

# LOCKDOWN RESTRICTION AND INTIMATE PARTNER VIOLENCE IN THE ERA OF COVID-19 IN KARU METROPOLIS OF NASARAWA STATE, NIGERIA

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## ABSTRACT

*Intimate partner violence has always raised concern but it was compounded by the COVID-19 pandemic. This study explored the COVID-19 lockdown restriction and intimate partner violence in Karu Local Government Area of Nasarawa State, Nigeria. The predictor variables were stay at home, frustration, and increased demand for household goods and attention. A total of 397 respondents were selected from intimate partners in Karu via the fish bowl and purposive sampling methods. Data was collected by means of a well-structured questionnaire and in-depth interviews. Quantitative data was analysed using the Statistical Package for Social Science, where frequencies and percentage were employed. The chi-square and ordinal logistic were employed to test the hypotheses. Findings revealed that significant interaction exists between lockdown restriction and physical, economic, psychological and sexual violence among intimate partners in the study location. It was recommended that partners should be tolerant of each other during crises and that partners who always violate the rights of others should desist.*

**Key words:** Lockdown restriction, Intimate partner violence, COVID-19 era, Karu metropolis

**JEL classification:** Y800

## **1. Introduction**

The phenomenon of intimate partner violence is a human right and public health issue of global concern, with serious socio-economic consequences for the victims and the larger society. Intimate partner violence connotes behaviours that are capable of causing psychological, economic, physical and sexual pain to those who are involved in intimate relationships (Smith, 2014; Krug et al., 2002). It entails violent behaviours orchestrated by partners aimed at harming self-esteem. For couples, intimate partner violence comprises behaviours usually expressed physically, psychologically, socially, and economically against a partner, with the aim of humiliating and damaging their self-esteem (Bhona et al., 2019). The violence is carried out by and against individuals in close affinity. Observations suggest that the violence could involve married couples and individuals intending to marry (Martins, 2014; Smith, 2014; Okoye, 2018).

Different measures have been taken in the form of conventions, acts or declarations highlighting the imperative for human rights protection and demonstrating that all humans have the right to be protected against various forms of violence (Centre for Disease Control and Prevention, 2019). For instance, the Convention on the Elimination of Violence Against Women (CEDAW), the United Nations Declaration on the Elimination of Violence against Women (UNDEV), Violence Against Persons Prohibition Act (VAPP) (2015) among others, were designed at global, continental and national levels to prevent and respond to violence against people (Udojen et al., 2017). It is however worrisome that nations that hitherto accepted to ensure adequate legislation and provide protection for all humans by agreeing to institute legal action and other measures against violence have done so with little sincerity of purpose (Udojen et al., 2017; Onyekwena & Ekeruche, 2020).

Intimate partner violence (IPV) is not a new social construct. It has always existed across societies, but the COVID-19 pandemic, with the introduction of various preventive measures, escalated the problem. The end of 2019 ushered in the dreaded coronavirus (COVID-19) pandemic that had a

serious impact on the health and socio-economic development of the world (Michael & Ishor, 2022). The entire world was alarmed by the extent of the devastation arising from the pandemic. By 2020, the statistics on infection, death and other complications from COVID-19 were alarming. The COVID-19 pandemic was described as the worst global public health challenge in the 21<sup>st</sup> century, with detrimental consequences on mortality rates and the global economy (Ishor & Ioramme, 2020; World Health Organization, 2020a). Commenting on the extent of devastation, the European Centre for Disease Prevention and Control (ECDC, 2020) pointed out that as at 9<sup>th</sup> June 2020, 7,201,136 cases of COVID-19 were confirmed, with 408,782 mortalities and 3,538,086 recoveries. The statistics continued to increase with more devastation. Statistically, developed countries such as the United States of America, Brazil, Russia, Spain, United Kingdom, India, Italy, Peru, Germany, Iran, Turkey, France, Chile, Mexico, Pakistan, and Saudi Arabia had over 100,000 confirmed cases of COVID-19 (ECDC, 2020; Ishor & Ioramme, 2020).

In the resource-limited countries of Africa, the zeal to contend with the dreaded COVID-19 was constrained by limited numbers of health practitioners and health facilities, and corruption at all levels of national institutions (Agwu et al., 2023). In Nigeria, the lack of preparedness allowed COVID-19 to ravage the country. As at 27<sup>th</sup> February 2020, Nigeria had 12,801 confirmed cases of COVID-19 and 4,040 recoveries. By 13<sup>th</sup> June 2021, the number of confirmed cases had increased to 33,156, out of which 13,671 were discharged from isolation centres and 744 deaths were recorded (Jacobs & Okeke, 2022). Irrespective of the clime where COVID-19 raged, the consequences on health and the economy were severe.

Due to the pandemic nature and the havoc done by COVID-19, the World Health Organization (WHO) came up with measures to curb the spread of the coronavirus. Beyond the use of face masks and regular hand washing, restraining movement and compulsory stay at home were some of the measures adopted to stem the tide of the virus (WHO, 2020b). In Nigeria, the

lockdown restriction or compulsory stay at home was one of the measures adopted by various levels of government. Shodunke (2022) pointed out that the lockdown mandated many to stay at home. As a way of demonstrating the government's seriousness, certain categories of employees were to stay home, while others were to work from their homes. The situation also resulted in the outright termination of the employment of some workers pending the reduction in the virulence of the pandemic.

The COVID-19 lockdown and compulsory stay at home created an opportunity for couples who may have been apart due to socio-economic engagements to stay together. During this period, couples had longer and intimate interaction. Smith (2020) opined that the lockdown innately mandated couples (mainly those dating) to spend some time and interact in an intimate manner. The intimacy arising from the interaction was beneficial as sexual pleasure, more pregnancies, socialization, and behaviour modification were witnessed. Couples had a better understanding of their partners and shared memorable moments. Conversely, the intimacy and interaction during this period also uncovered some unpleasant behaviour among couples (Michael & Ishor, 2020) that had serious effects on their relationships.

Considerable studies (Bhona et al., 2019; Masood, 2022) have been conducted on intimate partner violence. Bhoma et al. (2019) focused on the socio-economic factors promoting intimate partner violence; interrogating level of education, income, and occupation as they affect physical, psychological and sexual violence. Ahmed (2021) conducted a study among the Eggon people of Nasarawa State. The study examined socio-cultural factors and violence against women. The author found that education and male child preference have strong correlation with violence against women. Olimba and Adeyinka (2017) sought to uncover the variables promoting violence against women in Ihiala, Anambra State. The study pointed out that the socio-economic and socio-cultural variables inherent in the study location were key in determining the varieties of violence orchestrated by men against women. In gauging the association between socio-economic variables and violence, Akoji (2018) cautioned that it appears to be a complex interaction,

but socio-economic variables like age, income, and education correlate with intimate partner violence. These studies gave maximum attention to socio-economic and socio-cultural variables and intimate partner violence. The present study is a deviation from the above studies as the aim is to interrogate the nexus between the COVID-19 lockdown and intimate partner violence in Karu Local Government Area in Nasarawa State.

## **2. Literature Review**

The COVID-19 pandemic brought unique challenges worldwide, particularly regarding intimate partner violence (IPV). As governments enforced lockdowns to curb the spread of the virus, unintended consequences emerged for vulnerable individuals, especially those trapped in abusive relationships. Mobility restrictions left IPV victims confined in close quarters with their abusers, intensifying the frequency and severity of violence due to sustained proximity and heightened emotional stress. Furthermore, traditional support systems, such as shelters, counselling centres, and family networks, were suddenly harder to access, leaving many victims without the resources they would typically rely on (Peterman et al., 2020). The unprecedented situation left IPV victims more isolated, compounding their inability to escape abuse.

Peterman et al. (2020) stress how the pandemic aggravated existing gender inequalities, a known risk factor for IPV. During the lockdown, responsibilities like child-rearing and household tasks disproportionately fell on women, adding to their stress and reducing their autonomy. Economic pressures further intensified the strain on households. With many losing jobs or working fewer hours, financial instability became a significant source of tension and conflict within homes. For example, van Gelder et al. (2020) noted that financial strain and continuous exposure to one's partner during lockdowns could lead to frustration, potentially escalating into physical or emotional abuse.

Another consequence was the overwhelming demand placed on IPV support services, as reflected in the surge of calls to IPV hotlines. This

increase indicated a critical need for external intervention, with many seeking support remotely since in-person help was not readily available. Regions worldwide reported these spikes, underscoring the global scale of IPV amid the pandemic (Evans et al., 2020).

Health repercussions for IPV victims were also stark. The limited availability of healthcare services during the pandemic meant that victims' injuries were often left untreated, and many were unable to seek mental health support. Mittal and Singh (2020) observed that women in abusive relationships were more susceptible to severe physical and psychological consequences during the lockdown, as they could not access adequate healthcare or leave abusive settings. Isolation, economic hardship, and substance abuse — a well-documented catalyst for domestic violence — further worsened conditions for IPV victims. Piquero et al. (2021) confirmed that such factors, combined with reduced support access, heightened the incidence and severity of IPV, resulting in long-term health impacts.

In Nigeria, the COVID-19 lockdowns intensified already concerning levels of intimate partner violence (IPV), as restrictions led to both immediate and structural challenges that compounded the risks for IPV victims. Before the pandemic, IPV rates in Nigeria were notably high, but lockdown measures brought new complexities, trapping victims with abusers in confined spaces with limited recourse for help. According to Nwosu and Akintola (2021), the lockdowns disrupted access to critical support services, including shelters, legal assistance, and mental health resources. The closure of these essential services made it increasingly difficult for survivors to report abuse or access assistance, leaving them with fewer options to escape dangerous environments.

A significant cultural factor also contributed to the rise in IPV cases during the pandemic. In many Nigerian communities, IPV is regarded as a private family matter rather than a criminal issue, and there exists a social reluctance to seek external intervention. Nwosu and Akintola (2021) explain that this cultural barrier discourages many victims from seeking support, as they fear social stigma, familial repercussions, or blame from their

community. Consequently, when the lockdown restricted movement and social interaction, IPV incidents could occur without external oversight or intervention, creating an environment where violence was more likely to go unchecked and unaddressed.

The economic downturn brought on by the pandemic further aggravated this situation. Oladeji and Osasona (2022) discuss how the pandemic-induced economic strain disproportionately impacted low-income households in Nigeria, increasing job losses and reducing household incomes. Economic pressures and food insecurity heightened frustrations among household members, leading to increased tension and conflict. For many individuals in these socio-economically vulnerable groups, feelings of powerlessness and stress over financial difficulties were vented in violent ways within the home. As financial insecurity rose, so did the incidence of IPV, with perpetrators venting their frustration on their partners.

The social stigma around IPV also contributes to underreporting of cases. Many victims refrain from reporting incidents due to limited legal recourse, as well as concerns about judgment or lack of empathy from their communities. Alo et al. (2021) emphasize that victims in Nigeria often face barriers, such as inadequate law enforcement response, limited faith in the judicial system, and societal pressure to “keep the family intact,” which discourage them from seeking help. As a result, IPV incidents during the pandemic frequently went unreported or were only addressed within private, family-centred resolutions that lacked protective measures for victims.

Meanwhile, in several Nigerian states, there were significant surges in demand for IPV support services, despite the constraints brought on by movement restrictions and resource limitations. Gondwe and Tawiah (2022) explain that, although the need for intervention was critical, many support organizations and shelters were unable to function at full capacity due to the pandemic, leaving IPV victims with few viable options for escape or support. Some support hotlines were overwhelmed with calls, and shelter capacities

were reduced due to health protocols, which meant that even when victims sought help, services were not always available to accommodate them.

In essence, both structural factors (such as restricted access to services and economic hardship) and social factors (including cultural norms and stigma) contributed to a concerning rise in IPV in Nigeria during the pandemic. This increase underscores the need for policy reforms that provide more robust support systems for IPV victims and address societal norms around IPV.

## **2.1 Theoretical adequacy: The frustration-aggression theory**

The frustration aggression theory was propounded by Dollard and his associates, Doob, Miller, Mowerer, and Sears in 1939, and it has been expanded and modified by scholars such as Yates (1960) and Berkwonitz (1962) respectively. The frustration aggression theory is based on the premise that frustration causes aggression. The theory suggests that frustration creates a readiness and an urge to aggress and it implies that the act of aggression is always preceded by frustration. Following a frustrating situation, individuals will respond with aggressive behaviour as a form of retaliation against the circumstance that warranted the frustrating reaction (Dollard et al., 1939).

Intimate partner violence has been suggested as one of such aggressive reactions. For instance, in a situation where a partner attempts to achieve certain goals but for one reason or the other fails or is obstructed, frustration may set in. Such a condition can lead to aggression within the relationship and be transferred by the frustrated partner to an innocent one. Dollard and his associates (Dollard et al., 1939) argue that an individual tends to become frustrated and aggressive when he or she fails to achieve desired goals. The desired goals may be food, shelter, education, resources, good health, among others. However, issues such as poverty, unemployment, income, level of education, single parenting, and divorce are strong reasons for frustration and could give rise to violence. For example, where a partner becomes so frustrated that he or she could not get the needed income to cater for basic needs, they may retaliate against the source of frustration and also direct their

aggression at the innocent partner. By implication, being exposed to violence at home and in the community is strongly correlated to aggressive behaviour.

According to Van-Hasselt and Hersen (2000), aggression satisfies an innate desire to harm others when one feels bad or frustrated. People prefer to attribute the basis of their misfortune to someone else by engaging in aggressive and violent behaviour to reduce their anxiety and depression. Kasapçopur (2023) noted that disadvantaged situations, such as poverty, unemployment, disability, and family structure, may lead to discrimination, stigma and injustice. These lead to violence among parents which can also extend to the children. An individual's socio-economic condition, such as level of education, occupation, economic status, marital status, drug addiction, alcohol use, among others, influences their state of mind, which could give rise to aggressive behaviour.

The conditions faced by low-income earners and unemployed partners may produce sadness, depression, anxiety, withdrawal, hostility, anger, or generate negative or unfriendly thoughts and verbal aggression. Therefore, in the present study, the framework of the frustration-aggression theory is utilized as a lens through which the socio-economic conditions influencing intimate partner violence in the era of the COVID-19 pandemic in Karu Local Government Area of Nasarawa State are examined.

### **3. Methodology**

The study was conducted in Karu Local Government Area of Nasarawa State, Nigeria. The survey research design was employed with a major focus on the quantitative component. Surveys afforded the researchers the opportunity to select a reasonable sample from the population for study with the aim of generalizing the findings. Participants for the study were couples (married or dating) who were living together in Karu Local Government Area. The sample size was determined using the Goddon Bill statistical method for infinite population (Goddon, 2004). Overall, 397 respondents were selected via a combination of the fish bowl and purposive sampling methods. Data

collection was done using the questionnaire instrument after which pre-coded questionnaires were properly arranged and fed into the Statistical Package for Social Sciences (SPSS). Analysis was done using frequencies, percentages and a run of ordinal logistic regression.

#### 4. Results

The socio-demographic characteristics of the respondents are presented in Table 1. The results show that more females (56.9%) participated in the study than males (43.1%). This is obviously a reflection of the increasing victimization of females through various forms of violence perpetrated by males. However, this does not negate the fact that males have also been victims of violence by females. The age of the respondents reveals that almost 60% of the participants in the study were still within the youthful age bracket of 18-37 years; only a negligible 2.8% were above 57 years. On the marital status of the respondents, most were married (60.7%); those who were dating constituted 39.3%. As for education, only 3.0% of the respondents had no formal education; the rest had various levels of education. Most of the respondents completed either tertiary (44.3%), or secondary education (37.3%). The implication of this to the study is that the participants are well-informed to understand violence and its contributory factors.

**Table 1:** Distribution of Respondents by Socio-demographic Characteristics

| Characteristic | N=397 | % = 100 |
|----------------|-------|---------|
| <b>Sex</b>     |       |         |
| Male           | 171   | 43.1    |
| Female         | 226   | 56.9    |
| <b>Age</b>     |       |         |
| 18-27          | 68    | 17.1    |
| 28-37          | 168   | 42.3    |
| 38-47          | 109   | 27.5    |
| 48-57          | 41    | 10.3    |
| <b>&gt;57</b>  | 11    | 2.8     |

| Characteristic                                    | N=397 | %=100 |
|---|-------|-------|
| <b>Marital Status</b>                             |       |       |
| Married   | 241   | 60.7  |
| Dating  | 156   | 39.3  |
| <b>Education</b>                                  |       |       |
| Complete Primary School                           | 61    | 15.4  |
| Complete Secondary School                         | 148   | 37.3  |
| Complete Tertiary School                          | 176   | 44.3  |
| No Formal Education                               | 12    | 3.0   |
| <b>Occupation</b>                                 |       |       |
| Farmer  | 31    | 7.8   |
| Trader  | 118   | 29.7  |
| Civil Servant                                     | 101   | 25.4  |
| Artisan   | 40    | 10.1  |
| Student   | 39    | 9.8   |
| Unemployed  | 51    | 12.8  |
| Others  | 17    | 4.3   |
| <b>Monthly Income</b>                             |       |       |
| ₦ 10,000  | 37    | 9.3   |
| ₦11,000-₦30,000                                   | 96    | 24.2  |
| ₦31,000-₦40,000                                   | 60    | 15.1  |
| ₦41,000-₦50,000                                   | 89    | 22.4  |
| ₦51,000-₦60,000                                   | 77    | 19.4  |
| ≥₦60,000  | 38    | 9.6   |
| <b>Religion</b>                                   |       |       |
| Christianity                                      | 263   | 66.2  |
| Islam   | 116   | 29.2  |
| African Traditional Religion                      | 11    | 2.8   |
| Others  | 07    | 1.8   |
| <b>Couples Residence during COVID-19 Lockdown</b> |       |       |
| Same Compound                                     | 61    | 15.4  |
| Same Apartment                                    | 286   | 71.5  |
| Same Neighbourhood                                | 52    | 13.1  |

*Source:* Field survey, 2024.

The results on the occupational background of respondents reveal that the majority were traders (29.7%) and civil servants (25.4%). Other respondents were farmers, artisans, or students. The data suggest that the majority of the respondents had a source of livelihood as they were engaged in diverse socio-economic activities. Nevertheless, their income levels differed. Less than 81.1% of the respondents earned monthly incomes between ₦10,000 and ₦60,000. The implication of this is that with the economic crisis, this monthly income is low and shortage of resources is capable of provoking violence among intimate partners. Also, the results indicate that the majority (66.2%) of the participants were Christians while Muslims accounted for 29.2% of respondents who participated in the study. Finally, on where the couples stayed during the COVID-19 lockdown, the majority (71.5%) stayed in the same apartment, 15.4% stayed in the same compound and 13.1% stayed in the same neighbourhood. Living in the same apartment with an intimate partner could increase the likelihood of violence of diverse forms.

**HO<sub>1</sub>:** Lockdown restriction is not significantly related to physical violence among intimate partners in the era of COVID-19.

The hypothesis seeks to ascertain the relationship between lockdown and physical violence among intimate partners during the COVID-19 era. The results in table 2 show that all the predictor variables are seen to statistically exert impact on physical violence among intimate partners in Karu Local Government Area. The estimates with positive coefficients indicate variables that contribute positively to physical violence statistically. The odds of becoming victims or witnessing physical violence moving from 'Can't say' to 'No' are 4.8 times higher for persons who were constantly at home during the lockdown than for those who did not stay at home during the lockdown period, when all other variables are held constant. For a unit increase in staying at home, we expect a 5.631 increase in the log odds for witnessing physical violence, given that all of the variables in the model are held constant.

**Table 2:** Parameter Estimates of Ordinal Logic Regression of Effect of Selected Variables on Physical Violence in Karu Local Government Area, Nasarawa State, Nigeria

|          |                                   | Parameter Estimates |            |         |    |      |        | 95% Confidence Interval |             |
|----------|-----------------------------------|---------------------|------------|---------|----|------|--------|-------------------------|-------------|
|          |                                   | Estimate            | Std. Error | Wald    | df | Sig. | Expb   | Lower Bound             | Upper Bound |
| Location | Threshold [Physical violence = 1] | 2.638               | .336       | 67.439  | 1  | .000 | 17.25  | 2.168                   | 3.528       |
|          | [Physical violence = 2]           | 4.829               | .342       | 179.171 | 1  | .000 | 375.78 | 5.061                   | 6.797       |
|          | Stay at home                      | 5.631               | .335       | 5.047   | 1  | .000 | 0.48   | 3.368                   | 3.093       |
|          | Unhealthy conversation            | 4.238               | .568       | 40.308  | 1  | .000 | 69.27  | 2.930                   | 5.547       |
|          | Increase in consumption of goods  | 4.891               | .687       | 43.738  | 1  | .000 | 0.02   | 5.045                   | -2.738      |
|          | Frustration                       | 3.048               | .425       | 22.160  | 1  | .000 | 7.76   | 1.196                   | 2.903       |
|          | Increased demands from partner    | 3.225               | .561       | 15.735  | 1  | .000 | 0.11   | 3.322                   | -1.125      |
|          | Unwillingness to support at home  | 2.670               | .426       | 25.768  | 1  | .000 | 14.44  | 1.639                   | 3.700       |

Link function: Logit.

Source: Field survey, 2024.

Intimate partners who engaged in unhealthy conversation were more likely to be victims of physical violence than those who engaged in healthy conversation ( $\exp(4.338) = 64.24$ ). Given the result, the odds of witnessing or becoming victims of physical violence by those who engaged in unhealthy conversation were 64.28 times higher than for those who engaged in healthy conversation, given that all of the other variables are held constant.

Intimate partners whose consumption of goods increased during the lockdown were more prone to physical violence. Indicating that they are  $\exp(4.891) = 0.04$  times more likely to be victims or to witness physical violence than those without increased consumption of household goods. Similarly, the

frustration arising from the COVID lockdown restriction was a significant positive variable that triggered physical violence among intimate partners. The odds of affirmation were  $\exp(3.048) = 7.65$  times greater for those who believed frustration can promote violence than for those who did not believe that increasing demands for non-tangible things was a significant factor that promoted physical violence. A small increase in the demand for intangible things from partners raised the odds of physical violence by 2.1%. The odds ratio for unwillingness to support at home, indicating that when all other variables in the model are constant, the level at which partners will not be willing to help at home is 13.2 times more likely to promote physical violence. A careful perusal of the significant score column, reveals that all the predictor variables were significant. On the basis of this, the null hypothesis is rejected and we then conclude that lockdown restriction is significantly related to physical violence among intimate partners.

**HO<sub>2</sub>:** Lockdown restriction is not significantly related to psychological violence among intimate partners.

The hypothesis seeks to ascertain the relationship between lockdown and psychological violence during the COVID-19 era. The result in Table 3 reveals that almost all the predictor variables seem to have a significant effect on psychological violence among intimate partners in the study location. Although estimates may contribute positively or negatively, the table shows that all the estimates contributed positively to psychological violence. Evidently, the odds of becoming a victim of psychological violence during the COVID-19 era were 5.48 times higher for partners when physically present than when not, when all other variables are held constant. A significant increase in physical presence has a slight increase of 6.432 in psychological violence, provided all other variables are held constant in the model. Intimate partner violence could also be triggered by unhealthy conversation during the COVID-19 lockdown period. Partners who engaged in unhealthy conversation were 59.27 times more likely to witness psychological violence than those who did not, provided all variables are held

constant. Increasing demand for household goods could contribute positively to psychological violence among intimate partners. Statistically, partners with increasing demand for household goods were  $\exp(3.291) = 33.02$  times more likely to witness psychological violence than those without increasing demand for household goods. Moreover, the odds of becoming victims of psychological violence were  $\exp(2.042) = 7.74$  higher for those who considered frustration as the bedrock of psychological violence than for those who were against the view, given that all other variables are held constant.

**Table 3:** Parameter Estimates of Ordinal Logic Regression of Effect of Selected Variables on Psychological Violence in Karu Local Government Area, Nasarawa State, Nigeria

| Parameter Estimates |                                  |          |            |         |    |      |        |                         |             |
|---------------------|----------------------------------|----------|------------|---------|----|------|--------|-------------------------|-------------|
|                     |                                  | Estimate | Std. Error | Wald    | df | Sig. | Expb   | 95% Confidence Interval |             |
|                     |                                  |          |            |         |    |      |        | Lower Bound             | Upper Bound |
| Threshold           | [Psychological violence = 1]     | 3.439    | .436       | 57.438  | 1  | .000 | 18.24  | 3.168                   | 4.527       |
|                     | [Psychological violence = 2]     | 4.729    | .352       | 169.171 | 1  | .000 | 365.78 | 6.061                   | 7.797       |
| Location            | Stay at home                     | 6.432    | .435       | 6.047   | 1  | .000 | 5.48   | 3.367                   | 4.093       |
|                     | Unhealthy conversation           | 5.328    | .578       | 44.308  | 1  | .000 | 59.27  | 2.831                   | 5.343       |
|                     | Increase in consumption of goods | 3.291    | .487       | 53.738  | 1  | .000 | 33.02  | 5.045                   | 3.738       |
|                     | Frustration                      | 2.042    | .325       | 32.160  | 1  | .000 | 7.76   | 1.196                   | 2.703       |
|                     | Increased demands from partner   | 2.324    | .461       | 17.734  | 1  | .000 | 0.11   | 4.324                   | 4.125       |
|                     | Unwillingness to support at home | 2.150    | .526       | 35.762  | 1  | .000 | 16.43  | 1.639                   | 4.600       |
|                     | Link function: Logit.            |          |            |         |    |      |        |                         |             |

Source: Field survey, 2024.

All categories of partners need attention. Thus, intimate partners with increasing demand for attention during the lockdown were prone to psychological violence. This indicates that they were  $\exp(2.150) = 16.43$  times more likely to be victims of violence than those partners who did not demand attention from their partners. The significant score column has demonstrated that all the predictor variables were significant ( $p < 0.05$ ). On this basis, the null hypothesis is rejected and we conclude that lockdown restriction in the era of COVID-19 is significantly related to psychological violence among intimate partners.

**HO<sub>3</sub>:** Lockdown restriction in the COVID-19 era is not significantly related to economic violence among intimate partners.

The prevalence of intimate partner violence, especially economic violence is not unconnected with the lockdown restriction during the COVID-19 era. Respondents who were victims or who witnessed violence expressed different views. It was established that staying at home for several hours and days was a variable factor that promoted economic violence among intimate partners ( $P < 0.05$ ). Similarly, the persistent increase in consumption of household goods was considered an important factor that promoted economic violence among partners, orchestrated by either of the partners  $F < 0.05$ . The COVID-19 era with all its restrictions on movement engendered much frustration between intimate partners. The frustration triggered economic violence among partners; the result was statistically significant. Unhealthy conversations were also a factor that triggered economic violence among intimate partners at  $P < 0.05$ . The score column reveals that all the variables were significant, that is, the independent variables were related to the dependent variables. On the basis of this, the null hypothesis is rejected. Thus, it is concluded that COVID-19 lockdown is related to economic violence in the study location.

**Table 4:**  $\chi^2$  Test of the Relationship between COVID-19 lockdown and Economic Violence among Intimate Partners

| Lockdown in COVID-19 era   | Economic violence |                  | Total            | $\chi^2$ | df | P-value |
|----------------------------|-------------------|------------------|------------------|----------|----|---------|
|                            | Common            | Not common       |                  |          |    |         |
| 1. Stay at home            |                   |                  |                  |          |    |         |
| No                         | 30(68.2%)         | 14(31.8%)        | 44(100%)         | 27.45    | 2  | 0.000   |
| Don't know                 | 57(74.0%)         | 20(25.9%)        | 77(100%)         |          |    |         |
| Yes                        | 217(78.9%)        | 58(21.1%)        | 275(100%)        |          |    |         |
| 2. Increase in consumption |                   |                  |                  |          |    |         |
| No                         | 40(67.8%)         | 19(32.2%)        | 59(100%)         | 28.34    | 2  | 0.002   |
| Don't know                 | 67(73.6%)         | 24(26.4%)        | 91(100%)         |          |    |         |
| Yes                        | 19(80.1%)         | 49(19.9%)        | 246(100%)        |          |    |         |
| 3. Frustration at home     |                   |                  |                  |          |    |         |
| No                         | 43(72.9%)         | 16(27.1%)        | 59(100%)         | 21.12    | 2  | 0.000   |
| Don't know                 | 42(75.0%)         | 14(25.0%)        | 56(100%)         |          |    |         |
| Yes                        | 219(77.9%)        | 62(22.1%)        | 281(100%)        |          |    |         |
| 4. Increasing demands      |                   |                  |                  |          |    |         |
| No                         | 42(67.8%)         | 20(32.3%)        | 62(100%)         | 19.21    | 2  | 0.002   |
| Don't know                 | 21(44.7%)         | 26(55.3%)        | 47(100%)         |          |    |         |
| Yes                        | 24(84.0%)         | 46(16.0%)        | 287(100%)        |          |    |         |
| 5. Negative conversation   |                   |                  |                  |          |    |         |
| No                         | 43(78.2%)         | 12(21.8%)        | 55(100%)         | 17.15    | 2  | 0.000   |
| Don't know                 | 72(63.2%)         | 42(36.8%)        | 114(100%)        |          |    |         |
| Yes                        | 189(83.3%)        | 38(16.7%)        | 227(100%)        |          |    |         |
| <b>Total</b>               | <b>304(76.8%)</b> | <b>92(23.0%)</b> | <b>396(100%)</b> |          |    |         |

Source: Field survey, 2024.

**HO4:** Lockdown restriction in the COVID-19 era is not significantly related to sexual coercion among intimate partners.

Chi-square was employed to test this hypothesis, and the result as presented in Table 5 indicates that sexual coercion was common among intimate partners during the COVID-19 lockdown. The prolonged stay at home triggered sexual coercion. This is because  $>8\%$  of the respondents believed that the stay at home promoted sexual coercion among intimate partners. The result was significant at  $p<0.05$ . During the lockdown

restriction, there was increased sexual demand from partners. This sexual demand was capable of promoting sexual coercion at  $p < 0.05$ . Moreover, the use of substances and their abuse as reported by the respondents could encourage sexual coercion. Respondents who considered that substances could be abused also believed that substance abuse can lead the partners to sexual coercion. The result is statistically significant as  $p < 0.005$ .

**Table 5:**  $\chi^2$  Test of the Relationship between Lockdown Restriction and Sexual Coercion

| Lockdown                    | Sexual coercion   |                  | Total            | $\chi^2$ | df | P-value |
|-----------------------------|-------------------|------------------|------------------|----------|----|---------|
|                             | Common            | Not common       |                  |          |    |         |
| 1. Stay at home             |                   |                  |                  |          |    |         |
| No                          | 44(62.9%)         | 26(37.1%)        | 70(100%)         | 17.21    | 2  | 0.000   |
| Don't know                  | 64(73.6%)         | 23(26.4%)        | 87(100%)         |          |    |         |
| Yes                         | 196(82.0%)        | 43(18.0%)        | 396(100%)        |          |    |         |
| 2. Increased sexual demands |                   |                  |                  |          |    |         |
| No                          | 64(47.1%)         | 36(52.9%)        | 68(100%)         | 20.43    | 2  | 0.002   |
| Don't know                  | 34(64.2%)         | 19(35.8%)        | 53(100%)         |          |    |         |
| Yes                         | 154(81.9%)        | 34(18.9%)        | 188(100%)        |          |    |         |
| 3. Exposed to sex materials |                   |                  |                  |          |    |         |
| No                          | 21(46.7%)         | 24(53.3%)        | 45(100%)         | 16.87    | 2  | 0.063   |
| Don't know                  | 41(64.1%)         | 22(35.9%)        | 64(100%)         |          |    |         |
| Yes                         | 242(84.3%)        | 45(15.8%)        | 287(100%)        |          |    |         |
| 4. Indecent dressing        |                   |                  |                  |          |    |         |
| No                          | 54(71.1%)         | 22(28.9%)        | 76(100%)         | 16.31    | 2  | 0.306   |
| Don't know                  | 33970.2%)         | 14(29.8%)        | 47(100%)         |          |    |         |
| Yes                         | 217(79.5%)        | 56(20.5%)        | 273(100%)        |          |    |         |
| 5. Substance use            |                   |                  |                  |          |    |         |
| No                          | 45(78.9%)         | 12(21.1%)        | 57(100%)         | 27.41    | 2  | 0.001   |
| Don't know                  | 72(62.1%)         | 44(37.9%)        | 116(100%)        |          |    |         |
| Yes                         | 187(83.9%)        | 3616.1%)         | 223(100%)        |          |    |         |
| <b>Total</b>                | <b>304(76.8%)</b> | <b>92(23.2%)</b> | <b>396(100%)</b> |          |    |         |

Source: Field survey, 2024.

However, exposure to sex materials and indecent dressing by partners during the lockdown were not considered as factors that promote sexual coercion among intimate partners. The result was not significant at  $p < 0.05$ .

Statistically, since the p-value column shows that more of the predictor variables were significant at  $p < 0.05$ , we therefore reject the null hypothesis and conclude that lockdown restriction is significantly related to sexual coercion among intimate partners in the COVID-19 era.

#### **4.2 Discussion**

The lockdown in the era of COVID-19 inevitably promoted violence in different dimensions. The prevalence of violence perpetrated by intimate partners was compounded by the COVID-19 lockdown. This study established that the stay-at-home measure contributed to physical violence among intimate partners. This finding aligns with the observation of United Nations Women (2020) that emerging evidence has revealed that since the outbreak of the COVID-19 pandemic, physical violence against women of diverse races has increased, especially in countries where the stay-at-home measure was put in place to curb the spread of the disease. During this era, confined living conditions bred frustration which inevitably promotes physical violence. The finding further underscores the revelation by Leslie and Wilson (2020) that during COVID-19, there was increased physical violence as exemplified by a sharp increase in domestic violence calls by homes that previously had no history of physical violence. This finding does not in any way negate the previous revelation of the Center for Global Development (2020) that battering, hurting and other physical violence among partners was witnessed more during the lockdown. Fraser (2020) maintained that intimate partner violence increased during crises such as COVID-19, which promoted mobility restrictions as victims were confined at home with perpetrators of violence.

The prolonged stay at home has a way of hiking the demand for consumption of tangible and intangible materials even in the midst of diminished access to services, insufficient income, and financial losses. The frustration arising from the above has the capability of promoting violence among intimate partners (Shariffi et al., 2020). This was further buttressed by

the revelation from Campbell (2020) that physical violence increased during the lockdown, even when some of the cases of physical violence among intimate partners were hidden due to fear of disclosure. The display of frustration from the lockdown was the increasing incidence of violence between intimate partners. Shariffi et al (2020) maintained that the stay at home triggered frustration which has a close affiliation with physical violence among intimate partners. The cumulative effect of the stay at home and other indices of the COVID-19 lockdown is the prevalence of physical violence among intimate partners.

The upsurge in psychological violence among intimate partners was not unconnected with the COVID-19 lockdown restriction. The study established that the mandatory stay at home was instrumental to the upsurge in psychological and emotional violence at home. This finding corroborates the argument of Shariffi et al. (2020) that there have been clear reports of increases in psychological violence during the COVID-19 lockdown. This is because during this era, intimate partners were obligated to stay at home. This finding does not contradict the postulation of Sri et al. (2021) that since the outbreak of the COVID-19 pandemic, intimate partner violence, including emotional abuse, has inevitably intensified. The study revealed that the lockdown provided avenues for unhealthy conversation, increased demand for tangible and intangible materials and attention from partners. The lockdown which was characterized by loss of jobs and financial difficulties gave rise to frustration in all its ramifications. The corresponding effect of this was the resort to emotional or psychological violence among partners. This finding affirmed the earliest position of Udoeyen et al. (2017) that economic crises are often associated with an upsurge in violence among intimate partners. On such occasions, partners inflict emotional torment on others, but women are the easy and typical victims. There is no doubt that the lockdown, with its social and economic costs, produced emotional consequences for partners (Sri et al., 2020).

Sexual violence among intimate partners was also witnessed during the lockdown. The lockdown resulted in compulsory stay at home, bred negative

conversations and excessive sex demands from partners. This finding is in line with previous studies conducted by Sri et al. (2020), Ford (2020) as well as Shariffi et al. (2020). According to the studies, the COVID-19 pandemic and the need for spouses to stay at home for several days, weeks and months did not only worsen traditional and ideological differences and triggered unresolved issues, promoting sensitivity to weaknesses in spousal relationships, but also promoted sexual violence. Moreover, the inordinate sexual demand from partners could not be resisted by the other partners. The quest to satisfy the sexual urge by partners triggered sexual harassment and violation of sexual rights of their partners during the COVID-19 lockdown period.

While the demand for sexual gratification was common during the lockdown, such desire and demands were sometimes triggered by drug or other substance abuse. Fegert et al. (2019) pointed out that the prevalence of corona led to the misuse of many substances. This led to an increase in domestic violence, especially physical and sexual abuse. The sexual pressure placed on partners in the lockdown period was compounded by the use of diverse substances such as alcohol and drugs. Even when the other partner was not ready for sexual interaction, the influence of the substance consumed by the partner could result in sexual coercion.

Furthermore, the prevalence of economic violence during COVID-19, especially as it affected intimate partners was acknowledged by participants in the study. The increasing demand for economic goods was reported to be common in the lockdown period. This finding is in conformity with the view of Fawole (2008) that during crises, a partner is capable of maintaining control of family finances, deciding without regard to the other partner how resources are spent or saved, thereby reducing the ability of the other partner to meet their personal needs. The excessive demands in the midst of financial difficulties resulted in withholding of funds needed for basic necessities like food, clothing and other needs (Prince Edward Island Women Abuse Protocol, 2001). The lockdown restriction during the COVID-19 period has

close affiliation with economic violence witnessed by intimate partners. The finding of the present study does not negate the findings of Fawole (2000) and Shariffi et al. (2020) who, in separate studies, submitted that there was a clear manifestation of economic violence in many homes as intimate partners were denied food and other basic needs by their partners in privileged financial position. Some partners were victimized by having limited access to cash, credit facilities and other economic advantages. Evidently, women were economically dependent in the lockdown period and the situation had serious implications for their overall wellbeing.

### **5. Conclusion and Recommendations**

The emergence and spread of COVID-19 triggered many social problems. The stay at home and other associated components of the lockdown escalated the problem of intimate partner violence. Intimate partners were perpetrators and victims of physical, economic, psychological and sexual violence which had serious implications for their romantic and social relationships. The study recommends that partners should be tolerant of each other in the midst of crises and that partners who are always violating the right of others should desist from the act. More importantly, government and non-governmental agencies concerned with social welfare should strengthen the availability of support services and facilities for victims, especially during periods of crisis.

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