

A STATE-WIDE STUDY ON PERCEPTIONS TOWARDS INTIMATE PARTNER VIOLENCE AMONG YOUNG ADULTS ATTENDING PREMARITAL COURSES

WAN SOLIHA WAN MOHD HANAFI¹, TENGKU ALINA TENGKU ISMAIL^{1*},
ANIS KAUSAR GHAZALI², ZAHARAH SULAIMAN³ and AZIAH DAUD¹

¹*Department of Community Medicine, School of Medical Sciences,
Universiti Sains Malaysia, Kubang Kerian, Kelantan*

²*Department of Biostatistic, School of Medical Sciences,
Universiti Sains Malaysia, Kubang Kerian, Kelantan*

³*Department of Women Health and Development, School of Medical Science,
School of Medical Sciences, Universiti Sains Malaysia, Kubang Kerian, Kelantan*

*E-mail: dralina@usm.my

Accepted 22 October 2021, Published online 30 November 2021

ABSTRACT

Intimate partner violence (IPV) is a global health issue. Limited knowledge exists about IPV among young adults as they are in a critical period of transition to adulthood and encounter serious dating and partnerships. This study sought to determine the perceptions and factors associated with perceptions towards forms of IPV. A total of 305 young adults with the mean age of 24 years old, were recruited from premarital courses in Kelantan, using a random sampling method. After obtaining their consent to participate, the participants responded to a self-administered validated questionnaire. Logistic regression analysis revealed that misperceptions towards physical violence are significantly associated with female and high income; misperceptions towards psychological violence associated with female, self-employed and high income, and while misperceptions towards controlling actions related to female and middle income. The results highlight that this issue may due to a lack of education and cultural gender role. There is a need for efforts to accurately target these factors through comprehensive prevention programs to address IPV in this population more effectively.

Key words: Intimate partner violence, perceptions, premarital young adults

INTRODUCTION

Intimate partner violence (IPV) is a severe substantial public health burden. IPV refers to any behavior within an intimate relationship that causes physical, psychological, or sexual harm to those in the relationship, either in current or former spouses (WHO, 2012; Niolon & CDC, 2017). It can start as soon as people start dating or having intimate relationships, often in adolescence. This issue usually becomes a hidden health burden in private domains and receives far less public attention. Historically, it has been viewed as an individual or a family problem (Carson & Worden, 2005).

There are four forms of behaviors in IPV include physical abuse, psychological abuse, sexual abuse,

and controlling actions. Physical violence refers to behavior when a person hurts a partner by slapping, pushing, shoving, dragging, choking, hitting, kicking, and beating. Sexual violence includes sexual assaults and sexual threats, either acts or a non-physical event when the partner does not or cannot give any consent. Psychological violence is any behavior to harm a partner mentally or emotionally either through verbal or non-verbal communication. Controlling behaviors include insists on things being done their way, stalking their movements, prohibiting a person from seeing family and friends, and curbing access to resources, disposing of property, and preventing a person from having employment (WHO, 2012; WHO, 2014; CDC, 2017).

Globally, at least one-third of women reported having physical and or sexual partner violence. A WHO study in 2013 showed that the lifetime

* To whom correspondence should be addressed.

prevalence by age groups among ever-partnered women, the majority of exposure to violence among young women aged less than 20 years old, indicates that violence starts early in relationships nowadays. A survey data from a US study found that around 1 in 7 men and almost double the number of women reported ever suffered severe physical violence from their partner (Smith *et al.*, 2017). Data from the Royal Malaysia Police Department in 2018 showed that the reported violence cases have increased with almost double increment within 15 years period from 2003 until 2017. Kelantan was declared as the third-highest number of domestic violence cases by 12%, after Selangor (14%) and Johor (12.4%) (Royal Malaysia Police Department, 2018).

The adult is the well-known age group associated with IPV. However, the increasing numbers of violence among younger age is alarming and received more attention in recent times (Morgan & Chadwick, 2009). IPV is common in adolescents' and young adults' communities as they begin to have firm relationships. This matter later influences the founding of principles, morals, and standards that will impact their future relationships (Indremaur, 2001; Flood, 2007; Mikton, 2010). Tolerance perceptions towards IPV have been identified as the most crucial risk factor for its occurrence. Young adults' understandings of IPV have rarely been given attention (Burman & Cartmel, 2005; McCarry, 2009). Hence, it is essential to study the young adult's perspective on IPV to identify their level of understanding and judgment.

MATERIALS AND METHODS

Study sample

This cross-sectional study was carried out among premarital young adults registered for premarital courses in Kelantan district religious offices between August and September 2020. Convenience sampling was applied to select the respondents. The inclusion criteria were unmarried young adults aged 18 to 30 and excluded those who do not understand the Malay language. Convenience sampling was used because of its convenience in proximity and accessibility. Before administering the questionnaire, the ethical approval was granted by Universiti Sains Malaysia Human Research Ethics Committee (HREC) (USM/JEPeM/19110807). Single proportion formula was used to calculate the sample size, 71% proportion of young adults have positive perceptions towards IPV, added with 20% estimated non-response rate, end with estimated sample size calculated was 405 (Kisa & Zeyneloglu, 2019).

Survey Procedure

Validated Malay intimate partner violence questionnaire (MY-PAIPVQ) with Cronbach's Alpha values range was 0.817-0.972 and Raykov's Rho values range were 0.613-0.982 was used. The questionnaire was converted into a Google Form questionnaire and informed consent was obtained before the study. As the participants consented to participate in our research, their phone numbers were taken. The Google form questionnaire was sent through the WhatsApp application to minimize the exposure and keep the social distance during this Covid-19 outbreak.

In the online form, the participants answered the socio-demographic data, and a questionnaire consisted of 15 questions regarding their perceptions towards forms of IPV. The questionnaire uses a 5-point Likert scale scoring system. The score for positive statements would be as follows: "strongly disagree" =1, "disagree" =2, "not sure" =3, "agree" =4, "strongly agree" =5; while for negative statements, the score would be reversed. The respondents were categorized into two different categories based on their perceptions score; "negative perceptions" (Perception score < median score) and "positive" (Perception score > median score).

Statistical Analysis

The data analysis was carried out using Statistical Package for the Social Sciences software for Windows Version 25 (SPSS 25). The descriptive findings were presented in frequency, percentage, mean and standard deviation. Factors associated with perceptions towards forms of IPV were identified using simple and multiple logistic analysis. All significant variables in the simple logistic analysis were entered in the multiple logistic regression analysis. Variables with a *P*-value <0.05 were considered statistically significant.

RESULTS

Descriptive findings

A total of 305 out of 405 participants responded and successfully answered the questionnaire, giving a response rate of 75.3%. This is a preliminary result. Descriptive results in Table 1 show the mean age was 24 years old. Among the 305 participants, there was an almost similar ratio between male and female, majority of respondents with secondary educational level (55.7%), non-government servant (36.4%), and low household income (92.1%).

Table 1. Socio-demographic characteristics of the respondents ($n=305$)

Variables	<i>n</i> (%) or Mean (SD)
Age (Mean, SD)	24.34 (3.52)
Gender	
Male	141 (46.2)
Female	164 (53.8)
Education level	
Primary School	6 (7.0)
Secondary School	170 (55.7)
Diploma	76 (24.9)
Degree	49 (16.1)
Master/PhD	4 (1.3)
Occupational	
Government	23 (7.5)
Non-Government	111 (36.4)
Self-Employed	107 (35.1)
Unemployed	64 (21.0)
Household Income	
Low Income	281 (92.1)
Middle Income	21(6.9)
High Income	3 (1.0)

Table 2 demonstrates the prevalence of misperceptions of forms of IPV by premarital young adults in Kelantan, either physical violence, psychological violence, sexual violence, or controlling actions. According to gender, females had more misperceptions than males towards any forms of violence, and the highest misperceptions were towards controlling actions (59.5%). Most of the misperceptions were prevalent among those with secondary educational levels (45.4-55.3%). The non-

government servants had the highest prevalence of misperceptions towards psychological violence by 40.2%, and those with low household income reported most sexual violence (90.7%).

Regression results

Table 3 shows the factors associated with misperceptions towards forms of IPV through simple and multiple logistic regression. The results of simple logistic analysis for perceptions towards physical, psychological violence, and controlling actions found that female gender, educational level, occupational, and household income were significant. For misperceptions towards sexual violence, only female gender and occupational factor were significant.

Furthermore, the multiple logistic analysis demonstrated that the female (Adjusted OR 2.006, 95% CI: 1.221,3.295; $p=0.006$) and high income (Adjusted OR 0.024, 95% CI: 0.001,0.625; $p=0.024$) were significant factors associated with misperceptions towards physical violence. The significant factors associated with misperceptions towards psychological violence were female (Adjusted OR 2.551, 95% CI: 1.428,4.556; $p=0.002$), self-employed (Adjusted OR 0.551, 95% CI: 0.300,1.012; $p=0.050$) and high income (Adjusted OR 0.020, 95% CI: 0.01,0.525; $p=0.019$), while the significant factor associated with misperceptions towards controlling actions were female (Adjusted OR 0.543, 95% CI: 0.321,0.918; $p=0.023$) and middle income (Adjusted OR 0.100, 95% CI: 0.013,3.0.791; $p=0.029$). For the sexual violence, no significant factors associated with its misperception.

Table 2. Misperceptions towards forms of intimate partner violence ($n=305$)

Variables	<i>n</i> (%)			
	Physical Violence	Psychological Violence	Sexual Violence	Controlling Actions
Gender				
Male	85 (40.9)	86 (41.1)	116 (45.1)	83 (40.5)
Female	123 (59.1)	123 (58.9)	141 (54.9)	122 (59.5)
Education level				
Primary School	5 (2.4)	5 (2.4)	6 (2.3)	5 (2.4)
Secondary School	94 (55.3)	94 (45.0)	132 (51.4)	93 (45.4)
Diploma	57 (27.4)	58 (27.8)	67 (26.1)	56 (27.3)
Degree	48 (23.1)	48 (23.0)	48 (15.7)	48 (23.4)
Master/PhD	4 (1.9)	4 (1.3)	4 (1.3)	3 (1.0)
Occupational				
Government	20 (6.6)	20 (9.6)	22 (8.6)	19 (9.3)
Non-Government	82 (39.4)	84 (40.2)	100 (38.9)	81 (39.5)
Self-Employed	66 (31.7)	66 (31.6)	88 (34.2)	65 (31.7)
Unemployed	40 (19.2)	39 (18.7)	47 (18.3)	40 (19.5)
Household Income				
Low Income	187 (89.9)	188 (90.0)	233 (90.7)	184 (89.8)
Middle Income	20 (9.6)	20 (9.6)	21 (8.2)	20 (9.8)
High Income	1 (0.5)	1 (0.5)	3 (1.2)	1 (0.5)

Table 3. Factors associated with misperceptions towards forms of intimate partner violence among premarital young adults in Kelantan (n=305)

Variables	Physical Violence		Psychological Violence		Sexual Violence		Controlling Actions	
	Crude OR (95% CI)	Adjusted OR (95% CI)	Crude OR (95% CI)	Adjusted OR (95% CI)	Crude OR (95% CI)	Adjusted OR (95% CI)	Crude OR (95% CI)	Adjusted OR (95% CI)
Age	1.018 (0.94-1.10)		0.997 (0.92-1.08)		1.004 (0.91-1.11)		0.983 (0.91-1.07)	
Gender								
Male	1	1	1	1	1		1	1
Female	0.457 (0.25-0.85)**	2.006 (1.22-3.29)**	0.442 (0.24-0.83)**	2.551 (1.42-4.56)**	0.512 (0.23-1.13)*		0.443 (0.24-0.81)**	0.543 (0.321-0.918)**
Education level								
Primary	1		1		1	1	1	1
Secondary	5.193 (0.58-46.47)*		5.108 (0.57-45.45)*		54.944 (0.00)	1.675 (0.00)	5.134 (0.58-45.58)*	5.072 (0.57-45.06)
Diploma	2.149 (0.23-21.22)		2.043 (0.22-19.17)		29.826 (0.00)	0.211 (0.00)	2.287 (0.24-21.32)	2.107 (0.23-19.47)
Degree	0.144 (0.01-2.99)*		0.157 (0.01-3.25)*		61.298 (0.00)	0.509 (0.00)	0.153 (0.01-3.16)*	0.124 (0.01-2.52)
Master/PhD	0.00 (0.00)		0.00 (0.00)		0.871 (0.00)	0.216 (0.00)	1.853 (0.08-44.09)	1.852 (0.08-42.89)
Occupational								
Government	0.236 (0.05-1.03)*		0.224 (0.05-0.98)**	1.759 (0.84-3.68)	0.119 (0.02-1.06)*		0.388 (0.09-1.52)*	
Non-Gov	0.530 (0.24-1.18)*		0.457 (0.20-1.02)*	0.286 (0.07-1.06)	0.269 (0.10-0.72)**		0.602 (0.27-1.33)*	
Self-Employed	0.566 (0.26-1.25)*		0.541 (0.25-1.19)*	0.551 (0.30-1.01)**	0.368 (0.15-0.93)**		0.659 (0.30-1.44)	
Unemployed	1		1	1	1		1	
Household Income								
Low Income	1	1	1	1	1		1	1
Middle Income	0.102 (0.01-0.82)**	0.280 (0.024-3.22)	0.101 (0.01-0.82)**	0.213 (0.02-2.68)	0.00 (0.00)		0.098 (0.1-0.79)**	0.100 (0.01-0.79)**
High Income	14.106 (0.35-51.58)*	0.024 (0.01-0.62)**	15.599 (0.38-63.57)*	0.020 (0.01-0.52)**	0.00 (0.00)		14.748 (0.34-62.98)*	13.85 (0.35-53.59)

Note: OR = odds ratio; CI = confidence interval. * $p < 0.25$; ** $p < 0.05$; *** $p < 0.001$. Multicollinearity and interactions were tested and not found in the two separate adjusted models.

DISCUSSION

This paper presents baseline findings of misperceptions towards forms of IPV among premarital young adults in Kelantan, Malaysia. Our results suggest that premarital young adults have multiple misperceptions about IPV. Our study showed that the misperceptions among the premarital young adults towards physical violence (68.19%), psychological violence (68.52%), sexual violence (84.26%), and controlling actions (67.21%).

Misperceptions towards sexual violence were high, possibly because the sexuality issue is a taboo subject among Malay, predominantly the Muslim population, as all the respondents are Muslim (Zeyneloglu *et al.*, 2013). Family privacy and gender role were found to traditionally pose difficulties to premarital young adults in accepting this issue. Studies found that most Muslims originate from cultures that emphasize loyalty and obey their

husband in all matters, and individual behaviors are mainly shaped by group norms (Yoshioka, 2008; Baobaid & Hamed, 2010).

The importance of preventing IPV is being highlighted by this study because psychological violence within relationships may lead to worse situations and become a significant contemplation of physical violence occurrence in future relations (Machado *et al.*, 2014). It was a worry when some harmful psychological behaviors were not considered violent acts such as jealousy, yelling, and restricting resources (Kisa & Zeyneloglu, 2019).

There are no significant relationships between educational level and age with misperceptions towards any form of IPV. These findings are varying with previous studies showing that age and educational level were associated with misperceptions towards IPV. Some studies reported that older young adults were more likely to agree to accept the violence (Mullender *et al.*, 2002; Wang,

2019). According to Uthman *et al.* (2009), younger respondents were significantly more likely to perceive IPV. Antai and Antai (2008) demonstrated that women with lower educational levels were more likely to perceive IPV than women with higher education levels.

Being female was significantly associated with misperceptions towards physical violence, psychological violence, and controlling actions, which shows how patriarchal norms influence violence. The dominant position of men makes men legitimate to use physical violence in their household. At the same time, cultural norms allow men to use violence to maintain control and power in the family (Laisser *et al.*, 2011). This happens when societal norms enable violence to warn their spouses and where men are expected to have the final say in all decision making (UN, 1995; Okenya *et al.*, 2009). However, contradicting the finding by Nabors *et al.* (2006) found that women have good perceptions towards all forms of IPV.

Middle and high income were found to have a significant association with misperceptions toward IPV because of the influence of the power of money. A similar explanation with the Nicaraguan study by Valladers linked IPV to deep-rooted inequality in access to own resources and finances (Valladares, 2005). Contradict with a study in Zimbabwe found that those from low-income families were more likely to accept the violence in a relationship (Hindin, 2003). Even educational level was found insignificant in this study; it is the easiest variable option that policymakers could make any manipulations to help minimize IPV burdens. Our findings suggest that educational role either secondary schools, colleges, or universities need to play an active role in providing educational programs and safe surroundings targeting non-violence relationships. More attention in addressing intimate partner violence and domestic violence through violence prevention activities should be included in the health education courses and campus-wide programming.

The misperceptions towards IPV are essential as they will be grounded to be social norms if left without intervention. It influences the acceptance rules regarding the appropriateness of behavior later on in the future relationship. Researchers have found a strong relationship between violence report cases and misperceptions towards violence and hostility (Holtzworth-Munroe *et al.*, 2000; Taylor & Sorenson, 2004). Educative correctional interventions to normalize misperceptions have been essential for this approach (Neighbors *et al.*, 2010). This outcome may suggest evaluating the effect of the relationship

between perceived IPV norms and intimate partner behavior in the future.

This study is the first state-wide study to understand the perceptions towards IPV among premarital young adults. Moreover, the response rate was quite high (75.3%) despite the sensitive topic and cultural taboo. However, some limitations in this study are noted such as the cross-sectional study design cannot establish the cause and effect relationships between misperceptions towards forms of IPV and independent variables. The current research is insufficient to represent the whole population nationwide as it was done only in Kelantan. Therefore, further studies should include larger sample size and cover a more diverse Malaysian population. Other studies can also be done through face-to-face interviews to reduce bias.

CONCLUSION

Misperceptions towards IPV among young adults are essential to be highlighted. These misperceptions may be due to a lack of education and cultural gender role. Cultural taboos and norms are dominant in shaping individual behavior. Recognition of these factors emphasizes the need for comprehensive prevention programs in schools, mass media interventions, and laws and policies to enhance awareness of IPV and reduce the conceivable bad consequences. To reduce these misconceptions, future researches and rigorous scientific evaluations of interventions should explore the most effective methods in handling this IPV issue among our population, especially among premarital young adults.

ACKNOWLEDGEMENTS

The authors thank the Director-General of Health Malaysia for his permission to publish this paper and the Ministry of Higher Education Malaysia for Fundamental Research Grant Scheme with Project Code: FRGS/1/2020/SKK04/USM/02/4. We would also like to thank all research team members for their contributions and commitment to this study. We also would like to express appreciation to Jabatan Hal Ehwal Islam Kelantan (JAHEIK) for cooperation in this research. Most importantly to all premarital young adults registered for premarital courses in Kelantan for their participation in this survey.

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