

Couples' Perspectives on Gender and Intimate Partner Violence: Insights from the RESPECT Study, Tanzania

Background and Theoretical Focus

Intimate partner violence (IPV), defined as actual or threats of physical, sexual or psychological abuse directed toward a spouse or partner, is a grave public health issue globally. A large body of evidence has documented the association between IPV and an array of adverse health outcomes, including HIV and other sexually transmitted infections, unintended pregnancy, pregnancy loss, and infant and maternal mortality. Although research suggests that societies with greater gender inequities have a higher prevalence of IPV,¹ few studies have empirically examined the association between gender inequitable norms and IPV. Even fewer studies have explored couples' perspectives on gender roles within intimate relationships, and the association between gender roles and IPV. Our research has addressed these gaps. Guided by a conceptual framework that links sexual/reproductive health outcomes and the underlying risk environment, including structural factors such as gender inequities and poverty,² we examined the relationship between perceptions of gender norms and IPV among young married couples participating in a randomized controlled trial of an intervention to prevent sexually transmitted infections in rural Tanzania.

Methods

Study Design and Participants

This analysis uses data from the RESPECT (“Rewarding STI Prevention and Control in Tanzania”) study (2009-2010) in rural south-west Tanzania. RESPECT, a randomized controlled trial, evaluated the impact of a conditional cash transfer on risky sexual behavior and selected curable sexually transmitted infections (STIs) among young men and women in Kilombero/Ulanga district. Using the Demographic Surveillance System, 2399 young men and women were randomly selected and recruited to the study. Participants were randomized to a control arm or one of two intervention arms (low or high value cash reward), and followed for 12 months. Every four months, they completed a questionnaire, underwent STI screening, and were offered free STI treatment and counseling. While all participants received a small “inconvenience fee” to minimize attrition from the study, intervention arm participants received a cash reward (either a \$10 or \$20 equivalent) for negative STI tests at each round. Study protocols were approved and monitored by institutional review boards in Tanzania and the United States. For this analysis, we have drawn upon all four rounds of interview data from the subset of married couples enrolled in RESPECT.

Measures

The data collection instruments were developed based on our theoretical framework and the literature. The primary outcome of interest for this analysis was women's experience of IPV. Questions on IPV were adapted from the WHO multi-country study questionnaire³. Four questions were used to measure women's experience of IPV: 1) Have you been hit, kicked or beaten by your partner for any reason during the last 4 months? 2) Has your partner done any of the following during the last 4 months: humiliated you in front of others, insulted you, tried to scare you, threatened to hurt you or someone you care about? 3) Have you been physically forced to have sexual intercourse by your partner when you did not want to during the last 4 months? 4) Did you, during the last 4 months, have sexual intercourse when you did not want to because you were afraid of what your partner might do? If a woman indicated yes to any of these items, she was categorized as experiencing IPV. In addition, we assessed men's perpetration of violence against their spouse using a set of three questions – similar to the first three above. If a male respondent indicated yes to any of these items, he was categorized as having perpetrated IPV. Concordance in women's reports of IPV and their husband's reports of perpetrating IPV was also examined.

Four sets of questions measured participants' perspectives on gender norms. The first set asked, “Do you think that if a woman refuses to have sex with her husband when he wants her to, he has the right to 1) get angry and reprimand; 2) refuse to give her money or other means of financial support; 3) use force

and have sex with her even if she does not want to; and 4) go and have sex with another woman.” Participants were asked to respond “yes” or “no” to each situation. Individuals who responded yes to one or more of these items were compared to those who responded in the negative to all items.

Second, we assessed which spousal partner usually has more say about whether they have sex (both equally vs. the respondent or their spouse), and third, we asked participants whether they or their partner has more power in the relationship (both equal vs. the respondent or their spouse). In addition, we examined concordance/discordance of spousal responses to these questions.

Finally, we measured participants’ acceptance of IPV using the following five item question: “Is a husband justified in hitting or beating his wife in the following situations: 1) if she goes out without telling him; 2) if she neglects the children; 3) if she argues with him; 4) if she refuses to have sex with him; 5) if she burns the food? As in the case of the first set of questions, individuals who responded yes to one or more of these items were compared to those who responded in the negative to all items. We also examined the role of intervention/control arm assignment, and considered the following covariables: household socioeconomic status, women’s education, and concordance/discordance in spousal reports of marital status.

Data Analysis

Only the subset of couples who were both enrolled in the study was included in this analysis. We first examined the cross-sectional relationships between independent variables and ever having experienced IPV at enrolment using contingency tables, chi-square analyses, and Student’s t-tests. We then looked at changes in women’s reports of IPV over time, including tests for trend to determine whether changes were statistically significant, and whether they were associated with demographic variables or intervention/control assignment. We also examined spousal concordance regarding IPV. Next, we examined the relationship between women’s reports of IPV and spousal perspectives on gender norms using random effects multivariable logistic regression adjusting for household socioeconomic status, education, and agreement on marital status.

Results

A total of 567 couples enrolled in RESPECT. While there was some attrition at each round, participation in interviews remained quite high and was not significantly different between intervention and control arms (see Table 1). Of note is the fact that 28% of couples in our study did not agree on their marital status (Table 1). This is consistent with other studies that have found the concept of marriage to be quite fluid in parts of sub-Saharan Africa, an issue which can have a significant impact on a woman’s level of power and control within a relationship⁴. It is necessary to take this information into account as further analyses are performed and interpreted.

Cross-sectional analyses of IPV reports at baseline revealed that these did not differ by education, socioeconomic status, agreement on marital status, or enrollment in intervention or control arms of the study (results not shown). Notably, we found that women’s reports of IPV decreased steadily over time (Table 2). This decrease was not associated with demographic characteristics or study arm (results not shown). We found that there was significant disagreement within couples regarding whether violence had occurred in the last 4 months. However, concordance seemed to improve with time (Table 3).

Table 4 summarizes the results of the multivariable logistic regression. Women who believed that violence is ever justified if a woman refuses sex were more likely to report of IPV as were women whose husband believed that such violence was justified. The same was true for participants who believed that a husband is ever justified in beating his wife. Participants who shared more equitable attitudes with their partner were the least likely to be in a violent relationship, while those who agreed upon inequitable attitudes were significantly more likely to be in a violent relationship.

Couples who reported equality in power and sexual decision-making were less likely to experience violence than those who reported an imbalance. Women who reported that they had more power or decision-making ability were significantly more likely to experience IPV. Similar results were found

among men who reported that their wives had great power or decision-making ability, though these findings were not statistically significant.

The declining trend in women's reports of IPV suggests that participation in the trial, including exposure to repeated counseling and questions regarding gender norms, may have had a protective effect. The results highlight the need for violence and HIV prevention programs to address men's and women's perceptions of gender and roles within relationships.

Table 1: Baseline demographic characteristics of the study population

Variable	Control	"High Value" Treatment	"Low Value" Treatment	Total
N (baseline)	520 (45.86%)	299 (26.37%)	315 (27.78%)	1,134
N (round 2)	460 (45.45%)	283 (27.96%)	269 (26.58%)	1,012
N (round 3)	471 (46.04%)	277 (27.08%)	275 (26.88%)	1,023
N (round 4)	498 (45.98%)	287 (26.50%)	298 (27.52%)	1,083
Mean age (st. dev)	29.42 (5.98)	30.18 (5.67)	29.85 (6.14)	
Education				
None	59 (11.35%)	26 (8.70%)	40 (12.70%)	125
Some primary school	104 (20.00%)	68 (22.74%)	57 (18.10%)	229
Primary school completed	328 (63.08%)	186 (62.21%)	194 (61.59%)	708
Some secondary school	15 (2.88%)	10 (3.34%)	9 (2.86%)	34
Secondary school completed	9 (1.73%)	6 (2.01%)	9 (2.86%)	24
Completed university	0 (0%)	0 (0%)	1 (0.32%)	1
Missing	5 (0.96%)	3 (1.00%)	5 (1.59%)	13
Total	520	299	315	
Marital status				
Single	6 (1.15%)	2 (0.67%)	11 (3.49%)	19
Married	420 (80.77%)	253 (84.62%)	261 (82.86%)	934
Living in union as if married	89 (17.12%)	41 (13.71%)	37 (11.75%)	167
Divorced	0 (0%)	0 (0%)	1 (0.32%)	1
Missing	5 (0.96%)	3 (1.00%)	5 (1.59%)	13
Total	520	299	315	
Agreement on marital status	360 (69.50%)	226 (76.35%)	216 (70.59%)	802 (71.61%)
Low SES	271 (52.12%)	154 (51.51%)	167 (53.02%)	592 (52.20%)

Table 2: Women's self-reports of IPV over time:

Round	Women reporting any IPV
1	115/558 (20.62%)
2	78/400 (19.50%)
3	69/474 (14.56%)
4	64/542 (11.81%)

Non-parametric test for trend: $z = -3.90, p < .005$

Table 3: Couples' agreement on whether IPV occurred in the last 4 months:

Round	Agree, no violence	Disagree	Agree, violence	Total
1	820 (73.67%)	273 (24.53%)	20 (1.80%)	1,133
2	625 (77.45%)	164 (20.32%)	18 (2.23%)	807
3	783 (82.77%)	145 (15.33%)	18 (1.90%)	946
4	924 (85.95%)	147 (13.67%)	4 (0.37%)	1075

Non-parametric test for trend: $z = -10.87, p < .005$

Table 4: Men’s and women’s attitudes as predictors of women’s experience of violence (odds ratios) xtlogit analysis over all rounds[#]

Question	Men’s response as predictor of women’s experience of violence	Women’s response as predictor of their experience of violence	Couples’ concordance as predictor of women’s experience of violence
Is any kind of violence justified if a woman refuses sex?	1.1598 (0.8435, 1.5948)	2.4533 [†] (1.7824, 3.3767)	2** : 2.6369 [†] (1.6968, 4.0979)
			3** : 2.6826 [†] (1.8122, 3.9710)
			4** : 1.2889 (0.7687, 2.1612)
Is a husband ever justified in beating his wife?	1.5343 [†] (1.1056, 2.1294)	1.4955 [†] (1.0722, 2.0859)	2** : 2.1046 [†] (1.3328, 3.3233)
			3* : 1.4742 (0.8486, 2.5609)
			4* : 1.4952 (0.9915, 2.2547)
Who has more say about having sex?	Self* : 1.1719 (0.8448, 1.6256)	Self* : 2.0029 [†] (1.0504, 3.8189)	N/A
	Wife* : 1.6824 (0.8931, 3.1693)	Husband* : 1.5565 [†] (1.1213, 2.1606)	
Who has more power in the relationship?	Self* : 0.7274 (0.4644, 1.1395)	Self* : 2.3920 (0.6369, 8.9829)	N/A
	Wife* : 1.3998 (0.6944, 2.8218)	Husband* : 2.2656 [†] (1.1211, 4.5785)	

[#]Covariables included in the models: education, SES, agreement on marital status

[†] Statistically significant

* Reference category: both equally

**Reference category: Concordance, violence/beating never justified

2 = concordance, violence/beating ever justified

3 = discordance, husband says violence/beating justified

4 = discordance, wife says violence/beating justified

¹ Levinson D. Family Violence in Cross-cultural Perspective. Newbury Park, CA: Sage Publications; 1989. Jewkes R. Intimate partner violence: causes and prevention. Lancet. 2002 Apr 20;359(9315):1423-9. WHO. World Report on Violence and Health. Geneva: World Health Organization; 2002.

² Rhodes,T., M. Singer, et al. (2005). “The social structural production of HIV risk among injecting drug users.” Soc Sci Med 61(5): 1026-44. Boerma, J.T. and S.S.Weir. (2005). Integrating demographic and epidemiological approaches to research on HIV/AIDS: the proximate determinants framework.” J Infect Dis 191 Suppl 1: S61-7.

³ Garcia-Moreno C, Jansen HAFM, Ellsberg M, Heise L, Watts C. WHO Multi-country Study on Women’s Health and Domestic Violence against Women. Initial results on prevalence, health outcomes and women’s responses. Geneva: WHO; 2005.

⁴ McCloskey, L.A., Williams, C. & Larsen, U. (2005). Gender inequality and intimate partner violence among women in Moshi, Tanzania. International Family Planning Perspectives, 31 (3), 124-30.