

Prevalence of domestic and family violence reported by  
young men aged 18-24 years-old in Namibia

Frieda Mboshono Theofelus

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Committee:

Ahoua Koné

Keshet Ronen

Stephen Gloyd

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Frieda Mboshono Theofelus

University of Washington

**Abstract**

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Frieda Mboshono Theofelus

Chair of the Supervisory Committee:

Ahoua Koné

Department of Global Health

**Introduction:** Domestic and family violence against children is a major problem, but little is known about the amount of exposure among young men in sub-Saharan Africa and specifically in Namibia.

**Objective:** To estimate the overall and past year prevalence of sexual, physically and emotional violence among young Namibian men 18-24 years old.

**Methods:** We used secondary data from the national representative Namibia 2019 Violence Against Children Survey (VACS) to estimate the prevalence of domestic and family violence among the young men, ever married or with romantic partners, who were surveyed.

**Results:** From a sample of 557 Namibian males ages 18 to 24, we analyzed childhood and contemporary experiences of violence. We found that approximately two-thirds (66.8%) reported experiencing some form of childhood violence before the age of 18. While some of these respondents experienced only one or two types of violence, a small number experienced all three types (physical, sexual, and emotional). Of those who experienced only one type of childhood violence, most (57.8%) experienced physical violence followed by emotional violence (35.0%) and sexual violence (17.6%). Among those who had experienced multiple types of violence, less

than one third (22.3%) reported two types, and a smaller number (10.6%) reported to have experienced all three types.

**Conclusions:** Our findings show that Namibian young men are frequent victims of direct childhood family violence including physical, emotional, and sexual. To address this prevalent domestic and family violence, young males including adult male victims of violence must know how and where to seek help, not only for themselves but also for children in their household. It is also important to make available strategies that teach healthy relationship skills and those that reduce domestic and family violence to interrupt these types of violence. The high prevalence of domestic and family violence should inform violence prevention and response efforts. The results of this thesis project offer an opportunity for the government of Namibia to lead the way in addressing the problem of violence against men, by focusing on immediate and future prevention and response programs so that young men in Namibia can feel safe, protected, and supported.

**Keywords:** Childhood Sexual violence; Childhood Physical violence; Domestic violence; Family violence

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## **Introduction**

Violence against children is a widespread global health crisis associated with poor mental and physical health outcomes. A systematic review published in 2016 estimated that at least 50% of children aged 2-17 years in Asia, Africa, and Northern America (approximately 1 billion children) had experienced emotional, physical, or sexual violence in the past year. The prevalence of violence varied by type of violence and by country (Hillis et al., 2016). A 2013 comparative publication on specific countries indicated that the prevalence of violence among male victims aged 13-24 ranged from 29.5% in Nigeria to 51.5% in Malawi; and among female victims, the rates ranged from 15.3% in Zambia to 28.4% in Uganda (Swedo et al., 2019). In addition, a United Nations multi-country cross-sectional study of males' and females' experiences of violence reported that in Asia and the Pacific, the prevalence of physical and interpersonal violence (IPV) or both varied by site, ranging between 25.4% in rural Indonesia to 80% in Bougainville, Papua New Guinea (Fulu et al., 2013).

Beyond immediate pain and suffering, domestic and family violence can cause long-term behavioral and physical problems, such as alcohol and drug abuse, risky sexual behaviors, and susceptibility to sexually transmitted infections (STIs), (Leigh & Stall, 1993; Pitpitan et al., 2012). Children who have suffered from violence also often experience lasting mental health problems such as depression, anxiety, difficulties with attachment, regressive behaviors, aggression and conduct problems (Riggs, 2010). Exposure to violence may also impair a child's capacity for parenting later in life, continuing with the behavior of violence into the next generation (Fraga et al., 2022). The effects of child abuse and exposure to domestic violence as a child have been linked to various risks of harm and revictimization (Papalia et al., 2021).

In Namibia, a large country with a small population of 2.6 million people, there is limited data on childhood experiences of violence, particularly the experiences of young men. A recent study revealed that over one-third of women aged 15-24 have reported physical or sexual violence from an intimate partner (Bikinesi et al., 2017). The WHO has found that over one-third of ever-partnered women in the country reported having experienced physical or sexual violence at the hands of intimate partners at some time, with 31% reporting physical violence and 17% sexual

violence (Suemori & Yoshitake, 1976). Domestic violence may increase during childhood through experiencing physical and sexual assault by family members and witnessing domestic and community violence (Roberts et al., 2010).

In 2003, the Namibian government committed to doing more on the legislative and policy frameworks to protect children and women against domestic violence (Domestic Violence ACT, 2003, Act No., 4 of 2003). Unfortunately, to date, most people in Namibia have limited knowledge of the laws protecting their rights against domestic or intimate partner violence (Parvin et al., 2016). A study on intimate partner, familial and community violence among young men in Namibia indicated that power differentials and jealousy within romantic relationships are some of the direct causes of violent interaction and emotional abuse (Stephenson et al., 2014).

By concentrating our local research solely on women's experiences with domestic violence, we will only gain a limited understanding of the problem. Examining males' exposure to domestic and family violence is vital as well as childhood exposure to such violence. The few studies that have explored childhood experience of violence and associations with mental health among young adult males and females in sub-Saharan Africa have suggested that the prevalence ranged from 7.8% emotional violence to 55% witnessing community violence. (Bordignon et al., 2023; Brown et al., 2023).

The main objective of this thesis was to quantify the occurrence of sexual, physical or emotional violence and witnessing violence among young Namibian men aged 18-24 years old. We used secondary data from the Namibia 2019 Violence Against Children Survey (VACS) to estimate the prevalence of exposure to domestic and family violence. The VACS has been administered in over 24 countries in Africa, Asia-Pacific, Latin America, and the Caribbean (Krug et al., 2002).

### **Rationale and hypothesis for this study**

Given the serious problem of domestic and sexual violence that affects men during childhood, it is crucial to understand the magnitude of young men in Namibia who are impacted by domestic

and family violence. We hypothesized that the prevalence of childhood experience of violence among young men 18-24 years old before the age of 18 would be 40%.

This thesis assessed the prevalence of childhood violence occurring before 18 years of age. In addition, we estimated the prevalence of violence in the 12 months before the VACS survey and made recommendations for targeted domestic violence prevention for this group.

**The specific study aims were:**

To estimate the prevalence of childhood experience of sexual, physical, and emotional violence occurring before 18 years of age among young Namibian men 18-24 years old who participated in the VACS.

To estimate the prevalence of violence in the 12 months before the VACS survey among young Namibian men aged 18-24 years.

## **Methods**

### **Study design and sample**

All the 11 countries in Africa, Asia and the Caribbean where VACS was administered, used the same definitions for violence as per the World Health Organization (WHO) and the CDC (Chiang et al., 2016). This was done to ensure a better comparison of the findings across the globe. The VACS was funded by the President's Emergency Plan for AIDS Relief (PEPFAR) through the U.S. Centers for Diseases Control (CDC) Cooperative agreement NU2GGH001430-05 to I-TECH/UW to measure the prevalence of males and females experiencing physical, sexual, or emotional violence in childhood (Velloza et al., 2022). Violence was defined as the intentional use of physical force or power, threatened or actual, against oneself, or another person. Sexual violence was defined as encompassing a range of acts, including non-consensual sexual acts, attempted non-consensual sexual acts, non-physically pressured sexual acts, and unwanted sexual contact (Rutherford et al., 2007). Physical violence was defined as the intentional use of physical force with the potential to cause death, disabilities, injury, or harm by any perpetrator (Rutherford et al., 2007).

With the secondary data derived from the 2019 Namibia VACS, we aimed to estimate the prevalence of childhood experience of violence (physical, sexual, emotional) occurring before 18 years of age among young men 18–24-year-old. We also aimed to estimate the prevalence of violence in the 12 months before the VACS survey.

The sampling frame was originally compiled by the Namibian Statistics Agency (NSA) for the 2016 Namibia Intercensal Demographic Survey. The master frame for the 2019 Namibia VACS included 3472 Primary Sampling Units (PSUs) from the 2011 census master frame for both female and male. In male PSUs, 980 interviews were completed among 1203 surveyed households. The 2019 Namibia VACS utilized a three-stage stratification sample design. In the first stage, a total of 274 PSUs were randomly selected from the master frame where 54 PSUs were assigned to male participants. 52.7% of these PSUs were in urban regions and 47.3% in rural regions (Velloza et al., 2022). The individual response rate for males aged 13-24 years old was 90.4% (Velloza et al., 2022).

In the second stage, a fixed number of 25 households were selected using equal probability systematic sampling. In the last stage, one eligible male participant was randomly selected from the list of all eligible participants 18-24 years of age in each household and administered the questionnaire. Data were restricted only to males aged 18 to 24, representing 557 individuals out of a total of 565 who participated in the VACS study.

### **Data collection procedures**

Data was extracted from the Microsoft Excel dataset of the 2019 Violence Against Children and Youth of Namibia, with boys, girls, and young adults between the ages of 18 and 24 to a new Microsoft Excel worksheet for this study. Missing values and duplicates were removed using Microsoft Excel data analysis. Some of the variables were merged or combined to obtain the variables that met this thesis analysis' needs. Multiple worksheets were created so that one could always go back a step to the original or previous unconsolidated data set if needed.

### **Ethical considerations**

Before the study, the staff involved, including myself, received training from the UW Human Subjects Institutional Review Board (IRB) via the CITI web-based training program.

In addition, the Namibia Statistics Agency provided training on national detailed standards for maintaining the privacy and confidentiality of the information collected and an Oath of Secrecy to all staff involved in the survey.

## **Measures**

The 2019 Namibia VACS that was the primary data collector of this survey used these variables below following the ISPCAN Child Abuse Screening Tool-Retrospective version (ICAST-R) for questionnaire development. This would help to compare our findings with other VACS studies (Dunne et al., 2009). Additionally, the Namibia VACS used questions from the Juvenile Victimization Questionnaire (JVQ) to ensure the design of a comprehensive questionnaire that gathered information on a broad range of violence victimizations (Finkelhor et al., 2005).

## **Study variables**

**Childhood experience of violence** was estimated by the prevalence of young Namibian adult male ages 18 to 24 who experienced during childhood, sexual, physical, and emotional violence. These could be someone the participants are currently with or were once with, such as a current girlfriend or an ex-girlfriend, or a current wife or ex-wife. Respondents were asked about their experience of various acts of violence committed by others, such as neighbors, or relatives.

**Childhood physical violence** was defined as any experience of being physically forced with the potential to cause death, disability, injury, or harm. Some examples of physical violence were whether a current or past girlfriend, romantic partner or wife ever slapped, pushed, shoved, shook or intentionally threw something at them to hurt them; or whether the person punched, kicked, whipped or beat them with an object; or strangled, smothered, or tried to drown them, or burned them intentionally; or used or threatened them with a knife, panga, gun or other weapons. A response of "yes" to any of these experiences occurring before age 18 is classified as having experienced physical violence. A response of "no" to every question was classified as no experience of physical violence.

**Childhood sexual violence** was defined as having ever experienced unwanted sexual touching, attempted forced sex, pressured sex, physically forced sex or alcohol-facilitated forced sex. Some examples of sexual violence were whether anyone ever sexually touched them without their permission but did not try and force them to have sex; or they were touched sexually without their permission and such acts included fondling, pinching, grabbing, or touching them on or around their sexual body parts. A response of “yes” to any of the questions was classified as having experienced sexual violence. Additionally, any respondent with a response of "yes" was further asked about the sexual violence of the first and most recent acts of violence and if the participant experienced more than one such incidents.

**Childhood emotional violence** was defined as a pattern of verbal behavior over time or an isolated incident that is not developmentally appropriate or supportive and that has a higher probability of damaging a child's mental health or his/her physical, mental, spiritual, moral, or social development (Ssewamala et al., 2022). Some examples of emotional violence were whether a parent, adult caregiver or other adult relative ever told them that they were not loved, or did not deserve to be loved; or said they wished they had never been born or were dead; or ever ridiculed them or put them down such as saying they were stupid or useless. A response of "yes" to one of these experiences occurring before age 18 was classified as having experienced emotional violence. A response of "no" to every question was classified as non-experience of emotional violence.

### **Background characteristics of young men aged 18–24 year old**

To estimate the background characteristics of the study participants, the following variables were collected: age; level of education (defined as having completed primary school or less or never attended school, completed secondary school, or had attended higher than a secondary school); orphanhood (defined as the loss of a single or both parents before the age of 18); food insecurity (defined by whether the family thinks they had enough money for food); and relationships (defined as ever been married or lived with someone as if married).

## **Overlap of types of violence: sexual, physical, and emotional**

Although specific forms of violence have a distinctive nature and can occur in isolation, attempts to categorize violence can be somewhat artificial given that the boundaries between acts of violence are often blurred. Overlap among different forms of violence happens in two primary ways: (1) violence could occur simultaneously, such as when a youth is being emotionally and physically subjected to violence at the same time; and/or (2) violence could occur to the same youth but at different points in time. The overlap types of violence includes sexual, physical, and emotional violence.

## **Data analysis**

After completing data cleaning, generating variables and developing a codebook in Microsoft Excel, we produced data for men aged 18-24 years to assess the prevalence of violence experienced before the age of 18 and in the 12 months before the survey using weighted descriptive statistics. Microsoft Excel was used for analysis as well as data management.

## **Results**

### **Participant background characteristics**

Among 565 males aged 13-24 who were sampled, 557 were between the ages of 18 and 24. This latter group constituted the study sample for our secondary data analysis. Our findings show that 374 (67.2%) of the participants were between the ages of 20-24 years. With regards to education level, 65 (11.7 %) has completed primary or less than primary (or never attended school) while 131 (23.5%) reported that they had completed secondary school and 85 (15.3%) had attended higher than secondary school. With regards to orphanhood, around one-third (34.0%) of the respondents reported to have lost one or both parents before age 18. For socioeconomic conditions, 55.3 % reported to have experienced food insecurity. (See Table 1).

**Table 1. Background characteristics of 18–24 year-old young males (n=557)**

Characteristics of respondents	N (%)	95% Confidence Interval
<b>Age group (years)</b>		
18-19	183 (32.9%)	29.0 - 36.8
20-24	374 (67.2%)	63.2 - 71.0
<b>Relationships</b>		
Ever been married or lived with someone as if married	37 (6.6%)	4.6 - 8.7
<b>Education status</b>		
Completed primary or less than primary (or never attended school)	65 (11.7%)	9.4 - 14.3
Completed secondary school	131 (23.5%)	20.0 - 27.0
Higher than secondary school	85 (15.3%)	12.3 - 18.2
<b>Orphan status prior to age 18<sup>A</sup></b>		
Not an orphan	368 (66.0%)	62.1 - 70.0
Lost one or both parents	189 (34.0%)	30.0 - 37.9
<b>Socioeconomic conditions<sup>B</sup></b>		
Experiencing food insecurity	308 (55.3%)	51.2 - 59.4

<sup>A</sup>Defined as the loss of a single or both parents before the age of 18

<sup>B</sup>Used by asking if the family think they had enough money for food

### **Childhood experience of violence**

Table 2 shows data on the types of violence experienced in childhood among young Namibian males aged 18–24 year in our study. The prevalence of any specific childhood violence in general in this population was 66.8% (95% CI: 62.9 – 70.7). As for the types of childhood violence experienced: 17.6% (95% CI: 14.4 - 20.8) reported experiencing sexual violence; 57.8% (95% CI: 53.7 – 61.9) reported experiencing physical violence only 35.0% (95% CI: 31.0 – 39.0) reported experiencing emotional violence. For the study participants who experienced multiple types of violence, 22.3% (95% CI: 18.8 – 25.7) experienced two types of violence, and 10.6% (95% CI: 8.0 – 13.1) experienced all three types of violence (Table 2).

**Table 2. Prevalence of different types of violence and multiple forms of violence experienced before age 18, among young men 18–24-year-olds in Namibia (n=557)**

<b>Experience of childhood violence</b>	<b>N (%)</b>	<b>95% Confidence Interval</b>
<b>Any violence</b>		
No childhood violence	185 (33.2%)	29.3 - 37.1
Any childhood violence	372 (66.8%)	62.9 - 70.7
<b>One type of violence only</b>		
Childhood sexual violence <sup>A</sup>	98 (17.6%)	14.4 - 20.8
Childhood physical violence <sup>B</sup>	322 (57.8%)	53.7 - 61.9
Childhood emotional violence <sup>C</sup>	195 (35.0%)	31.0 - 39.0
<b>Multiple types of violence</b>		
Two types of violence	124 (22.3%)	18.8 – 25.7
Three types of violence	59 (10.6%)	8.0 - 13.1

<sup>A</sup>Sexual violence includes unwanted sexual touching, attempted sex, physical forced sex, and pressured sex (through treats or harassment)

<sup>B</sup>Physical violence includes slapping, pushing, shoving, shaking, intentionally throwing something to hurt, punching, kicking, whipping, beating with an object, strangling, smothering, trying to down, burning intentionally or using or threatening with a knife, panga, gun or other weapon.

<sup>C</sup>Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed or put down by a parent, caregiver or adult relative.

### **Experiences of violence in the last 12 months prior to the survey**

In our study population, 46.3% (95% CI: 42.2 – 50.5) experienced any violence in the past 12 months prior to the VACS survey. Among these, 2.7% (95% CI:1.3 – 4.0) experienced sexual violence, 16.0 % (95% CI: 13.0 – 19.0) experienced physical violence, and 3.4% (95% CI:1.9 – 4.9) experienced emotional violence. Moreover, among the respondents who reported to have experienced violence in the past 12 months prior to the study, 6.2% (95% CI: 2.0 – 6.2) experienced two types of violence, and 1.8% (95% CI: 0.7 – 2.9) experienced all three types of violence (Table 3).

**Table 3. Prevalence of the different types of violence and multiple forms of violence experienced in the past 12 months, among young men 18-24 years-olds (n=557)**

Experience of violence in the past 12 months	N (%)	95% Confidence Interval
<b>Any violence</b>		
No violence	299 (53.7%)	49.5 - 57.8
Any violence	258 (46.3%)	42.2 - 50.5
<b>One type of violence only</b>		
Sexual violence only	15 (2.7%)	1.3 - 4.0
Physical violence only	89 (16.0%)	13.0 - 19.0
Emotional violence only	19 (3.4%)	1.9 - 4.9
<b>Multiple types of violence</b>		
Two types of violence	35 (6.2%)	2.0 - 6.2
Three types of violence	10 (1.8%)	0.7 - 2.9

<sup>A</sup>Sexual violence includes unwanted sexual touching, attempted sex, physical forced sex, and pressured sex (through treats or harassment)

<sup>B</sup>Physical violence includes slapping, pushing, shoving, shaking, intentionally throwing something to hurt, punching, kicking, whipping, beating with an object, strangling, smothering, trying to down, burning intentionally or using or threatening with a knife, panga, gun, or other weapon.

<sup>C</sup>Emotional violence includes being told that you were unloved or did not deserve to be loved, being told that they wished you were dead or had never been born, or being ridiculed or put down by a parent, caregiver or adult relative.

## Discussion

We found that approximately two-thirds (66.8%) reported experiencing some form of childhood violence before the age of 18 years. While some of these respondents experienced only one or two types of violence, a small number experienced all three types (physical, sexual, and emotional). Of those who experienced only one type of childhood violence, most (57.8%) experienced physical violence followed by emotional violence (35.0%) and sexual violence (17.6%). Among those who had experienced multiple types of violence, less than one third (22.3%) reported two types, and a smaller number (10.6%) reported to have experienced all three types.

Our study findings are consistent with previous reports from Kenya indicating that three quarters of adults experienced some type of violence before the age of 18, with physical violence being the most reported type (Nguyen et al., 2019a). Also, the 57.8% prevalence of childhood physical violence reported in our study were similar to estimates from a sub-Saharan African

multicountry analysis of the Violence Against Children and Youth Survey which found that 49.7% of males experienced physical violence (Amene et al., 2024).

In addition, the prevalence of the three types of childhood violence reported in this study were also similar to findings from some sub-Saharan Africa countries, in particular Tanzania, Kenya and Swaziland indicating that 25,1% of male experienced two types of violence, (Nguyen et al., 2019b), (Amene et al., 2024). In contrast, the prevalence of 46.3% for any violence in our study is higher than a similar study done in Uganda in 2018 that reported a prevalence of 33.3% and another study in Kenya that reported 32.0%.

Of those who reported one type of violence in the past 12 months prior to the survey, physical violence is the most prevalent violence (16.0%). For those who experienced two types of violence during the past 12 months, our finding (6.2%) is much lower than a study from sub-Saharan Africa which reported 24.2% prevalence of adverse childhood experience (Amene et al., 2024). The difference could be attributed to the small sample size for our study.

The findings of our study highlight the need for interventions to address the burden of childhood violence in Namibia. For example, a parenting support program developed in South Africa to prevent abuse of adolescents using a pre-post design to test initial effects of parenting program showed significant reduction in child abuse, violent discipline, and adolescent problem behavior (Cluver et al., 2017).

Although a multicounty analysis of violence against children and youth survey in sub-Saharan Africa reported domestic violence among both men and women, to our knowledge, the prevalence of domestic's violence among young men reported by our study are the first reported estimates in Namibia.

According to the 2016 Global Partnership to End Violence Against Children report, addressing violence against children remains high on the Namibia Government's agenda. Namibia is one of 38 pathfinding countries with the Global Partnership committing to end violence against children.

Also, findings from the 2019 Namibia VACS study and from the disclosure and help-seeking behaviors related to sexual and physical violence in childhood and adolescences study have led the Namibian government and partners to take actions for violence prevention. The commitments were based on the seven INSPIRE strategies as defined below. (1) Prohibit corporal punishment of children (Legal Assistance Center Namibia). (2) Adopt zero hunger challenges to eradicate poverty and hunger among young adolescents by keeping girls in school and addressing food insecurity. (3) Combat domestic violence and likelihood of witnessing violence at home by increasing coverage of evidence-based response and support services for children. (4) Improve parents and caregivers support by providing training resources to service providers and parents and referral for early assessments and intervention of childhood violence. (5) Develop long-term systems of economic strengthening activities for capacity building in the areas of planning, financing, human resources, and monitoring. (6) Establish a safe community environment with life skills by increasing community awareness and the availability of support services for survivors of violence. (7) Create programs to reduce violence in and through schools.

The findings of this study add to the existing evidence suggesting that there is a large need for strategies to address violence against boys. In addition to our findings on experiences of violence, our data shows a high level of food insecurity among half of the young males. This finding is similar with the findings from Jimma zone Southwest Ethiopia where food insecure was 63% (Hassen et al., 2016).

### **Strengths and Limitations**

Our study has strengths and limitations. For strengths, the study is a sampling strategy that ensured the data are nationally representative, pre-screened, and randomly sampled using the three-stage cluster design which allowed weight estimates calculations. Another strength of this study is the level of details obtained in the context of violence. Additionally, the study used a core questionnaire that is consistent across countries, so the findings are comparable with other similar studies.

This study also has several limitations. The 2019 Namibia VACS is a household-based survey, as a result, some vulnerable populations may have been excluded or missed, such as children residing in residential care as well as children with disabilities and those who are unhoused. The

implementation of the survey was timed during school holidays to reach children who were living in school hostels; however, some children may have been missing. The 2019 VACS findings are generalized to the population of youth residing in households in Namibia but not in another context, for example children who are unhoused or living in orphanages. Children who had a severe disability or language barrier that prevented them from understanding or responding to the interview questions or from being interviewed in private were also excluded from this study. We recommend that future studies should address the burden of violence among these special populations.

This study only focusses on the prevalence of childhood violence among young men aged 18-24, excluding childhood violence among male children aged 13-17. The study also explored the prevalence of childhood violence (physical, sexual, and emotional) occurring before 18 years of age but, didn't assess perpetration of violence. Additionally, because of small sample size, we could not develop estimates for everyone per region to yield nationally representative results for the 14 regions including urban and rural areas.

## **Conclusion**

In conclusion, our study highlights the need for specific programs to prevent violence against children in Namibia and particularly young and adolescent males. Ending domestic and family violence requires a collective effort from government to individuals and has the potential to change the health and wellbeing of the Namibian child and youth.

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