
Health Education on Prevention of Domestic Violence Behavior in Newly Married Couples in Sukosari Village Bondowoso

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Abstract

Domestic violence has a prevalence of millions of victims throughout the world which results in violations of human rights, has serious impacts on physical and mental health, and causes damage to relationships within the household. Therefore, it is important to provide health information and education services to the community to prevent domestic violence. This activity aims to provide health education service facilities regarding the prevention of domestic violence behavior in newly married couples. Health education activities were carried out for 60 minutes with 10 newly married couples as participants. The results of the activity showed that the participants' knowledge before the activity was in the good knowledge category at 50% and after the health education activity, the knowledge increased to the very good knowledge category at 50%. The health sector has the unique potential to address domestic violence, particularly through health services that can be accessed by the majority of the general public, one of which is through health education activities

Keywords: Violence, Domestic, Mental Health, Health Education

Introduction

Behavior or acts of domestic violence as a social fact are nothing new from the sociological perspective of Indonesian society. Domestic violence is a social fact that is universal because it can occur in a household without distinction between culture, religion, ethnicity and the age of the perpetrator or victim. This act of violence can be committed by a husband or wife against their respective partners, or against children and other family members separately or simultaneously (Viblola, 2022). Destructive This behavior has the potential to seriously damage household life due to divorce and mental health problems (Rahmadani & Suartini, 2022).

The number of domestic violence cases in Indonesia throughout 2022 will reach 5,526 cases per year. This number decreased compared to the 2021 and 2020 periods of 7,435 cases and 8,104 cases respectively. Based on the Annual Records (Catahu) for the 2022 period by the National Commission on Violence Against Women, the number of cases of gender-based violence against women throughout 2021 reached 338,496 cases, up from 226,062 in 2020. Based on the KemenPPPA report, households are the location where incidents occur most frequently. violence. Throughout 2022, KemenPPPA received 16,899 complaints of domestic violence. Then, the number of domestic violence victims in 2022 will reach 18,142 victims (BPS Indonesia, 2020).

In general, victims who experience domestic violence will leave an impact on themselves, be it physical or psychological (Rahmadani & Suartini, 2022). Several factors that emerge in problem identification show various possibilities which are thought to be related to understanding the function of families of domestic violence victims. Understanding family functions for victims of domestic violence in terms of socio-economic conditions, the increase in poverty, unemployment, hardship, income inequality, stress and alcohol abuse has led to increased violence in society, including violence against women (Viblola, 2022).

Domestic violence is a serious problem that must be prevented and addressed immediately. Domestic violence can damage family relationships and an individual's health. To prevent domestic violence, we need to communicate well, trust each other, avoid bad prejudices, be tolerant of each other, avoid infidelity, get good education and emotional education for children, play the roles of each family member well, build networks. positive social behavior, and seek professional help if necessary (Maslahah & Khoirunnisa, 2020). Based on this phenomenon, it is very necessary for the community to be given health education about preventing domestic violence behavior in newly married couples in the village of Sukosari Lor Bondowoso as a prevention effort.

Identification of Problems

Domestic violence is any act against someone, especially women, which results from physical, sexual, psychological or domestic violence, including threats to commit acts, coercion or unlawful deprivation of liberty within the household. Domestic violence is also known as hidden crime because both the victim and the perpetrator try to hide it from the public.

The problem of domestic violence has been widely raised, both through articles published in the mass media, as well as the results of research conducted by researchers in universities and government agency research centers. From various articles it is stated that the factors causing domestic violence include: economic factors; patriarchal hegemonic culture; a decline in social concern and solidarity as well as poor people's empathy. Meanwhile, several research results have found that the main factors for domestic violence are economic factors and the strong patriarchal culture among society. Paying attention to the various factors that cause acts of domestic violence, means that it is very important to prevent and choose alternative solutions

to the problem of domestic violence that are considered the most appropriate. Because of this phenomenon, it is very necessary for the public to be given health education about preventing domestic violence behavior in newly married couples as a prevention effort.

Implementation Methodology

Educational activities about domestic violence are a forum used to provide information for newly married couples with the aim of helping improve welfare (Budiman, M Elyas Arif, Zidni Nuris Yuhbaba, 2021) Mental health in building a household and improving coping skills (Budiman et al., 2023). Educational activities about domestic violence provide the information needed for newly married couples who will later use this information and apply it independently and together to explore various approaches to find the right combination and solution to overcome the problems they are experiencing. This method is used so that newly married couples as the target of the program not only understand and comprehend, but also play an active role by applying what they already know in this activity.

The series of community service activities are activities that focus on the community in Sukosari Lor village, Sukosari District, Bondowoso Regency with the target being newly married couples. The community service activities carried out are a form of implication of the results of the research that has been carried out. Apart from that, the sequence before the activity took place, such as the introduction of the program and the concept of the event, was carried out using socialization and survey methods with the assistance of female cadres and community leaders. The socialization method is carried out in a persuasive way so that the target is enthusiastic about the program. Meanwhile, the survey method is carried out by filling out a questionnaire regarding the activities to be carried out, so as to obtain informative answers and make it easier to filter targets that will be included in implementing the community service program. Before carrying out the activity, the target's knowledge about domestic violence and prevention will be measured and then at the end of the session, knowledge will be measured again after the health education activities have been carried out. Health education activities were carried out for 60 minutes with 10 newly married couples as participants.

Results and Discussion

The analysis was carried out to obtain an overview of the community service program through health education activities regarding preventing domestic violence behavior in newly married

couples. The results of community service activities carried out on 10 newly married couples can be presented in the following table:

Table 1.1 Results Description of Frequency of Participants' Interest in Participating in Community Service Activities.

Interest	Frekuensi	Persentase
Interested	7	35.0
Very interesting	13	65.0
Total	20	100.0

The calculation results show that of the 20 participants who took part in health education community service activities regarding preventing domestic violence behavior in newly married couples, 65% were very interested in the program, 35% were interested in the program. The calculation results show that of the 20 participants who took part in community service activities in health education regarding preventing domestic violence behavior in newly married couples, 85% were very helpful and 15% were useful

Table 1.2 Frequency Description Results Regarding the Benefits of Participants in Participating in Community Service Activities.

Benefits	Frequency	Percentage
Beneficial	3	15.0
Very helpful	17	85.0
Total	20	100.0

The calculation results show that of the 20 participants who took part in community service activities in health education regarding preventing domestic violence behavior in newly married couples, 85% were very helpful and 15% were useful.

Table 1.3 Results of Frequency Description of Pretest Data Regarding Prevention of Domestic Violence

Knowledge	Frequency	Percentage
Sufficient Knowledge	8	40.0
Good Knowledge	10	50.0
Excellent Knowledge	2	10.0
Total	20	100.0

The calculation results show that of the 20 respondents who took part in health education community service activities regarding preventing domestic violence behavior in newly

married couples, 50% had good knowledge, 40% had sufficient knowledge and 10% had very good knowledge.

Table 1.4 Results of Frequency Description of Posttest Data Regarding Prevention of Domestic Violence

Knowledge	Frequency	Percentage
Sufficient Knowledge	2	10.0
Good Knowledge	10	50.0
Excellent Knowledge	8	40.0
Total	20	100.0

The calculation results show that of the 20 respondents who took part in health education community service activities regarding preventing domestic violence behavior in newly married couples, 10% had sufficient knowledge, 50% had good knowledge and 40% had very good knowledge.

Domestic violence is not just an argument. This is a pattern of coercive control that one person exercises over another person. Abusers use physical and sexual violence, threats, emotional humiliation and economic deprivation as a way to dominate victims and get what they want (Yuhbaba et al., 2022).

Domestic violence is a long-standing phenomenon. Women as the most victims are always considered weak, vulnerable and in a position to be exploited (Sarkar, 2010). Violence has long been accepted as something that happens to women. Cultural customs, religious practices, economic and political conditions may be the main factors in initiating and perpetuating domestic violence, but ultimately committing violent acts is a choice that a person makes from various existing options (Sarkar, 2010).

Violence not only causes physical injury, but also damages the social, economic, psychological, spiritual and emotional well-being of victims, perpetrators and society as a whole. Domestic violence is the main cause of poor mental health. This has a serious impact on mental and physical health. These include injuries, gynecological problems, temporary or permanent disability, depression and suicide (Mazza et al., 2021). An effective response to violence must be multisectoral in addressing the urgent practical needs of victims experiencing violence and providing long-term follow-up and assistance as well as focusing on changing

cultural norms, attitudes and legal provisions that support the acceptance and even encouragement of violence against victims, and weaken victims from enjoying their full human rights and freedoms (Mazza et al., 2021).

The health sector has unique potential to address domestic violence, particularly through health services that are accessible to the majority of the general population. However, this potential is still far from being realized. Only a few nurses or other health workers have the awareness to provide information to identify violence as the main cause of health problems in the household (Lanchimba et al., 2023). The health sector can play an important role in preventing domestic violence and helping identify violence early, providing victims with the necessary assistance facilities. Health services must be a place where at-risk groups feel safe and can receive quality and informed support. A comprehensive health sector response is needed to this problem, especially to prevent and overcome the problem of domestic violence (Babae et al., 2021).

In the field of research, public health workers can contribute by conducting studies on ideological and cultural aspects that give rise to and perpetuate the phenomenon of domestic violence. Likewise, program implementation and impact should be assessed to provide the necessary background for policy making and planning. However, the health sector must work together with all other sectors including education, law and justice, and social services.

Conclusion

The health sector has unique potential to address domestic violence, particularly through health services that are accessible to the majority of the general population. An effective response to violence must be multisectoral in addressing the urgent practical needs of victims experiencing violence and providing long-term follow-up and assistance as well as focusing on changing cultural norms, attitudes and legal provisions that support the acceptance and even encouragement of violence against victims, and weakening victims from enjoying their full human rights and freedoms, one of which is through health education activities.

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