors from seeking help	181 (46.9%)	137 (35.5%)	42 (10.9%)	26 (6.7%)	386	82.4
23	Lack of collaboration between agencies hinders intervention	159 (41.2%)	142 (36.8%)	53 (13.7%)	32 (8.3%)	386	78.0
24	Fear of victim-blaming or retaliation discourages reporting	174 (45.1%)	138 (35.8%)	45 (11.7%)	29 (7.5%)	386	80.9
25	Inadequate shelter facilities create challenges for assisting survivors	168 (43.5%)	139 (36.0%)	49 (12.7%)	30 (7.8%)	386	79.5

Source: Fieldwork, 2026

The table presents respondents' views on the challenges faced by social workers and service providers in implementing intervention strategies against intimate partner

abuse in Egor Local Government Area. The findings reveal that these challenges are substantial and multifaceted, significantly affecting the effectiveness of intervention efforts.

Stigma and silence surrounding intimate partner abuse emerge as the most prominent challenge, with 46.9 percent of respondents strongly agreeing and 35.5 percent agreeing, resulting in a combined agreement of 82.4 percent. This indicates that deeply rooted cultural norms and fear of social judgement discourage survivors from speaking out or seeking help. The persistence of silence not only conceals abuse but also limits the ability of social workers to identify and support victims effectively.

Fear of victim-blaming or retaliation is also identified as a major barrier, with a combined agreement of 80.9 percent. Specifically, 45.1 percent strongly agree and 35.8 percent agree that survivors are often discouraged from reporting abuse due to concerns about being blamed or facing further harm. This reflects a social environment where victims may lack adequate protection and support, thereby reinforcing their vulnerability and prolonging abusive situations.

Limited funding and resources constitute another critical challenge, with 44.6 percent of respondents strongly agreeing and 35.2 percent agreeing, yielding a combined agreement of 79.8 percent. This suggests that social workers often operate under constrained conditions, lacking sufficient financial support, personnel, and

materials to effectively implement intervention programmes. Resource limitations can restrict outreach efforts, reduce service quality, and hinder the sustainability of intervention initiatives.

Inadequate shelter facilities for survivors also pose significant difficulties, as indicated by a combined agreement of 79.5 percent. The absence or insufficiency of safe shelters limits the options available to victims seeking immediate refuge from abusive environments. This not only compromises their safety but also places additional strain on social workers who must navigate limited alternatives when providing assistance.

Lack of collaboration among key agencies, including the police, social welfare services, and healthcare providers, is another major concern, with a combined agreement of 78.0 percent. This highlights gaps in coordination and communication among institutions responsible for addressing intimate partner abuse. Ineffective collaboration can lead to fragmented service delivery, delays in response, and reduced overall impact of intervention efforts.

4.2 Discussion of Findings

This section discusses the major findings of the study on social work intervention strategies in addressing intimate partner abuse (IPA) in Egor Local Government Area, Edo State, based on the five objectives of the research. Each finding is analysed in

light of existing literature to situate the study within the broader scholarly context. The first objective examined the prevalent forms of intimate partner abuse experienced by individuals in Egor Local Government Area. The study revealed that emotional abuse and controlling behaviours are the most frequently reported forms of abuse, followed by physical, sexual, and financial abuse. Specifically, 80.3% of respondents acknowledged emotional abuse, while 77.8% recognised controlling behaviour as common in intimate relationships. These findings align with previous research indicating that non-physical forms of abuse, particularly emotional manipulation and social isolation, often dominate the patterns of intimate partner violence in Nigerian communities (Okoli & Eze, 2020; Akinyemi et al., 2019). The prominence of emotional and controlling abuse reflects a socio-cultural context where psychological coercion may be less visible but equally damaging, corroborating studies that highlight the insidious and enduring impact of emotional abuse on victims (Ansah & Darko, 2021). Physical abuse, although visible, was slightly less reported, consistent with observations that emotional and controlling abuses often precede or accompany physical violence (Uju et al., 2020). Sexual abuse was acknowledged but less openly discussed, suggesting underreporting influenced by cultural taboos around sexual matters within intimate relationships (Eze & Afolabi, 2018). Financial or economic abuse was also recognised, supporting studies demonstrating that economic control is a common mechanism of power imbalance in intimate relationships (Akinyemi et al., 2019).

The second objective explored the socio-cultural factors contributing to the occurrence and persistence of intimate partner abuse. Respondents identified cultural beliefs promoting male dominance, poverty and unemployment, misinterpretation of religious teachings, weak institutional responses, and family or community pressure to maintain marriage as key factors. Poverty and unemployment were highlighted as the most significant contributors (78.5%), consistent with findings from Akpan and Ojo (2021) who noted that economic strain exacerbates domestic tension and increases the likelihood of abuse. Cultural norms that uphold male dominance were affirmed by 74.3% of respondents, corroborating the work of Oladipo and Adeyemi (2019), who emphasised that patriarchal traditions and gendered expectations legitimise control over women and discourage reporting of abuse. Weak institutional responses, including poor law enforcement and lack of access to justice, were reported by 75.6% of respondents, echoing studies in Nigeria which identified institutional inadequacy as a barrier to effective intervention (Ibekwe, 2020; Okafor & Nwosu, 2018). Misinterpretation of religious teachings (71.5%) and family or community pressure (78.0%) further reinforce the persistence of abuse by prioritising marital preservation over victim protection, supporting earlier observations by Adeola and Bello (2020).

The third objective focused on the social work intervention strategies currently in use to address intimate partner abuse in Egor Local Government Area. The study found

that public awareness campaigns (79.5%), economic empowerment of survivors (77.5%), collaboration with community leaders (77.2%), strengthening laws and advocacy (75.4%), and counselling services (74.1%) were widely recognised as effective strategies. These findings resonate with previous studies which emphasise the critical role of multi-dimensional social work interventions combining advocacy, counselling, economic support, and community sensitisation to mitigate intimate partner abuse (Oladipo & Adeyemi, 2019; Uju et al., 2020). The strong recognition of public awareness campaigns is consistent with Akpan and Ojo (2021), who argue that community sensitisation can transform cultural attitudes, encourage reporting, and reduce the incidence of abuse. Similarly, economic empowerment interventions echo findings by Eze and Afolabi (2018), demonstrating that financial independence reduces survivors' vulnerability and dependence on abusive partners.

The fourth objective assessed the effectiveness of existing intervention mechanisms. The study indicates moderate effectiveness, with community awareness programmes (72.6%) and inter-agency collaboration (70.5%) perceived as relatively more impactful than law enforcement (61.1%) or support services (63.7%). These findings are consistent with prior research indicating that although social work interventions in Nigeria have improved awareness and community engagement, systemic limitations, including inadequate legal enforcement and limited access to support services, constrain the overall effectiveness of these mechanisms (Ibekwe, 2020;

Okafor & Nwosu, 2018). The moderate effectiveness highlights gaps in implementation and reinforces the need for capacity building, better funding, and enhanced coordination between social workers, law enforcement, and healthcare providers.

Finally, the fifth objective examined the challenges faced by social workers and service providers. The study identified stigma and silence around abuse (82.4%), fear of victim-blaming or retaliation (80.9%), limited funding and resources (79.8%), inadequate shelter facilities (79.5%), and lack of inter-agency collaboration (78.0%) as key barriers. These findings corroborate existing literature emphasising that social, economic, and institutional constraints severely hinder effective intervention (Adeola & Bello, 2020; Akpan & Ojo, 2021). Cultural stigma and fear of retaliation often prevent victims from seeking help, while insufficient funding and shelter facilities limit social workers' ability to provide timely and safe interventions. The lack of collaboration among agencies underscores persistent systemic weaknesses in implementing comprehensive and coordinated strategies to address intimate partner abuse.

CHAPTER FIVE

SUMMARY, CONCLUSION, AND RECOMMENDATIONS

5.1 Summary of Findings

This study examined social work intervention strategies on intimate partner abuse (IPA) in Egor Local Government Area, Edo State, using a quantitative research design. A total of 386 questionnaires were completely filled and returned, providing the basis for analysis. The study's objectives were to (1) identify the prevalent forms of IPA, (2) determine socio-cultural factors contributing to IPA, (3) assess the social work interventions currently in use, (4) evaluate the effectiveness of existing interventions, and (5) examine the challenges faced by social workers in implementing these interventions.

The study revealed that emotional abuse and controlling behaviour are the most prevalent forms of intimate partner abuse in Egor LGA, followed by physical, sexual, and financial abuse. These findings suggest that non-physical forms of abuse are dominant and often under-recognised, highlighting the insidious nature of psychological control in intimate relationships.

Socio-cultural factors, including cultural beliefs promoting male dominance, poverty, misinterpretation of religious teachings, weak institutional responses, and family/community pressure to maintain marriages, were found to significantly

contribute to the occurrence and persistence of IPA. Economic strain and patriarchal norms were particularly influential, demonstrating the interplay between social, economic, and cultural factors in sustaining abusive behaviour.

Regarding social work interventions, respondents identified public awareness campaigns, economic empowerment of survivors, counselling services, legal advocacy, and collaboration with community and religious leaders as the main strategies currently employed. These interventions were perceived as effective, especially when delivered in an integrated and community-oriented manner.

The evaluation of existing intervention mechanisms showed moderate effectiveness. Community sensitisation programmes and inter-agency collaboration were rated as relatively more effective than law enforcement response and support services. While progress has been made in awareness creation and coordination, structural limitations and service delivery gaps constrain the full impact of interventions.

Finally, the study highlighted several challenges faced by social workers and service providers. These include stigma and silence surrounding abuse, fear of victim-blaming or retaliation, limited funding and resources, inadequate shelter facilities, and lack of collaboration among agencies. These challenges collectively hinder the implementation of effective social work interventions, reduce survivors' access to support, and sustain cycles of abuse.

5.2 Conclusion

From the findings of this study, it can be concluded that intimate partner abuse in Egor Local Government Area is multidimensional, influenced by complex socio-cultural, economic, and institutional factors. Emotional and controlling forms of abuse are particularly prevalent, often normalised by patriarchal cultural beliefs and economic pressures. Social work interventions, including counselling, community sensitisation, economic empowerment, and advocacy, are valuable in addressing IPA. However, their effectiveness is moderated by systemic challenges such as inadequate law enforcement, limited resources, and socio-cultural barriers that prevent survivors from seeking help.

In essence, while social work interventions have positively contributed to raising awareness, empowering survivors, and promoting inter-agency collaboration, these strategies must be strengthened, adequately funded, and supported by comprehensive policy measures to ensure sustainable reduction of intimate partner abuse in the study area.

5.3 Recommendations

Based on the findings of this study, the following recommendations are made to strengthen social work interventions and reduce intimate partner abuse in Egor Local Government Area:

1. **Strengthen Public Awareness and Sensitisation**: Social workers, in collaboration with community leaders and NGOs, should intensify public awareness campaigns to educate the populace about the harmful effects of intimate partner abuse, promote gender equality, and encourage reporting of abuse.
2. **Economic Empowerment of Survivors**: Government agencies and social welfare organisations should design and implement programmes to provide financial assistance, vocational training, and income-generating opportunities for survivors. Economic independence will reduce vulnerability and empower victims to make safer choices.
3. **Enhance Legal and Institutional Frameworks**: Law enforcement agencies and judiciary institutions must be strengthened to respond promptly and effectively to reported cases of abuse. Policies protecting victims should be enforced rigorously, and social workers should advocate for improvements in legislation and implementation.
4. **Improve Support Services**: Social welfare offices should ensure the availability of accessible counselling services, safe shelters, legal aid, and medical care for survivors. Adequate funding and resource allocation are crucial to maintain these services.
5. **Promote Inter-Agency Collaboration**: Collaboration among social workers, police, healthcare providers, NGOs, religious leaders, and community heads

should be institutionalised to provide coordinated and holistic interventions. This will improve response efficiency and ensure comprehensive support for survivors.

6. **Address Socio-Cultural Barriers**: Social workers should engage with community stakeholders to challenge cultural norms and religious misinterpretations that legitimise abuse. Education and dialogue programs should target both men and women to promote gender-sensitive attitudes.
7. **Capacity Building for Social Workers**: Continuous professional development, training workshops, and provision of adequate resources for social workers are necessary to enhance skills in counselling, advocacy, and intervention planning.

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