ORIGINAL ARTICLE

Prevalence and factors associated with intimate partner violence during Covid-19 pandemic in rural Samarahan, Sarawak

Siti Romahani¹, Md Mizanur Rahman¹

¹Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak, Malaysia; 94300, Kota Samarahan, Sarawak, Malaysia

Corresponding Author Md Mizanur Rahman Email: rmmizanur@unimas.my

Received: 8 December 2021 **Revised:** 22 February 2022 **Accepted:** 26 February 2022 **Available online:** May 2022 **DOI:** 10.55131/jphd/2022/200216

ABSTRACT

The prevalence of intimate partner violence (IPV) has increased since the onset of COVID-19 pandemic. A total of 336 married women were randomly selected and interviewed face-to-face using a structured questionnaire adapted from the World Health Organisation (WHO) multi-country questionnaire. The main objective was to determine the prevalence and associated factors of IPV during the COVID-19 pandemic. The analysis found an increase in IPV prevalence from 10.7% before Movement Control Order (MCO) to 14.9% during MCO. Multivariate analysis (MVA) revealed unemployed partners (AOR = 10.70), smoking partners (AOR = 5.36), partners' previous experience of violence (AOR = 1.05), partners' positive controlling behaviour (AOR = 0.95), and informal social control (AOR = 0.97) appeared to be significant predictors of IPV before MCO. However, the unemployed partners were 15.59 times more likely to perpetrate IPV during MCO. The probability of partners' previous experience of violence, partners' positive controlling behaviour, and informal social control was almost the same as before MCO. The increase in IPV prevalence during the COVID-19 pandemic had an unintended impact, especially in gender-based violence, which requires a comprehensive programme to mitigate the aforementioned situation.

Key words:

intimate partner violence; violence against women; risk factors; COVID-19

Citation:

S. Romahani, Md M. Rahman. Prevalence and factors associated with intimate partner violence during Covid-19 pandemic in rural Samarahan, Sarawak. J Public Hlth Dev. 2022;20(2):214-227 (https://doi.org/10.55131/jphd/2022/200216)

INTRODUCTION

Violence against women is a significant global health issue, where the commonest type is intimate partner violence (IPV)1. IPV is any behaviour within a personal relationship that can cause harm either physically, sexually, or psychologically ^{1,2}. Globally, one in three women experienced physical violence by an intimate partner, with or without sexual violence ¹. In Malaysia, the IPV prevalence ranges between 4.94% and 35.9% 3. The most common type of violence in Malaysia is psychological violence, followed by physical and sexual violence. Overall, 30% of women in a relationship had experienced physical or sexual violence at least once in their lives ^{3,4}. Since the COVID-19 countries worldwide pandemic, implemented social isolation, physical distancing, and stay-at-home policy. Since then, many countries have reported a rise in IPV cases, amounting to a 20% - 40% rise in calls to domestic violence hotlines in Spain and 40% in Brazil 5-7. In Peru, Aguero⁸ estimated a 48% increase in IPV cases since the implementation of the stayat-home policy. Other than the surge of IPV cases, the severity of violence has also heightened during the pandemic ⁶. During the first phase of MCO in Malaysia, a 14% increase in IPV cases was reported through a domestic violence hotline called 'Talian Kasih, '9,10.

The intergenerational pathway of IPV results from interactions between multiple factors at various levels of life ¹¹. Researchers are increasingly adapting the social-ecological approach in understanding the interaction between IPV factors at the individual, relationship, community, and societal levels ¹²⁻¹⁴. Substance abuse like alcohol consumption, illicit drugs, and smoking is frequently associated with IPV ^{12, 15,16}. Alcohol consumption and drug use can cause

impaired judgement and cognitive function of an individual, thus, increasing the likelihood of perpetration 15-17. Women from lower socioeconomic households were more likely to be victims due to financial scarcity ¹⁸. During the pandemic, the prevalence of IPV continues to rise due to disruption in the family economy during lockdown 19. Apart from social and functional isolation, economic instability increases the stress in the relationship during the pandemic. Sharma and Borah ²⁰ have proven that high-stress relationships increase IPV risks by three times compared with low-stress relationships. Moreover, economic uncertainty and social instability also increase alcohol and drug abuse, resulting in a higher risk of perpetration ^{5, 7,} ^{21, 22}. IPV is considered a sensitive issue in Malaysia. The social stigma of reporting violence in an intimate relationship that is deemed to bring shame and social repercussions has silenced the victims. Furthermore, most IPV studies in Malaysia did not include Sabah and Sarawak. Thus, the prevalence of IPV among women in Sarawak remains unknown. Therefore, this study focuses on the IPV prevalence before and during MCO and its associated factors.

METHODS

Setting, sampling, instrument

A cross-sectional, household-based interview was conducted in ten villages in the rural Samarahan, Sarawak, where the study had taken place from October 2020 until August 2021. Only married women aged 18 years and above were included in the study. We excluded those who do not understand English or Bahasa Malaysia, are mentally unsound, divorcees, or separated. The sample size was estimated using the formula $n = (Np(1-p))/(d^2/z^2*(N-1)+p(1-p)) \times NR$, where "N" represents the number of registered married women, "p" represents the estimated prevalence of IPV