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Original Article

The Prevalence of Intimate Partner/Spouse Violence against Males and its Association with Common Substances of Abuse in Kenya

Vincent Kiprono Mukthar, PhD¹* & Rogers Kiprotich Chemoiwa¹

¹ Egerton University P. O. Box 536-20115, Egerton, Kenya.

*Author ORCID ID: <https://orcid.org/0000-0002-9034-1030>; Email: vkiprono@egerton.ac.ke

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Intimate partner/spouse violence is a global public health problem with many short-term and long-term effects on the physical and mental health of the general population. Intimate partner/spouse violence is predominantly perpetrated by males against women victims, but the men may also be the victims. This study sought to determine the prevalence of male intimate partner/spouse violence and its association with common substance abuse in Kenya. Data from the nationwide and representative Kenya Demographic and Health Survey, conducted in 2014, were further analysed. The Demographic and Health Survey utilizes a two-stage stratified sampling technique. 19.6% (n=3283) of males have ever experienced some form of emotional violence, 3.1% (n=3285) of males have ever experienced a form of severe physical violence and 3.7% (n=3284) of males have ever experienced a form of sexual violence orchestrated by intimate partner/spouse. Binary Logistic regression established that the males who do not take alcohol had lower odds of emotional intimate partner/spouse violence (OR 0.56, CI 0.46-0.68), to severe physical intimate partner/spouse violence (OR 0.60, CI 0.39-0.91) and to sexual intimate partner/spouse violence (OR 0.62, CI 0.43-0.90). Binary Logistic regression also established that the males with intimate partners/spouses who do not take alcohol had lower odds of being exposed to emotional intimate partner/spouse violence (OR 0.39, CI 0.28-0.56), to severe physical intimate partner/spouse violence (OR 0.20, CI 0.12-0.35) and to sexual intimate partner/spouse violence (OR 0.37, CI 0.21-0.67). Intimate partner violence against males is not rife in Kenya but it is a public health and social concern. The predictors of this vice are alcohol intake by both the men and their partners. Cigarette smoking by men was also significantly associated with male intimate partner violence. This study recommends that one of the strategic approaches to tackling male intimate partner violence is counselling the general population to abstain or refrain from common substances of abuse.

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INTRODUCTION

Intimate partner/spouse violence of any form is a costly public health concern and is associated with increased morbidity, preventable disability and mortality. A number of studies have demonstrated myriad and dire physical, mental and social consequences (Miller & McCaw, 2019). Intimate partner/spouse violence as physical violence, sexual violence, stalking, or psychological aggression (including coercive acts) by a current or former intimate partner, whether or not the partner is a spouse (Centre for Disease Control, 2017)

Intimate partner/spouse violence affects either gender or about a third of all families in the United States have experienced some form of intimate partner/spouse violence in their lifetime. Intimate partner/spouse violence has huge economic implications which include but are not limited to loss of productive man-hours, medical costs, psychological support costs and litigation costs (Doyce et al., 2022). Whereby many studies have focused on prevalence, associated factors and interventions on intimate partner/spouse violence against women, minimal effort has been put on intimate partner/spouse violence against men. It is further asserted that there is under-reporting of intimate partner/spouse violence against men for fear of reprisal or stigmatization (Jewkes et al., 2017).

It is estimated in the United States that 9.5% of men have experienced some form of sexual violence by an intimate partner/spouse during their lifetimes, 14% of men have experienced severe physical violence by an intimate partner/spouse and about 40% of men have experienced some form of emotional violence by

an intimate partner/spouse (Casey, 2014). Lifetime rates of general physical and/or sexual intimate partner/spouse violence have been found to be highest in Southeast Asia, the Mediterranean region and sub-Saharan Africa (Kapiga et al., 2017).

Many studies on intimate partner/spouse violence are inconclusive in association with substance abuse (Cafferky et al., 2018; de Bruijn & de Graaf, 2016; Gilchrist et al., 2017). There is a paucity of literature on intimate partner/spouse violence against men in Kenya. Therefore, this study sought to determine the prevalence of male intimate partner/spouse violence and its association with common substance abuse in Kenya.

METHODOLOGY

This study uses data from the nationwide Kenya Demographic Health Surveys (KDHS) conducted in 2014. The KDHS provides a nationally representative sample of the Kenyan population and utilizes a two-stage stratified sampling design. In the first stage, clusters are stratified by region and urban-rural location and randomly selected in proportion to population size. The second stage involves the random selection of households within clusters.

This study focused on determining the association between common substance abuse and intimate partner/spouse violence against males in Kenya. Thus the unit of analysis was men who participated in the survey and were in a heterosexual relationship. Men are asked separately about background information, substance abuse, and intimate partner/spouse violence experiences. 12,819 men participated in the survey and 3,285 met the inclusion criteria and

thus were therefore eligible for our analysis. Permission to get access to the data was obtained from the measure DHS program online request from <http://www.dhsprogram.com> website and the data used were publicly available with no personal identifier

The outcome variable is intimate partner/spouse violence against men in a dichotomous form (Yes or No). Intimate partner/spouse violence was in three forms namely emotional, severe physical and sexual violence. The explanatory variable was the use of common substances of abuse which was also threefold; men using cigarettes, men using alcohol and use of alcohol by intimate partner/spouse against men.

Data were analysed using Statistical Package for Social Sciences (SPSS) version 24. Descriptive statistics are presented as proportions, percentages, figures and tables for the categorical variables. A Pearson Chi-Square test of independence was used to compare the association of intimate partner/spouse violence by the explanatory variable use of common substance of abuse status. A binary logistic regression model was fitted to assess the strength and direction of

associations between the outcome variable (intimate partner/spouse violence) and the explanatory variable namely use of common substance of abuse status. The odd ratios and corresponding 95% confidence intervals were computed for all the significant variables in the unadjusted model.

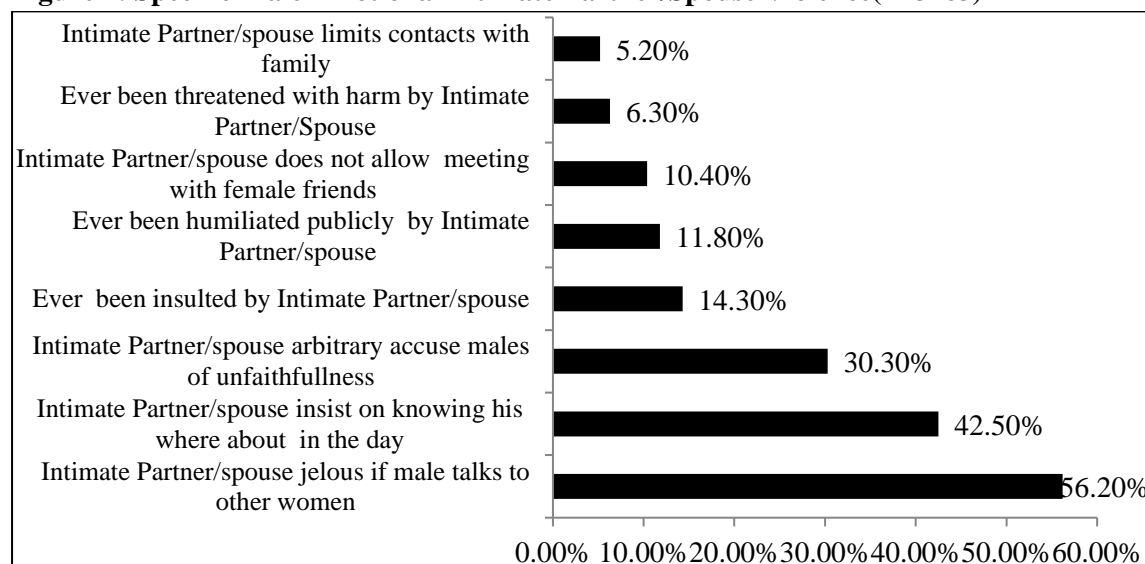
FINDINGS

Male Emotional Intimate Partner/spouse Violence

Prevalence of Male Emotional Intimate Partner/spouse Violence

About twenty percent of males (19.6%, 644) had ever experienced some form of emotional violence from an intimate partner/spouse. The three highest ranking emotional violence to males by intimate partner/spouses are; feeling jealous when the males talk to women friends (56.2%, 1845), intimate partner/spouse insisting on knowing male whereabouts in the day (42.5%, 1395) and intimate partner/spouse arbitrary accusing males of unfaithfulness (30.3%, 995 as captured by the following *Figure 1*.

Figure 1: Specific Male Emotional Intimate Partner/Spouse Violence(n=3283)



Association of common substance abuse and Male Emotional Intimate Partner/spouse Violence

Table 1 shows that indulgence of alcohol by both males and their intimate partners/spouses is

significantly associated with male emotional violence ($p < 0.05$). It also demonstrates that male indulgence in cigarettes is significantly associated with male emotional intimate partner/spouse violence ($p < 0.05$).

Additionally, Binary Logistic regression was used to determine if male indulgence in alcohol could predict male Emotional intimate partner/spouse violence practice. This study established that the males who do not take alcohol had lower odds of being exposed to emotional intimate partner/spouse violence compared to those who indulged in alcohol (OR 0.56, CI 0.46-0.68). Furthermore, Binary Logistic regression was used

to determine if female partner/spouse indulgence in alcohol could predict male Emotional intimate partner/spouse violence practice. This study established that males with intimate partners/spouses who do not take alcohol had lower odds of being exposed to emotional intimate partner/spouse violence compared to those whose intimate partners/spouses indulged in alcohol (OR 0.39, CI 0.28-0.56).\

Table 1: Comparison of common substance abuse versus male emotional intimate partner/spouse violence

Variable		Frequency of violence	Population (n)	Percentage	X ²	p-value
Male smoking Cigarettes	Smokes	478	2125	22.5%	5.012 ^a	.025
	Does Not Smoke	164	878	18.7%		
Male Alcohol Intake	Takes Alcohol	310	1170	26.5%	55.466 ^a	.000
	Do not Take Alcohol	332		15.7%		
Female Alcohol Intake	Takes Alcohol	60	142	42.3%	47.744 ^a	.000
	Do not Take Alcohol	582	3112	18.7%		

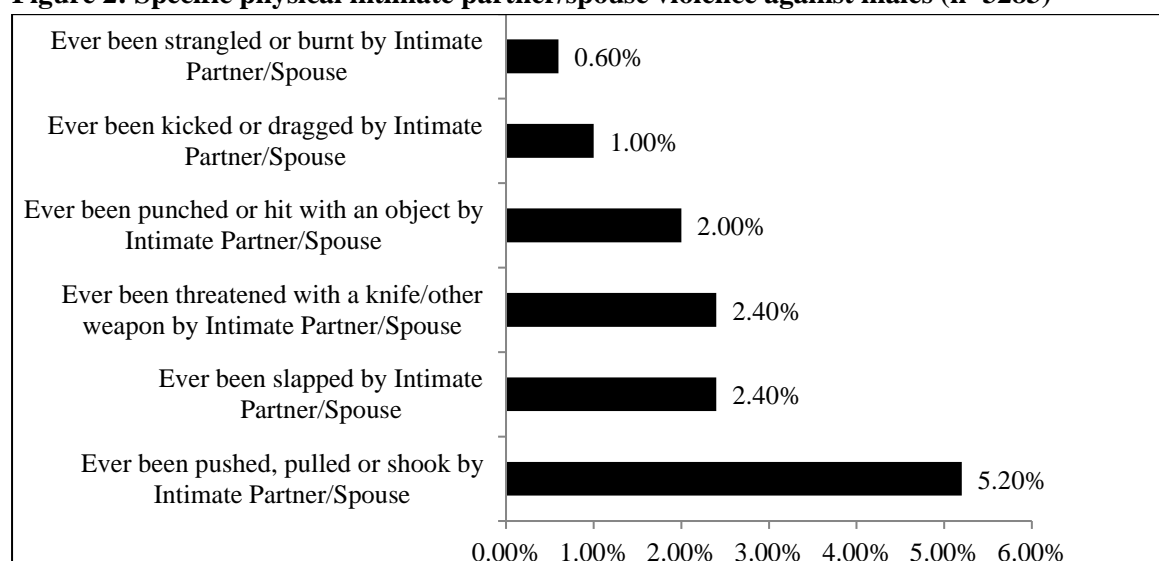
Male Physical Intimate Partner/spouse Violence

Prevalence of Male Physical Intimate Partner/spouse Violence

Slightly over three percent of males (3.1%, 102) of males have ever experienced some form of severe physical violence from an intimate partner/spouse. The three highest ranking physical

violence to males by intimate partner/spouses are; having ever been slapped by an intimate partner/spouse (2.4%, 79), having ever been threatened with a knife/other weapon by an intimate partner/spouse (2.4%, 79) and having ever r been punched or hit with an object by intimate partner/spouse (2.0%, 66) as shown by the following Figure 2.

Figure 2: Specific physical intimate partner/spouse violence against males (n=3283)



Association of Common Substance of Abuse and Male Physical Intimate Partner/spouse Violence

Table 2 demonstrates that indulgence of alcohol by both males and their intimate partners/spouses is significantly associated with male physical violence ($p < 0.05$).

Additionally, Binary Logistic regression was used to determine if male indulgence in alcohol could predict severe physical intimate partner/spouse violence practice. This study established that the males who do not take alcohol had lower odds of being exposed to physical intimate partner/spouse

violence compared to those who indulged in alcohol (OR 0.60, CI 0.39-0.91). Furthermore, Binary Logistic regression was used to determine if female partner/spouse indulgence in alcohol could predict male severe physical intimate partner/spouse violence practice. This study established that males with intimate partners/spouses who do not take alcohol had lower odds of being exposed to severe physical intimate partner/spouse violence compared to those whose intimate partners/spouses indulged in alcohol (OR 0.20, CI 0.12-0.35).

Table 2: Comparison of common substance of abuse versus male physical intimate partner/spouse violence

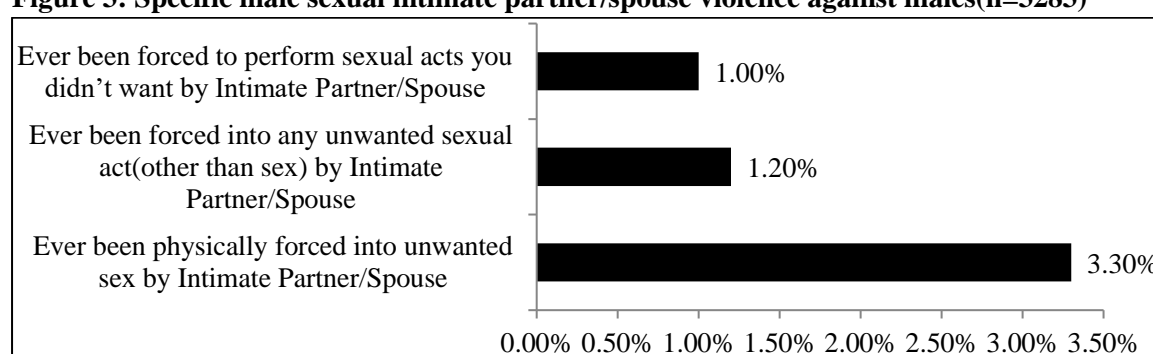
	Variable	Frequency of violence	Population (n)	Percentage	X ²	p-value
Male smoking Cigarettes	Smokes	32	727	4.4%	5.379 ^a	.020
	Does Not Smoke	69	2556	2.7%		
Male Alcohol Intake	Takes Alcohol	54	1174	4.6%	14.383 ^a	.000
	Does Not Take Alcohol	47	2136	2.2%		
Female Alcohol Intake	Takes Alcohol	20	142	14.1%	59.717 ^a	.000
	Does Not Take Alcohol	81	3115	2.6%		

Male Sexual Intimate Partner/spouse Violence

Prevalence of Male Sexual Intimate Partner/spouse Violence

About four percent of males (3.7%, 122) of males have ever experienced some form of sexual violence from an intimate partner/spouse.

Figure 3: Specific male sexual intimate partner/spouse violence against males(n=3283)



Association of common substance abuse and Male Sexual Intimate Partner/spouse Violence

Table 3 elucidates that indulgence of alcohol by both males and their intimate partners/spouses is significantly associated with male sexual violence ($p < 0.05$). Male indulgence in cigarettes is not

significantly associated with male sexual intimate partner/spouse violence ($p > 0.05$).

Additionally, Binary Logistic regression was used to determine if male indulgence in alcohol could predict male sexual intimate partner/spouse violence practice. This study established that the males who do not take alcohol had lower odds of

being exposed to sexual intimate partner/spouse violence compared to those who indulged in alcohol (OR 0.62, CI 0.43-0.90). Furthermore, Binary Logistic regression was used to determine if female partner/spouse indulgence in alcohol could predict male sexual intimate partner/spouse

violence practice. This study established that males with intimate partners/spouses who do not take alcohol had lower odds of being exposed to sexual intimate partner/spouse violence compared to those whose intimate partners/spouses indulged in alcohol (OR 0.37, CI 0.21-0.67).

Table 3: Comparison of common substance abuse Versus Male Sexual Intimate Partner/Spouse Violence

Variable			Frequency of violence	Population (n)	%	X ²	p-value
Male smoking cigarettes		Smokes	35	729	4.80%	2.883 ^a	0.090
		Does Not Smoke	88	2588	3.40%		
Male alcohol intake		Takes Alcohol	61	1173	5.20%	10.832 ^a	0.001
		Do not Take Alcohol	62	2138	2.90%		
Female alcohol intake		Takes Alcohol	15	142	10.60%	18.855 ^a	0.000
		Does Not Take Alcohol	108	3086	3.50%		

DISCUSSION

Emotional Intimate Partner/Spouse Violence Against Men

About twenty percent of males (19.6%, 644) of males have ever experienced some form of emotional violence from an intimate partner/spouse. This compares favourably with what is documented in Casey (2014), as being about 40% but this ought to be taken with caution owing to possible under-reporting for fear of reprisal or stigmatization as explained by (Jewkes et al., 2017).

This study established that the males who do not take alcohol were about 44% less likely to be exposed to emotional intimate partner/spouse violence compared to those who indulged in alcohol (OR 0.56, CI 0.46-0.68). This study also established that males with intimate partners/spouses who do not take alcohol were over 60% less likely to be exposed to emotional intimate partner/spouse violence compared to those whose intimate partners/spouses indulged in alcohol (OR 0.39, CI 0.28-0.56).

Severe Physical Intimate Partner/Spouse Violence against Men

Slightly over three percent of males (3.1%, 102) of males have ever experienced some form of severe physical violence from an intimate partner/spouse. It takes a woman a lot of physical

stamina and mental psyching to engage in a physical brawl. It can be explained by the influence of substance abuse which has been known to alter judgment and give a sense of egoism (Dowling et al., 2016).

This study established that the males who do not take alcohol were about 40% less likely to be exposed to severe physical intimate partner/spouse violence compared to those who indulged in alcohol (OR 0.60, CI 0.39-0.91). This study established that males with intimate partners/spouses who do not take alcohol were about 80% less likely to be exposed to severe physical intimate partner/spouse violence compared to those whose intimate partners/spouses indulged in alcohol (OR 0.20, CI 0.12-0.35). According to, Dowling et al. (2016) and Sontate et al. (2021) alcohol indulgence increases the propensity for aggression. Alcohol use arouses morbid aggression that may lead to many forms of violence, especially against those who are accessible or reachable to the aggressor including but not limited to intimate partners/spouses. This has damaging short to long-term repercussions on family set-up and human relationships in general.

Sexual Intimate Partner/Spouse Violence Against Men

About four percent of males (3.7%, 122) of males have ever experienced some form of sexual

violence from an intimate partner/spouse. This study may have under-reported sexual violence from an intimate partner/spouse because of the sensitivity associated with the subject. In many African countries, anything associated with the subject of sexual intimacy is not boldly engaged or discussed at individual, group or societal levels more so when the victims are men (Broban et al., 2020).

This study established that the males who did not take alcohol were 38% less likely to be exposed to sexual intimate partner/spouse violence compared to those who indulged in alcohol (OR 0.62, CI 0.43-0.90). This study established that males with intimate partners/spouses who do not take alcohol are 63% less likely to be exposed to sexual intimate partner/spouse violence compared to those whose intimate partners/spouses indulged in alcohol (OR 0.37, CI 0.21-0.67). Cafferky et al., (2018) explain that alcohol consumption may hamper the perpetrators' cognition, span of self-control and judgment thus leading to sexual violence to the intimate partner/spouse. These regrettable sexual escapades associated with alcoholism are often injurious to the victim but may also be detrimental to both the perpetrator and the victim physically, emotionally and psychologically.

CONCLUSION AND RECOMMENDATIONS

Intimate partner violence against males is not rife in Kenya but it is a public health and social concern. The predictors of this vice are alcohol intake by both the men and their partners. Cigarette smoking by men was also significantly associated with male intimate partner violence. This study recommends that one of the strategic approaches to tackling male intimate partner violence is counselling the general population to abstain or refrain from common substances of abuse.

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