

Violence Against Women in Sierra Leone: Frequency and Correlates of Intimate Partner Violence and Forced Sexual Intercourse

Ann L. Coker¹ and Donna L. Richter²

ABSTRACT

Violence against women is a significant public health problem which impacts women, men, and children. Little is known about the frequency or correlates of violence against women in Africa. In this cross-sectional study, we found that 66.7% of 144 women surveyed in a study of AIDS knowledge, attitude, and behaviours, report being beaten by an intimate male partner and 50.7% report having ever been forced to have sexual intercourse; 76.6% of women report either forced sex or intimate partner violence. Circumcised women were most likely to report intimate partner violence and forced sexual intercourse. To improve the health of women worldwide, violence against women must be addressed. (*Afr J Reprod Health* 1998;2(1):61-72)

RÉSUMÉ

La violence à l'encontre des femmes au Sierra Leone: Fréquences et déterminants actes de violence de la part du conjoint et des rapports sexuels forcés. La violence à l'encontre des femmes est un problème de santé publique majeur qui affecte à la fois les femmes, les hommes et les enfants. Cependant, l'on sait peu sur la fréquence et les déterminants de la violence contre les femmes en Afrique. Dans cette étude transversale, nous avons découvert que 66,7 % des 144 femmes enquêtées au cours d'une étude sur les connaissances, les attitudes et les comportements en rapport au SIDA, avaient rapporté avoir été battues par un conjoint mâle et 50,7% ont déclaré avoir été forcées à avoir des rapports sexuels. 76,6% des femmes ont déclaré avoir soit été forcées à des actes sexuels, soit avoir subi des actes de violence de la part de leurs partenaires. Les femmes excisées étaient les plus nombreuses à rapporter la violence subie de la part de leurs partenaires et les rapports sexuels forcés.

Afin d'améliorer la santé des femmes dans le monde entier, le problème de la violence à l'encontre des femmes doit être résolu. (*Rev Afr Santé Reprod* 1998;2(1):61-72)

KEYWORDS: *Violence against women, female circumcision, rape, sexual assaults, women, Africa, intentional injury*

¹Department of Epidemiology and Biostatistics; ²Department of Health Promotion and Education, both in the University of South Carolina, School of Public Health, Columbia, South Carolina, 29208, USA

Implications

Violence against women, both intimate partner violence and forced sex, is common in Sierra Leone where the majority of women are circumcised. Both female circumcision and intimate partner violence can result in significant health consequences for women. Women experiencing IPV disproportionately are circumcised women.

Circumcision may be a marker or proxy for the social status of women in society. Women who are circumcised are more likely to live in households in which intimate partner violence including forced sex is condoned.

These women recognize that their choices in prevention of HIV and other sexually transmitted infections are limited and difficult. Suggesting that a spouse or partner consistently use condoms can result in further violence against the woman. Such a suggestion could be interpreted as objecting to the spouse / partner's having multiple partners (a practice which is believed to enhance a male's status with his peers), questioning his ability to choose uninfected partners (the belief persists that one can tell if a person has HIV/AIDS based on their appearance), or admitting that the woman herself has had other partners who may have infected her. The addition of subsequent wives, who may themselves be infected with HIV, into an existing household is not uncommon and adds an additional concern for women's health and safety. Beyond HIV / AIDS prevention and toward better health for women, we must address violence against women. Clearly, any such measures should be culturally appropriate.

Acknowledgments

This research was conducted as part of a Fulbright Senior Research Fellowship in Sierra Leone, West Africa. The cooperation and support of the Sierra Leone Ministry of Health, the National AIDS Programme of Sierra Leone, the Marie Stopes Clinics, Kissy Eye Clinic, Connaught Hospital, Waterloo Refugee Camp, Lokomasama Teachers' College, Magbil Clinic, the Sierra Leone chapter of the Society for Women and AIDS in Africa (SWAASL) and the US Embassy in Freetown are gratefully acknowledged.

REFERENCES

1. Koss MP, Koss PG, Woodruff WJ. Deleterious effects of criminal victimization on women's health and medical utilization. *Arch of Intern Med* 1991;151:342-7.
2. Hendricks-Matthews MK. Survivors of abuse: Health care issues. *Prim Care* 1993;20:289-305.
3. Drossman DA, Leserman HJ, Nachman G, et al. Sexual and physical abuse in women with functional or organic gastrointestinal disorders. *American College of Physicians* 1990;113:828-33.
4. Kemp A, Rawlings ER, Green BL. Post-traumatic stress disorders (PTSD) in battered women: a shelter sample. *Trauma Stress* 1991;4:137-48.
5. Plichta S. The effects of woman abuse on health-care unitization and health status: A literature review. *Womens Health Issues* 1992;2:154-163.
6. Sasseti MR. Domestic Violence. *Prim Care* 1993;20:289-305.
7. Odujinrin O. Wife battering in Nigeria. *Int J of Gynecol and Obstetrics*. 1993;41:159-164.
8. Van der Straten A, King R, Grinstead O, Serufilira A, Allen A. Couple communication, sexual coercion and HIV risk reduction in Kigali, Rwanda. *AIDS* 1995;9:935-944.
9. Butchart A, Brown D. Non-fatal injuries due to interpersonal violence in Johannesburg — Soweta: incidence, determinates and consequences. *Forensic Sci Int*. 1991;52:355-51.
10. Raikes A. Pregnancy, birthing and family planning in Kenya: Changing patterns of behaviours: A health utilization study in Kissi District. 1990, Copenhagen: Center for Development Research.
11. Heise L. Violence against women: the missing agenda. In *Women's health: A global perspective*. Koblinsky MA and Timyab GJ, Eds. Boulder CO: Westview, 1993.
12. Stewart TJ, Richter RL. Perceived barriers to HIV prevention among university students in Sierra Leone, West Africa. *International Quarterly of Community Health Education*, 1995;15:253-265.

13. Adedoyin M, Adegoke AA. Teenage prostitution — child abuse: a survey of the Ilorin situation. *Afr J of Med and Med Sci* 1995;24:27–31.
14. Meursing K, Vos T, Coutinho O, Moyo M, Mpofu S, Oneko O et al. Child sexual abuse in Matabeleland, Zimbabwe. *Soci Sci and Med* 1995;41:1693–1704.
15. Toubia N. Female genital mutilation: A call for global action. New York : Women Ink 1993.
16. Koso-Thomas O. The circumcision of women: A strategy for eradication. London: Zed Books Ltd., 1992, page 17.
17. El Dareer A. A study of the prevalence of epidemiology of female circumcision in Sudan. In: Baasher T. et al, eds. Traditional practices affecting the health of women and children, Background papers to the WHO Seminar. WHO EMRO Technical Publications 1982;2(2): 312–334.