

Prevalence and Factors Associated With Men's Perpetration of Intimate Partner Violence in South Tarawa, Kiribati

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Abstract

In the Republic of Kiribati, two-thirds of women report experiencing intimate partner violence (IPV) during their lifetime. Less is known about men's perpetration of IPV, or associated risk factors, in this high prevalence setting. We conducted a cross-sectional study with 429 currently partnered men aged 15-49 in South Tarawa, Kiribati, to estimate the prevalence of, and risk factors associated with, currently married men's perpetration of physical and sexual IPV against female partners. Two-thirds (63%) of currently partnered men reported past year physical and/or sexual IPV. Modifiable risk factors associated with men's perpetration of physical and/or sexual IPV included child physical abuse (aOR: 2.31, $p=0.01$), gender inequitable attitudes (aOR: 1.12, $p=0.02$) and anti-social behaviors, including gang involvement (aOR: 3.36, $p=0.01$) and involvement in fights with weapons (aOR 3.54, $p=0.004$). IPV prevention approaches in Kiribati should prioritize efforts to prevent child maltreatment, promote gender equitable norms and practices, and reduce community violence.

Keywords: intimate partner violence; Kiribati; Pacific region; perpetration; physical violence; sexual violence

What We Already Know

- Prevalence of intimate partner violence (IPV) is high in Kiribati
- National research to-date focuses on women's reported experiences of IPV
- Data on risk factors associated with men's perpetration of IPV is critical to inform evidence-based policies and interventions to prevent IPV

What This Article Adds

- In this first ever study on men's perpetration of IPV in Kiribati, two-thirds of men reported perpetrating physical and/or sexual violence against a female partner in the past 12 months
- Men who experienced physical child abuse, held gender inequitable attitudes, or engaged in anti-social behaviors such as gang involvement or fights with weapons were more likely to report physical and/or sexual IPV perpetration, compared to men who did not experience physical child abuse, held more equitable gender attitudes or did not engage in anti-social behaviors
- Interventions to prevent child maltreatment, promote gender equitable attitudes and relations, and reduce community violence may lead to reductions in IPV prevalence in this high-prevalence setting

Introduction

One in three women experience physical and/or sexual intimate partner violence (IPV) by a male partner worldwide. Intimate partner violence includes physical, emotional or sexual violence by a current or former intimate partner. The Pacific region is home to some of the highest rates of intimate partner violence globally. Up to two-thirds of women living across the region experience violence by an intimate partner.^{1,2} In the Republic of Kiribati, an island country in the central Pacific ocean, a 2019 nationally representative sample of women aged 15-49 found that 53% experienced sexual, physical and/or emotional IPV in the past 12 months.³ Despite increased efforts by government and international actors to respond to violence against women and provide support to survivors, prevalence of IPV has remained stable over the past decade in Kiribati.²⁻⁴

Ending violence against women and girls is a global public health and human rights priority. The Government of Kiribati has demonstrated a commitment to reducing violence against women and girls through recent national legislation and policies, and the implementation of national prevention interventions. These policy and program interventions to prevent IPV rely on prevalence studies to identify key risk and protective factors that can be modified to reduce rates of violence in homes and communities.⁵ Surveys on IPV in Kiribati collect data from women on their self-reported experiences of abuse.^{2,3} Until 2019, no study had been conducted on prevalence or risk factors associated with men's *self-reported* perpetration of IPV in this high-prevalence setting. While collecting data with women is, and should remain, a public health priority, understanding the prevalence and determinants of men's perpetration is critical to inform coordinated violence prevention interventions to address multiple risk factors at different socio-ecological levels in Kiribati society, and other high-prevalence settings.⁶

As one of the few studies on men's perpetration of violence against women in the Pacific region,^{7,8} this article seeks to (1) estimate the prevalence of men's perpetration of physical and sexual IPV against female partners and (2) identify risk factors associated with IPV perpetration, using data from a cross-sectional study with men aged 15-49 in South Tarawa, Kiribati.

Methods

Data source

The data used in this article derive from the baseline survey of the South Tarawa Healthy Living Study, a four-year mixed-methods impact evaluation of the Strengthening Peaceful Villages (SPV) violence prevention intervention conducted in Teinainano Urban Council (TUC) and Betio Town Council (BTC) (hereafter South Tarawa), Republic of Kiribati. The SPV intervention, adapted from the SASA! model,⁹ is an evidence-based, community mobilization initiative to prevent intimate partner violence and promote grassroots gender equitable and non-violent social norm change. The primary aim of the evaluation is to assess change over time in men's perpetration of IPV in areas where the intervention is being implemented. The baseline survey was conducted from March to April 2019. The total population of women and men aged 15-49 in South Tarawa was approximately 28,000.

The baseline survey used a cross-sectional, stratified multi-stage random sampling framework to sample eligible women and men aged 15-49. Census tracts served as strata and households served as primary sampling units. Households were randomly selected in census tracts. Individuals were randomly sampled within households without replacement. This analysis used only data from the men's survey. The University of the South Pacific Research Office provided ethics approval for the survey.

Study design and participants

The instrument for the men's survey was adapted from the United Nations Multi-country Study on Men and Violence in Asia-Pacific (UNMCS)⁶ and the SASA! Community Men's Survey.⁹ Questions were translated into the local language, Taetae n Kiribati. Close collaboration with local stakeholders in the back-translation of questionnaires ensured accurate translation of survey items.

Overall, 556 of 596 eligible men were interviewed, with a response rate of 93%. Verbal consent was obtained from all survey participants. Verbal consent – in place of written consent – was used to ensure the safety and confidentiality of participants in this small, close-knit island society. Participants completed an 8-module survey questionnaire that included modules on (1) demographic information; (2) socio-economic indicators; (3) general health; (4) fatherhood; (5) gender attitudes; (6) intimate relationships; (7) knowledge and provision of support to women who experience violence; and (8) sexual practices. The interviews were conducted face-to-face with data recorded into the KoBoCollect app on handheld tablets. Participants self-administered the final module on sexual practices. The self-administered section included a number of questions on sensitive topics, including sexual practices and sexual violence. The section was self-administered to reduce risk of reporting bias and enhance confidentiality of participants. In order to evaluate correlates with past-year IPV perpetration, the present analysis restricted the sample to men who were currently married, partnered or dating a woman at the time of the survey (referred to as currently partnered men). Two participants were missing on all outcome items and were dropped from the sample. The final analytic sample size was 429 men. In our final sample of currently partnered men, the average age of male respondents was 32 years old, and 95% reported ever attending school. Our sample characteristics generally align with nationally representative demographic characteristics of men aged 15-49 years in Kiribati.³

Outcome measure

Physical and/or sexual IPV perpetration was measured using nine behaviourally-focused survey items from the UNMCS on men's violent behaviours in the past year.⁶ Items were adapted for the UNMCS from the World Health Organization Multi-country Study on Women's Health and Domestic Violence against Women¹⁰ and the Revised Conflict Tactics Scale.¹¹ Six items captured physical violence and three items captured sexual violence (see Supplemental Table 1 for operational definitions of outcome variables). We generated a binary variable wherein men who reported at least one physically or sexually violent behaviour were coded as 1, and men who reported no perpetration of any physically or sexually violent behaviour were coded as 0.

Covariates

We modelled four sets of covariates to estimate the relative and net associations between covariate groups and men's past year perpetration of physical and/or sexual IPV. Covariate groups captured (1) men's exposure to child maltreatment before age 18, (2) men's gender attitudes, (3) characteristics of the current or most recent intimate partnership, and (4) men's anti-social behaviours and men's sexual behaviours outside the intimate partnership. We included age as a control variable to adjust for age-related variation in intimate partnerships. See Supplementary Table 1 for operational definitions of covariates.

Statistical Analysis

Statistical analyses accounted for multi-stage cluster design, and survey weights were generated to account for differential probability of respondent inclusion in the study. We conducted descriptive analyses to examine sample characteristics and prevalence of outcome variables and covariates. We used multiple imputation to account for missingness on covariates. We performed bivariate analyses to estimate associations between the outcome (perpetration of physical and/or sexual IPV in the past year) and all covariates. We applied Pearson chi-square and adjusted Wald t-tests for categorical and continuous variables, respectively. We then conducted sequential binomial logistic regression models to test the relative and net associations of covariates with the outcome. All analysis was conducted in STATA Version 13.

Results

Sample description and bivariate associations

Among currently partnered men, 63% reported perpetration of any past year physical and/or sexual violence against a female partner (Table 1). A total of 45% reported any past year physical violence and 38% reported any past year sexual violence against a female intimate partner.

Men reported high rates of childhood maltreatment overall (Table 2). Over three-fourths of all men reported exposure to emotional abuse and neglect when they were children (77%). One in six men experienced childhood sexual abuse (16%) and one-third reported witnessing the abuse of their mother (33%). On average, we found significant bivariate differences in exposure to child maltreatment between men who reported past year physical and/or sexual IPV perpetration compared to men who did not report IPV perpetration.

Gender attitude measures reflected high agreement with gender inequitable norms (Table 2). Among currently partnered men, 73% agreed that men were justified in beating their wives under at least one condition. On average, men who reported IPV perpetration were more likely to justify wife-beating (77%) compared to men who did not report IPV perpetration (66%). Mean gender inequitable attitudes scale scores ranged from 21 to 44, with an adjusted mean score of 31.78 (SE=0.23). Men who reported past-year IPV perpetration had higher mean scores on average (mean score = 32.29) compared to men who did not (mean score = 31.08, $p=0.013$).

Table 1. Prevalence and frequency of intimate partner violence perpetration among men currently married, cohabiting or dating a female partner in South Tarawa, Kiribati, 2019 (n=429).

	Yes		Once		Few times		Many times	
	%	SE	%	SE	%	SE	%	SE
Physical violence								
Slapped/thrown something at her that could hurt her	26.52	2.41	8.12	1.48	18.16	2.18	0.24	0.17
Pushed or shoved a partner or pulled her hair	25.67	2.40	8.86	1.60	16.46	2.08	0.36	0.26
Hit a partner with a fist or with something else that could hurt her	23.30	2.44	4.87	1.11	17.85	2.30	0.58	0.28
Kicked, dragged, beaten a partner	12.72	1.94	3.20	0.88	9.39	1.79	0.13	0.13
Choked or burned a partner on purpose	2.63	0.85	0.82	0.49	1.80	0.70	0.00	0.00
Threatened to use or use a knife or other weapon against a partner	5.08	1.19	3.16	1.02	1.92	0.65	0.00	0.00
Sexual violence								
Forced your current or previous partner (wife or girlfriend) to have sex with you when she did not want to	28.07	2.65	14.31	2.14	12.05	1.82	1.71	0.66
Forced your current or previous wife or girlfriend to watch pornography when she didn't want to	13.96	2.05	6.55	1.47	5.72	1.27	1.69	0.92
Forced your current or previous wife or girlfriend to do something else sexual, other than sexual intercourse that she did not want to do	17.39	2.11	9.51	1.69	6.12	1.24	1.76	0.74
Any past year physical violence against a female partner	45.28	2.88	-	-	-	-	-	-
Any past year sexual violence against a female partner	38.28	2.94	-	-	-	-	-	-
Any past year physical and/or sexual violence against a female partner	63.09	2.83	-	-	-	-	-	-

% = percent weighted prevalence.

Table 2. Descriptive characteristics of study sample, men aged 15-49 currently married, cohabiting or dating female partners in South Tarawa, Kiribati, 2019 (n=429).

Covariates	All men (n=429)		Perpetrated past-year physical and/or sexual IPV				p
	%/Mean	SE	Yes (n=254)		No (n=175)		
	%/Mean	SE	%/Mean	SE	%/Mean	SE	
Age (range 15 – 49)	32.31	0.53	32.40	0.64	32.19	0.92	0.86
Ever attended school	95.02	1.13	94.23	1.57	96.11	1.69	0.45
Earns money	58.03	2.72	60.8	3.49	54.19	4.44	0.25
Childhood trauma							
Emotional abuse and neglect	76.56	2.45	79.80	2.83	72.05	4.25	0.12
Physical abuse	70.00	2.51	77.89	2.84	59.04	4.35	<0.001
Sexual abuse	15.59	1.98	19.10	2.81	10.72	2.63	0.04
Witness abuse of mother	33.17	2.56	38.09	3.47	26.40	3.86	0.03
Gender attitudes							
Justification of wife-beating	72.51	2.48	76.91	3.20	66.39	4.05	0.045
Gender inequitable attitudes scale (range 21 – 44, high=more inequitable)	31.78	0.23	32.29	0.30	31.08	0.36	0.013
Couple characteristics							
Support scale (range = 0-5)	4.63	0.05	4.65	0.06	4.59	0.09	0.601
Communication scale (range = 0 -5)	3.90	0.08	4.02	0.09	3.73	0.14	0.075
Sexual discussion scale (range = 0 - 5)	1.93	0.08	2.20	0.10	1.55	0.13	<0.001
Relationship control scale (range = 12-28)	19.06	0.16	19.24	0.20	18.81	0.25	0.189
Anti-social behaviors and sexual behaviors outside the intimate partnership							
Extra-marital affair	16.73	2.48	15.86	2.93	18.16	4.37	0.658
Sex with sex worker	6.92	1.43	9.92	2.10	2.40	1.60	0.026
Gang involvement	15.50	2.22	21.33	3.27	6.62	2.53	0.002
AUDIT score (0 - 14)	3.67	0.26	4.24	0.35	2.87	0.41	0.014
Fight with weapons	13.05	1.70	18.14	2.61	5.20	1.93	0.001

On average, men reported a support scale score of 4.63 (SE = 0.05), a communication scale score of 3.90 (SE = 0.08), a sexual discussion scale score of 1.93 (SE = 0.08), and a relationship control scale score of 19.06 (SE=0.16). At the bivariate level, only sexual discussion scale scores varied by men's reported IPV perpetration. Men who reported IPV perpetration had higher scores on the sexual discussion scale (mean score = 2.20), indicating greater discussion with their partner of sex and sexual behaviors, compared to men who did not perpetrate IPV (mean score = 1.55, $p < 0.001$).

Finally, one in six men reported last sex with a partner other than their primary female partner (17%). Among all men, 7% reported engaging in sex with a female, male or transgender sex worker. On average, 13% of all men reported being in a fight with weapons, and 16% reported involvement in gang activity at least once. At the bivariate level, men who reported IPV perpetration reported significantly higher estimates, on average, of all measures of anti-social behaviors and sexual practices outside the intimate partnership, compared to men who did not report IPV.

Multivariable models

In the sequential multivariable models, at least one factor from each theorized domain of risk was associated with men's perpetration of physical and/or sexual IPV (Table 3). We present here results from the full multivariable model (Table 3, Model 5). Men who reported childhood physical abuse were 2.31 times more likely to report perpetration of physical and/or sexual IPV ($p=0.01$). No other forms of childhood trauma were associated with perpetration of physical and/or sexual IPV, after adjusting for all other covariates. A one-unit increase in the gender inequitable attitudes score was associated with 1.12 times greater likelihood of perpetration of physical and/or sexual IPV ($p=0.018$). Men's anti-social behaviors were most strongly associated with IPV perpetration. Men's involvement in gangs (aOR 3.36, $p=0.014$) and engagement in fights with weapons (aOR 3.54, $p=0.004$) each increased the likelihood of physical and/or sexual IPV perpetration by a factor of three. Unexpectedly, couples' greater discussion about sexual desire and sexual practices was associated with higher risk of physical and/or sexual IPV perpetration (aOR 1.31, $p=0.019$). No other covariates emerged as significantly associated with physical and/or sexual IPV perpetration among currently partnered men in South Tarawa, Kiribati, once adjusting for all other covariates.

Table 3. Sequential binomial logistic regression models of factors associated with men's perpetration of past year physical and/or sexual intimate partner violence, among currently married, cohabiting or dating men aged 15-49 in South Tarawa, Kiribati, 2019 (n=429).

Covariates	M1			M2			M3			M4			M5		
	aOR	SE	p	aOR	SE	p	aOR	SE	p	aOR	SE	p	aOR	SE	p
Childhood trauma															
Emotional abuse and neglect	1.37	0.42	0.294										1.04	0.36	0.907
Physical abuse	2.27	0.60	0.002										2.31	0.74	0.010
Sexual abuse	1.54	0.54	0.220										0.98	0.42	0.957
Witness abuse of mother	1.34	0.35	0.252										1.22	0.39	0.527
Gender attitudes															
Justification of wife beating				1.48	0.39	0.143							1.70	0.54	0.099
Gender relations score				1.08	0.04	0.026							1.12	0.05	0.018
Couple characteristics															
Support scale							1.02	0.16	0.895				0.95	0.20	0.816
Communication scale							1.05	0.11	0.651				0.99	0.12	0.957
Sexual discussion scale							1.40	0.14	0.001				1.31	0.15	0.019
Relationship control scale							1.07	0.05	0.156				1.04	0.07	0.506
Men's anti-social behaviours and sexual behaviors outside the intimate partnership															
Extra-marital affairs										0.59	0.24	0.196	0.59	0.27	0.248
Sex with sex worker										2.38	1.72	0.229	2.26	1.99	0.356
Gang involvement										3.42	1.73	0.015	3.36	1.64	0.014
AUDIT score										1.04	0.03	0.224	1.02	0.04	0.560
Fights with weapons										3.33	1.53	0.009	3.54	1.55	0.004
Age	1.01	0.01	0.570	1.00	0.01	0.768	1.00	0.01	0.946	1.01	0.02	0.622	1.01	0.02	0.405
Intercept	0.41	0.24	0.128	0.07	0.09	0.028	0.15	0.18	0.122	0.84	0.46	0.746	0.00	0.01	0.007

Discussion

In our survey, two-thirds of currently partnered men reported perpetration of past-year physical and/or sexual IPV against a female partner. The high levels of men's reported perpetration are consistent with extant literature and underscore that IPV is pervasive in intimate relationships in South Tarawa, Kiribati. Notably, men's rates of physical and/or sexual IPV in our study are almost double that of women's reports in previous studies in Kiribati.^{2,3} Although partially accounted for by variation in geographic scope and calculation of prevalence between surveys, men's higher reports compared to women is consistent with other surveys from the region wherein men report higher levels of IPV perpetration than women report IPV victimization.^{6,8,12} There are a number of potential explanations. Men may be less likely than women to fear recrimination or retaliation for reporting violence in the household to survey enumerators, particularly in societies where men's violence is normalized, and men's power over women is sanctioned by norms and legislation. Women may underreport exposure to violence for similar reasons.¹³ Stigma around sexual violence and norms around male sexual entitlement may inhibit women's disclosure and, in turn, lead to underestimation sexual violence prevalence.^{2,13,14} Men's open acknowledgement of their use of violence may also be linked to fulfilling social expectations of men's demonstrated control over women. In qualitative data from South Tarawa, men espoused hegemonic ideals of masculinity that included the exercise of dominance over household members, by force if necessary.⁴

In South Tarawa, high rates of IPV may also reflect underlying and systemic challenges driven by macro-level stressors such as a highly extractive colonialist past, economic insecurity, and climate change.¹⁵⁻¹⁷ Although beyond the scope of the present study, these historical and contemporary stressors may contribute to lower social cohesion and stressors at the individual, family, and community levels, which may in turn increase prevalence of violence.¹⁶ More recently, the COVID-19 epidemic has proven a considerable stressor for individuals, families and communities, and would be an important consideration for future research on IPV in this setting.

Understanding what factors increase men's risk of IPV perpetration is important to identify opportunities for violence prevention interventions.^{6,18} In this study, factors related to child maltreatment, gender inequitable attitudes and anti-social behaviors were

associated with men's perpetration of past-year physical and/or sexual IPV. We interpret these results as indication of how inequitable family and community structures create conditions conducive to violence in intimate relationships. For example, the connection between exposure to childhood physical abuse and adult IPV perpetration may be a result of patriarchal family structure in Kiribati society. Patriarchal notions of men's dominance in the family is an underlying driver of both violence against children and violence against women.¹⁹ In South Tarawa, men who experience physical discipline and punishment as children may adopt these behaviors to intimate partner relations, given prevalent norms around men's authority to discipline both children and women.⁴ Second, consistent with regional literature, we found that more gender inequitable attitudes were associated with men's perpetration of past year physical and/or sexual IPV, demonstrating the convergence of inequitable attitudes and behaviors in this setting.⁶ Finally, we found that men's anti-social behaviors outside the home – notably gang involvement and community violence – were associated with their use of aggression against a partner. In societies where social constructions of masculinity endorse violence and aggression, men may exert violence against women and other men as a way to demonstrate masculinity.²⁰ As a result, men's violence against other men and men's abuse of intimate partners share a common driver.²¹ In South Tarawa, perceived high levels of community violence,⁴ alongside normalization of men's abuse of and control over female partners,²⁻⁴ indicate that prevailing norms of masculinity may drive men's use of violence inside and outside of the home.

Unexpectedly, while indicators of positive support, assistance and general conversation between partners were not associated with men's perpetration, men who reported more discussion on sexual activities were more likely to perpetrate past-year physical and/or sexual IPV. The significance and direction of the association between the sexual discussion scale and IPV perpetration may suggest that violence is used to police transgressions of norms around sexual access and establish ownership over women's bodies. That is, open discussion of sexual practices, preferences and contraception use within the couple may signal women's greater sexual autonomy, in turn, putting her at greater risk of IPV. In one study, women's sexual autonomy was perceived as a violation of expectations around modest female sexuality in Kiribati.² Alternatively, survey items may capture conversations around sex within couple conflict. For example, in qualitative research, i-Kiribati women and men cite extra-marital affairs and sexual jealousy as triggers for couple

conflict and violence in South Tarawa.⁴ Thus, discussion of sexual issues may take place under adversarial conditions, in turn elevating the risk of IPV.

Intervention priorities

Results of this study have practical implications for violence prevention priorities in Kiribati, and the Pacific region more broadly. Key areas for program intervention include child protection, community violence reduction and social norm change efforts to promote equality between women and men. The past decade saw substantial improvement in child protection policies and interventions in Kiribati. Yet, as elsewhere, violence against children and violence against women tend to be addressed through siloed development initiatives, despite evidence of intergenerational cycles of abuse.²² Integration of child protection and violence prevention programming is key to concurrently address these interlinked social problems.²³ Community violence reduction programs can raise awareness of the interlinkages between aggressive behaviours within and outside the home. In particular, making the link between IPV and community violence can minimize perceptions that IPV affects only some people, and instead promote IPV prevention strategies as a way to enhance community wellbeing. Finally, social norm change interventions can begin to shift prevailing norms around masculinity, violence and women's agency and autonomy.^{18,24} Intervention programs should work with heterogeneous groups of women and men to examine, deconstruct and challenge harmful gender norms at multiple levels of society, in order to transform systematic inequalities.¹⁸

Limitations

This study has a number of limitations. Firstly, the survey is cross-sectional and, as such, we are unable to extrapolate the temporal ordering of adult covariates (e.g. gender attitudes, couple characteristics, and anti-social behaviors) with perpetration of physical and/or sexual IPV. Secondly, while the survey is representative of the population on South Tawara, where over half of the Kiribati's population resides, the survey is not nationally representative of all partnered men in Kiribati. Future nationally representative studies on men's perpetration of IPV in this setting are needed. Finally, due to survey item wording for men's involvement in extra-marital affairs, this item may underestimate the prevalence of men's engagement in

these behaviors, thereby biasing estimates of association between behaviors and men's perpetration of IPV.

Conclusion

Men's reported perpetration of physical and/or sexual IPV against a female partner in South Tarawa, Kiribati is high and underscores the normalization of violence within intimate partnerships in this setting. Child maltreatment, gender attitudes, couple characteristics, and community violence are associated with men's perpetration of IPV in this sample. Future mixed method research on men's perpetration of IPV is needed to evaluate achievement of global development goals and reduce rates of violence in this high-prevalence setting.

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