

Understanding Patterns of Gender-Based Violence: Victim–Perpetrator Dynamics within a Social-Ecological Framework in Sarawak

Ke Lin Siew, BEcon (Hons)¹, Shirly Siew-Ling Wong, PhD^{1*}, Keng Sheng Chew, PhD², Vanitha A/P Kandasamy, M. Med³

¹Faculty of Economics and Business, University Malaysia Sarawak.

²Faculty of Medicine and Health Sciences, University Malaysia Sarawak.

³Emergency and Trauma Department, Sarawak General Hospital.

DOI: <https://dx.doi.org/10.47772/IJRISS.2025.910000420>

Received: 14 October 2025; Accepted: 19 October 2025; Published: 13 November 2025

ABSTRACT

Gender-based violence (GBV) is a pervasive issue that manifests in various forms that are often influenced by the relationship between the victim and the perpetrator. While intimate partner violence (IPV) is widely recognized, abuse by other family members, such as parents, siblings, or children, also presents serious concerns, particularly within households. Understanding the dynamics between victims and perpetrators is crucial for determining the nature and intensity of violence. This study investigates how the nature of the perpetrator-victim relationship affects the form and severity of GBV, with a focus on cases reported at the One Stop Crisis Center (OSCC) in Sarawak General Hospital. A total of 139 adult victims were surveyed between March 2021 and March 2023 using the World Health Organization's Violence Against Women Instrument (VAWI), which measures psychological, physical, and sexual violence. The analysis revealed that the relationship with the perpetrator significantly influenced the severity and type of violence experienced. Victims of intrafamilial violence were more likely to report experiencing only one form of abuse, whereas those subjected to IPV were more often exposed to multiple forms of violence. Although the demographic factors such as age, marital status, and education level showed some associations with the patterns of abuse, the perpetrator relationship remained the strongest predictor in this study. In fact, these findings highlight the importance of addressing GBV within both intimate and familial contexts. Understanding the dynamics of different relationships can inform more effective prevention strategies and support services that promote safety and resilience for individuals and communities in Sarawak.

Keywords: One Stop Crisis Center (OSCC), Gender-based violence, Sarawak

INTRODUCTION

Gender-based violence (GBV) remains a serious global challenge and a major barrier to achieving gender equality and sustainable development [1], [2]. According to the World Health Organization (WHO), approximately 27 percent of women aged between 15 and 49 have experienced physical and/or sexual violence by an intimate partner at least once in their lifetime [3], [4]. The COVID-19 pandemic further exacerbated this issue, as lockdowns and economic instability contributed to a sharp rise in domestic violence cases. The widespread nature of this violence, occurring behind closed doors and across social classes, led the United Nations to describe it as a “shadow pandemic” [5]. This hidden crisis highlighted the importance of addressing not only the prevalence of violence but also the social, relational, and structural factors that place certain individuals at heightened risk.

Existing research highlights that GBV can take various forms, including psychological, physical, and sexual abuse. These experiences are not uniform; they are often shaped by the nature of the relationship between the victim and the perpetrator. While intimate partner violence (IPV) has received substantial attention in public

health and legal discourse, domestic violence (DV) within family settings, including abuse perpetrated by parents, siblings, or children, remains comparatively underexplored [6]. Understanding how different types of perpetrator relationships influence the severity and form of GBV is especially relevant in Malaysia, where cultural values and legal definitions significantly affect how violence is perceived, reported, and addressed.

For this study, IPV refers to any form of violence within intimate relationships that results in physical, emotional, or sexual harm [7]. This includes violence between current or former spouses or partners, regardless of whether they cohabit or not, and applies to both heterosexual and same-sex relationships. In contrast, Malaysia's Domestic Violence Act [8] extends the definition of DV to include violence perpetrated by any member of the household, such as parents, children, or siblings [9], [10]. This broader category, referred to in the literature as intrafamilial violence (IFV), stems from structural power imbalances and may emerge at any point across the life course [11], [12]. Some scholars view IPV as a subcategory of IFV. However, this study treats them as analytically distinct in order to explore how the source of abuse, whether a partner or a family member, relates to the form and frequency of violence experienced [13].

This research is grounded in the social-ecological model (SEM), which provides a holistic framework for analyzing the multilayered factors that contribute to GBV. According to the SEM, violence does not occur in isolation but is shaped by interacting factors at the individual, relational, community, and societal levels. At the individual level, personal characteristics such as age, education, gender, and marital status influence a person's risk of experiencing violence. Younger individuals may have less life experience and fewer social resources to resist or report abuse. Similarly, those with lower education levels often lack awareness of legal protections or face limited economic independence, making them more vulnerable to prolonged abuse [14], [15].

On the relational level, the specific dynamics between victim and perpetrator are crucial in determining the nature and intensity of violence. Intimate relationships may involve coercive control, dependency, or possessiveness, increasing the risk of repeated and escalating abuse. In contrast, violence within families may result from caregiving stress, generational conflicts, or traditional hierarchies. For example, elder abuse or sibling violence can reflect deeper structural and emotional tensions within families [6], [11], [12]. Marital status can also serve as a proxy for relational complexity, with those in formal or long-term relationships often facing greater challenges in leaving abusive situations due to shared responsibilities, legal ties, or social expectations [15], [16], [17].

At the societal level, broader cultural beliefs, social norms, and legal frameworks play a defining role in how GBV is recognized, reported, and addressed. In Malaysia, cultural ideals such as family honor and filial obedience may discourage victims from disclosing abuse, particularly when the perpetrator is a family member. Additionally, traditional gender roles and expectations related to caregiving and submission can normalize violence or hinder help-seeking efforts [14], [18], [19], [20].

The WHO Violence Against Women Instrument (VAWI) has been widely used to assess IPV and has also been applied, with some modifications, in the study of non-partner abuse. This instrument captures three major types of violence: psychological, physical, and sexual [20]. Previous studies have demonstrated that early exposure to these types of abuse can shape future relationship behaviors and increase the risk of revictimization [21]. However, there remains a gap in the literature regarding how these forms of violence differ depending on whether the perpetrator is an intimate partner or a family member, particularly in the Malaysian context.

To address this gap, the present study investigates how different perpetrator relationships and victim characteristics shape the patterns and severity of GBV reported at the One Stop Crisis Center (OSCC) in Sarawak General Hospital (SGH). Specifically, this study examines the associations between demographic factors (age, gender, marital status, and education), the type of perpetrator (IPV versus IFV), and the number of abuse forms experienced as measured by the VAWI. By applying the social-ecological framework, this research aims to offer a deeper understanding of the layered risks and protective factors that influence GBV outcomes. The findings are intended to inform targeted interventions and policy responses that support victims and promote long-term resilience within communities in Sarawak.

Methods

Procedure

This study employed a cross-sectional survey design using a self-administered questionnaire. Data were collected at the One Stop Crisis Center (OSCC) of Sarawak General Hospital (SGH) over a two-year period, from March 2021 to March 2023. A total of 139 individuals who reported experiences of gender-based violence (GBV) were enrolled. Eligible participants were aged 18 years or older and able to comprehend and respond in either English or Malay. Individuals who were not physiologically stable at the time of recruitment were excluded to ensure ethical and informed participation. Written informed consent was obtained from all participants prior to data collection. Ethical approval for the study was granted by the Malaysian Medical Research and Ethics Committee (MREC), under reference number NMRR-20-1437-54831.

Instrument

The study adopted the World Health Organization's Violence Against Women Instrument (VAWI) as its primary measurement tool [22]. This instrument is widely recognized for its ability to capture the prevalence and severity of different forms of violence. It includes 13 items distributed across three domains: physical violence (6 items), psychological violence (4 items), and sexual violence (3 items). Each item assesses specific acts of abuse experienced by the respondent, allowing for a nuanced analysis of both the type and intensity of GBV. Although originally designed to evaluate intimate partner violence, the VAWI's structure enabled it to be adapted for use in assessing both IPV and intrafamilial violence (IFV) in this study.

Sociodemographic and Relational Variables

This study collected a range of sociodemographic and relational data from participants, including the nature of the relationship with the perpetrator (categorized as intrafamilial violence or intimate partner violence), education level (classified as primary school and below, secondary school, and pre-university and above), marital status (never married or ever married), age group (younger adults, those in early marriage or child-rearing years, midlife adults, and older adults), and gender (female or male).

The nature of the relationship between the victim and the perpetrator plays a crucial role in shaping both the experience and complexity of violence. Research has consistently shown that violence inflicted by someone emotionally or relationally close to the victim such as a partner, spouse, or family member tends to result in more severe psychological trauma and often includes multiple, overlapping forms of abuse. These may include physical, emotional, sexual, and economic violence [7], [23], [24]. Such relationships are frequently characterized by ongoing interaction, power imbalances, emotional dependency, and a foundation of trust, all of which contribute to the persistence and escalation of harm over time [18], [24]. Victims in these situations often face significant barriers to seeking help, including fear of retaliation, social stigma, financial dependence, and shared caregiving responsibilities [18]. Moreover, perpetrators who are family members or intimate partners often exert control in several aspects of a victim's life, making the abuse more pervasive and deeply embedded in the social fabric. Therefore, the nature of the victim-perpetrator relationship is not simply a contextual detail but a core structural factor that strongly influences the likelihood and complexity of victimization.

Education level is another important variable that affects both exposure to violence and the capacity to respond to it. Lower levels of education are often linked to reduced access to resources, limited knowledge of legal rights and available services, and decreased social capital, all of which can increase the risk of experiencing long-term or multifaceted victimization [14], [15]. Individuals with minimal formal education may find it more difficult to recognize abuse, resist it, or seek help, especially in environments where violence is normalized or culturally accepted. Furthermore, lower educational attainment is frequently associated with economic dependence and limited mobility, which can make it harder for individuals to leave abusive relationships. In contrast, higher levels of education have been shown to empower individuals by enhancing personal agency, increasing access to employment opportunities, and improving the ability to negotiate power dynamics within relationships [15]. These factors contribute to a lower risk of experiencing severe or repeated violence. As a result, educational

background not only influences the likelihood of victimization but also affects the type, recurrence, and progression of violence, making it an essential variable in any analysis of socio-demographic influences on GBV.

Marital status is closely linked to patterns of vulnerability in both intimate partner and domestic violence. Empirical studies have demonstrated that individuals who are married, cohabiting, separated, or divorced face a significantly higher risk of experiencing multiple forms of abuse compared to those who are single or never married [15], [16], [17]. These elevated risks are often rooted in complex dynamics, including power imbalances, emotional dependence, social and cultural obligations, and financial entanglement. Individuals who are separated or divorced may also encounter post-separation violence, a period often marked by increased danger as perpetrators seek to reassert control through physical, emotional, or sexual abuse [18], [19]. The legal and emotional bonds associated with marriage or cohabitation can delay help-seeking or leaving abusive situations, thereby increasing the likelihood of ongoing and compounding victimization.

Age group captures both life-stage vulnerabilities and structural conditions that influence the risk and nature of violence. Younger individuals, particularly adolescents and young adults, are more susceptible to polyvictimization due to limited life experience, weaker support networks, and a greater likelihood of engaging in unstable or exploratory relationships [12], [13], [24]. This age group is especially vulnerable to dating violence, peer-related abuse, and sexual coercion, which frequently co-occur. In contrast, older adults may face long-term abuse, particularly in the context of intimate partnerships or caregiving arrangements, where dependency and accumulated stress increase the risk of chronic, multi-form violence [28]. Age, therefore, serves as more than a chronological marker. It signals varying levels of risk that evolve across the life course and influence the form and intensity of violence experienced.

Among the various factors influencing patterns of violence, gender stands out as a foundational determinant. Extensive research has shown that women are disproportionately affected by multiple, overlapping forms of abuse, including physical, sexual, psychological, and economic violence, particularly in intimate and domestic contexts [14], [20], [25]. This disparity is not solely a matter of individual behavior but is deeply rooted in broader structural conditions, such as persistent gender inequalities, harmful societal norms, and entrenched power imbalances that enable and sustain male-perpetrated violence. In many cases, women also encounter greater challenges in seeking protection and accessing justice, which can result in prolonged exposure to abuse and increased severity over time. For these reasons, incorporating gender as a key variable is essential to fully capture the structural disparities that shape victimization. It also ensures that the analysis reflects the broader social and cultural contexts in which gender-based violence occurs.

Data analysis

All data analyses were conducted using the Statistical Package for the Social Sciences (SPSS), Version 27.0. Prior to statistical testing, the dataset was screened for missing values, outliers, and any violations of statistical assumptions. Descriptive statistics were then computed to summarize the characteristics of the sample and to examine the distribution of key variables. To explore the bivariate relationships between victim characteristics and variables related to violence, Pearson's Chi-Square tests were employed. This non-parametric method is well-suited for analyzing associations between categorical variables and is commonly used in social science and public health research to identify distributional differences between independent groups [29]. In cases where expected cell counts were low, Fisher's Exact Test was applied to maintain the precision of the statistical outcomes under small-sample conditions. These tests served as an initial step to identify potential patterns and predictors before proceeding to more complex multivariate analysis. Furthermore, to assess the influence of multiple socio-demographic variables on the categorical outcome variable representing the number of violence types experienced, a Multinomial Logistic Regression (MLR) was utilized. MLR is considered an appropriate analytical method when the dependent variable is categorical and comprises more than two outcome categories. This approach also accommodates both categorical and continuous independent variables, offering flexibility in modeling complex relationships [30]. In the context of this study, the use of MLR enabled the examination of the distinct contribution of each predictor variable while simultaneously accounting for potential interrelationships among them. Moreover, model adequacy of the MLR was assessed using a combination of diagnostic tools, including likelihood ratio tests, pseudo R^2 statistics (Nagelkerke R^2), and overall goodness-of-

fit indicators. Nagelkerke R^2 , although not a direct analogue to R^2 in linear models, is widely accepted in logistic modeling as a proxy for explanatory power [31], and its use in this study adheres to best practices in statistical modeling within social research.

Results

A total of 139 victims of gender-based violence (GBV) participated in the study. Among them, 51 individuals (36.7 percent) reported experiencing intrafamilial violence (IFV), while the remaining 88 individuals (63.3 percent) reported incidents of intimate partner violence (IPV). A detailed breakdown of the participants' sociodemographic characteristics is presented in Table 1.

Table 1. Results of association between victim characteristics and type of perpetrator

Variable	Intrafamilial Violence (n=51)	Intimate Partner Violence (n=88)	p-value
Marital Status			
Never Married	17	5	<0.001***
Ever Married	34	83	
Gender			
Male	12	39	0.733
Female	23	65	
Education Level			
Primary School and Below	13	6	0.009**
Secondary School	27	59	
Pre-university and Above	10	21	
Age			
Younger Adult	9	9	<0.001***
Early Marriage/Child-rearing	9	38	
Midlife	13	30	
Later Life	20	11	

Note. All items were analyzed using Pearson Chi-Square test.

As shown in Table 1, the Pearson chi-square test revealed several significant associations between sociodemographic characteristics and the type of perpetrator relationship. Marital status was significantly associated with the form of GBV reported ($p < 0.001$), with victims who were ever married being more likely to report intimate partner violence (IPV). Education level also showed a significant association with perpetrator type ($p = 0.009$). Participants with primary-level education were more likely to report intrafamilial violence (IFV), while those with secondary or higher education were more likely to report IPV. A significant relationship was further observed between age group and perpetrator type ($p < 0.001$). Younger adults (aged 18 to 24) reported both types of violence at similar rates. However, IPV was more frequently reported among individuals in the early marriage and child-rearing years (25 to 34) and during midlife (35 to 44). Among participants in later life (ages 45 to 73), IFV, particularly in the form of elder abuse, appeared to be more prevalent. In contrast, gender was not significantly associated with perpetrator type ($p = 0.733$). This suggests that in this sample, male and female survivors experienced similar distributions of IPV and IFV.

Table 2. Results of association between violence acts in violence against women instrument (VAWI) and type of perpetrator

Variable	Intrafamilial Violence (n=51)	Intimate Partner Violence (n=88)	p-value
Psychological Violence			
Insulted me in a way that made me feel bad about myself	18	65	<0.001***
Belittled and humiliated me in front of other people	10	41	0.001***
Tried to scare and intimidate me on purpose (e.g., by the way he/she looked at you, by yelling or smashing things)	31	60	0.377
Threatened to hurt me or someone I care about	29	47	0.693
Physical Violence			
Pushed or shoved me	29	69	0.007***
Thrown something at me that could have hurt me	11	36	0.020**
Hit me with his/her fist or with some other object that could have hurt me*	40	72	0.627
Kicked and dragged me and beat me up	9	45	<0.001***
Choked me or burnt me on purpose	1	25	<0.001***
Hurt me with a knife, a gun or some other weapon	8	6	0.094*
Sexual Violence			
Demanded to have sex with me even though I did not want to (but did not use physical force)	0	20	<0.001***
Forced me to have sex against my will by using his/her physical strength (by hitting, holding me firmly or threatening me with a weapon)	0	9	0.026**
Forced me to perform sexual acts that I experienced as degrading and/or humiliating	0	9	0.026**

Note. *Fisher-Exact test was performed for this item as 1 cell (25%) have expected count of less than 5. All items were analyzed using Pearson Chi-Square test.

Following the initial analysis of sociodemographic characteristics and their association with perpetrator type, further investigation was conducted to explore how the severity and specific forms of gender-based violence (GBV) varied between intimate partner violence (IPV) and intrafamilial violence (IFV). This analysis was based on victim responses to the Violence Against Women Instrument (VAWI) and employed Fisher's Exact and Pearson's Chi-Square tests. The findings are summarized in Table 2 and reveal notable differences in the patterns of violence reported across these two contexts. Within the domain of psychological violence, certain forms were significantly more prevalent among IPV survivors. Specifically, verbal insults that undermined self-worth and acts of public humiliation were reported more frequently by those who had experienced IPV ($p = 0.001$). On the other hand, experiences involving intimidation or threats such as shouting, threatening harm, or using fear-based behaviors were reported at comparable rates in both IPV and IFV cases, with no statistically significant difference. More distinct differences emerged in the area of physical violence. IPV victims were significantly more likely to report being pushed ($p = 0.007$), having objects thrown at them ($p = 0.020$), being kicked or beaten ($p < 0.001$),

and experiencing severe acts such as choking or burning ($p < 0.001$). Although the use of weapons was somewhat more frequently associated with IFV, this association did not reach statistical significance. Interestingly, the act of being hit, whether with a fist or object, was reported at similar rates in both IPV and IFV contexts and did not differ significantly between the two groups. In terms of sexual violence, IPV was again more strongly associated with victimization. Reports of coerced sex without physical force ($p < 0.001$), forced sex involving physical strength ($p = 0.026$), and sexual acts perceived as degrading or humiliating ($p = 0.026$) were all significantly more prevalent among those experiencing IPV. These results indicate that sexual violence is overwhelmingly concentrated within intimate partner relationships, with comparatively few incidents reported among victims of intrafamilial abuse.

Table 3. Results of Multinomial Logistic Regression Analysis

Variables		Chi-square	df	p-value
Form of violence				
	Intercept	0.000	0	
	Gender	0.617	2	0.734
	Age Group	3.020	6	0.806
	Marital Status	0.122	2	0.941
	Educational Level	4.686	4	0.321
	Relationship with Perpetrator	15.137	2	< 0.001***
	Likelihood Ratio Tests	0.014***		
	Nagelkerke R ²	0.243		
	Goodness of Fit	$\rho = 0.960$		

The multinomial logistic regression (MLR) model was used to assess the influence of several socio-demographic factors on the number of violence types experienced, categorized as one, two, or three forms of violence. The model as a whole was statistically significant, as indicated by the likelihood ratio test ($\chi^2 = 30.748$, $df = 16$, $p = .014$), suggesting that the predictors, when considered together, provided meaningful differentiation across categories of violence severity. Among the predictors included, the relationship with the perpetrator was the only variable that reached statistical significance ($\chi^2 = 15.137$, $df = 2$, $p < .001$). This underscores the central importance of victim–perpetrator dynamics in shaping the complexity of abuse. Victims who reported violence by intimate partners or family members were more likely to experience multiple overlapping forms of abuse. This result aligns with prior evidence that close relational ties often amplify risks of sustained, multifaceted violence due to emotional dependency, power asymmetries, and repeated access to the victim.

Although other variables, including gender, age group, marital status, and education level, did not yield statistically significant results ($p > .05$), their inclusion in the model remains theoretically and empirically justified. A large body of research demonstrates that these characteristics operate as structural determinants of violence exposure. For example, age and marital status are known to influence vulnerability at different life stages [15], [18], [19], while education has been consistently linked to both protective effects and increased risk under certain circumstances [14], [15]. Gender, likewise, remains a critical factor given the persistent evidence of disproportionate risks faced by women [14], [20], [25]. Although their independent effects were not significant in this sample, these variables contribute to a comprehensive model that reflects the multifactorial nature of gender-based violence. Excluding them would risk oversimplifying the phenomenon and ignoring established pathways documented in previous studies.

The Nagelkerke R² value of 0.243 indicates that the predictors in the model accounted for approximately 24.3 percent of the variation in the dependent variable. This represents a moderate and meaningful level of explanatory power within the context of social and behavioral research [32]. As noted by [33], pseudo-R² values

in logistic regression models are generally modest, even when predictors show strong associations with outcomes, because human behavior and social phenomena are shaped by numerous unmeasured factors. On this basis, the current model can be regarded as both valid and reliable in identifying the key predictors of violence severity. The goodness-of-fit statistic ($\rho = .960$) further confirmed that the model adequately represented the data, supporting the appropriateness of the multinomial logistic regression approach. Most importantly, the results of the MLR analysis reinforced that the relationship with the perpetrator emerged as the strongest and most consistent predictor of violence complexity.

DISCUSSION

The present study examined how sociodemographic characteristics and perpetrator–victim relationships influence the forms and severity of gender-based violence (GBV). Conceptualizing violence as a continuum, from experiencing a single form of abuse to multiple, overlapping forms, our findings suggest that the victim–perpetrator relationship plays a more critical role than demographic profile alone in shaping patterns of victimization. While age, marital status, education, and gender were associated with perpetrator type in the bivariate analyses, their independent effects diminished in the multivariate model. This shift underscores that the dynamics between victim and perpetrator provide the strongest explanatory power for understanding GBV complexity.

From a social-ecological perspective, these findings show that violence does not arise from demographic characteristics alone, but is deeply rooted in the relationships people are embedded in and the broader cultural and social structures that shape those relationships. At the relational level, the type of perpetrator, whether an intimate partner or a family member, emerged as the strongest and most consistent predictor of violence severity. This underscores how closeness, dependency, and ongoing access within intimate or familial bonds can create conditions where abuse is more easily sustained and more difficult to escape. These dynamics, documented across the literature [21], remind us that GBV is not simply an individual experience but a relational and structural problem that reflects the interplay of power, trust, and vulnerability in everyday life.

For intimate partner violence (IPV), the majority of cases in this study involved female victims who were ever married. This reflects deeply entrenched gendered power hierarchies within households, where decision-making authority and financial control often rest with male breadwinners [21]. Such dynamics can foster environments where women have less autonomy and greater vulnerability to coercion and abuse. Interestingly, the results also showed that women with secondary education or higher were more likely to report IPV, a pattern consistent with findings from other studies in Malaysia [23]. Education, therefore, appears to play a complex role. On one hand, it can be protective, as it equips women with greater awareness of their rights and increases access to information and resources that support disclosure [34], [35]. On the other hand, education may also create tension within households where shifting gender roles and expectations challenge traditional norms, potentially escalating conflict and heightening the risk of violence.

In contrast, intrafamilial violence (IFV) was more commonly reported by victims who were never married and had only primary education or below. This pattern suggests that unmarried individuals, particularly younger adults, are more likely to remain in the family home, where dependence on parents or siblings can increase the risk of family-based abuse. Such experiences often carry consequences that extend far beyond the immediate harm. Family violence can disrupt education, limit opportunities for personal development, and create lasting barriers to economic independence. These disruptions frequently translate into long-term disadvantages, such as reduced income and heightened vulnerability to poverty later in life [36]. In this way, IFV is not only an expression of power within the family but also a mechanism that perpetuates inequality across the life course, showing how structural vulnerabilities at both the individual and relational levels intersect to shape enduring consequences.

Age appeared to play an important role in the bivariate analysis, where the chi-square test highlighted how vulnerabilities shift across the life course. Younger adults, many of whom still lived with family members or were just beginning to navigate intimate relationships, faced risks from both intrafamilial and partner contexts [37]. Later in life, abuse was more often reported from children, particularly when ageing parents became

dependent on them for financial or caregiving support, often in the context of chronic illness or disability [28]. These patterns illustrate how relational power and dependency evolve across generations, from parental authority in youth, to partner dominance in adulthood, and finally to child–parent dynamics in older age. However, when age was considered alongside other sociodemographic variables in the multinomial logistic regression model, it no longer emerged as an independent predictor of violence severity. This suggests that while age is associated with patterns of victimization, its effects are better understood through its interaction with relational contexts, especially the type of perpetrator involved.

Besides, gender is often regarded as one of the most important structural determinants of GBV, with women disproportionately affected across almost all contexts [18], [21], [22]. In the descriptive analysis, both men and women in this study reported experiences of IPV and IFV, with no significant differences in distribution across perpetrator type. This suggests that in Sarawak, violence is not limited to one gender alone, and both men and women face risks within intimate and family relationships. However, when gender was included in the multinomial logistic regression model alongside other sociodemographic variables, it did not emerge as an independent predictor of violence severity. This does not diminish its relevance. Instead, it highlights that the impact of gender is best understood through its intersection with relational and structural dynamics. Women may remain more vulnerable within intimate partnerships due to entrenched gender norms, economic dependence, and social expectations, while men who experience violence may face additional stigma that discourages disclosure. These findings emphasize the need for interventions that recognize gender as a critical dimension, not as a stand-alone risk factor but as one that interacts with relationship dynamics and societal structures to shape how violence is experienced and reported.

Ultimately, this study shows that the victim–perpetrator relationship is the most decisive factor shaping the patterns and severity of GBV in Sarawak. While sociodemographic factors such as age, education, and marital status help to frame who may be at risk, their influence becomes most meaningful when viewed through the dynamics of intimate and familial relationships. A social-ecological perspective reminds us that GBV is not an individual problem that begins and ends with a single victim or perpetrator; it is deeply embedded within families, reinforced by community attitudes, and sustained by broader societal structures. Addressing GBV therefore requires more than short-term support for survivors. It demands interventions that actively challenge unequal gender norms, break cycles of coercion and dependency, and build protective spaces within households and communities alike.

CONCLUSION

This study highlights that the relationship between victim and perpetrator is the most important factor shaping the forms and severity of gender-based violence (GBV). The findings demonstrate clear differences between intimate partner violence (IPV) and intrafamilial violence (IFV). While IFV was more often associated with single forms of abuse, IPV was strongly linked to multiple, overlapping forms, particularly severe physical and sexual violence. These results reinforce that the victim–perpetrator relationship is not merely a contextual detail but a central determinant of violence complexity. Individual characteristics such as age, marital status, and education influence vulnerability, but their effects are best understood through their interaction with relational contexts.

Viewed through a social-ecological lens, these findings suggest that GBV is shaped by the interplay of factors across multiple levels, covering individual, relational, family, and societal. At the individual level, education and age intersect with vulnerability, while at the relational level, dependence and power asymmetries create sustained opportunities for abuse. At the societal level, entrenched gender norms, stigma, and cultural expectations continue to silence victims and normalize violence. Effective responses therefore require multi-level strategies that target not only victims and perpetrators but also families, communities, and institutions. Prevention and intervention must be adapted to the relational context of violence, acknowledging that the risks posed by intimate partners may differ fundamentally from those posed by family members.

Despite its contributions, this study has important limitations. First, the analysis was restricted to the primary reported perpetrator, without accounting for situations where victims experienced violence from multiple

perpetrators simultaneously. This may underestimate the complexity of victimization, particularly in cases involving overlapping abuse by both intimate partners and family members. Second, perpetrators within the IFV category were not disaggregated by role (e.g., parents, siblings, or children), which may mask important differences in relational dynamics. Third, the study excluded cases of child abuse and rape as well as victims under 18 years old, limiting the scope of findings to adult victims. Fourth, the sample was drawn exclusively from victims who reported to the One Stop Crisis Center in Sarawak General Hospital, which may not represent unreported cases or those who seek help through other channels. As a result, findings may not be generalizable to all GBV cases in Sarawak or Malaysia. Future research should address these gaps by adopting designs that account for multiple perpetrators, disaggregate intrafamilial categories, and include a broader range of victims, including those who do not report to formal services. Longitudinal studies may also help capture the dynamic nature of violence across the life course.

All in all, this study provides strong evidence that interventions addressing gender-based violence (GBV) in Sarawak must prioritize the victim–perpetrator relationship as a central determinant of violence severity. Recognizing the relational dynamics that underpin both intimate partner and intrafamilial violence is crucial for designing effective responses. Efforts to reduce GBV should therefore combine individual and family-level interventions with broader community engagement and structural reforms that challenge harmful social norms and power imbalances. Hence, we strongly urge both authorities and communities to adopt a multi-level prevention approach guided by the social-ecological framework. Such an approach has the potential to disrupt cycles of abuse, strengthen protective factors across the life course, and contribute to building safer, more resilient communities in Sarawak.

ACKNOWLEDGEMENT

The authors acknowledge the Malaysian Ministry of Higher Education (MOHE) for the Fundamental Research Grant Scheme (Grant no: FRGS/1/2020/SKK06/UNIMAS/01/1) and Universiti Malaysia Sarawak for supporting this project.

REFERENCES

1. Mshelia, I. I. H. (2021). Gender based violence and violence against women in Nigeria: A sociological analysis. *International Journal of Research and Innovation in Social Science (IJRISS)*, 5(8), 674-683.
2. United Nation. (20 August, 2025). Goal 5: Achieve gender equality and empower all women and girls. <https://www.un.org/sustainabledevelopment/gender-equality/>
3. Sardinha, L., Maheu-Giroux, M., Stöckl, H., Meyer, S. R., & García-Moreno, C. (2022). Global, regional, and national prevalence estimates of physical or sexual, or both, intimate partner violence against women in 2018. *The Lancet*, 399(10327), 803-813.
4. World Health Organization (WHO). Violence against women prevalence estimates, 2018: Global, regional and national prevalence estimates for intimate partner violence against women and global and regional prevalence estimates for non-partner sexual violence against women. Geneva; 2021.
5. UN Women. Measuring the Shadow Pandemic: Violence against women during COVID-19. UN Women Data Hub; 2021. <https://data.unwomen.org/sites/default/files/documents/Publications/Measuring-shadow-pandemic.pdf>
6. Livings, M. S., Hsiao, V., & Withers, M. (2023). Breaking the cycle of family violence: A critique of family violence interventions. *Trauma, Violence, & Abuse*, 24(4), 2544-2559.
7. Kadir Shahar, H., Jafri, F., Mohd Zulkefli, N. A., & Ahmad, N. (2020). Prevalence of intimate partner violence in Malaysia and its associated factors: a systematic review. *BMC Public Health*, 20(1), 20(1550), 1-9.
8. Domestic Violence Act 1994. (Act 521). (Malaysia) <https://lom.agc.gov.my/act-detail.php?type=principal&lang=BI&act=521>
9. Stevković, L. (2022). Victim or abuser: Victimization by domestic violence as a predictor of violent behaviour of juveniles towards family members. *Društvena istraživanja: časopis za opća društvena pitanja*, 31(4), 619-638.

10. Tharshini, N. K., & Hassan, Z. (2025). The prevalence of sibling violence among emerging adults in Malaysia. *Journal of Aggression, Conflict and Peace Research*, 17(2), 77-89.
11. Mota, R. S., Gomes, N. P., Estrela, F. M., Silva, M. A., Santana, J. D. D., Campos, L. M., & Cordeiro, K. C. C. (2018). Prevalence and factors associated with experience of intrafamilial violence by teenagers in school. *Revista Brasileira de Enfermagem*, 71(3), 1022-1029.
12. Perkins, S. C., Cortina, K. S., Smith-Darden, J. P., & Graham-Bermann, S. A. (2012). The mediating role of self-regulation between intrafamilial violence and mental health adjustment in incarcerated male adolescents. *Journal of Interpersonal Violence*, 27(7), 1199-1224.
13. Boonyanant, N., & Swords, L. (2025). A Systematic Review of the Psychosocial Mechanism Underlying the Pathway from Intra-Familial Victimization in Childhood to Intimate Relationship Violence in Adolescence and Adulthood. *Trauma, Violence, & Abuse*, 1-14.
14. Abramsky, T., Watts, C. H., Garcia-Moreno, C., Devries, K., Kiss, L., Ellsberg, M., ... & Heise, L. (2011). What factors are associated with recent intimate partner violence? Findings from the WHO multi-country study on women's health and domestic violence. *BMC public health*, 11(1), 109.
15. Peraica, T., Kovačić Petrović, Z., Barić, Ž., Galić, R., & Kozarić-Kovačić, D. (2021). Gender differences among domestic violence help-seekers: socio-demographic characteristics, types and duration of violence, perpetrators, and interventions. *Journal of family violence*, 36(4), 429-442.
16. Rezey, M. L. (2020). Separated women's risk for intimate partner violence: A multiyear analysis using the national crime victimization survey. *Journal of interpersonal violence*, 35(5-6), 1055-1080.
17. Krebs, C., Breiding, M. J., Browne, A., & Warner, T. (2011). The association between different types of intimate partner violence experienced by women. *Journal of Family Violence*, 26(6), 487-500.
18. Vatnar, S. K. B., & Bjørkly, S. (2012). Does separation or divorce make any difference? An interactional perspective on intimate partner violence with focus on marital status. *Journal of family violence*, 27(1), 45-54.
19. Spearman, K. J., Hardesty, J. L., & Campbell, J. (2023). Post-separation abuse: A concept analysis. *Journal of advanced nursing*, 79(4), 1225-1246.
20. Wilson, J. K. (2019). Cycle of Violence. *The Encyclopedia of Women and Crime*.
21. Rauf, S. H. A., & Ayob, N. (2020). The experience of domestic violence on married person in Malaysia. *Psychology and Education Journal*, 57(9), 2211-2215.
22. Oon, S. W., Shuib, R., Ali, S. H., Endut, N., Osman, I., Abdullah, S., & Ghani, P. A. (2016). Exploring the coping mechanism of women experiencing intimate partner violence in Malaysia. *IJASOS-International E-journal of Advances in Social Sciences*, 2(5), 549-553.
23. Nybergh, L., Taft, C., & Krantz, G. (2012). Psychometric properties of the WHO Violence Against Women instrument in a male population-based sample in Sweden. *Bmj Open*, 2(6), 1-7.
24. Kidman, R., & Kohler, H. P. (2020). Emerging partner violence among young adolescents in a low-income country: Perpetration, victimization and adversity. *PLoS One*, 15(3), 1-16.
25. World Health Organization (WHO). Multi-country study on women's health and domestic violence against women: Initial Results on Prevalence, Health Outcomes and Women's Responses. Geneva; 2005.
26. Ford, J. D., & Gómez, J. M. (2015). The relationship of psychological trauma and dissociative and posttraumatic stress disorders to nonsuicidal self-injury and suicidality: A review. *Journal of trauma & dissociation*, 16(3), 232-271.
27. Sauber, E. W., & O'Brien, K. M. (2020). Multiple losses: The psychological and economic well-being of survivors of intimate partner violence. *Journal of interpersonal violence*, 35(15-16), 3054-3078.
28. Bidin, A., & Mohd Yusoff, J. Z. (2015). Experience of Domestic Abuse among Malaysian Elderly. *Pertanika Journal of Social Sciences & Humanities*, 23, 107-118.
29. Field, A. (2018). *Discovering statistics using IBM SPSS statistics* (5th ed.). Sage.
30. Hosmer, D. W., Lemeshow, S., & Sturdivant, R. X. (2013). *Applied logistic regression* (3rd ed.). Wiley.
31. Menard, S. (2002). *Applied logistic regression analysis* (2nd ed.). Sage.
32. Smith, T. J., & McKenna, C. M. (2013). A comparison of logistic regression pseudo R² indices. *Multiple Linear Regression Viewpoints*, 39(2), 17-26.
33. Hu, B., Shao, J., & Palta, M. (2006). Pseudo-R² in logistic regression model. *Statistica Sinica*, 16(3), 847-860.
34. Weitzman, A. (2018). Does increasing women's education reduce their risk of intimate partner violence? Evidence from an education policy reform. *Criminology*, 56(3), 574-607.

-
35. Fasasi, M. I. (2020). Personality Trait and Attitude towards Domestic Violence among Currently Married Women in South-West Nigeria. *International Journal of Research and Innovation in Social Science*, 4(12), 476-480.
 36. Klencakova, L. E., Pentaraki, M., & McManus, C. (2023). The impact of intimate partner violence on young women's educational well-being: A systematic review of literature. *Trauma, Violence, & Abuse*, 24(2), 1172-1187.
 37. Hanafi, W. S. W. M., Ismail, T. A. T., Ghazali, A. K., Sulaiman, Z., & Daud, A. (2022). Factors associated with attitudes towards rejecting intimate partner violence among young adults in Malaysia. *International Journal of Environmental Research and Public Health*, 19(9), 5718.