

Original Research Article

Perceptions of men on community and their uptake of health services on experiencing domestic violence; a cross sectional study from Kisumu County, Western Kenya

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ABSTRACT

Background: The quality of life can be impacted negatively by domestic violence among partners. The community plays a major role in what they perceive could motivate or harbor health seeking services by men on experiencing domestic violence. Little is however known of men's perceptions on community in relation to men's health seeking. Therefore, this study was designed to assess the men's perceptions on community and their uptake of health services on experiencing domestic violence in Kisumu.

Methods: A cross sectional study design of 438 participants was used. The study was conducted from July 2019 to September 2019 using self-administered questionnaires. Basic socio-demographic characteristics were collected and participants' community perceptions and their uptake of health services on experiencing domestic violence were investigated. Descriptive statistics were computed to characterize the study population with frequency distribution tables used to show distribution of respondents by key variables, expressed as counts and corresponding percentages.

Results: Respondents who participated in the study were 398 (90.8%). Descriptive statistics analysis showed that 58.3% of the respondents perceived shame, fear and embarrassment from the communities as barriers to seeking health services.

Conclusions: Health services offered to men should be target oriented with interventions in place to ensure men are well managed and advised on the importance of health seeking in the face of domestic violence. The results from this study calls for advocacy on the importance of community awareness in relation to health seeking especially by men on experiencing domestic violence to aid in improving their life.

Keywords: Domestic violence, Community, Perceptions, Uptake of health services

INTRODUCTION

Social, cultural and religious constructs help explain men's perceptions of community in relation to their health seeking when experiencing domestic violence. From early ages, men are taught to be composed and not to express their emotions, to 'suck it up' and 'be a man'.¹¹ They may thus feel discouraged to talk about what's going on in their personal lives, or they feel like no one will believe them.¹¹ Men's health seeking services have been largely influenced by community perceptions

towards gender differences that over-emphasize men's physical capability to repel abuse, as well as societal expectations towards men's financial and physical ability to resolve their own issues.¹³ When men are victims of domestic violence, they face the struggles of reconciling their victimization with the perception towards their masculine identity.¹⁴ It is suggested that male victims who did not disclose personal problems or underreported their experience may be affected by men's unwillingness to show weakness.^{2,6} Reasons explaining men's reluctance to seek health services could be out of service

target perception, shame and embarrassment, denial, stigmatization and fear.¹⁰ The cultural and social constructs on men’s health seeking when experiencing domestic violence determines their lives. It thus remains unknown how much men could be assisted to seek health services even in the face of cultural and social perceptions concerning their masculine identity.

Men’s perceptions on community on health seeking when experiencing domestic violence could be due to lack of appropriate services making men feel isolated. For example, a cross sectional qualitative study using national data in 2008 in Nigeria was conducted to 1,369 adult male respondents to obtain why they avoid medical care and reported unfavorable evaluations of seeking medical care such as factors related to physicians, health organizations and affective concerns.⁷ Even though some services may target men and may be gender sensitive in nature, men may not know about these services because they have been socially isolated.⁹ There appears that male masculinity plays a role in their health seeking on experiencing domestic violence. Their socialization into male role thus encourages them to be stoical, tough, brave, strong and self-reliant and not to seek care for less serious health problems. Hence, there is a strong need to determine the needs by men experiencing domestic violence and to identify factors that lock men from seeking health services.

Men’s perceptions on community on why male victims are reluctant to seek health services are mainly because of shame and embarrassment. Men who have been assaulted by their intimate partners, do not want to disclose their problems to avoid additional problems.¹² Men’s perceptions on community on health seeking could be out of stigmatization. The longer they have been abused, the more likely they would hide their problems to avoid being stigmatized by others.⁵ It is common to hear those men should simply avoid the problem by leaving the situation for a whole rather than confronting it because they would be seen as the abuser if they would defend themselves.³ Fear is still regarded a factor blocking health seeking among abused men. The community also expresses those men who are inclined not to use community services like seeking health services are afraid that their masculinity would be challenged. Abused men do not report their incidents and are living in fear and anxiety.⁴ What makes these male victims feel vulnerable is their fear of losing male identity and power to defend, such as fear of the perpetrator, threat of retaliation and fear of being labelled as feminine.¹

Men feel shameful, holds self-blame or fearing blame from others and embarrassed when seeking health services on domestic violence because of the cultural, religious and social reasons that makes them the head of the houses. Some even relate abuse to their own weaknesses, others may blame their injuries on their own mistakes such as careless fall and other accidents. Thus, understanding community perceptions in relation to

men’s health seeking is important in determining intervention points in the community and among men experiencing domestic violence. Therefore, the study assessed men’s perceptions on community and their uptake of health services on experiencing domestic violence.

METHODS

The questionnaires were given to the study participants within Kisumu County. The questionnaires were thus administered with the help of research assistants. Only respondents of ages 18-54 years and were able to give consent were included in the study. The respondents were free to withdraw from the study at any time with no interrogation from the principal investigator or from the research assistants. An ethical approval was sought from Maseno university ethics review committee, proposal reference number MSU/DRPI/MUERC/00715/19.

Recruitment was done from July 2019 to September 2019. A response rate of 90.8% was obtained. The study adopted a simple random sampling (Figure 1). The questionnaires had been pre-tested during a pilot to assess a Cronbach’s reliability (assessed at the level of 0.974) and content validity was obtained through the use of professionals or experts in this particular field in which they were requested to assess the relevance of the content used in the questionnaire developed. Participants who participated in the pilot study were excluded. Statistical package for social scientists’ version 17 software was used to analyze the data.

Socio demographic characteristics				
Age:			
Marital status:			
Community perceptions and uptake of health services				
How does the community view men experience domestic violence				
.....				
.....				
To what extent do you agree with the following statements regarding community perceptions and uptake of health services by men experiencing domestic violence? Use a scale of 1-5 where; 1=Strongly disagree, 2=Disagree, 3=Neutral, 4=Agree, 5=Strongly agree				
Statements	1	2	3	4
Men are naturally seen as strong and not to go for health services when experiencing domestic violence.				
The sense of shame, fear, embarrassment, denial and stigmatization bars men from seeking health services.				
Most men have the feeling that most of the domestic violence services in the hospital targets women and not men.				
Men only seek health services when the injury is deep and life threatening.				
Cultural, religious and social reasons that put men as the head of the houses could be the reasons men do not seek health services after domestic violence?				
What do you think prevents men from seeking health services?			
What do you think facilitates men’s interest towards seeking health services?			

Figure 1: The survey questionnaire.

RESULTS

The extent to agree on men’s perceptions about the community and uptake of health services when experiencing domestic violence was measured on a Likert scale and answered to the statements in Figure 1. Majority 249 (67.7%) agreed with the statements with 57 (13.8%) and 57 (13.2%) disagreeing and strongly agreeing with the statements respectively. Those who strongly disagreed with the statements were 17 (2.5%) with 18 (2.8%) being neutral, stating their inability to decide on which of the statements could lead to men uptake of health services when experiencing domestic violence.

Majority of the respondents 232 (58.3%) perceived shame, fear and embarrassment to be what prevents men from seeking health services when experiencing domestic violence, with the least 3 (0.7%) of the respondents thinking that the little attention given to men by the health care providers and by the legal authorities when they report their cases for assistance could be the reasons that prevent men from seeking health services when experiencing domestic violence. Pride in men and ego defenses was reported by 48 (12.1%) with 21 (5.2%) reporting stigmatization from the society and peers as reasons that could prevent men from seeking health services. Some participants 12 (3.0%) acknowledged that nothing should prevent men from seeking health services as their condition is deemed normal worth health seeking while 9(2.3%) stated financial problems as reasons preventing men from seeking health services. Few participants 5 (1.3%) reported men’s ignorance and lack of knowledge on the importance of seeking health services when they are violated by their intimate partners as they will be seen as weak. Those who failed to answer to the question were 68 (17.1%).

Assessment on what community think accelerates men’s interest towards seeking health when experiencing domestic violence was attempted by 335 participants. Those who had no response to the question were 63 (15.9%) with more than half of the respondents 199 (50.0%) acknowledging the seriousness of the situation like men receiving deep wound or threats from their partner, or any life-threatening ordeal that could lead to divorce, death or cases of chopped organs as reasons some men sought health services. Creation of awareness on importance of seeking health services when experiencing domestic violence was reported by 45 (11.3%) with 41 (10.3%) stating availability of free services to men like counselling and guidance and providing services specified for men as a reason that could accelerate men’s health seeking when experiencing domestic violence. Support from friends and close ones including emotional and financial support was acknowledged by 30 (7.5%) while few participants 20 (5.0%), reported that nothing accelerates or motivates men’s health seeking when experiencing domestic violence and that health seeking should be voluntary with

no one to be reminded to go hospital when need arise. This is illustrated in Table 1.

Table 1: Men’s perceptions of community and uptake of health services on experiencing domestic violence, (n=398).

Variables	Responses	Percent (%)
Extent to agree		
Strongly disagree	17	2.5
Disagree	57	13.8
Neutral	18	2.8
Agree	249	67.7
Strongly agree	57	13.2
What community think prevents men from seeking health services		
Shame, fear and embarrassment from the community	232	58.3
Financial problems	9	2.3
Ego/pride	48	12.1
Little attention given to the affected men	3	0.7
No response	68	17.1
Stigma	21	5.2
Ignorance	5	1.3
Nothing	12	3.0
What community thinks accelerates men’s health seeking		
Seriousness of the situation	199	50.0
Free services	41	10.3
Friends support	30	7.5
Nothing	20	5.0
Creating awareness	45	11.3
No response	63	15.9

The table above shows men’s perceptions on community and uptake of health services.

DISCUSSION

The perceptions of the communities on health services uptake by men on experiencing domestic violence is crucial. Their views determine a man’s capability of moving to the hospital not only when experiencing a life-threatening condition but by providing dialogue and emotional support to the affected men. The shame men hold, self-blame from others and the feeling of embarrassment when seeking health services especially when experiencing domestic violence could be because of cultural, religious and social reasons.⁸ From the study, shame, fear and embarrassment from the community was reported to be what prevents men from seeking health services. This finding is similar to, who acknowledges that fear is still regarded a factor blocking health seeking among abused men and that the community also expresses those men who are inclined not to use community services like seeking health services are afraid that their masculinity would be challenged.⁴

CONCLUSION

A relatively high proportion of the participants perceived shame, fear and embarrassment from the community as a major reason that prevents men from seeking health services when experiencing domestic violence, while seriousness of the condition that could be life threatening was reported to improve men's health seeking when experiencing domestic violence.

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Conflict of interest: None declared

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