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THE INFLUENCE OF COUNSELING SERVICES ON DOMESTIC VIOLENCE AMONG MARRIED COUPLES IN DOUALA IV MUNICIPALITY, CAMEROON

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Abstract

Domestic violence remains a persistent threat to marital stability and public health in Cameroon, with Douala IV Municipality facing high prevalence alongside a largely informal, under-evaluated counseling sector. This study examined the influence of counseling services on domestic violence among married couples in Douala IV Municipality, focusing specifically on five counseling process variables: rapport, trust, congruence, active listening, and emotional management. The study adopted a descriptive cross-sectional survey design, drawing on primary data collected from 400 married respondents through a structured questionnaire, selected using a multi-stage sampling technique. Data were analyzed using descriptive statistics, Multiple Correspondence Analysis, weighted mean scores, correlation analysis, and Ordinary Least Squares multiple regression. All six constructs demonstrated strong reliability, with Cronbach's alpha values ranging from 0.904 to 0.962. Correlation analysis revealed statistically significant negative relationships between all five counseling process variables and domestic violence ($p < 0.01$), with active listening ($r = -0.597$), congruence ($r = -0.591$), and rapport ($r = -0.572$) showing the strongest associations. Regression results confirmed that all five variables significantly and negatively reduce have a negative and significant effects on domestic violence, collectively explaining 64.6% of the variance in outcomes ($R^2 = 0.646$, $F(5, 394) = 143.77$, $p < 0.001$), with rapport emerging as the strongest predictor ($\beta = -0.249$), followed by active listening, congruence, trust, and emotional management. All the five null hypotheses were rejected, though the strength of this relationship was itself shaped by considerable inconsistency in how rapport, trust, congruence, active listening, and emotional management were experienced across counseling encounters, with weighted mean scores clustering near the scale midpoint and most respondents relying on informal religious and community-based counseling rather than professional services. The study recommends standardized counselor training and expanded access to structured, evidence-based counseling services in Douala IV.

Keywords:

Counseling services, domestic violence, married couples, rapport, trust, congruence, active listening, emotional management, Douala IV Municipality.

Introduction

Regardless of financial status, educational attainment, or geographic location, domestic violence inside marriage continues to pose a threat to public health and family stability worldwide. Nearly one in three women worldwide are thought to have at some point in their lives been victims of physical or sexual abuse, most frequently at the hands of an intimate partner (World Health Organization, 2024). Despite growing awareness campaigns, intimate partner violence against women continues to be significant in low- and middle-income areas, according to a large-scale modeling study that provides a clearer picture of this burden (Sardinha *et al*., 2022). Analyzes based on Demographic and Health Survey data from approximately two dozen Sub-Saharan African countries confirm that the region bears a disproportionate share of this problem, with the prevalence of physical, emotional, and sexual violence varying greatly by country and affected women being significantly more likely to experience marital dissolution than those who have not experienced violence (Seidu *et al*., 2021).

This pattern is further supported by a more recent multi-country study that links intimate partner violence to increased rates of marriage dissolution throughout the sub-region and calls for evidence-based rather than assumption-driven intervention design (Ani & Katende-Kyenda, 2025). Due to ingrained patriarchal attitudes, financial dependence, and insufficient enforcement of protective laws, prevalence in Sub-Saharan Africa is significantly higher than the global average, at 44% in central Sub-Saharan Africa and about 38% in the eastern sub-region ("Domestic violence and its determinants among reproductive-age women in Sub-Saharan Africa," 2025). With a rate of 57.6%, Cameroon is among the worst-affected nations in the region, higher than Zimbabwe, Kenya, Mozambique, and Zambia, according to regional comparisons using Demographic and Health Survey data (Bamiwuye & Odimegwu, 2014). This pattern is consistent with more extensive evidence linking intimate partner violence to marital breakdown throughout the region (Seidu *et al*., 2021).

In addition to this epidemiological evidence, a great deal of research has been done on what actually helps couples and survivors reduce and recover from violence. Reviews of counseling approaches that combine relationship-building with skills training yield modest but real reductions in repeat offending (Babcock et al., 2024); West African trials show that structured, relationship-centered programs can lower rates of intimate partner violence (Green *et al*., 2015; John *et al*., 2022). Rogers's original "core conditions" (Norcross & Lambert, 2019; Flückiger *et al*., 2022). While active listening has been demonstrated to enhance therapeutic involvement (Kercher et al., 2025), emotional regulation deficiencies are closely linked to both violence perpetration and survivors' psychological symptoms (Maloney *et al*., 2023; Taccini *et al*., 2024; Mora-Pelegrín *et al*., 2025). High rates of violence coexist with inadequate therapy services in Cameroon. According to national data, 32% of women between the ages of 15 and 49 experienced violence in the previous year, and 43% report violence in their lifetime (NIS Cameroon & ICF, 2020, as quoted in Afrobarometer, 2024; Mulat *et al*., 2022). While Douala confronts acknowledged gaps in protection, including more than 200 alleged gender-related deaths (Human Rights Watch, 2026), public attitudes continue to legitimize abuse

(Afrobarometer, 2024). This study looks at how counseling procedures affect married couples' experiences with domestic abuse in Douala IV.

Statement of the Problem

This study considers domestic violence to be an outcome that is influenced by the quality of therapy provided to couples who are already in conflict. Ideally, married couples should have access to professional, confidential counseling that can reduce tensions, rebuild trust, and develop emotional control before the harm is permanent (Flückiger *et al*., 2018). Cameroonian reality falls short of the ideal. According to national survey statistics, a significant proportion of ever-married women have experienced physical, sexual, or emotional partner abuse, with incidence exceeding 50% in some regions, especially among women with inadequate education, economic dependency, or rural living (Mulat *et al*., 2022). In Yaoundé, 78.8% of women reported experiencing emotional violence, which was frequently accompanied by severe financial and physical abuse that had long-term health repercussions. In a recent year, intimate partners killed at least 77 women across the country, a figure that is likely underreported because such violence is frequently minimized or viewed as private (HRW, 2026).

There is no matching data for Douala IV Municipality. This gap is significant: regional literature advocates for stronger counseling interventions (Ani & Katende-Kyenda, 2025), but no study confirms what happens in Douala IV's counseling relationships or whether present tactics succeed. Most therapies are informal, religious, family-mediated, or underfunded, rather than based on validated competencies such as rapport, trust, congruence, active listening, and emotional management (Maloney *et al*., 2023). As a result, practitioners lack local evidence to guide their counseling practice. This study fills that gap by investigating how these five competences affect domestic violence outcomes in married couples in Douala IV Municipality.

Objectives of the Study

The main objective of this study is to examine the influence of counseling services on domestic violence among married couples in Douala IV Municipality.

Specifically, the study seeks to:

i. To assess the effect of rapport on domestic violence among married couples in Douala IV Municipality.
ii. To evaluate how trust influences domestic violence among married couples in Douala IV Municipality.
iii. To determine the effect of congruence on domestic violence among married couples in Douala IV Municipality.
iv. To evaluate the influence of active listening on domestic violence among married couples in Douala IV Municipality.
v. To analyze how emotional management affects domestic violence among married couples in Douala IV Municipality.

Justification of the Study

This research is justified on empirical, practical, and policy grounds. Although global evidence has established that structured, relationship-focused interventions can measurably reduce intimate partner violence (Babcock *et al*., 2024; Green *et al*., 2015), and regional analyzes have repeatedly called for the strengthening of marital counseling as a response to Sub-Saharan Africa's high violence-related marital disruption rates (Seidu *et al*., 2021; Ani & Katende-Kyenda, 2025), almost no Cameroonian study has tested whether these Practically speaking, the results will assist Douala IV counselors and mediators in focusing limited training resources on the relational skills that have been most successfully shown to increase client engagement and lessen conflict. These skills include rapport-building and active listening skills that have been shown to improve therapeutic effectiveness elsewhere (Ramadhani *et al*., 2024; Kercher *et al*., 2025), as well as emotional-regulation coaching that has been shown to mediate recovery from abuse-related distress (Taccini *et al*., 2024). Given evidence that structured, cross-sectoral couple-based counseling has resulted in quantifiable decreases in intimate partner violence in similar West African settings, this is particularly critical (John *et al*., 2022). At the policy level, the study addresses the wider regional trend that connects high rates of marital dissolution in Sub-Saharan Africa to intimate partner violence (Bamiwuye & Odimegwu, 2014), producing locally grounded data that can guide the design of counseling services in Douala IV to be truly effective rather than merely present.

LITERATURE REVIEW

Empirical Review

The therapeutic connection is one of the most researched indicators of counseling results worldwide, however empirical research on counseling specifically for victims of intimate partner violence is still relatively lacking. Although the evidence base is still dispersed across intervention types, a systematic review of counseling interventions for victims of intimate partner violence revealed that structured therapeutic approaches, such as relationship-focused and creative arts-based modalities, produced measurable improvements in victims' psychological wellbeing (Craven *et al*., 2023). In support of this clinical focus, a significant analysis of violence-prevention initiatives in low- and middle-income nations revealed that interventions that combined structural and relational components were more likely than single-component approaches to result in long-term decreases in intimate partner violence (Bacchus *et al*., 2024).

Instead of just recording prevalence, research in Africa has increasingly shifted toward assessing structural and psychosocial solutions. The added value of relational and family-based counseling components was highlighted by a cluster-randomized controlled trial in Burkina Faso that found that combining economic empowerment strategies with a family-focused psychosocial component produced greater reductions in domestic violence than economic intervention alone (Ismayilova *et al*., 2018). Similarly, after a two-year follow-up period, a microfinance-based intervention trial in South Africa showed that organized group involvement that combined relational and economic components decreased women's exposure to intimate partner abuse (Kim *et al*., 2007). This pattern is supported by more comprehensive analyzes of women's empowerment and violence in the area. For

example, a cluster-analytic study using data from the Zimbabwean Demographic and Health Survey revealed that emotional intimate partner violence was still very common among more empowered women, indicating that relational and communicative interventions might be required in addition to economic ones (Bengesai & Derera, 2021).

Studies conducted in Cameroon and throughout Southern Africa indicate ongoing inadequacies in intervention research while reiterating how urgent the issue is. Household conflict and intimate partner violence were found to be significant predictors of child maltreatment in a cross-national analysis of social determinants of child abuse across seven sub-Saharan African countries, indicating the intergenerational consequences of unresolved marital conflict (Dickson *et al*., 2024). Research on legislative and institutional responses to family violence throughout the region found that protective frameworks were poorly translated into accessible support for survivors (*Ryan et al*., 2018). Similarly, ethnographic work conducted in the Eastern Cape of South Africa revealed that community and family mediation structures, while essential to how couples negotiate marital conflict, frequently reinforced rather than challenged patriarchal power imbalances underlying violence (Moore, 2020). While South African research on adolescent exposure to domestic violence further highlights the long-term developmental costs of unresolved marital conflict within households (Rasool, 2022), a more comprehensive continental synthesis of domestic violence research confirms that structured intervention evaluation is still relatively uncommon across African contexts in comparison to prevalence documentation (Narciso & Crespo, 2023).

Conceptual Framework

According to the conceptual framework, rapport, trust, congruence, active listening, and emotional control are separate factors that influence domestic violence. Relational prerequisites for engagement include rapport and trust; in-session counselor competencies that shape engagement quality include congruence and active listening (Kercher *et al*., 2025); and emotional management functions at both the counselor and client levels, converting counseling insights into less conflict outside of sessions (Maloney *et al*., 2023; Taccini *et al*., 2024). These factors are thought to interact in a way that is mediated by socioeconomic position, cultural views, and service access; active listening improves trust, congruence strengthens emotional-regulation instruction, and their sustained combination eventually mediates lower aggression.

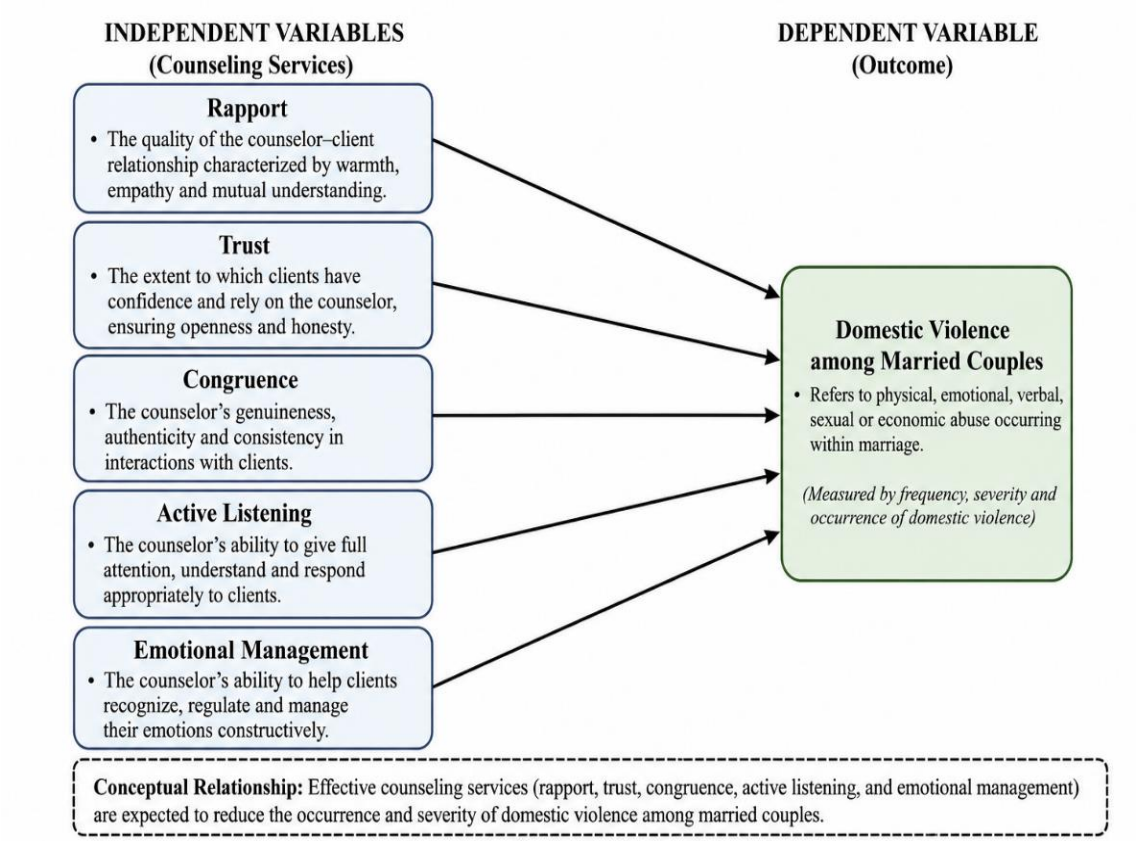

Figure 1: Conceptual Framework
Source: Author's Conception, (2026)

The conceptual framework shows how counseling services and domestic violence among married couples in Douala IV Municipality are predicted to be related. Five aspects are used to quantify counseling services, which make up the independent variable: rapport, trust, congruence, active listening, and emotional management. While trust emphasizes secrecy, competence, consistency, and safety, rapport indicates the caliber of the counselor-client relationship. Congruence relates to the counselor's sincerity, integrity, transparency, and consistency. Giving attention, letting clients speak, mirroring emotions, and asking questions are all components of active listening. The goal of emotional management is to assist couples in managing their emotions and controlling their anger. Domestic violence is a dependent variable that is measured by physical, verbal, emotional, and financial abuse, confrontations, threats, and changes in violence following counseling. These counseling characteristics are expected to have an impact on domestic violence. Thus, the framework makes the assumption that domestic violence can be decreased by competent treatment.

METHODOLOGY

Description of the Study Area

The study was conducted in Douala IV Municipality, one of the six administrative divisions of Douala, Littoral Region of Cameroon. Douala IV Municipality is made up of densely inhabited areas with a mix of formal and informal dwellings, fast urbanization, and a socioeconomically varied population primarily involved in small-scale business, artisanal labor, and trade. In addition to housing several religious, community, and non-

governmental counseling and listening centers that assisted married couples going through marital conflict, the municipality was chosen because it combined high population density with socioeconomic pressures like economic dependency, overcrowding, and restricted access to formal social services that recent Cameroonian research linked to an increased risk of domestic violence (Human Rights Watch, 2026; Mulat *et al*., 2022).

Research Design

The study used a quantitative research methodology with a descriptive cross-sectional survey design. This approach was deemed suitable for studies aiming to establish associations between naturally occurring variables in a defined population because it allowed for the collection of data from a relatively large number of married individuals at a single point in time and allowed for the description, measurement, and statistical testing of the relationships between the counseling process variables (rapport, trust, congruence, active listening, and emotional management) and domestic violence without manipulating any variable (Creswell & Creswell, 2018). The design was also in line with earlier research in Sub-Saharan Africa that modeled the association between intimate partner violence and associated household outcomes using cross-sectional survey data (Bamiwuye & Odimegwu, 2014; Seidu *et al*., 2021).

Population of the Study

The population of this study comprised all married men and women residing in Douala IV Municipality. This broad definition followed standard survey research procedure, which requires the entire collection of units to which findings are meant to generalize to be specified before a sample is drawn from it (Creswell & Creswell, 2017). From this target population, an accessible population was defined on practical and logistical grounds, in line with the principle that an accessible population should remain representative of the target population while being feasible to reach (Cohen *et al*., 2009). The accessible population consisted of married men and women residing in selected neighborhoods of Douala IV Municipality who were present and available during the data collection period, and who had at some point sought or received counseling related to marital conflict whether from a religious institution, a community mediation body, or a non-governmental listening center within the municipality. This restriction was deliberate: because the study examines the effect of specific counseling competencies (rapport, trust, congruence, active listening, and emotional management) on domestic violence outcomes, only individuals with direct exposure to a counseling process were considered capable of responding meaningfully to items addressing these competencies. The accessible population included couples who had experienced counseling of varying quality and structure ranging from informal religious or family-mediated support to more structured interventions thereby ensuring sufficient variation to assess how differences in counseling practice relate to differences in reported outcomes.

Sample Size and Sampling Technique

The sample size was determined using Yamane, (1973) simplified formula for sample size determination, $n = N / (1 + N(e)^2)$, computed at a 95% confidence level and a 5% margin

of error and applied to the estimated population of married adults in Douala IV Municipality. This procedure yielded a minimum sample size of 384 respondents, a figure consistent with the sample sizes recommended by Krejcie and Morgan, (1970) widely used table for determining sample size from a given population, which the researcher rounded upward to 400 respondents to compensate for potential incomplete or unreturned questionnaires. A multi-stage sampling technique was employed, following the procedure recommended for large, geographically dispersed survey populations in which random selection is carried out in successive stages to progressively narrow the sampling frame (Cohen *et al*., 2009).

In the first stage, a simple random sampling technique was used to select a number of quarters within Douala IV Municipality. In the second stage, a systematic random sampling technique was applied to select households within the chosen quarters. In the final stage, married individuals within the selected households were screened for eligibility on the basis of prior exposure to marital counseling whether through a religious institution, a community mediation body, or a non-governmental listening center consistent with the accessible population defined earlier. Where both spouses in a household met this eligibility criterion, one respondent was selected using simple random selection (a coin toss) to avoid selecting both partners from the same household and to preserve the independence of responses. This combination of probability sampling and eligibility screening ensured that the final sample remained both statistically representative of the accessible population and substantively relevant to the study's focus on counseling-related outcomes.

Sources of Data

Only primary data were used in the study. There was no use of a supplementary instrument. A structured questionnaire created specially to record respondents' perceptions of rapport, trust, congruence, active listening, and emotional management within counseling encounters, as well as their experience of domestic violence, was used to collect primary data directly from married men and women in Douala IV Municipality. This method is consistent with survey-based designs in which the questionnaire is the only tool used to generate quantifiable primary data directly from respondents (Creswell & Creswell, 2017).

Validity and Reliability of the Research Instrument

The content validity of the questionnaire was established by aligning every item with the specific objectives of the study and by subjecting the draft instrument to expert review, following the standard procedure for establishing content validity through expert judgment of item-objective congruence (Creswell & Creswell, 2017), after which items considered ambiguous, redundant, or irrelevant were revised or removed. Face validity was further confirmed through a pilot administration of the questionnaire to 30 married individuals in a neighboring municipality who were not part of the final sample, consistent with the recommendation that a pilot sample of about 10% of the intended sample size is adequate for pre-testing a survey instrument (Cohen *et al*., 2009), and whose feedback informed further refinement of the wording and structure of the instrument. The reliability of the instrument was tested using Cronbach's alpha

coefficient (Cronbach, 1951) computed from the pilot data, with each of the six constructs (rapport, trust, congruence, active listening, emotional management, and domestic violence) yielding a coefficient above the conventional threshold of 0.70 generally regarded as indicating acceptable internal consistency for research instruments (Nunnally, 1978; Taber, 2018).

Data Collection Procedure

Before data collection began, an introductory letter and research authorization were obtained and presented to the relevant municipal and quarter-level administrative authorities to secure permission to access respondents. Research assistants were recruited and briefed on the objectives of the study, the content of the questionnaire, and the ethical procedures to be observed, including obtaining verbal informed consent, guaranteeing confidentiality and anonymity of responses, and permitting voluntary withdrawal at any point, in line with standard ethical protocols for research involving human participants on sensitive topics such as domestic violence (World Health Organization, 2024). The questionnaires were administered face-to-face in the selected quarters over several weeks, with each respondent given sufficient time to complete the instrument independently, while research assistants remained available to clarify items where necessary. Completed questionnaires were checked for completeness on the spot before being collected, coded, and entered into a statistical software package for analysis.

Table 1 : Operationalization of Variables

Variable	Type	Indicators / Items	Measurement Scale
Rapport	Independent	Ease of interaction; warmth shown by the counselor; comfort of the couple in the counseling session; mutual liking between counselor and clients	5-point Likert scale (Strongly Disagree - Strongly Agree)
Trust	Independent	Confidentiality of information shared; belief in the counselor's competence; willingness to disclose sensitive marital issues; consistency of the counselor	5-point Likert scale
Congruence	Independent	Genuineness of the counselor; consistency between the counselor's words and actions; transparency during sessions; absence of a professional facade	5-point Likert scale
Active Listening	Independent	Counselor paraphrases and reflects feelings; non-verbal attentiveness; minimal interruption; clarifying questions asked	5-point Likert scale
Emotional Management	Independent	Counselor's composure under tension; skills taught for anger control; ability of couples to regulate emotional reactions after sessions	5-point Likert scale
Domestic Violence	Dependent	Frequency of physical altercations; occurrence of verbal or emotional abuse; economic control; reported	5-point Likert scale

	reduction in conflict episodes after counseling

Source : Author's Conception, (2026)

Methods of Data Analysis

Data collected from the field were coded, cleaned in SPSS, and analyzed using the STATA version 15 with all inferential tests conducted at the 5% (0.05) level of significance. Descriptive statistics, comprising frequencies, percentages, means, and standard deviations, were used to summarize respondents' demographic characteristics and to describe the general distribution of responses across the rapport, trust, congruence, active listening, emotional management, and domestic violence items, consistent with the standard use of descriptive statistics for summarizing the basic features of survey data before inferential testing (Field, 2018). Multiple Correspondence Analysis (MCA) was applied to the categorical survey items in order to explore and visually map the patterns of association between the categories of the counseling process variables and the categories of domestic violence, and to reduce the dimensionality of the categorical data into interpretable dimensions reflecting the underlying structure of the relationships, following the established application of MCA as a technique for analyzing and geometrically representing associations among multiple categorical variables (Greenacre, 2017; Le Roux & Rouanet, 2010).

Weighted mean scores were computed for each Likert-scale item by multiplying the frequency of each response category by its assigned weight, summing these products, and dividing by the total number of respondents, so as to rank the items and determine the overall level of agreement of respondents with statements relating to each counseling process variable, a procedure consistent with the conventional method for aggregating and ranking ordinal Likert-type survey responses (Pallant, 2020). Finally, an Ordinary Least Squares (OLS) multiple regression equation, the standard estimation technique for modelling the linear relationship between a continuous dependent variable and several independent variables (Gujarati, 2012), was estimated to determine the individual and combined effect of the five independent variables on domestic violence. The regression model was specified as follows:

$$\boldsymbol{DV_i = \beta_0 + \beta_1 RAP_i + \beta_2 TRU_i + \beta_3 CON_i + \beta_4 ALI_i + \beta_5 EMM_i + \epsilon_i}$$

Where;

DV represented domestic violence, RAP represented rapport, TRU represented trust, CON represented congruence, ALI represented active listening, EMM represented emotional management, β0 was the constant term, β1 to β5 were the regression coefficients of the respective independent variables, and ε was the error term. The overall significance of the model was assessed using the F-statistic, the explanatory power of the model was assessed using the coefficient of determination (R^2), and the statistical significance of each individual predictor was assessed using its corresponding t-statistic and p-value (Gujarati, 2012).

FINDINGS

Table 2 below shows that women made up the majority of the sample (78.50%) compared to men (21.50%). The respondents were pretty uniformly distributed throughout middle adulthood, with the greatest cluster (27.25%) being between the ages of 38 and 47. This suggests that the sample included married couples rather than those who were just getting married. With more than half having at least a bachelor's degree (56.00% combined across bachelor, master, and doctorate degrees), educational attainment skewed relatively high. This could indicate that better educated populations are more aware of or have easier access to counseling services. No single category dominated the distribution of marriage duration. Self-employment was the most prevalent employment status (30.00%), which is consistent with Douala's informal economy. Every respondent had received counseling, most frequently through professional counseling centers (23.25%) and religious institutions (29.75%), underscoring the ongoing predominance of faith-based support with a significant, if smaller, presence of professional counseling.

Table 2: Socio-Demographic Characteristics of Respondents (N = 400)

Variable	Category	Frequency	Percent (%)
Sex	Male	86	21.50
	Female	314	78.50
Age Category	18-27 years	84	21.00
	28-37 years	97	24.25
	38-47 years	109	27.25
	48-57 years	76	19.00
	58 years and above	34	8.50
Highest Level of Education	No formal education	18	4.5
	Primary education	65	16.25
	Secondary education	93	23.25
	Bachelor's degree	117	29.25
	Master's degree	72	18.00
	Doctorate	35	8.75
Duration of Marriage	Less than 5 years	86	21.50
	5-9 years	88	22.00
	10-14 years	83	20.75
	15-19 years	86	21.50
	20 years and above	57	14.25
Employment Status	Employed	101	25.25
	Self-employed	120	30.00
	Unemployed	102	25.50
	Retired	35	8.75
	Other	42	10.50
Received Counseling	Yes	400	100.00
Place of Counseling	Religious institution	119	29.75
	Community mediation centre	49	12.25
	Non-governmental organization	45	11.25

	Professional counseling centre	93	23.25
	Health facility	64	16.00
	Other	30	7.50

Source : Author's Conception, (2026)

Weighted Mean Scores of Counseling Process and Domestic Violence Items

In table 3 all five rapport items closely clustered around a mean of roughly 2.97-3.00 on a 5-point scale, suggesting that respondents were mainly indifferent to the quality of rapport with their counselors, neither strongly endorsing nor rejecting statements about comfort, warmth, acceptance, and ease of communication. With responses dispersed widely about the midpoint rather than concentrated around it, the comparatively high standard deviations (1.278-1.330) indicate significant diversity in individual experiences and hint to uneven rapport-building throughout counseling meetings in Douala IV Municipality.

Table 3: Assessing Rapport

Statement	Mean	SD	Count
I feel comfortable interacting with the counselor	2.980	1.305	400
The counselor creates a warm atmosphere during counseling sessions	2.998	1.305	400
I feel at ease when speaking with the counselor	2.975	1.321	400
I feel accepted by the counselor during counseling sessions	2.990	1.330	400
I find it easy to communicate with the counselor	2.970	1.278	400

Source : Author's Conception, (2026)

In table 4 below, trust ratings were close to the midpoint of the scale (2.990-3.030), indicating that respondents' confidence in counselor confidentiality, competence, safety, disclosure willingness, and consistency was only moderate. None of these aspects of trust were highly affirmed. Confidentiality received the slightly highest score (3.030), suggesting a somewhat higher level of confidence in privacy compared to other characteristics of trust. Standard deviations continued to be high (1.316-1.348), indicating significant variety in respondents' trust experiences once more. This suggests that counselor practices are inconsistent rather than that Douala IV's counseling services have a consistently weak or good trust atmosphere.

Table 4 : Evaluating Trust

Statement	Mean	SD	Count
The counselor keeps information shared during counseling confidential	3.030	1.324	400
The counselor is competent to handle marital problems	2.998	1.316	400
I feel safe discussing sensitive marital issues with the counselor	2.990	1.338	400
I am willing to disclose personal marital concerns to the counselor	3.007	1.348	400
The counselor behaves consistently during	2.990	1.326	400

counseling sessions			

Source : Author's Conception, (2026)

Additionally, in table 5 congruence measures clustered around the midpoint (2.982-3.030), suggesting that respondents' opinions of counselor sincerity, word-action consistency, openness, honesty, and natural manner were varied and generally neutral. The lowest-ranked item, openness (2.982), was rated lower than honesty and word-action consistency, which scored somewhat higher (3.030 and 3.027), indicating significantly greater judgments of counselor integrity. High standard deviations (1.309-1.359) indicate that respondents' experiences varied greatly, indicating that congruence such as rapport and trust were not consistently displayed in various counseling interactions in Douala IV Municipality.

Table 5: Analysing Congruence

Statement	Mean	SD	Count
The counselor is genuine during counseling sessions	2.998	1.325	400
The counselor's actions are consistent with the counselor's words	3.027	1.331	400
The counselor communicates openly during counseling sessions	2.982	1.359	400
The counselor expresses thoughts honestly during counseling sessions	3.030	1.309	400
The counselor behaves naturally during counseling sessions	2.990	1.353	400

Source : Author's Conception, (2026)

In table 6, the same neutral pattern was seen in the active listening ratings, which ranged only slightly from 2.967 to 3.000. Asking clarifying questions had the lowest score (2.967) and restating crucial information received the highest score (3.000), indicating that counselors were thought to be somewhat more attentive in noting what clients said than in delving further for clarification. Standard deviations continued to be high (1.318-1.370), the highest of the four constructs thus far. This suggests that respondents' perceptions of counselors' listening behaviors nonverbal attentiveness, minimal interruption, and reflective responses appear to be applied inconsistently throughout counseling sessions in Douala IV Municipality.

Table 6 : Assessing Active Listening

Statement	Mean	SD	Count
The counselor restates important information that I provide	3.000	1.340	400
The counselor reflects my feelings during counseling sessions	2.990	1.345	400
The counselor maintains attentive non-verbal behavior while I speak	2.982	1.318	400
The counselor allows me to speak without unnecessary interruption	2.993	1.355	400
The counselor asks questions to clarify information that I provide	2.967	1.370	400

Source : Author's Conception, (2026)

The emotional management scores in table 7 clustered close to the midpoint of the scale, ranging from 2.960 to 3.013. Notably, respondents' self-reported ability to control emotional reactions after counseling scored highest (3.013), indicating that clients perceived modest personal gains in emotion regulation even where counselor calmness and explicit skills-teaching were rated less favorably. In contrast, the counselor's own composure during challenging discussions scored lowest (2.960). The pattern observed across all five constructs significant variability in respondents' experiences, suggesting that emotional management support was inconsistently provided across counseling encounters in Douala IV Municipality was reinforced by the consistently high standard deviations (1.314-1.344).

Table 7 : Evaluating Emotional Management

Statement	Mean	SD	Count
The counselor remains calm when discussing difficult marital issues	2.960	1.335	400
The counselor teaches strategies for controlling anger	2.970	1.328	400
The counselor teaches strategies for managing emotional reactions	2.975	1.322	400
I can control my emotional reactions better after counseling	3.013	1.344	400
I can manage anger better after receiving counseling	2.993	1.314	400

Source : Author's Conception, (2026)

Domestic violence indicators in table 8 clustered tightly around the midpoint (2.955-3.025), suggesting moderate, widespread acknowledgment of physical, verbal, emotional, and economic abuse within marriages. Emotional abuse (3.023) and physical altercations (3.025) scored slightly higher, indicating these forms were marginally more prevalent than others. Notably, the item on reduced violent incidents after counseling scored lowest (2.955), suggesting respondents were least confident that counseling had meaningfully diminished violent behavior, even though perceived reductions in general conflict frequency scored somewhat higher (2.995). High standard deviations throughout (1.294-1.365) reflect substantial variation in respondents' experiences, pointing to uneven levels of both violence exposure and counseling effectiveness across Douala IV Municipality.

Table 8 : Assessing Domestic Violence in Douala IV

Physical violence occurs between spouses in my marriage	3.007	1.365	400
Verbal abuse occurs between spouses in my marriage	3.002	1.333	400
Emotional abuse occurs between spouses in my marriage	3.023	1.312	400
One spouse controls the other's access to money	3.005	1.328	400
Conflicts occur frequently in my marriage	2.993	1.318	400
Physical altercations occur during marital conflicts	3.025	1.317	400
Hurtful words are used during marital disagreements	3.010	1.305	400
One spouse uses threats during marital disagreements	2.998	1.348	400
The frequency of conflicts in my marriage has decreased after counseling	2.995	1.294	400
The frequency of violent incidents in my marriage has	2.955	1.326	400

decreased after counseling			

Source : Author's Conception, (2026)

In table 9, all six constructs demonstrated strong internal consistency, with Cronbach's alpha values ranging from 0.904 (Emotional Management) to 0.962 (Domestic Violence), well above the conventional threshold of 0.70 generally regarded as acceptable for research instruments (Nunnally, 1978; Taber, 2018). Rapport (α = 0.907), Trust (α = 0.918), Congruence (α = 0.921), and Active Listening (α = 0.916) each showed similarly high reliability, indicating that the five items measuring each construct consistently captured the same underlying dimension. The Domestic Violence scale, comprising ten items, returned the highest alpha (0.962), reflecting excellent coherence among its indicators of physical, verbal, emotional, and economic abuse. These results, computed from the Cronbach's alpha coefficient (Cronbach, 1951), confirm that the questionnaire was a dependable instrument for measuring both the counseling process variables and domestic violence outcomes among married couples in Douala IV Municipality.

Table 9: Reliability Test Results

Construct	Number of Items	Average Inter-item Covariance	Cronbach's Alpha	Decision
Rapport	5	1.132	0.907	Reliable
Trust	5	1.221	0.918	Reliable
Congruence	5	1.248	0.921	Reliable
Active Listening	5	1.241	0.916	Reliable
Emotional Management	5	1.151	0.904	Reliable
Domestic Violence	10	1.261	0.962	Reliable

Source: *Computed from survey data, 2026.* ***N = 400.***

Following the application of Multiple Correspondence Analysis (MCA) to reduce the categorical survey items into interpretable dimensions (Greenacre, 2017; Le Roux & Rouanet, 2010), the normalized scores for all six constructs clustered near the midpoint of the 0-1 range, consistent with the neutral tendencies observed in the raw weighted means. Rapport recorded the highest normalized mean (M = 0.564, SD = 0.277), followed by Active Listening (M = 0.559, SD = 0.290) and Domestic Violence (M = 0.533, SD = 0.278), while Trust registered the lowest (M = 0.476, SD = 0.285). Congruence (M = 0.508, SD = 0.283) and Emotional Management (M = 0.516, SD = 0.275) fell between these extremes. The relatively similar standard deviations across all variables (approximately 0.275-0.290) indicate comparable dispersion in respondents' normalized experiences, reinforcing that no single counseling process construct was markedly more consistent or variable than the others in this sample from Douala IV Municipality.

Table 10: Summary of Descriptive Statistics from MCA

Variable	Obs	Mean	Std. Dev.	Min	Max
RAPORT	400	.5638197	.2769431	0	1
TRUST	400	.4762347	.2848355	0	1
CONGRUENCE	400	.5081092	.2832291	0	1
ACTIVE LISTENING	400	.5590168	.2901767	0	1

EMMOTIONAL MANAGEMENT	400	.5162916	.2753042	0	1
DOMESTIC VIOLENCE	400	.5334484	.2782388	0	1

Source: *Computed from survey data, 2026.* ***N = 400.***

The Pearson pairwise correlation matrix in table 11 revealed statistically significant negative relationships between all five counseling process variables and domestic violence (all $p < 0.01$), indicating that stronger rapport, trust, congruence, active listening, and emotional management were consistently associated with lower reported levels of domestic violence among married couples in Douala IV Municipality. Active listening showed the strongest negative correlation with domestic violence ($r = -0.597$), followed closely by congruence ($r = -0.591$) and rapport ($r = -0.572$), while emotional management showed the weakest, though still significant, association ($r = -0.510$). Among the counseling process variables themselves, moderate positive correlations were observed for instance, between congruence and active listening ($r = 0.457$) and between trust and active listening ($r = 0.413$) suggesting these constructs, while conceptually distinct, tend to co-occur within effective counseling encounters, consistent with the framework's assumption that the five variables interact rather than operate independently (Field, 2018; Pallant, 2020).

Table 11: Pairwise Correlation Matrix of Study Variables

Variable	DV	RAP	TRU	CON	ALI	EMM
Domestic Violence (DV)	1.000					
Rapport (RAP)	-0.572***	1.000				
Trust (TRU)	-0.551***	0.344***	1.000			
Congruence (CON)	-0.591***	0.405***	0.388***	1.000		
Active Listening (ALI)	-0.597***	0.351***	0.413***	0.457***	1.000	
Emotional Management (EMM)	-0.510***	0.352***	0.290***	0.333***	0.339***	1.000

Note: * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$. N = 400. Correlations are Pearson pairwise correlations.

Effects of Counseling Services on Domestic Violence in Douala IV

The Ordinary Least Squares regression results in table 12 reveal that all five counseling process variables exert statistically significant negative effects on domestic violence among married couples in Douala IV Municipality. A one-unit increase in rapport is associated with a 0.249-unit decrease in domestic violence ($\beta = -0.2493$, $t = -7.15$, $p < 0.001$), holding other variables constant. This effect was the strongest among the five predictors and is statistically significant at the 1% level, leading to the rejection of the null hypothesis that rapport has no significant effect on domestic violence. Similarly, a one-unit increase in active listening is associated with a 0.239-unit decrease in domestic violence ($\beta = -0.2392$, $t = -6.93$, $p < 0.001$), also significant at the 1% level, resulting in rejection of its corresponding null hypothesis. These two findings align closely with Rogers's (1957) Person-Centered Theory and its contemporary validation through large-scale alliance-outcome meta-analyses (Flückiger *et al*., 2018, 2020; Norcross & Lambert, 2019), which consistently demonstrate that relational warmth and attentive listening are

among the strongest predictors of therapeutic change. The magnitude of this effect further supports Ramadhani *et al*. (2024), who emphasized that the deliberate cultivation of empathy and communication is central to successful counseling outcomes.

Congruence also demonstrated a significant negative effect, with a one-unit increase associated with a 0.222-unit decrease in domestic violence ($\beta = -0.2221$, $t = -6.24$, $p < 0.001$), significant at the 1% level and warranting rejection of the null hypothesis for this construct. This finding directly supports Rogers's (1957) original assertion that genuineness is a necessary condition for constructive change, and reflects the theoretical framework's assumption that congruence strengthens the credibility of a counselor's broader efforts, including emotional-skills teaching (Maloney *et al*., 2023). Trust similarly showed a significant negative relationship with domestic violence, with a one-unit increase producing a 0.211-unit decrease ($\beta = -0.2115$, $t = -6.25$, $p < 0.001$, significant at 1%), again rejecting the null hypothesis. This result reinforces Bordin (1979) working alliance concept, wherein trust in the shared bond between counselor and client predicts positive relational outcomes, and is consistent with evidence from Ibadan, Nigeria, where structured couple-based counseling that fostered trust produced measurable reductions in intimate partner violence (John *et al*., 2022).

Emotional management, while recording the smallest coefficient among the five predictors, remained statistically significant: a one-unit increase is associated with a 0.202-unit decrease in domestic violence ($\beta = -0.2024$, $t = -5.97$, $p < 0.001$, significant at 1%), leading to rejection of the null hypothesis. This finding corroborates Maloney *et al*. (2023) meta-analytic evidence that emotion regulation functions as a protective factor against intimate partner violence perpetration, and aligns with Taccini *et al*. (2024), who found emotion dysregulation mediates the relationship between abuse severity and psychological distress. However, the comparatively modest coefficient echoes Mora-Pelegrín *et al*. (2025), who cautioned that emotional-skills training, while beneficial, does not always translate proportionately into reduced violent behavior, suggesting emotional management may function as a necessary but not singularly sufficient mechanism within the broader counseling process. The constant term ($\beta = 1.1258$, $p < 0.001$) represents the predicted level of domestic violence when all five predictors are held at zero, anchoring the model's baseline.

Collectively, the model explains a substantial proportion of variance in domestic violence, with an R-squared of 0.646, indicating that approximately 64.6% of variation in domestic violence outcomes is explained by the five counseling process variables jointly, and the overall model is highly significant ($F(5, 394) = 143.77$, $p < 0.001$). Diagnostic tests confirm the model's robustness: the Breusch-Pagan test indicates no significant heteroskedasticity ($chi2(1) = 2.10$, $p = 0.1475$), and the Ramsey RESET test shows no evidence of omitted variable bias ($F(3, 391) = 0.47$, $p = 0.7057$), while a mean VIF of 1.37 rules out problematic multicollinearity. These combined findings empirically validate the study's conceptual framework and echo Seidu *et al*. (2021) and Ani & Katende-Kyenda (2025), both of whom called for strengthened marital counseling as a promising avenue for reducing intimate partner violence across Sub-Saharan Africa; the Douala IV results provide localized, quantitative evidence supporting that call, filling the empirical gap identified in the justification of this study regarding the near-total absence of

Cameroonian research linking specific counseling mechanisms to domestic violence outcomes.

Table 12: Regression Analyses (OLS) Results

Domestic Violence (DV)	Coef.	Std. Err.	t	P>t	[95% Conf.	Interval]
Rapport (RAP)	-.2493267***	.0348556	-7.15	0.000	-.3178528	-.1808005
Trust (TRU)	-.2114551***	.0338411	-6.25	0.000	-.2779868	-.1449233
Congruence (CON)	-.2221211***	.035568	-6.24	0.000	-.2920479	-.1521942
Active Listening (ALI)	-.2391818***	.0345245	-6.93	0.000	-.307057	-.1713066
Emotional Management (EMM)	-.2024246***	.0339117	-5.97	0.000	-.2690952	-.135754
_cons	1.125804***	.0238349	47.23	0.000	1.078945	1.172664
Breusch-Pagan / Cook-Weisberg test for heteroskedasticity **Ho: Constant variance** **Variables: fitted values of DV_norm** **chi2(1) = 2.10** **Prob > chi2 = 0.1475** **Ramsey RESET test using powers of the fitted values of DV_norm** **Ho: model has no omitted variables** **F(3, 391) = 0.47** **Prob > F = 0.7057**			Number of obs = 400 F(5, 394) = 143.77 Prob > F = 0.0000 **R-squared = 0.6460** **Adj R-squared = 0.6415** Root MSE = .1666 **Mean VIF=1.37**			

Source: *Computed from survey data, 2026.* ***N = 400.***

Conclusion

This study examined how counseling services influence domestic violence among married couples in Douala IV Municipality, focusing on five counseling process variables: rapport, trust, congruence, active listening, and emotional management. The findings showed that all five variables had statistically significant negative effects on domestic violence, together explaining nearly 65% of the variation in reported violence. Rapport emerged as the strongest predictor, followed by active listening, congruence, trust, and emotional management. This confirms that well-delivered counseling meaningfully reduces domestic violence among married couples in this context. However, weighted mean scores across all constructs clustered near the midpoint with considerable variability, suggesting counseling quality remains inconsistent across Douala IV. Most respondents accessed counseling through religious institutions rather than professional centres, pointing to a largely informal counseling landscape. The study therefore concludes that while counseling holds strong protective potential against domestic violence, this potential is not yet consistently realized in practice across the municipality.

Recommendations

i. Prioritize rapport-building in counselor training, since it showed the strongest protective effect against domestic violence; training programmes should place early and heavy emphasis on warmth, comfort, and ease of interaction between counselors and couples.

ii. Strengthen active listening skills among counselors through structured practice in reflecting feelings, minimizing interruptions, and asking clarifying questions, given its strong association with reduced violence.
iii. Reinforce congruence and genuineness in counselor conduct, ensuring counselors' words and actions remain consistent, as this significantly predicted lower domestic violence levels.
iv. Build and safeguard trust through confidentiality and competence, since trust significantly reduced domestic violence; counselors should be trained and monitored to maintain consistent, confidential, and competent practice.
v. Introduce sustained emotional-regulation coaching for couples, extending beyond single sessions, given emotional management's significant but comparatively modest effect on reducing violence.
vi. Expand and formalize access to structured counseling services, particularly professional centres, given that most respondents currently rely on informal religious or community-based counseling rather than evidence-based professional support.

Contribution

This study makes several original contributions to knowledge. Theoretically, it is among the first in the Cameroonian context to empirically connect the global therapeutic-relationship literature with the domestic violence literature, showing that specific, measurable counseling processes predict violence outcomes rather than counseling as an abstract concept. Empirically, it offers the first quantitative, locally grounded evidence from Douala IV showing the relative strength of five distinct counseling components, with rapport and active listening emerging as the strongest predictors, offering prioritized guidance for training investment. Methodologically, it demonstrates the value of combining Multiple Correspondence Analysis with OLS regression, offering a replicable template for future domestic violence research within Sub-Saharan Africa.

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