



## **Nursing Students' Attitudes Toward Intimate Partner Violence and the Influencing Factors**

### Hemşirelik Öğrencilerinin Yakın Partner Şiddetine Karşı Tutumları ve Etkileyen Faktörler

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## NURSING STUDENTS' ATTITUDES TOWARD INTIMATE PARTNER VIOLENCE AND THE INFLUENCING FACTORS

### ABSTRACT

**Aim:** The increasing incidence of violence is an important public health problem. Violence against women is increasing day by day. Most of this violence is intimate partner violence. In this context, nursing students' attitudes toward intimate partner violence and their experience with intimate partner violence are very important. The aim of this study was to determine the factors influencing the attitudes of nursing students toward intimate partner violence.

**Method:** The study was a descriptive-correlational design. The data were collected by using the Personal Information Form and Intimate Partner Violence Attitude Scale. In the analysis of the descriptive research statistics, the Pearson correlation, Kruskal-Wallis, Mann-Whitney-U and Binary logistic regression tests were used.

**Results:** It was found that 11.4% of the female students and 8.5% of the male students encountered intimate partner violence; of these students, 6.7% experienced physical, 5.2% experienced psychological, 4.4% experienced social, 2.1% experienced sexual and 1.5% experienced economic and digital intimate partner violence. It was found that nursing students whose mothers had attained a higher education level, who were exposed to domestic violence or who witnessed violence adopted a strong attitude against intimate partner violence.

**Conclusion and Suggestions:** This study emphasizes the necessity of increasing awareness of nursing students towards intimate partner violence and other types of violence, of adding violence as a compulsory course in the curriculum, and learning about legal responsibilities.

**Keywords:** Adolescents; Dating Violence, Flirt Violence, Intimate Partner Violence, Nursing Students.



## HEMŞİRELİK ÖĞRENCİLERİNİN YAKIN PARTNER ŞİDDETİNE KARŞI TUTUMLARI VE ETKİLEYEN FAKTÖRLER

### ÖZ

**Amaç:** Şiddet olaylarının giderek artması önemli bir halk sağlığı sorunudur. Kadına yönelik şiddet her geçen gün artmaktadır. Bu şiddetin çoğu yakın partner şiddetidir. Bu bağlamda hemşirelik öğrencilerinin yakın partner şiddetine karşı tutumları ve yakın partner şiddetiyle yaşadıkları deneyimler oldukça önemlidir. Bu çalışmanın amacı, hemşirelik öğrencilerinin yakın partner şiddetine yönelik tutumlarını etkileyen faktörleri belirlemektir.

**Yöntem:** Araştırma tanımlayıcı-ilişki arayıcı tiptedir. Araştırmanın verileri Kişisel Bilgi Formu ve Yakın Partner Şiddeti Tutum Ölçeği kullanılarak toplandı. Araştırmanın tanımlayıcı istatistiklerinin analizinde Pearson korelasyonu, Kruskal-Wallis, Mann-Whitney-U ve Binary lojistik regresyon testleri kullanıldı.

**Bulgular:** Kız öğrencilerin %11.4'ünün, erkek öğrencilerin ise %8.5'inin yakın partner şiddetiyle karşılaştığı; bu öğrencilerin %6,7'si fiziksel, %5,2'si psikolojik, %4,4'ü sosyal, %2,1'i cinsel ve %1,5'inin ekonomik ve dijital şiddet yaşadığı saptandı. Annesi eğitim düzeyi yüksek olan, aile içi şiddete maruz kalan veya şiddete tanık olan hemşirelik öğrencilerinin yakın partner şiddetine karşı güçlü bir tutum sergiledikleri saptandı.

**Sonuç ve Öneriler:** Bu çalışma, hemşirelik öğrencilerinin yakın partner şiddeti ve diğer şiddet türlerine karşı farkındalıklarının artırılması, şiddetin müfredata zorunlu ders olarak eklenmesi ve yasal sorumlulukların öğrenilmesi gerekliliğini vurgulamaktadır.

**Anahtar Kelimeler:** Ergenler, Flört Şiddeti, Yakın Partner Şiddeti, Hemşirelik Öğrencileri.



### INTRODUCTION

The increasing incidence of violence is an important public health problem. While violence toward women and children has the highest focus, violence among close partners is the most common type of violence experienced by young people, according to reports (World Health Organization [WHO], 2017). Intimate partner violence (IPV), which is also called flirt violence or dating violence, includes such control behaviors as physical aggression, verbal violence, psychological abuse, forced sexual intercourse and other sexual violence types, as well as isolation of the

individual from family and friends and economic pressure. All over the world, nearly one-third (30%) of women who have been in a relationship report that they have experienced forms of physical and/or sexual violence committed by their intimate partner (WHO, 2017). The studies abroad, the rate of at least one instance of physical and/or sexual violence experienced by young people in their lifetimes was between 15 % and 71 % (De Puy et al., 2014; Temple et al., 2013).

As it is all over the world, violence is also a societal problem in Turkey. In recent years, studies in Turkey show that the increase in visual stimuli, such as that in violent movies, series, and digital games, inadequate socioeconomic opportunities, education and culture influenced the increase in violent cases (Gurhan, 2017; Kizmaz, 2006). Considering the impact of violence on culture, incidents of violence in Turkish society are frequently observed due to ideas such as men are responsible for the honor of women, the patriarchal society is the ruling or power owner, the use of violence is a disciplinary tool (Boyacioglu, 2016; Gurhan, 2017). The most common form of violence is domestic violence against women and children by men. However, the frequency of intimate partner violence has increased significantly in recent years (Turkish Statistical Institute [TSI], 2017). According to studies, one in every two women experienced violence from their male partner in Turkey; according to TSI reports, on average, 4 in 10 women have experienced male violence (Hatipoglu, 2010; TSI, 2017). In three studies that were focused on the IPV experienced by college students, it was reported that the rate of IPV increased from 18 % to 50 % between 2010 and 2016 (Hatipoglu, 2010; Iftar, 2016; Yildirim, 2016).

Studies have shown that the attitude toward IPV, which has more than 50 defined risk factors, is an important factor related to both the activation of IPV and mistreatment at an individual level. Men who believed that violence against their wives was an acceptable behavior increased their use of violence. It has been reported that women who believe that it is normal for men to use violence against themselves are more likely to be subjected to violence (WHO, 2010). Although there are many Studies on IPV, studies regarding the perception and attitudes surrounding IPV are limited. Although studies have revealed the relationship between the attitudes toward IPV and certain factors, studies that focus on the relationship of these complex factors are rare.

Previous studies have linked attitudes toward IPV to individual sociodemographic variables, such as education, gender, age, and place of residence. Although there are inconsistent findings considering the factors affecting attitudes toward IPV, the main conclusions of both theoretical and empirical studies highlight the possibility of accepting IPV against women and young people living in rural areas where the education level is low (Speizer, 2010; Wang, 2016). In this context, it is believed that studies should be conducted to determine the factors that are affecting the attitude toward and perception of IPV among young people with the same level of education.

Intimate partner violence is more common during late adolescence when flirting behavior increases; this violence leads to several health problems. Among adolescent victims of IPV, studies have shown an association between dating violence and health problems, such as depression; suicide ideation and/or attempts; eating disorders; smoking, alcohol and drug use; contraction of a sexually transmitted disease; having multiple sex partners; pregnancy; and diminished quality of life (De Puy et al., 2014; Temple et al., 2013).

Nurses are an important communication channel for identifying and assisting IPV victims because they are often the first points of contact within the health system. Nurses often encounter IPV cases in occupational health, school health, or clinical areas. Nurses may be a suitable resource to recognize and refer women to care and support, which is important to reducing overall harm and violence (Sawyer et al., 2019; Sundborg et al., 2017). Therefore, nurses' attitudes toward IPV and their experience of violence are of great importance. It is also believed that nursing students may similarly experience intimate partner violence; their history of violence directed at them and their attitude toward violence may affect their professional approach to the violence that they may encounter in the course of their professional lives (Gomez-Fernandez et al., 2017). In addition, the number of male nursing students has also increased significantly in the last 20 years in Turkey (Arslan & Alkan, 2016). The increasing number of male nurses who will need to respond to IPV most makes it important to investigate the experience and attitudes of IPV in nursing students. Determining the attitude and behavior against flirt violence and reinforcing positive attitudes are important in providing positive direction to negative attitudes. This view is particularly important for professional groups, such as nurses, who bear the responsibility of direct interference with people (Terzioglu et al., 2016).

In Turkey, "violence" and "forensics" elective courses have been included in the curriculum in certain nursing faculties. In these courses, the students learn the legal procedures that should be followed in IPV and other violence cases. In addition, the definition and understanding of psychological and physical problems originating from IPV, prevention of IPV victimization, early diagnosis, care and rehabilitation are important skills that should be acquired at graduation. However, these courses are not included in the compulsory curriculum. In this context, it is considered important to determine nursing students' attitudes toward IPV and the factors affecting these attitudes and to make the "violence" course compulsory in the course curriculum of the students. In addition, it has been determined that there are limited number of studies examining nursing students' encounters with IPV and their attitudes towards IPV in Turkey (Iftar, 2016; Yildirim, 2016). Intimate partner violence cases are increasing each day rapidly, making this topic quite important to investigate in Turkey (Iftar, 2016; Yildirim, 2016). In this context, the aim of this study was to determine the incidence and encounter of IPV, the attitude toward IPV and the factors affecting these parameters.

The following research questions were addressed in this study:

1. Research Question 1: What is the prevalence of IPV among nursing students?
2. Research Question 2: What are the attitudes of nursing students toward IPV?
3. Research Question 3: Which factors affect the attitudes of nursing students toward IPV?
4. Research Question 4: What are the predictors of nursing students' attitudes toward IPV?

## MATERIALS AND METHOD

**Type of Research:** This study was descriptive and correlational.

**The Universe and Sample of the Research:** The population of the research consisted of 1154 students studying at Istanbul University-Cerrahpasa Florence Nightingale Faculty of Nursing in the academic year 2017-2018. It was planned to reach the whole population of the study, but only 521 students agreed to participate in the study, and the study was performed with the participation of a sample of 521 (45.15%) nursing students. This study was conducted between February 2017 and March 2017. All participants were informed of the study content, and following their consent to participate, questionnaire forms were provided. Before the questionnaire was conducted, participants were assured that all the information recorded on the forms would remain confidential and would not be shared with third parties. Being 18 years of age or older, being a nursing student, volunteering to participate in the study, being at school on the days of the research not having a health problem that would prevent participation in the study constituted the inclusion criteria of this study. Being 18 years of age or younger, not volunteering to participate in the study, not being at school on the days of the research having a health problem that would prevent participation in the study constituted the exclusion criteria of this study.

**Data Collection (Data Collection Tools):** Data were obtained using the Participant Information Form and the Intimate Partner Violence Attitude Scale (IPVAS).

**Participant Information Form:** Participant Information Form consisted of 21 multiple-choice questions to determine the personal characteristics, family relations and violence encounters of the participants.

**Intimate Partner Violence Attitude Scale:** The Intimate Partner Violence Attitude Scale (IPVAS) was developed by Terzioglu et al. (2016) to measure individuals' attitudes towards IPV. The scale consists of five violence subscales (general

violence, physical violence, emotional violence, economic violence and sexual violence) and has a five-level Likert scale for responses ranging from 1 (disagree) to 5 (strongly agree) A higher average score on the scale indicates a strong attitude that does not support IPV. The calculated Cronbach alpha internal consistency coefficient of the scale was 0.91, and the Cronbach alpha internal consistency coefficients of the subscales were 0.72 and 0.85. After exploratory factor analysis, the validity of the five-subscale structure, which explained 53.15% of the total variant, was confirmed using confirmatory factor analysis ( $\chi^2/df < 4-5$ , TLI  $> 0.90$ , CFI  $> 0.90$ , RMSEA  $< 0.08$ , SRMR  $< 0.10$ , NFI  $> 0.90$ , GFI  $> 0.90$ ) (17). The Cronbach alpha value of the scale was 0.84 for this study.

**Ethical Considerations:** Ethics committee approval was received from the Ethics Committee of Social and Humanities, numbered 27/04/2017-161204. Additionally, approvals were obtained from the Nursing Faculty administration.

**Data Analysis:** The data were analyzed using SPSS software package version 21.0 (IBM Corp., Armonk, NY). Descriptive statistics (percentage, mean, standard deviation, minimum and maximum) were used to summarize the demographic data and to determine the exposure to IPV. The data were tested for normality analysis using the Kolmogorov–Smirnov test. Since the data did not show a normal distribution, the relationship between the dependent variable of the study (IPV attitude scale scores) and the independent variables (socio-demographic characteristics and the violence they experienced) was examined using the non-parametric Kruskal-Wallis and Mann-Whitney tests. In addition, a binary logistic regression model with a backward stepwise procedure was performed by performing advanced analysis to identify the nursing students' attitudes toward IPV. Six different regression models were developed that included the scores of the total IPVAS and its subscales. The scores of each subscale and the total IPVAS were determined as the dependent predictors, and a total of 15 characteristics of nursing students were determined as the independent predictors. The median values of the dependent predictors were calculated as the cut-off scores of the dependent predictors. Additionally, odds ratios (ORs) and 95% confidence intervals (CIs) were calculated for each predictor. The significance was set at  $p < 0.05$ , and the CI and confidence interval were estimated at the 95% level (Nunnally & Bernstein, 1994).

## RESULTS

### Sociodemographic Characteristics

It was found that 89.1% of the participants were female and 11.8% were male, 97.7% of the participants were single, and 2.3% were married. The mean age of the sampling group was  $20.60 \pm 1.52$  years. According to the students' statements, 74% lived in a city, 15% lived in small towns, and 10.2% lived in villages; 38% lived

with their family, and 62% lived in dormitories or with their friends. Regarding the education level of their parents, 58.2% of the mothers and 45.1% of the fathers of the students were educated to primary school level.

### History of IPV and Violence Among the Nursing Students

It was found that 16.5% of the students had been exposed to violence by their families, and that 24.6% had witnessed violence. Also, 10.4% of the students who had an intimate partnership had been exposed to IPV (11.4% of females; 8.5% of males): 83.3% of the students had not experienced violence, and the remaining 6.3% did not reply. The violence to which the students had been exposed was physical violence in 6.7%, psychological violence in 5.2%, social violence in 4.4%, sexual violence in 2.1% and economic and digital violence in 1.5%. In addition, 6.5% of the students reported that they had used violence during their relationship. A total of 1.4% of the females and 3.6% of the males reported that they had committed IPV. The types of violence committed were psychological violence (2.1%), physical violence (1.9%), social violence (0.8%) and sexual violence (0.4%) (see Table 1). (Table 1 is here in Results section).

**Table 1.** History of IPV and Violence of Nursing Students (N=521)

		N	%
<b>Did you experience IPV in your life?</b>	Yes	54	10.4
	No	433	83.3
Type of Violence	Physical V.	35	6.7
	Psychological V.	27	5.2
	Social V.	23	4.4
	Sexual V.	11	2.1
	Economic	8	1.5
	Digital	8	1.5
		34	6.5
<b>Did you IPV in your relationship?</b>		400	76.8
Type of Violence	Physical V.	10	2.1
	Psychological V.	11	1.9
	Social V.	4	0.8
	Sexual V.	2	0.4
	Economic	-	-
	Digital	-	-



If you were exposed to violence, did you apply to the security forces?	Yes	3	.6
	No	173	33.2
Are you exposed to any kind of violence in your family?	Yes	86	16.5
	No	434	83.3
Are you witnessing any kind of violence in your family?	Yes	128	24.6
	No	383	73.5
Is violence a way of looking for a right?	Absolutely Agree	15	2.9
	Partially Agree	53	10.2
	Strongly Disagree	444	85.2

### Attitudes of the Nursing Students Toward IPV

The total mean score of the IPVAS was  $4.46 \pm 41$  (1 to 5). Regarding the subscales, the mean score of physical violence was  $4.65 \pm 52$ , the mean score of general violence was  $4.64 \pm 54$ , the mean score of sexual violence was  $4.56 \pm 63$ , the mean score of emotional violence was  $4.34 \pm 60$ , and the mean score of economic violence was  $4.06 \pm 66$ . Among the 28 IPVAS items, the three items with which the nursing students most disagreed were the following: Item 28, "Sexual acts can only be the man's right during flirting", Item 6 "Males may hit their girlfriends whenever necessary" and Item 8 "Males who use physical violence (slapping, kicking, hitting, etc.) are more attractive". The three items with which the nursing students least disagreed were the following: Item 17 "Girlfriends and boyfriends cannot interfere in the other's money spending", Item 11 "Men should change their behavior in order to please their girlfriends", and Item 20 "Girlfriends and boyfriends should know the passwords for each other's bank cards" (see Table 2) (Table 2 is here in Results section).

**Table 2.** Attitudes of Nursing Students Towards IPV (N=521)

	Mean	SD
<b>General IPV</b>	4.64	.54
1. Threatening can be a tool for the continuation of the girl/boy friendship	4.72	.67
2. The presence of violence in the girl-boy relationship indicates the absence of mutual respect	4.18	1.33
3. There can sometimes be violence in the girl/boy relationship	4.79	.59
4. Violence brings order into the girl/boy relationship	4.76	.74
5. Violence in the girl/boy relationship should be considered as normal	4.76	.75
<b>Physical IPV</b>	4.65	.52
6. Men can heat their girlfriends whenever necessary	4.85	.49
7. Girls can heat their boyfriends whenever necessary	4.63	.87

8. Men committing physical violence (slapping, kicking, hitting etc.) are more attractive	4.83	.58
9. Ignorance of ethical principles can be a reason for physical violence in the girl/boy relationships	4.44	.98
10. Mild mutual violence can be acceptable in the girl/boy relationship	4.50	.88
<b>Emosyonel IPV</b>	4.34	.60
11. Men should change their behavior in order to please their girlfriends	3.94	1.34
12. Girls should indulge every request of their boyfriends	4.52	.85
13. Boys should indulge every request of their girlfriends	4.39	.98
14. In the community, men should talk instead of women	4.71	.69
15. Real love calls for the fulfillment of every request of the girl/boyfriend	4.53	.79
16. Girls can force to accomplish all their requests by crying	4.38	.96
<b>Economic IPV</b>	4.20	.66
17. Girl/boyfriend cannot butt in each other's money-spending	2.89	1.41
18. Men have to control the spending habits of their girlfriends	4.50	.98
19. Girls have to control the spending habits of their boyfriends	4.35	.98
20. Girls/boyfriends should know the passwords of each other's bank cards	4.09	1.08
21. Girls should spend money at their boyfriends' discretion	4.47	.87
<b>Sexual IPV</b>	4.56	.63
22. If the girl had a previous sexual experience, her boyfriend can force her to have sexual intercourse	4.80	.66
23. Boys should not force their girlfriends into sexual intercourse	4.23	1.42
24. Girls should not force their boyfriends into sexual intercourse	4.26	1.40
25. Boys do not have to ask for permission during sexual acts like fondling or kissing	4.68	.74
26. Boys can force their girlfriends into sexual intimacy	4.78	.69
27. There should be no forceful sexual intimacy in the girl/boy relationship	4.32	1.33
28. A sexual act is only men's right during the flirting	4.87	.47
<b>Total IPV</b>	<b>4.46</b>	<b>.39</b>

IPV=Intimate Partner Violence

### Factors Affecting the Attitudes of Nursing Students Toward IPV

The scores of general violence, physical violence and sexual violence were significantly higher among the fourth-year students than among the first-year students. Regarding the relationship between gender and the attitude to IPV, the total scale score and the general violence, physical violence, economic violence, and sexual violence scores were significantly higher among females than males. In addition, the general violence score was significantly higher among single students than among married students and among students not in a relationship than among students in a relationship. The attitude of not supporting IPV was significantly stronger among students with parents with a postgraduate qualification than among students with illiterate or primary-school-educated parents (see Table 3).

(Table 3 is here in the Results or Discussion section).

**Table 3.** Factor Affecting of Attitudes of Nursing Students Towards IPV (N=521)

	General IPV Mean $\pm$ SD Value	p	Physical IPV Mean $\pm$ SD Value	p	Emosyonel IPV Mean $\pm$ SD Value	p	Economic IPV Mean $\pm$ SD Value	p	Sexual IPV Mean $\pm$ SD Value	p	Total IPV Mean $\pm$ SD Value	p
<b>Gender</b>		>.001	.00		.12		>.01		>.001		>.001	
Female	4.69 $\pm$ .44		4.70 $\pm$ .44		4.35 $\pm$ .57		4.11 $\pm$ .63		4.63 $\pm$ .55		4.50 $\pm$ .33	
Male	4.25 $\pm$ .91		4.24 $\pm$ .88		4.22 $\pm$ .76		3.67 $\pm$ .73		3.99 $\pm$ .88		4.12 $\pm$ .62	
<b>Class</b>		>	>.05		.55		>.05		>.01		>.05	
One	4.69 $\pm$ .44		4.73 $\pm$ .48		4.44 $\pm$ .62		4.14 $\pm$ .72		4.36 $\pm$ .78		4.47 $\pm$ .41	
Two	4.61 $\pm$ .48		4.58 $\pm$ .54		4.35 $\pm$ .64		3.95 $\pm$ .75		4.63 $\pm$ .52		4.44 $\pm$ .38	
Three	4.72 $\pm$ .43		4.68 $\pm$ .45		4.29 $\pm$ .56		4.12 $\pm$ .59		4.67 $\pm$ .54		4.50 $\pm$ .31	
Four	4.55 $\pm$ .71		4.63 $\pm$ .61		4.32 $\pm$ .59		4.02 $\pm$ .61		4.51 $\pm$ .66		4.42 $\pm$ .46	
<b>Place of residence</b>		.47		.23		.65		.55		.36		.11
Village	4.66 $\pm$ .43		4.53 $\pm$ .54		4.35 $\pm$ .62		4.19 $\pm$ .63		4.53 $\pm$ .64		4.41 $\pm$ .31	
Town	4.72 $\pm$ .40		4.69 $\pm$ .36		4.41 $\pm$ .51		4.26 $\pm$ .58		4.67 $\pm$ .50		4.56 $\pm$ .27	
City	4.62 $\pm$ .58		4.65 $\pm$ .55		4.33 $\pm$ .60		4.25 $\pm$ .57		4.54 $\pm$ .65		4.45 $\pm$ .42	
<b>Marital status</b>		>.01		>.001		>.001		.33		.85		>.001
Single	4.06 $\pm$ 1.19		4.00 $\pm$ 1.39		3.95 $\pm$ 1.10		3.55 $\pm$ .76		4.17 $\pm$ 1.43		4.09 $\pm$ 1.05	
Married	4.65 $\pm$ .52		4.66 $\pm$ .50		4.35 $\pm$ .59		4.07 $\pm$ .66		4.56 $\pm$ .61		4.46 $\pm$ .37	
<b>Relationship status</b>		.05		>	.50		.35		.87		.45	
Yes	4.57 $\pm$ .64		4.64 $\pm$ .57		4.31 $\pm$ .58		4.07 $\pm$ .60		4.53 $\pm$ .63		4.43 $\pm$ .41	
No	4.69 $\pm$ .44		4.67 $\pm$ .45		4.37 $\pm$ .59		4.08 $\pm$ .68		4.58 $\pm$ .60		4.48 $\pm$ .35	
<b>Mother's education</b>		>.001		>.001		>.05		.21		>.001		>.001
Primary School	4.70 $\pm$ .41		4.70 $\pm$ .42		4.35 $\pm$ .56		4.08 $\pm$ .59		4.62 $\pm$ .59		4.49 $\pm$ .32	
Middle School	4.70 $\pm$ .43		4.63 $\pm$ .55		4.28 $\pm$ .68		4.07 $\pm$ .68		4.49 $\pm$ .62		4.45 $\pm$ .35	
High School	4.77 $\pm$ .39		4.79 $\pm$ .37		4.45 $\pm$ .49		4.27 $\pm$ .65		4.78 $\pm$ .40		4.61 $\pm$ .29	
University	4.56 $\pm$ .64		4.58 $\pm$ .59		4.28 $\pm$ .62		4.14 $\pm$ .66		4.47 $\pm$ .68		4.41 $\pm$ .43	
<b>Father's education</b>		>.001		>.001		>.01		>.001		>.001		>.001
Primary School	4.70 $\pm$ .41		4.70 $\pm$ .44		4.33 $\pm$ .58		4.04 $\pm$ .64		4.60 $\pm$ .61		4.48 $\pm$ .35	
Middle School	4.67 $\pm$ .48		4.65 $\pm$ .54		4.37 $\pm$ .58		4.15 $\pm$ .61		4.45 $\pm$ .64		4.45 $\pm$ .37	
High School	4.73 $\pm$ .44		4.66 $\pm$ .53		4.32 $\pm$ .63		4.13 $\pm$ .62		4.64 $\pm$ .53		4.52 $\pm$ .31	
University	4.71 $\pm$ .38		4.78 $\pm$ .41		4.53 $\pm$ .40		4.18 $\pm$ .64		4.71 $\pm$ .54		4.58 $\pm$ .33	
<b>Did you experience IPV in your life?</b>		.27		.27		.39		.46		.83		.41
Yes	4.56 $\pm$ .67		4.55 $\pm$ .86		4.28 $\pm$ .66		4.01 $\pm$ .70		4.53 $\pm$ .77		4.42 $\pm$ .58	
No	4.65 $\pm$ .52		4.68 $\pm$ .47		4.39 $\pm$ .59		4.08 $\pm$ .66		4.55 $\pm$ .62		4.47 $\pm$ .37	
<b>Exposure to violence in the family</b>		.001		>	>.001		>.01		.92		.94	
Yes	4.42 $\pm$ .66		4.45 $\pm$ .76		4.17 $\pm$ .72		4.07 $\pm$ .78		4.56 $\pm$ .72		4.37 $\pm$ .56	
No	4.69 $\pm$ .50		4.69 $\pm$ .46		4.38 $\pm$ .57		4.06 $\pm$ .64		4.56 $\pm$ .61		4.48 $\pm$ .35	
<b>Having witnessed violence in the family</b>		>.01		>.01		.06		.39		.84		.84
Yes	4.51 $\pm$ .63		4.51 $\pm$ .71		4.25 $\pm$ .63		4.02 $\pm$ .72		4.38 $\pm$ .50			
No	4.69 $\pm$ .50		4.70 $\pm$ .44		4.37 $\pm$ .59		4.08 $\pm$ .64		4.49 $\pm$ .35			

### Predictors of Attitudes Toward IPV

The predictors of the five subscales and of attitudes toward IPV of nursing students are shown in Table 3. Six predictors with significant odds ratios were identified with the help of logistic regression analysis of the total IPVAS score. An analysis of the predictor factors of the attitudes toward IPV showed that the strong predictors were "having university graduate mothers" ( $\beta = 3.83$ , OR = 46.18, CI

[1.53, 1393.32]) and “having high-school-graduate mothers” ( $\beta = 3.37$ , OR = 29.34, CI [11.53, 729.67]) vs. the predictor “having primary school educated mothers”. In addition, “female gender” ( $\beta = 2.42$ , OR = 11.28, CI [1.96, 64.86]) and “being a fourth-year student” ( $\beta = 1.84$ , OR = 6.32, CI [1.36, 29.35]) were other stronger predictors of total IPVAS (see Table 4). Significant odds ratios were identified using logistic regression analysis for the predictors “female gender” ( $\beta = 2.34$ , OR = 10.44, CI [1.82, 59.73]) and “being a fourth-year student” ( $\beta = 1.75$ , OR = 5.77, CI [1.29, 25.82]) (see Table 4). “Being a fourth-year student” ( $\beta = 1.35$ , OR = 3.86, CI [1.30, 11.46]) and “being a third-year student” ( $\beta = 1.16$ , OR = 3.21, CI [1.01, 10.20]) were identified as stronger predictors than “being a first-year student” (see Table 4). The analysis of the predictors of the subscales for general violence, economic violence and emotional violence revealed no predictor. (Table 4 is here in the Results or Discussion section).

**Table 4.** Predictors of Attitudes of IPV: Binary Logistic Regression Analysis (N = 521)

Dependent Variables (Positive Attitudes,%)	Independent Variables (%)	<i>P</i>	Unadjusted OR <sub>a</sub>	95% CI <sub>b</sub>
Total IPVAS (50.7)	<b>Mother's Education</b>			
	Primary School		1.00	
	Middle School	.85	.60	(.20-2.23)
	High School	.004	29.34	(11.53, 729.67)
	University	.001	46.18	(1.53,1,393.32)
	<b>Gender</b>			
	Boy		1.00	
	Girl	.01	11.28	(1.96,64.86)
	<b>Class</b>			
	One		1.00	
Two	.78	.56	(.32-3.35)	
Three	.56	.24	(.10-1.15)	
Four	.02	6.32	(1,36,29.35)	
Physical IPV Subscale (53.6)	<b>Gender</b>			
	Boy		1.00	
	Girl	.01	10.44	(1.82, 59.73)
	<b>Class</b>			
	One		1.00	
	Two	.42	.62	(.09-3.51)
	Three	.58	.88	(.06-5.51)
	Four	.02	5.77	(1.29, 25.82)
Sexual IPV Subscale (49.5)	<b>Class</b>			
	One		1.00	
	Two	.62	.58	(.20-4.59)
	Three	.03	3.21	(1.01, 10.20)
	Four	.04	3.86	(1.30, 11.46)

IPV: Intimate Partner Violence a=Odds ratio. b=95% confidence interval.

## DISCUSSION

Nurses belong to an occupational group that interacts in clinics, offices, and schools with individuals experiencing IPV. Previous studies have shown that interaction with healthcare professionals may influence the perception and status of the individual exposed to IPV and his/her decision to end the relationship (Chang et al., 2010; Morse et al., 2012). However, it has been determined that caregivers do not have sufficient information about IPV, and they have negative attitudes and beliefs and a low rate of complaints of IPV (Sprague et al., 2013). Moreover, it has been emphasized that a history of violence among caregivers may affect their professional competency in cases of IPV (Walker, 2017). It has been suggested that the experience of violence and the attitude toward IPV among nursing students will affect the nursing care that they provide to victims of IPV and other types of violence. Accordingly, this study aimed to determine the prevalence of IPV among nursing students, their attitudes toward IPV and the factors affecting these parameters.

### History of IPV Among the Nursing Students

It was found that 10.4% of the nursing students reported that they had experienced IPV. Several studies determined that an estimated lifetime prevalence of IPV victimization among males and females between 11% and 71% (Alhabib et al., 2010, Archer, 2006; Garcia-Moreno et al., 2006). The three most common types of violence experienced by those students who were exposed to IPV were physical, psychological and social violence. In a study by Selcuk et al. determined that university students were most exposed to psychological violence (Selcuk et al., 2018). In addition, 6.5% of the students reported that they had used violence in their relationships. The two most common violence types used by these students were psychological and physical. In our study, as in other studies, the majority of the IPV victims were female, and the majority of the perpetrators of violence were male (If-tar, 2016). Although international studies report that 15-71% of young people are exposed to IPV at least once in their lives (Sanz-Barbero et al., 2019), several studies have shown that individuals do not perceive violent acts against themselves as violence. Studies focused on the awareness of flirt violence showed striking results.

Approximately 90% of the students stated that slapping, beating, forcing sexual intercourse, preventing contraceptive usage and swearing were violent acts. In a study by Yildirim (2016) focused on nursing students, interfering with a person's life, demanding explanations, questioning, jealousy, forcing a sexual act, behaving with extreme indifference, and paying an account by men were considered IPV. It was shown that the awareness of IPV had increased among young people in Turkey between 2008 and 2016. In a study in Mexico, 88.0% of the participants stated that

they had not been abused by their girlfriends or boyfriends. However, 15.2% of these participants reported that they were scared; 27.0% had felt at a certain point in their relationship that they were caught in a trap. These results indicated that the majority of the young people were not aware of the violence they were exposed to (Rodríguez Franco et al., 2014).

### Attitudes of the Nursing Students Toward IPV

The research results showed that the nursing students got high scores from IPVAS, which also showed an attitude that did not support IPV. In parallel with the study, a study by Senol et al. found that university students exhibited an attitude that did not support IPV (Senol et al., 2022). The type of violence that students opposed most was physical violence; It was observed that they had a more accepting attitude towards economic violence. Item 28 “Sexual acts can only be the man’s right during flirting”, Item 6 “Men may hit their girlfriends whenever necessary” and Item 8 “Men who use physical violence (slapping, kicking, hitting, etc.) are more attractive” had the three highest scores against IPV severity. Item 17 “A girlfriend or boyfriend cannot interfere in each other’s money-spending”, Item 11 “Men should change their behavior in order to please their girlfriends” and Item 20 “Girlfriends and boyfriends should know the passwords for each other’s bank cards” received the three lowest scores against IPV severity (see Table 2). Similarly, Udmuangpiaet al. (2020) reported that nursing students have attitudes that do not support IPV. In the study conducted by Yildirim (2016), in which the evaluation was performed with the IPVAS among postgraduate students, the students reported that they were most against physical violence and least against economic violence. The nursing students had similar attitudes to other postgraduate students. However, certain studies have demonstrated that emotional and economic violent acts were not considered actual violence (Rodríguez Franco et al., 2014). The role of nursing in medical clinics has become more important with respect to the attitudes and awareness of healthcare professionals who encounter IPV and intervene in it. Thus, it is considered that the addition to the nursing curriculum of a course about violence, the types of violence and the legal responsibilities of nurses in cases of violent acts will improve the awareness of nursing students and their attitude toward violence (Thornton & Persuad, 2017).

### Factors Associated with Attitudes of the Nursing Students Toward IPV

The scores of general, physical and sexual violence were significantly higher among fourth-year students than among first-year students (see Table 3). This finding might depend on the influence of nursing education. The fourth-year students had previously taken psychology and psychiatry lessons. In addition, some had also taken an elective course about violence. Under the influence of these

courses, the attitude score toward IPV was significantly higher among fourth-year students. The logistic regression analysis also confirmed these results and found a strong correlation between the attitudes toward physical and sexual violence and the students' year (see Table 4).

Several studies shows that demographic factors, including gender, socioeconomic status, and age with IPV perpetration and victimization (Alhabib et al., 2010; Garcia-Moreno et al., 2006; Harvey et al., 2007). And also, a study by Kök et al. determined that gender role attitudes affect attitudes towards dating violence (Kök et al., 2022). In this study, as in other similar studies, the IPV attitude scale scores of females were found to be higher than those of males (Wang, 2016; Yildirim, 2016; Senol et al., 2022). Logistic regression analysis also supports this finding (see Table 4). Several studies have shown that gender is an important variable that makes a difference in dating violence attitudes and behaviors, and this difference is in favor of women. It is also shown that women are less supportive of violence in dating relationships compared to men. (Cinal, 2018; Gündoğdu et al., 2018; İftar, 2016). A strong correlation was detected between the total and physical violence score and the female gender. This result is actually expected, as IPV and other types of violence are primarily directed toward women and children. In Turkey, according to the results of research conducted by the TSI (2014), the rate of physical and sexual violence committed by a partner was 41.9%, the rate of violence committed by a person other than a partner was 17.8%, and the rate of the sexual violence was 3.3%.

It was found that students who were single and had no dating relationships had an anti-IPV attitude. Again, in this study, as in the study by Yildirim (2016), with the increase in parents' education level, children's attitudes that do not support IPV also increased. Logistic regression analysis also showed that the strongest correlation of attitudes towards IPV was with the education level of the parents, and that children's attitudes not supporting IPV improved with the increase in the education level of the mother. In this context, the importance of the mother's education level and the mother's influence on the child was again at the forefront. It was found that the attitude against IPV was significantly higher in people who had been exposed to domestic violence or who had witnessed it. In the study by Yildirim (2016), which was conducted using the same scale among postgraduate students, no significant difference was found between those who had been exposed to domestic violence and those who had witnessed it. In several studies conducted in different cultures, it was reported, as in our study, that exposure to domestic violence or witnessing it influences the attitude of children toward violence in the future (Gage, 2016; Parlak & Canel, 2021).

**Study Limitations:** A limitation of this study was that there was no male-female balance.

## CONCLUSIONS

There are many various factors that influence the occurrence of dating violence and one of them is young people's attitudes towards dating violence. This research indicates that during their intimate partner relationships, nursing students were exposed to physical, psychological and social violence, and they committed psychological and physical violence. Each year at school has been found to significantly increase students' attitudes that do not support IPV. Therefore there is a need for an education and training curriculum that educates skilled nurses to effectively identify IPV patients and provide them with support. In this context, it is recommended that a compulsory course about IPV and violence toward women should be added to nursing schools' curriculums, as nursing students are potential healthcare professionals. These courses will change the perception and awareness of nursing students regarding IPV and other types of violence toward women and children, and they will be trained in their legal responsibilities regarding such cases. Moreover, the possibility of close interaction with society is higher in fields such as workplace and school nursing. Here, it is important to implement programs to prevent violence toward women and children and prevent IPV, planned and conducted by these trained nurses. These programs will also enable the development of policies regarding this violence in the future.

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No conflict of interest has been declared by the authors.

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### Author Contribution Rates

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Data Acquisition: GYDG(%100)

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