PREVALENCE AND PERCEPTIONS TOWARDS GENDER-BASED VIOLENCE AGAINST WOMEN OF REPRODUCTIVE AGE IN AGUATA L.G.A.

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Abstract
This study investigated the Prevalence and Perceptions towards Gender-Based Violence Against Women of Reproductive Age in Aguata L.G.A, Anambra state. A cross-sectional survey design was adopted. The study participants were females who are 18 years and above residents of Aguata L.G.A. The sample size was 204 respondents. Multi-stage sampling procedure was used in the study. The major instruments of data collection used were a questionnaire and an In-Depth interview (IDI) guide. Quantitative data were processed using Statistical Package for Social Sciences (SPSS) and analyzed using percentages and frequency distribution tables. Qualitative data were provided from the transcription of the electronically recorded interview and field notes and analyzed using the manual thematic content analysis technique. Findings indicated amongst others that forms of GBV include: Physical violence, Sexual violence, Female genital mutilation, domestic violence, and forced and early child marriage. It also found some socio-cultural factors affecting GBV such as: Poverty, patriarchy, lack of education/ ignorance, religious beliefs, and growing up in an abusive home. Consequences of GBV include Physical, sexual, and Psychological problems. The study recommends that there is a need for government to increase access to education and employment opportunities for women. The government and every other social institution involved in society should encourage victims of GBV not to die in silence but to speak out to be heard and helped. Furthermore, there is a need for proper socialization of children at the family level in Aguata Local Government Area of Anambra state, Nigeria.
Keywords: Factors, Gender, Prevalence, Perception, Reproductive age, Violence.

1. Introduction

One of the most pervasive and enduring problems that women and girls face worldwide is gender-based violence (GBV). Every continent, nation, and cultural setting is susceptible to gender-based violence, which affects women of all racial, ethnic, cultural, religious, and age groups. One of the most common, least punished, and most pervasive human rights violations in the world is gender-based violence (Duncan, 2022).

The Inter-Agency Standing Committee (IASC) (2015) defines GBV as any harmful act that is perpetrated against a person's will and that is based on socially ascribed (i.e., gender) differences between females and males. It includes acts that inflict physical, sexual, or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty. Most issues of gender-based violence have centered on men as perpetrators, however, this is not to deny that cases of men being victims of GBV do exist. GBV almost always harms women and girls, for this reason, the term " GBV " is often used interchangeably with the term "Violence against Women"(VAW). Violence against women and girls is defined by the World Health Organization (2021) as any act of gender-based violence that causes, or is likely to cause, physical, sexual, or psychological harm or suffering to women; this includes threats of such acts, coercion, or arbitrarily denying them their freedom. GBV is an expression of power and control that stems from gender inequality and role division. It includes a variety of violent acts, such as physical, sexual, emotional, and financial abuse (WHO, 2021).

According to the World Bank (2019), one in three women will experience GBV, also known as violence against women and girls (VAWG), in their lifetime. The sums are astonishing: 35 percent of women globally have been victims of intimate partner violence, which includes both physical and sexual abuse, as well as non-partner sexual abuse. 7% of women worldwide report having experienced sexual assault at the hands of someone other than a romantic partner. Approximately 38% of female homicides worldwide are carried out by close companions. 200 million women have undergone female genital mutilation or cutting. This problem has major societal and financial ramifications in addition to being tragic for victims of abuse and their families. According to estimates, violence against women can cost certain nations up to 3.7 percent of their GDP (World Bank, 2019).

GBV is a global public health issue that presents risks to human health and is more common in developing nations. In addition to having a substantial impact on women's morbidity and mortality, this type of violence has a disproportionately negative impact on the health of mothers and their offspring. Studies have indicated that GBV can have detrimental effects on women's general well-being, reproductive health outcomes, and physical and mental health (Muluneh, Stulz, Francis, & Agho, 2020). A woman's reproductive years, which include adolescence, relationships with intimate partners, pregnancy, and the postpartum period, are extremely important. Owing to several factors such as societal expectations, power imbalances in relationships, and cultural perspectives on women's roles and procreation, women are particularly susceptible to gender-based violence during this time (WHO, 2013).

According to some descriptions, Nigeria is "a land of opposites and a melting pot of nationalities, religions, and traditions" (Offiong & Uduigwomen, 2021). The patriarchal aspect of Nigerian society is characterized by a system of materially based social connections that allows men to rule women (Ekpenyong, 2017). It is a system of sex-based social stratification and distinction that favors men while severely restricting the positions and activities available to women. Women are disadvantaged by sociocultural norms and practices in Nigerian communities because of the dominance and control that men have over them. According to Mojekwu-Chikezie (2016). Women's advancement is severely hampered by sociocultural factors. Customs, culture, tradition, and religion have persisted in keeping women in Africa, particularly in Nigeria, in a subordinate role with essentially no status, restricting their access to equality and freedom from different forms of violence. Patriarchy has characterized several Nigerian traditional institutions, which has had a significant impact on gender-based violence up until this point (Mojekwu-Chikezie, 2016).

In Aguata L.G.A, GBV against women who are of reproductive age has become a major societal issue with serious consequences for both the community and the individual victims. Socio-cultural factors, such as societal norms, attitudes, and practices that uphold power disparities and gender inequality, are the basis of violence. Due to this disparity in authority, men are frequently led to believe that they have the right to dominate and control women. This idea can result in a variety of gender-based violent acts, including harassment, sexual assault, and domestic abuse (Ekpenyong, 2017). Hence, this study sought to examine the Prevalence and Perceptions towards Gender-Based Violence Against Women of Reproductive Age in Aguata L.G.A. The following research questions guided the study:

I. What are the perceptions toward gender-based violence in Aguata L.G.A?
II. What are the forms of gender-based violence experienced by females of reproductive age in Aguata L.G.A?
III. What are the socio-cultural factors influencing Gender based violence against females of reproductive age in Aguata L.G.A?
IV. What are the consequences of gender-based violence on females of reproductive age in Aguata L.G.A?
V. What measures can be used to control gender-based violence in Aguata L.G.A?

2. Methodology

A. Research Design

This study adopted the mixed methods research design. This involves the application of both quantitative and qualitative data collection techniques. The mixed methods research design was selected

because it comprises gathering data on specific variables within a study population at a particular point in time using two distinct data collection methods, such as the quantitative (questionnaire) and qualitative (interview) methods, to produce a reliable finding or findings that can be extrapolated to the larger population.

B. Area of the Study

The study was conducted in Aguata Local Government Area of Anambra State. the L.G.A is made up of fourteen (14) towns, namely: Ekwulobia, Akpo, Achina, Uga, Igboukwu, Isuofia, Umuchu, Aguluezechukwu, Ezinifite, Ikenga, Amesi, Oraeri, Umuona and Nkpologwu. The land area of Aguata L.G.A is 195 square kilometers which is 75 square miles (History of Aguata, 2022).

There are 28 councilors in the Aguata LGA, and the chairman serves as the group's executive head. Aguata LGA is dominated by Igbo ethnic group with the Igbo language serving as the major language. Christianity is the dominant religion in the area (History of Aguata, 2022). Subsistence farming is a popular type of employment in this area, and marketplaces such as Eke and Nkwo provide a venue for the exchange of goods and services. In the Aguata LGA, there are many different types of companies, including hotels, banks (especially microfinance banks), and other industries. Prof. Chukwuma Charles Soludo, the current governor of Anambra State, is a native of Aguata LGA.

C. Population of the Study

According to Population Projection (2022), Aguata L.G.A has a population of five hundred and twenty-seven thousand, two hundred individuals (527,200) which is made up of 253,710 males and 273,490 females. The target population of this study was females who are 18 years and above resident in Aguata L.G.A. Therefore, the target population for this study was 159,285, Population projection, 2022).

D. Scope of the Study

This study was limited to an investigation into the Prevalence and Perceptions towards Gender-Based Violence Against Women of Reproductive Age in Aguata L.G.A. of Anambra state.

E. Sample Size

Taro Yamane's statistical formula (1967) was used to determine the sample size and it is given thus:

$$n = \frac{N}{1 + N(e)^2}$$

Where:

n = sample size, N = Total population of the study,

l = constant, e = level of significance $(0.07)^2$

Therefore,

$$n = \frac{527,200}{1+527,200\ (0.07)^2}$$

$$n = \frac{527,200}{1+527,200\ (0.0049)}$$

$$n = \frac{527,200}{527,201\ (0.0049)}$$

$$n = \frac{527,200}{2,583.2849}$$

n = 204.0812

n = 204 (approximately).

F. Sampling Techniques

This study adopted both probability and non-probability sampling methods. This means that the researchers used the simple random sampling technique, as well as purposive sampling. First, using a simple random sampling technique, two (2) communities namely Ekwulobia and Ezinifite were selected from the 14 communities in Aguata LGA. Then the villages in the selected communities were numbered. Secondly, with the use of a simple random sampling technique, one (1) village was selected from each of the selected two communities, Ula in Ekwulobia and Aku in Ezinifite, making it a total of two (2) villages. The third step was to number the households in the selected villages, the households

in the selected villages were numbered using the local government's household numbering pattern, using the systematic random sampling technique, fifty-one (51) households were selected in each of the two (2) villages. Finally, two females, aged 18 years and above were selected from each household. Thus, a total of 204 respondents were selected for the study. This equalled to 51(households) x 2 (respondents) = 102 x 2 (villages) = 204.

Using the non-probability sampling technique, four (4) respondents were purposively selected for the in-depth interview (IDI). The respondents included four women leaders, community leaders, etc who were not part of those given questionnaires. The individuals were believed by the researchers to possess information, knowledge, and understanding relevant to the research interest. The interviews were conducted in the respondents' residences to get the respondents when they were available.

G. Instruments for Data Collection

The instruments of data collection that were used in this study are the questionnaire schedule and In-depth Interview (IDI) guide. The quantitative data were generated through the questionnaire and supported by the qualitative data from the in-depth interviews that were conducted by the researchers on some important figures in the community.

H. Administration of Instruments

The questionnaire for the study was self-administered on a face-to-face basis by the researchers with the aid of two research assistants (male and female) who also resided in Aguata LGA. Furthermore, the research assistants for the study were trained by the researchers for two (2) consecutive days, in line with the study objectives to enable the research team can guide and take down responses from the study participants. This ensured that the exercise was accurate, less difficult, and recorded an absolute completion of a questionnaire.

The in-depth interviews (IDIs) were conducted by the researchers with the aid of two research assistants in English and Igbo Language.

I. Methods of Data Analysis

Statistical Package for Social Sciences (SPSS) software version 24 was used to process the quantitative data collected from the field. The qualitative data gathered from the interview sessions were carefully transcribed, coded, and analysed thematically using the narrative method of qualitative data analysis.

3. Results

Two hundred (200) questionnaires out of two hundred and four (204) were validly filled and completed for the analysis. The qualitative data collected through In-Depth Interviews were used to complement the study.

A. Socio-Demographic Characteristics of the Respondents

This section deals with the analysis of the socio-demographic characteristics of the respondents. The variables of interest here are: sex, age, educational qualification, marital status, religious affiliation, and the number of years worked in the organization.

Table 1: Personal Data of Respondents

Responses	Frequency	Percentage (%)
Age		
18 – 22	52	26.0
23 – 27	60	30.0
28 – 32	33	16.5
33 and above	55	27.5
Total	**200**	**100.0**
Religious Affiliation		
Christianity	178	89.0
African Traditional Religion	15	7.5

Islam	2	1.0
Atheist/Atheist	5	2.5
Total	**200**	**100.0**
Occupation		
Unemployed	25	12.5
Civil servant	15	7.5
Self-employed	53	26.5
Farming	41	20.5
Trader	31	15.5
Student	35	17.5
Total	**200**	**100.0**
Level of Education		
No formal education	36	18.0
FSLC	51	25.5
SSCE	61	30.5
OND/HND	22	11.0
B.Sc./BA	30	15.0
M.Sc./Ph.D	0	0.0
Total	**200**	**100.0**
Income Status		
Low-Income Earner	110	55.0
Average Income Earner	61	30.5
High-Income Earner	29	14.5
Total	**200**	**100.0**
Marital Status		
Divorced	3	1.5
Separated	15	7.5
Single	125	62.5
Married	47	23.5
Widowed	10	5.0
Total	**200**	**100.0**

Field Survey, 2024

Data in Table 1 show that 100.0% of the respondents who took part in this study are females. In terms of the age of the respondents, it can be seen that 30.0% of the respondents are between the ages of 23–27, whereas only 16.5% of the respondents are between the ages of 28–32. This implies that a slight majority of the respondents are in their late 20s. The religious affiliation shows that 89.0% are Christians while 1.0% are Muslims. This confirms that a greater percentage of the respondents who took part in this study are Christians. Further findings from Table 1 show that 12.5% of the respondents are unemployed, 26.5% of the respondents are self-employed and 7.5% are civil servants. This implies that the majority of the respondents are self-employed. On the level of educational qualification, the distribution shows that 30.5% of the respondents have SSCE while none of the respondents have advanced. This implies that the majority of the respondents have lower levels of education.

The column for income status shows that a significant majority, representing 55.0% of the respondents are low-income earners while 14.5% are high-income earners. Regarding marital status, table 1 shows that 62.5% are single whereas 1.5% of the respondents are divorced. This implies that most respondents are single. This is understandable because this study is about socio-cultural factors influencing gender-based violence against females of reproductive age in Aguata LGA which of course falls within the purview of youths.

B. Perceptions toward GBV in Aguata L.G.A

Table 2: Respondents' views on the meaning of GBV

Responses	Frequency	Percentage (100%)
GBV is simply a form of discrimination and acts of violence against women	55	27.5%
GBV is a social problem perpetrated by social structures and norms.	30	15.0%
GBV is rooted in gender inequality and provides unequal power relations among men and women	34	17.0%
GBV is a threat to the sexual and reproductive health of women	38	19.0%
All of the above	43	21.5%
Total	**200**	**100.0%**

Field Survey, 2024

Table 2 shows that 27.5% of the respondents defined GBV as a form of discrimination and acts of violence against women while 15.0% see it as a social problem perpetrated by social structures and norms. This implies that the majority of the respondents defined gender-based violence as a form of discrimination and acts of violence against women. This finding is supported by the qualitative data. One of the interviewees stated:

GBV *means different things to different people. To some it refers to violence against women, to others, it is an act caused by gender inequality. In a nutshell, I see GBV as acts of violence against women most especially because they're the subordinate ones in society (Female, Married, 51 years, Opinion Leader, Ekwulobia Community).*

Table 3: Respondents' views on the perception of GBV against females of reproductive age in Aguata L.G.A

Responses	*Frequency*	*Percentage (%)*
Positive	27	13.5%
Negative	116	58.0%
Don't know	57	28.5%
Total	**200**	**100.0%**

Field Survey, 2024

Table 3 indicates that the majority (58.0%) of the respondents perceived GBV negatively. At the same time, 13.5% of the respondents perceived GBV against females of reproductive age in Aguata L.G.A positively. This implies that many residents have negative views about GBV.

Table 4: Respondents' views on perceptions of GBV in Aguata L.G.A.

Responses	*Frequency*	*Percentage (%)*
GBV is a violation of women's sexual and reproductive health rights	51	23.5%
Men are the perpetrators of gender-based violence	19	9.5%
Male dominance in society encourages GBV	24	12.0%
The legal framework regards GBV as a private family issue and therefore neglects the issues being reported	64	32.0%
Reports of GBV open room for stigmatization of victims	42	21.0%
Total	**200**	**100.0%**

Field survey, 2024

Table 4 shows that 32.0% of the respondents opined that the legal framework regards GBV as a private family issue and therefore neglects the issues being reported by victims. Similarly, 9.5% of the

respondents were of the view that men are usually the perpetrators of GBV. This confirms that the legal framework regards GBV as a private family issue and therefore neglects the issues being reported in Aguata L.G.A. This agrees with the qualitative data. One of the interviewees stated:
I see GBV as a negative occurrence in many families because it can scatter in any home. GBV is now a social problem that must be discouraged by everybody. Regrettably, my husband beats me, sometimes out of provocation only to realize a few hours later that he shouldn't have done that. I know this is not only in my marriage because it might be happening silently in other people's marriages (Female, Single, 31 years, Youth Leader, Ekwulobia Community.

C. Prevalence of *GBV* in Aguata L.G.A

Table 5: Respondents' views on knowledge/awareness of the various forms of *GBV* against females of reproductive age existing in Aguata L.G.A

Responses	Frequency	Percentage
Yes	130	65.0%
No	44	22.0%
Don't know	26	13.0%
Total	**200**	**100.0%**

Field Survey, 2024

Table 5 shows that 65.0% of the respondents are knowledgeable about the various forms of GBV against females of reproductive age in Aguata L.G.A while 13.0% are not aware of the various forms of GBV existing in Aguata LGA. This implies that the majority of the respondents are quite knowledgeable about the various forms of GBV against females of reproductive age in Aguata L.G.A.

D. Forms of GBV in Aguata L.G.A.

Table 6: Respondents' views on the forms of GBV against females of reproductive age in Aguata L.G.A.

Responses	Frequency	Percentage (%)
Physical violence	31	15.5%
Sexual violence	43	21.5%
Female Genital Mutilation	22	11.0%
Domestic violence	44	22.0%
Forced and early child marriage	12	6.0%
All of the above	50	25.0%
Total	**200**	**100.0%**

Field survey, 2024

With regards to forms of GBV existing in Aguata L.G.A, table 6 shows 25.0% of the respondents stated that all of the above are forms of GBV against females while 6.0% identified forced and early marriage as another form of GBV against women. This implies that the majority of the respondents maintained that all the options listed above are the various forms of GBV against females of reproductive age in Aguata L.G.A. This finding aligns with the in-depth interview. One of the interviewees stated:
Domestic violence is the worst form of violence that I know of and it is not hidden from public knowledge. For instance, some married men in our compound abuse their wives, it is now a routine and I pity the women involved because it has led a lot of them to early doom (Female, Married, 46 years, Opinion Leader, Ezinifite Community).
Another participant stated:
There are many forms of gender-based violence here in Ekwulobia. You see, sexual harassment, rape, and forcing small girls to marry early are common forms. The rate at which young girls even get pregnant is outrageous and expands the poverty rate we are experiencing here (Female, Single, 31 years, Youth Leader, Ekwulobia Community).

E. Socio-cultural Factors influencing GBV in Aguata L.G.A

Table 7: Respondents' views on whether they agree that patriarchy is an aspect of the culture in Aguata L.G.A that supports GBV against females of reproductive age

Responses	Frequency	Percentage
Yes	80	40.0%
No	65	32.5%
Don't know	55	27.5%
Total	**200**	**100.0%**

Field Survey, 2024

Table 7 shows that the majority (40.0%) of the respondents agreed that patriarchy is an aspect of the culture in Aguata L.G.A that supports females of reproductive age. On the other hand, 27.5% do not know whether patriarchy supports GBV or not. In line with this, one of the interviewees stated:
Patriarchy encourages GBV *a lot, men use it because they are the head of the house to torment women and children who seem to be their property according to patriarchy. Women should be able to know their rights, lose fear, and believe that they should also enjoy equal rights especially when it comes to being successful or in politics (Female, Married, 51 years, Opinion Leader, Ekwulobia Community).*

Table 8: Respondents' views on the cultural aspects of Aguata L.G.A that also support GBV against females of reproductive age

Responses	Frequency	Percentage (%)
Traditional social norms	50	25.0%
Preference of male children over female	41	20.5%
All of the above	109	54.5%
Total	**200**	**100.0%**

Field Survey, 2024

Table 8 shows that among the respondents, 54.5% indicated all of the above as cultural aspects of Aguata people that support GBV against females of reproductive age. Again, 20.5% identified the preference of male children over females as a cultural aspect that supports GBV against females of reproductive age. This implies that all the options outlined in Table 8 are the major cultural aspects of Aguata L.G.A that promote GBV against females of reproductive age.

Table 9: Respondents' views on the socio-cultural factors influencing GBV in Aguata L.G.A

Responses	Frequency	Percentage (%)
Poverty	31	15.5%
Lack of education/Ignorance	38	19.0%
Patriarchy	38	19.0%
Religious beliefs	19	9.5%
Growing up in an abusive household	28	14.0%
All of the above	46	23.0%
Total	**200**	**100.0%**

Field Survey, 2024

Table 9 shows that the majority (23.0%) indicated all of the above as the socio-cultural factors that influence GBV against females of reproductive age in Aguata L.G.A. while 9.5% of the respondents identified religious beliefs as factors influencing GBV. This agrees with the in-depth interview sessions. One of the interviewees stated:
In Igbo lands, most especially in this Achina community, many factors encourage violence against women, men are being placed on a higher status than women and thus due to the elements of inequality being influenced by some socio-cultural factors, women suffer violence. In the process of socialization, men learn these acts and women learn to be silent (Female, Married, 46 years, Opinion Leader, Ezinifite Community).

Another participant stated:
Where will I start, a lot of factors put GBV *into play, first the fact that men are superior to women and own them, do you know that some religious bodies encourage these acts of violence? They will keep encouraging you to endure if you are going through abuse in your marriage or family. The way they turn a blind eye to all these makes* GBV *worsen, but that's not the only factor (Female, Single, 31 years old, Youth Leader, Ekwulobia Community).*

F. Consequences of GBV against females of reproductive age in Aguata L.G.A. Anambra State
Table 10: Respondents' views on the consequences of GBV against females of reproductive age in Aguata L.G.A. Anambra State

Responses	Frequency	Percentage
Physical and sexual problems, e.g., STDs, bruises, etc	38	19.0%
High economic cost of treating poor health conditions of victims	26	13.0%
Psychological issues such as depression, stress, anxiety disorders, etc	40	20.0%
It affects the upbringing of children who witness such violence	35	17.5%
All of the above	61	30.5%
Total	**200**	**100.0%**

Field Survey, 2024

Table 10 shows that 30.5% indicated all of the above as the major consequences of GBV against females while 13.0% noted that it could lead to high economic cost of treating poor health conditions of victims. This implies that GBV against females of reproductive age in Aguata L.G.A leads to all the problems mentioned above. This finding was corroborated by the qualitative findings. One of the persons interviewed stated:
The consequences of GBV *are many, victims suffer a series of psychological problems, depression among others which most times have a way of affecting their interactions with people around them (Female, Married, 51 years old, Opinion Leader, Ekwulobia Community).*
Another participant stated:
The consequences of GBV *occur in two ways; it affects children and also affects women. Children who are exposed to acts of* GBV *are likely to show negative attitudes later in life. Women go through a lot, mentally, physically, emotionally, economically, and many more. Surprisingly some women face death at the cold hands of* GBV *(Female, Married, 46 years, Opinion Leader, Ezinifite Community).*

G. Measures to control GBV against females of reproductive age in Aguata L.G.A
Table 11: Respondents' views on best measures to control GBV against females of reproductive age in Aguata L.G.A

Responses	Frequency	Percentage (%)
Education and economic empowerment of women in Aguata L.G.A should be carried out to improve their status.	33	16.5%
GBV acts should be seen as an infringement on women's sexual and reproductive health and should be incorporated into the curriculum of education at all levels	22	11.0%
Aspects of the culture and traditions of Aguata L.G.A that tend to support and promote GBV against females of reproductive age should be eradicated	41	20.5%

Women in society should be subjected to massive reorientation and education to enable them to understand their rights, appreciate their values, and stand up for themselves	41	20.5%
Legal frameworks, awareness campaigns, and support services should be rendered to curb GBV	17	8.5%
All of the above	46	23.0%
Total	**200**	**100.0%**

Field Survey, 2024

With regards to measures to be taken to control GBV against females of reproductive age in Aguata L.G.A, 23.0% indicated all of the above while 8.5% recommended that legal frameworks, awareness campaigns, and support services should be rendered to curb GBV. This shows that a majority of the respondents maintained that to control GBV against females of reproductive age all the options enumerated above must be considered. This agrees with the qualitative data. One of the interviewees stated:

The government should encourage victims of GBV not to die in silence but to speak out to be heard and helped. This is important so that men who engage in such acts of violence will not take it as a normal thing in society or a way of asserting male dominance in society (Female, Married, 46 years, Opinion Leader, Ezinifite Community).

Furthermore, another participant stated:

The government in conjunction with churches and community leaders should organize counseling sessions for women and even married couples to educate them on the need to live in peace, this will help curb children growing up being exposed to violence to avoid them repeating the same issues in the future (Female, Single, 31 years, Youth Leader, Ekwulobia Community)

H. Testing of Hypotheses

Two hypotheses were formulated for the study.

Hypothesis 1: Children who witnessed GBV from their homes are more likely to become abusive adult than those who do not experience GBV in their homes in Aguata L.G.A, Anambra State.

Table 12: Relationship between prevalence and perceptions of GBV in Aguata LGA

		How do you perceive GBV against females of reproductive age in HIS Community?			
		Responses			**Total**
		Positive	**Negative**	**Don't know**	
Do you think that children who witnessed GBV from their homes will grow into abusive adults in the future?	Yes	14	87	50	151
	No	3	10	4	17
	Don't know	10	19	3	32
Total		**27**	**116**	**57**	**200**

= 19.106, df = 4, N=200, p = .001

Table 12 shows that the Chi–square statistical test was run to test if there was statistically significant relationship between perception and prevalence of GBV in Aguata LGA. The statistics confirmed that positive relationship ***(= 19.106, df = 4, N=200, p = .001)*** exist between the cross-tabulated variables. This implies that children who witnessed GBV from their homes are more likely to become abusive

adults than those who do not experience GBV in their homes in Aguata Local Government Area, Anambra State. Thus, it can be inferred that experience of GBV as children could lead to becoming abusive adults in the future in Aguata L.G.A., Anambra State. Hence, there is a significant relationship between perception and prevalence of GBV in Aguata LGA.

Hypothesis 2: There is a significant relationship between patriarchy and GBV against females of reproductive age in Aguata L.G.A., Anambra State.

Table 13: Relationship between patriarchy and GBV against females of reproductive age in Aguata LGA

		Are you knowledgeable/aware of GBV against females of reproductive age in his community?			
		Responses			**Total**
		Yes	**No**	**Don't know**	
Do you agree that Patriarchy is an aspect of the culture in this community that support GBV against females of reproductive age?	Yes	56	14	10	80
	No	35	20	10	65
	Don't know	39	10	6	55
Total		**130**	**44**	**26**	**200**

= 28.336, df = 4, N=200, p = .000

Table 13 shows that the Chi–square statistical test was run to test if there was any statistical relationship between patriarchy and GBV against females of reproductive age in Aguata LGA. The result of the test shows that a statistical relationship ***(= 28.336, df = 4, N=200, p = .000)*** exist between the cross-tabulated variables. This means that there is a significant relationship between patriarchy and GBV against females of reproductive age in Aguata LGA. This confirms that patriarchy significantly influences GBV in Aguata Local Government Area of Anambra State.

4. Discussion of Findings

This study investigated Prevalence and Perceptions towards Gender-Based Violence Against Women of Reproductive Age in Aguata L.G.A. Firstly, the majority of the respondents defined GBV as a form of discrimination and acts of violence against women. This study also discovered that the perceptions of respondents toward GBV were mainly negative and perceived as a private family issue in Aguata L.G.A. This agrees with the previous study carried out by Ilika (2005), which discovered that there was no such thing as marital rape and that domestic violence existed in all families and could take the forms of beatings, scoldings, wrestling, and fights. As a result, they did not think it appropriate to report the incident to the police.

Secondly, it was also found that most respondents are knowledgeable of the various forms of GBV against females of reproductive age in Aguata L.G.A. These forms were identified as physical violence, sexual violence, female genital mutilation, domestic violence, and forced and early child marriage. This finding aligns with the previous study of Odimegwu (2016) which identified the various forms of GBV to include: sexual violence, physical violence, female genital mutilation, and domestic violence.

Thirdly, patriarchy was found to be an aspect of the culture in Aguata L.G.A that supports GBV against females of reproductive age. This study also established that other socio-cultural aspects of Aguata L.G.A support GBV against females of reproductive age such as traditional social norms and preference of male children over female, poverty, lack of education/ignorance, patriarchal, religious beliefs, and growing up in an abusive home. This corroborates with the study by Okolo (2019) which found that cultural values and practices such as male preference in the family and male dominance in the society tacitly support GBV against women in Enugu State, Nigeria.

Fourthly the study found, that some consequences of GBV include: physical and sexual problems, e.g. STDs, bruises, etc, poor health conditions, psychological issues such as depression, stress, anxiety disorders, etc. This finding is consistent with the previous findings by Akaba, & Abdullahi, (2020) which revealed that marital violence affects women and the fetus in their wombs which could lead to low infant birth weight, physical trauma, and emotional stress to women. It also stated that children who witness GBV at home are hurt simultaneously with the victims.

Furthermore, most respondents indicated that many strategies can be put in place to control GBV against females of reproductive age in Aguata L.G.A. These strategies were identified as follows: education and economic empowerment of women in Aguata L.G.A should be carried out to improve their status, GBV acts should be seen as an infringement on women's sexual and reproductive health and should be incorporated into the curriculum of education at all levels, aspects of the culture and traditions of Aguata L.G.A that tend to support and promote GBV against females of reproductive age should be eradicated, women in the society should be subjected to massive reorientation and education to enable them understand their rights, appreciate their values and stand up for themselves and legal frameworks, awareness campaigns and support services should be rendered to curb GBV. Also, the majority of the respondents indicated that the government has a greater role in controlling GBV in Aguata L.G.A. This supports Tanko (2016) who found that government and NGOs should organize community awareness programs to discourage from beating their wives, community leaders should make strong and consistent penalties for perpetrators of GBV, there should be funding for support services for victims of GBV and government should empower women to make them financially independent.

Two hypotheses were formulated and tested in this study. The first hypothesis was tested to know whether there was statistically significant relationship between perception and prevalence of GBV in Aguata LGA, hence the hypothesis: children who witness GBV from their homes are more likely to become abusive adults than those who do not experience GBV in their homes in Aguata L.G.A. The test statistics showed that children who witnessed GBV from their homes are more likely to become abusive adults than those who do not experience GBV in their homes in Aguata Local Government Area, Anambra State. Hence, there is a significant relationship between perception and prevalence of GBV in Aguata LGA. The second hypothesis was designed to find out whether or not there's a significant relationship between patriarchy and GBV against females of reproductive age in Aguata L.G.A. The result confirms that patriarchy significantly influences GBV.

5. Conclusion and Recommendations

Gender-based violence has a negative impact not only on women and their reproductive health but also on Nigeria's economy and progress. Socio-cultural factors play a significant role in the prevalence of GBV against females of reproductive age in Aguata L.G.A. These factors include patriarchal structures, gender inequality, and traditional gender roles that normalize violence against women. It is crucial to address these underlying causes to effectively prevent and reduce GBV.

Based on the findings of this study, the following recommendations were made. They are:
a. GBV victims should be encouraged by the government and all other social institutions to speak up so that they can be heard and receive assistance, rather than dying in silence. This is crucial to prevent people from viewing it as a sign of social norms or as a means of establishing male dominance.
b. The government ought to give women more access to career and educational options. The ability to take charge of their life through education would empower women, and job possibilities will help them become financially independent, which will lessen their vulnerability to abuse and violence.
c. It is imperative that families properly socialize their children. It is the responsibility of parents and guardians to provide a secure environment for their wards' upbringing, wherein they view gender-based violence as a terrible deed. Adequate family-level socialization of children can steer them towards the correct path and familiarize them with socially acceptable behaviors, standards, norms, and values.
d. The government should greatly increase public awareness of GBV and its effects through the media, campaigns, and other public awareness measures. This will support the efforts to deter GBV against women of reproductive-age in Aguata LGA

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