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COUNSELLING ISSUES ON WOMEN'S HEALTH, EDUCATION/EMPOWERMENT AND SUSTAINABLE DEVELOPMENT IN NIGERIA



Edited by
Ali Mburza

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COUNSELLING ISSUES ON WOMEN'S HEALTH, EDUCATION/EMPOWERMENT AND SUSTAINABLE DEVELOPMENT IN NIGERIA

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DEDICATION

This book is dedicated to all Nigerians in distress.

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Ali Mburza

Editor, The Counsellor
Department of Education
University of Maiduguri
PMB, 1069, Maiduguri

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CHAPTER 23

GENDER-BASED VIOLENCE: THE ROLE OF COUNSELLORS IN HANDLING VICTIMS AND PERPETRATORS

*MUHAMMED, Shuaib Abolakale, OKESINA, Falilat Anike (PhD),
IBRAHIM Barakat & ADEGUNJU, Kabir Adewale*

Introduction

Gender is the socially defined set of roles, rights, responsibilities, entitlements, and obligations of females and males in societies. The social definitions of what it means to be female or male vary among cultures and change over time. Gender identity is an individual's internal, personal sense of being male or female. Gender is a social dynamic concept used to identify and measure differences in the roles of men and women, the differing opportunities and constraints they face including with respect to access to power and control over resources and ultimately, their well-being (USAID 2014). As gender is dictated by social and cultural norms, gender roles can change over time. These gender roles, norms, and inequities heavily influence the patterns, contexts, and consequences of violence against men and women.

Violence has been defined in many ways. The Concise Oxford Dictionary defines violence as unlawful exercise of physical force. The World Health Organization (WHO 2002) defines violence as the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community that either results in or has a high likelihood of resulting in injury, death, psychological harm or deprivation.

Gender-based violence (GBV) is a term used to describe any harmful act that is perpetrated against a person's will, and

that is based on socially ascribed differences between males and females. Gender Based Violence (GBV) can also be described as any harm that is perpetrated against a person, as a result of power or inequalities that are based on gender roles. According to United Nations Economic and Social Council (1992), gender based violence is all encompassing, as it is not only limited to physical, sexual and psychological violence, but includes threats of violence, coercion or arbitrary deprivation of liberty. Though gender based violence may take many forms, it cuts across all cultures disproportionately affecting women and children mostly. It is the use of the term gender in these definitions which explains that women, men and transgender individuals can experience this kind of violence. Thus, gender-based violence involves men and women, in whom the female is usually the target, and this is basically because of unequal power relationships between men and women, and the violence is directed specifically against a woman because she is a woman or affects women disproportionately.

The UN General Assembly, in adopting the 1993 declaration on the elimination of violence against women defined gender-based violence as any act of violence that results in physical, sexual, or psychological harm or suffering to women; including threats of such acts, coercion, or arbitrary deprivation of

liberty, whether occurring in public or private life (Population Reference Bureau, 2000). Traditionally, gender-based violence is linked to existing inequalities between men and women in relation to gender norms that is society's expectation of appropriate roles and behaviours for boys and girls (Ashimolowo & Otulafe, 2012). Consequently, gender based violence thrives as a mode of promoting male supremacy and control. Despite effort to address issues of gender based violence and to raise awareness on these issues, gender based violence continues to be a major problem throughout the world hence, the role of counsellors.

Gender-based violence takes on many forms and can occur throughout the life cycle. Types of gender-based violence can include infanticide, child sexual abuse, sex trafficking and sexual coercion, neglect, domestic violence, forced labour, elder abuse and harmful traditional practices such as early and forced marriage, horror killing and female genital mutilation/cutting etc. Consequently, the term "violence against women" and Gender-based violence are often used interchangeably. However, boys and girls, men and women can also experience gender based violence. This paper therefore looks into the concept of gender-based violence against women, levels, forms, causes and consequences of gender-based violence against women and the role of counsellors in handling victims of gender-based violence.

Levels of Gender-Based Violence

According to Jekayinfa (2013), there are three levels of gender-based violence. These are the home or family

level, the community level and the state level.

Violence in the Home

Domestic violence is the most prevalent form of gender-based violence. It typically occurs when a man beats his female partner. Psychological abuse always accompanies physical abuse and majority of women abused by their partners are abused many times. Physical, sexual and psychological violence against women within a couple and in the family consists of battery, sexual abuse, female genital mutilation and other traditional practices harmful to women and girls, marital rape, dowry-related violence, incest, non-spousal violence like a son's violence against his mother and violence related to exploitation and deprivation of freedom.

Population Reference Bureau, (2000) reported Murray and Richard's findings of 1986 that in the United States, more than a million and half women are beaten by their partners each year. It also reported that in the 1995 Egypt Demographic and Health survey, 35 percent of women were reported being beaten by their husbands during marriage. In spite of these available data on gender-based violence, there is no accurate information on gender-based violence in some countries. A culture of silence surrounds cases of violence against women in most countries like Nigeria, making it difficult to get a true picture of its extent. Some of the reasons why it is difficult to get an accurate account is that most of the gender-based violence occur in the private sphere – within families, inside homes, and out of sight.

Violence in the General Community

Physical, sexual and psychological violence occurring within the general community include battery, rape, sexual assault, sexual harassment and intimidation in school or work, forced treatments and abusive medication, the exploitation and commercialization of women's bodies which is related to increased poverty that is mainly a result of unbridled economic liberalism. These types of violence occurring within the general community also include contraception imposed on women by constraints or force, forced sterilization or abortions, selective abortion of female fetuses and female infanticide (World March of Women, 2000).

Violence Perpetrated by the State

Physical, sexual and psychological violence are too often perpetrated or tolerated by States that prioritize custom or tradition over the respect of fundamental freedom. In some countries, the rise of religious fundamentalism is extremely disturbing as regards women's right to their economic autonomy and their freedom of choice. The social exclusion of women is so great that it constitutes a new form of apartheid. Women are considered second class beings, of lesser value, deprived of their fundamental rights.

Violence against women is also exercised as a weapon of war in situations of armed conflict. It has many forms including murder, rape, sexual slavery, hostage taking and forced pregnancy (World March of Women, 2000). Salami (2000) identified some additional violations of human rights and

fundamental freedoms such as the trafficking in women and girls for sex trade, forced prostitution, rape, sexual abuse and sex tourism that have become the focus of internationally organized crimes.

Forms of Gender-Based Violence

According to Ganley (1998), the following are the forms of gender-based violence:

Domestic Violence

Domestic violence is a pattern of behaviors used against a victim which consists of a variety of abusive acts, occurring in multiple episodes over the course of the relationship. Some episodes consist of a sustained attack with one tactic repeated many times (e.g., punching), combined with a variety of other tactics (such as name calling, threats, or attacks against property). Other episodes consist of a single act (e.g., a slap, a "certain look"). One tactic (e.g., physical assault) may be used infrequently, while other types of abuse (such as name calling or intimidating gestures) may be used daily. Some parts of the pattern are crimes in most countries (e.g., physical assault, sexual assault, menacing, arson, kidnapping, harassment) while other battering acts are not illegal (e.g., name calling, interrogating children, denying the victim access to the family automobile). All parts of the pattern interact with each other and can have profound physical and emotional effects on victims. Victims respond to the entire pattern of perpetrators' abuse rather than simply to one episode or one tactic (Ganley, 1998).

Physical Violence

Physical violence refers to any contact intended to cause feelings of humiliation, pain injury and other physical suffering or bodily harm (Ganley, 1998). Physical abuse may include spitting, scratching, biting, grabbing, shaking, shoving, pushing, restraining, throwing, twisting, slapping (with open or closed hand), punching, choking, burning, and/or use of weapons (e.g., household objects, knives, guns) against the victim. The physical assaults may or may not cause injuries (WHO, 2011)

Sexual Violence

Sexual violence refers to any situation in which force is used to obtain participation in an unwanted sexual activity. According to Ganley (1998) sexual violence can take many forms and take place under very different circumstances, for instance, a person can be sexually violated by one individual or several people (e.g. gang-rapes); the incident may be planned or a surprise attack. Although sexual violence occurs in most cases at the victim's or the perpetrator's home, it can also takes place in many other settings, such as the workplace, at school, in prisons, cars, the streets or open spaces (e.g. parks, farmland).

The perpetrator of a sexual violence may be a date, an acquaintance, a friend, a family member, an intimate partner or former intimate partner, or a complete stranger, but most a times, is someone known to the victim. The author further posited that there is no stereotypical perpetrator; sexually violent men come from all backgrounds, rich and poor,

academic and uneducated, religious and non-religious. Perpetrators may be persons in positions of authority who are respected and trusted (e.g. a doctor, teacher, tourist guide, priest, police officer) and thus less likely to be suspected of sexual violence (Ganley, 1998). Other forms of sexual violence include, but are not limited to: sexual slavery; sexual harassment (including demands for sex in exchange for job promotion or advancement or higher school marks or grades); trafficking for purposes of forced prostitution; forced exposure to pornography; forced pregnancy; forced sterilization; forced abortion; forced marriage; female genital mutilation (WHO, 2013).

Psychological /Emotional Violence

Psychological/Emotional abuse is a tactic of control that consists of a wide variety of verbal attacks and humiliations, including repeated verbal attacks against the victim's worth as an individual or role as a parent, family member, friend, co-worker, or community member. In domestic violence, verbal attacks and other tactics of control are intertwined with the threat of harm in order to maintain the perpetrator's dominance through fear. While repeated verbal abuse is damaging to partners and relationships over time, it alone does not establish the same climate of fear as verbal abuse combined with the use or threat of physical harm.

Emotional abuse may also include humiliating the victim in front of family, friends or strangers. Perpetrators may repeatedly claim that victims are crazy, incompetent, and unable "to do anything right" Ganley (1998). Psychological and emotional abuse can be perpetrated

through isolation, nagging, use of children, snubbing, and other non verbal attacking behaviours. According to Ganley (1998) through different isolation and information tactics, some perpetrators increase their psychological dominance on the victims. For instance, perpetrators' use of disinformation tactics such as distorting what is real through lying, providing contradictory information or withholding information is compounded by the forced isolation of the victims. Also, some abusive acts are directed against or involve children in order to control or punish the adult victim (e.g., physical attacks against a child, sexual use of children, forcing children to watch the abuse of the victim, engaging children in the abuse of the victim). The perpetrator may use children to maintain control over his partner by not paying child support, threatening to take children away from her, involving her in long legal fights over custody, or kidnapping or taking the children hostage as a way to force the victim's compliance.

Economic Violence

This is perceived as a subtle form of emotional abuse; it involves an attempt to make the victim financially dependent on the abuser (Oyadeyi, 2014). Perpetrators control victims by controlling their access to all of the family resources: time, transportation, food, clothing, shelter, insurance, and money. He may actively resist the victim becoming financially self-sufficient as a way to maintain power and control. Conversely, he may refuse to work and insist that she supports the family. He may expect her to be the family "bookkeeper," requiring that she keeps all records and write all checks, or he may

keep financial information away from her. In all instances he alone makes the decisions. Most time, victims are put in the position of having to get "permission" to spend money on basic family needs. When the victim leaves the battering relationship, the perpetrator may use economics as a way to maintain, control or force her to return: refusing to pay bills, instituting legal procedures costly to the victim or destroying assets in which she has a share. All of these tactics may be used regardless of the economic class of the family (Ganley, 1998).

Causes of Gender-Based Violence

The causes of gender-based violence are many and varied depending on the types of violence. Several factors have been adduced for gender based violence in Nigeria. Some of the factors include:

Poverty and Financial Insecurity
Poverty usually triggers gender violence especially domestic violence because it hinders spouses from living to their domestic responsibilities. A lot of families are finding it difficult due to extreme austerity and hardship which often triggers conflict leading to frustration and violence (Oyadeyi, 2014). Njenga (1999) also commented that if a man cannot establish his authority intellectually or economically, he would tend to do so physically.

Society's Belief System: Some cultural values and beliefs are found to be reinforcing gender based violence traditional attitudes towards women around the world help perpetuate the violence. Stereotypical roles in which

women are seen as subordinate to men constrain a woman's ability to exercise choices that would enable her end the abuse. Another cause is the image created by the society which portrays a man to be viewed as being strong, educated, creative, and clever while a woman is the opposite of all these traits Uwameiye and Iserameiya (2013; Ndungu, 2004).

Also the patriarchal belief in Nigeria in which men are perceived to have a born right to control family resources and women contribute in no small measure to gender based violence. Also the way parents bring up their children, which create disparity between boys and girls, also is a source of gender-based violence in later life. When a boy grows up, knowing that he is not supposed to wash his own clothes, cook or help in the house, if he grows up and gets married to a woman who comes from a home where duties are equally shared between girls and boys, this can create tension that might lead to violence.

Power and Control: The need for power and control of one partner over the other usually triggers violence in a relationship. Domestic violence is often used as a strategy to gain or maintain power and control over victims. Abusers' effort to dominate their partners have been attributed to low self esteem, unresolved childhood conflicts, the stress of poverty, genetic tendencies and socio-cultural influences among other causative factors

Environment: the type of environment an individual is brought up can influence his/her attitude towards gender violence. Njenga (1999) who was the chairman of

the Psychiatric Association in Kenya discussed with women in Kenya on reasons for the rise in gender-based violence. He opined that one of the causes is the space people live in. The more crowded people are the more domestic violence there is likely to be.

Anger and lack of self control: Uncontrollable anger or bad temper can contribute to gender-based violence. Such individual responds violently to the slightest provocation

Alcoholism: Drunkenness can contribute to frequent feud which usually result in domestic violence since alcohol has been found to reinforce aggressive behaviour

Consequences of Gender Based Violence

The effects of Gender-based violence can be devastating and long lasting. They pose danger to survivors' reproductive health and can scar a survivor physically, psychologically, cognitively and interpersonally.

Health Consequences: According to The Inter-Agency Standing Committee (IASC) Task Force on Gender and Humanitarian Assistance (2005), survivors/victims of GBV are at high risk of severe and long-lasting health problems, including death from injuries or suicide. Health consequences can include unwanted pregnancy, unsafe self induced abortion, infanticide, and sexually transmitted infections, including HIV/AIDS. Some reproductive challenges have been identified among female victims of domestic violence. For instance pregnant victims have been found to experience

greater risk of miscarriage, pre-term labour and injury to or death of fetus (Jones & Horan, 1997). Other reproductive effects include gynecological disorders, pelvic inflammatory disease, sexual dysfunction, sexually transmitted infections including HIV/AIDS, unintended pregnancy, delayed prenatal care, pregnancy difficulties like low birth weight babies and prenatal death (Oyadeyi, 2014).

Psychological/ Emotional Consequences: Gender Based Violence can lead to psychological consequences such as anxiety, depression, post-traumatic stress disorder (PTSD), low self esteem, apprehension, fear of intimacy, insecurity, and inability to trust others especially in intimate relationship.

Physical Consequences: Physical abuse may result in injuries, broken bones, unplanned or involuntary abortion, head injury, burns and laceration, internal bleeding, disability and death as a result of injuries. Victims of violence suffer physical injuries such as minor cuts, scratches and bruises and other major injuries such as fracture etc.

Social Consequences: Social effect that accompany gender based violence are restricted access to services, strained relationship, marital conflict, divorce, isolation from social networks, homelessness and social stigma (Haise & Garcia-moreno, 2002; Plitcha, 2004).

Roles of Counsellors in Handling Victims of Gender Based Violence

Gender Based Violence is a reality in Nigeria and most other developing

countries. Therefore, the role of Counsellors cannot be over emphasized in providing full support, encouragement and adequate welfare to victims and perpetrators. Counselors perform several roles such as counseling, educating, planning, campaign and policy making. Gender Based Violence undoubtedly has serious implications for counselling in the view of its devastating effect on victims. Counsellors have serious role to play in combating the menace as they are supposed to be bothered by the pace and tempo at which gender based violence ravages victims well being in our society. Counsellors as a matter of urgency need to be deeply involved in providing prevention, remedial and rehabilitation services to the perpetrators and victims. The following are some of the intervention strategies that can be provided for victims and perpetrators of gender based violence.

Access to Rehabilitation Counselling Service: one major role Counselors would have to play is to provide access to rehabilitation counselling service for both victims and abusers. Rehabilitation counselling unit should be established within major towns and villages so as to provide avenue for easy access for victims suffering from psychological trauma and who are in needs of help. Rehabilitation counselling service will help to rehabilitate abusers to lead a normal life again.

Facilitation of Public Enlightenment Campaign against GBV: Counsellors can also play an active role in setting up and running gender based violence awareness campaigns. Counsellors in collaboration with Governmental and Non-

governmental agencies saddled with responsibilities of mass education should facilitate and promote programmes that will educate the public and the abusers on the devastating effect of gender based violence on victims in Nigeria. Enlightenment programmes for the public can be organized using village meeting, town union programmes, markets, motto parks e.t.c.

Support: Counsellors also assist individuals that have been infected with the virus to overcome the trauma and put in place various coping mechanisms to help the individual lead as normal life as possible

Appropriate Referral: counsellors have a big role to play in referring victims to appropriate places where they can receive immediate help. Victims may need urgent medical attention or legal service. The counselor would do a lot of favor by referring victims to appropriate services centres.

Provision of Family Life Counselling: counsellors would need to focus attention on family life and community based counselling service that will provide opportunities for victims to receive help and support from professionals (Marital Counsellors, Social Workers, Legal Practitioners and Medical Practitioners). Presently in Nigeria today, counselling services are only accessible in educational institutions and in the hospital settings, there is need for counselling services that will be community based so that yearning of people can be met especially in family life aspects. People should be enlightened

to know that violence in the home serves as a breeding ground for violence in the society. People should be taught how to be good role models and walk together to end violence in the home.

Training in Communication Skills: the major cause of gender based violence in the family is communication problem. Victims and perpetrators need communication training to be able to assert themselves and communicate their feelings without being violent or instigating violence. Counsellors by their training as experts in communication skills needs to step up their effort in promoting effective ways of communication through the use of mass media and other means of public education. Victims can also be trained with these skills to help resolve their conflicts. Thus, offender should be counseled on anger management and good communication skills.

Conclusion

GBV is a social menace that has serious bio-psychosocial impact on victims and perpetrators. Therefore there is the need for practitioners in the helping professions such as counselling, psychiatry and social work to put all hands on deck in proving the needed support for full recovery and integration in their communities. It is also imperative that government should provide women, who experience violence with avenue for multi-disciplinary services including counseling, mental health and legal support (including provision for compensation) and to ensure that perpetrators are brought to justice and later rehabilitation. In addition, men should be educated from infancy on the

concept of manhood and their supportive and protective roles in the family as a means of eradicating all forms of gender-based violence against women. Non-Governmental Organizations (NGOs) should champion this public based campaign to eradicate/eliminate gender-based violence against women in our society.

Recommendations

The following are recommended to help reduce incidence of gender based violence and to provide a holistic approach to combating gender based violence in Nigeria:

- Provision of Clinic and community-based education efforts
- Organizing programs for men aimed at promoting gender equitable relationships
- Encouraging behavior change through mass media campaigns and education
- Incorporation of gender equality, human rights and violence prevention into school curricula
- Coordinate health and justice systems to improve medico-legal services.
- Launching of mass media and community campaigns against GBV.
- Setting up rehabilitation homes for victims and perpetrators.
- Coordinating a referral network for victims of GBV.
- Provision of essential health and psychosocial services that respond to the different types of GBV that victim's experience.

- Counsellors should partner with the law enforcement agencies, judiciary, women protection authorities, community leaders, media institutions and the civil society/ organization in combating the menace of GBV.

References

- Ashimolowo O.R. & Otufale G.A. (2012) Assessment of Domestic Violence among Women in Ogun State, Nigeria. *Greener Journal of Social Sciences*. 2 (3), 102-114.
- Ganley, Anne L. (1998): Understanding domestic violence. In: Warshaw, C., & Ganley, A. (1998): Improving the health care response to domestic violence: a resource manual for health care providers. *Future without Violence: health care*,
- Heise L, Garcia-Moreno C. (2002). Violence by intimate Partners. In: Krug E, Dahlberg L.L., Mercy J.A, et al., editors. *World report on Violence and health*. Geneva (Switzerland) World health organization. P.87121
- Inter-Agency Standing Committee (2005) *Guidelines for Gender-Based Violence Interventions in Humanitarian Settings: Focusing on Prevention of and Response to Sexual Violence in Emergencies (Field Test Version)* Geneva: Inter-Agency Standing Committee

- Jekayinfa A.A. (2013). Types, causes and effects of gender-based violence: challenges for social studies education in Nigeria. Retrieved on 2 / 4 / 1 6 from <https://www.unilorin.edu.ng/publications/jekayinoluwa%20Types%20and%20Causes%20Original.htm>
- Jones, R. & Horan, D.L. (1997). The American College of Obstetricians and Gynaecologist: A decade of responding to violence against women" international journal of Gynaecology and Obstetrics: the official organ of Gynaecology and Obstetrics 58(1): 4350
- United Nations (1992). Economic and social council. Report of the working group on violence against women. Vienna: United Nations. E/CN.6/WG.2/1992/L.3.
- Njenga, F. (1999). "If your Husband is Abusive, Leave Him!" In: Conveying Concerns: Women Report on Gender-based Violence. Washington
- Patricia, M. S. (2011) Understanding Gender-Based Violence. A paper Presentation of Mindanao Young Women Leaders Conference, USA.
- Population Reference Bureau (2000). Washington: Measure Communications.
- Plichta S.B. (2004). Intimate partner violence and physical health consequences: policy and practice implications. Journal of Interpersonal Violence 19(11); 12961323
- Oyadeyi, J. B. (2014) Impact of domestic violence on family well-being. Perspectives in Guidance and Counselling. Edo: Justice-Jeco printing and publishing Global.
- Salami, I.I. (2000). "The Girl-Child: Work and Health Hazards". Journal of Women in Academics (1). Gender-based Violence and the Challenges for Social Studies Education.
- The World March of Women Advocacy, (2000). Guide to Women's World Demands.
- United Nations Economic and Social Council (1992): Violence against women. <http://www.paho.org/English/ad/ge/viol>. Accessed September 23, 2008
- USAID (2014) Global overview of Gender-Based Violence: A public Health problem http://www.who.int/violence_injury_prevention/capacitybuilding/en. Accessed September 23, 2015
- Uwameiye, B.E., Iserameiya F.E. (2013) Gender Based Violence against Women and Its Implication on the Girl Child Education in Nigeria. International Journal of Academic Research in

Progressive Education and Development, 2(1).

World Health Organization (WHO) (2002). "Female genital mutilation: Programmes to Date. What works and What Doesn't. Geneva: World Health Organization Press.

World Health Organization (WHO) (2011). "Violence against women: intimate partner and sexual violence against women. Factsheet No 239 retrieved from [http://www.who.int/mediacentre/factsheet/fs239/en/index/html](http://www.who.int/mediacentre/factsheet/fs239/en/index.html).

World Health Organization (WHO) (2013). Acts of Gender based violence against women. Retrieved from: <http://www.healthgender.org>.