

THE EFFECTS OF DOMESTIC VIOLENCE AMONG UNIVERSITY STUDENTS

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ABSTRACT

This study aims to examine the effects of domestic violence among university students. A qualitative interview approach was conducted with a total of 10 students from universities in Malaysia who met the inclusion criteria, namely those who have experienced or were currently experiencing domestic violence. Semi-structured interviews with open-ended questions were used to encourage respondents to elaborate and provide a more comprehensive understanding of the issue. The respondents' feedback regarding domestic violence was divided into two categories: a) mental effects and b) physical effects. Mental effects included depression, anxiety, low self-esteem, and difficulty concentrating. Physical effects included bruises, cuts, broken bones, and head trauma. The findings indicate that domestic violence adversely affects both the physical and mental well-being of university students.

Keywords: Domestic violence, University students, Mental and Physical Well-being, Psychological effects

1. INTRODUCTION

Domestic violence is a pattern of abusive behaviour in an intimate relationship that one partner uses to gain or maintain power and control over the other partner (Cortis & Smyth, 2021). Domestic violence can be physical, sexual, emotional, economic, psychological, or technological. It includes actions, threats of actions, and other patterns of coercive behaviour that influence an intimate partner. Such behaviour encompasses intimidation, manipulation, humiliation, isolation, fear-inducing tactics, terrorising, coercion, threats, blame, and acts that hurt, injure, or wound another person (Cortis & Smyth, 2021).

University Students are individuals who pursue courses at universities or higher education institutions and are considered the next generation of leaders. To reach their full potential, they require adequate support and a safe environment. However, their well-being is often compromised by exposure to violence. Numerous studies have explored how witnessing or experiencing violence early in life influences later outcomes. A study conducted in Selangor, Malaysia, found that while domestic violence was not significantly associated with age, gender, or type of institution, it was significantly related to race, religion, and parental status. Furthermore, students exposed to domestic violence during childhood often recorded lower Cumulative Grade Point Averages (CGPAs), indicating a negative impact on academic performance (Attalla et al., 2020).

This study focuses on university students who have firsthand experience with domestic violence, either as victims or witnesses. It aims to evaluate the overall impact on respondents' psychological, physical, and emotional well-being, and to explore how these experiences influence the dynamics of their future relationships. This investigation is critical, as previous research indicates that domestic violence can have long-term negative effects on both mental and physical

health, potentially leading to the development of unhealthy interpersonal relationships later in life. Specifically, the study examines how such trauma affects students' academic performance, psychological well-being, and social interactions within their environment. Furthermore, it investigates the increased risk of developing serious mental health issues, such as depression and anxiety, as well as the tendency for victims to become trapped in cycles of toxic or recurring domestic violence. By identifying these social and psychological impacts, the study seeks to provide valuable insights to design more effective prevention and intervention strategies.

Ultimately, the in-depth understanding gained through this study is intended to assist researchers in developing targeted support measures to aid victims and prevent further abuse. Additionally, the findings serve as a vital reference for university management to enhance and adapt existing policies and procedures. Such measures are crucial for ensuring a safer and more conducive campus environment, thereby providing better protection for students affected by domestic violence.

2. LITERATURE REVIEW

Recent literature indicates that domestic violence is no longer an isolated domestic issue, but rather a public health crisis that exerts a systemic impact on the psychological well-being of university students. Studies by Al Majali and Alsrehan (2020) as well as the WHO (2021) consistently link exposure to violence with a drastic decline in psychosocial functioning, whereby victims often experience identity crises and low self-esteem. However, a critical argument arises regarding the tendency of existing literature to focus too exclusively on female victims, thereby creating a narrative gap concerning male victims and individuals in non-heterosexual relationships (Bates, 2020). This data imbalance leads to a biased understanding of violence dynamics among university students and fails to reflect the diversity of the modern, more inclusive campus demographic.

From the perspective of physiological and serious mental health outcomes, significant differences in the instruments used to measure the impact of violence raise questions about the accuracy of current research findings. Conventional studies often rely on quantitative scales to measure physical injuries. However, this approach is criticised for failing to capture the nuances of emotional trauma and neurobiological changes. Zainuddin et al. (2022) emphasise that neurobiological injuries and changes in brain structure due to chronic trauma are often overlooked in university health screenings, leading to serious mental health issues such as Post-Traumatic Stress Disorder (PTSD). This gap indicates the need for integrating clinical neuroscience data with psychological self-reports to understand the extent to which this "subtle" trauma permanently affects students' cognitive abilities and emotional stability.

The relationship between domestic violence and the decline in academic performance is another critical dimension requiring re-evaluation. Although Mohd Salleh et al. (2023) and Mohamad et al. (2020) confirm that trauma leads to absenteeism and grade failure, with specific findings in Malaysia showing 18.7% of respondents being affected, there is a lack of research examining resilience factors. Much of the literature tends to label victims through a pathological lens, such as depression, without exploring positive coping mechanisms (Ungar, 2012). The failure to examine how some students maintain academic excellence in toxic environments results in university interventions that remain reactive and occasionally punitive, relying on rigid academic policies.

In Malaysia's social environment context, the gap between legal awareness and practical action reflects a systemic failure in student protection. A study by Aun and Mustaffarizan (2022) reveals that although students have access to information regarding the Domestic Violence Act 1994, their knowledge of formal channels for seeking assistance remains very superficial. This is compounded by the Ministry of Health Malaysia's (2020) analysis, which states that the cultural value of "family shame" often hinders students' courage to interact with authorities or seek professional help. This social pressure leads victims to choose to isolate themselves from the

campus social environment, which ultimately worsens their mental state through loneliness and alienation.

The emergence of new forms of violence in the digital era also exposes weaknesses in the definition of institutional protection regarding students' social interactions. Although progressive steps have been taken through the Anti-Sexual Harassment Act 2022 and the establishment of the Anti-Sexual Harassment Tribunal (2024), a study by Zakaria et al. (2023) shows the existence of a "digital gap" whereby abuse via social media or cyberstalking is not categorised as domestic violence in the minds of students. The literature still lacks a critical discussion of the extent to which campus security protocols can address "persistent abuse" that affects safe social interaction. Furthermore, discussions on economic abuse, such as the control of scholarship funds by family members or partners, remain marginalised in local studies despite being a primary form of manipulation that jeopardises student survival.

In conclusion, this review of past research suggests that research focus must shift from merely identifying external effects to a more comprehensive evaluation of structural aspects. There is an urgent need to integrate university support systems with external agencies and authorities, guided by legal frameworks such as Wadeema's Law and other domestic protection instruments, as discussed by Rahman and Hassan (2024). The primary gap to be addressed by future researchers is the development of culturally sensitive intervention models to dismantle the walls of social stigma, thereby ensuring more holistic protection for students without risking institutional-level academic or social discrimination.

3. METHODOLOGY

a. Instrument Design and Respondent Selection

Data were collected through narrative interviews to explore the respondents' life experiences and personal narratives in depth. This approach aligns with Flick's (2007) argument that narrative interviews allow individuals to structure critical experiences in story form. Initially, a screening form was distributed via Microsoft Forms to identify potential respondents among university students. Ten respondents who met the inclusion criteria were selected through purposive sampling. All participants had either experienced or witnessed domestic violence. To protect confidentiality, each participant was assigned a numerical code (e.g., R1, R2), and no identifying demographic information was collected.

b. Ethical Consideration

In light of these confidentiality protections, the participant's identity would be kept confidential, and names would not be collected throughout the research. Hence, all participants were assigned a pseudonym consisting of numerals and were not asked for any demographic information.

c. Data Collection

Data were collected mainly through interviews with ten respondents who had experienced or witnessed domestic violence. Interviews were conducted through various media at respondents' convenience, including face-to-face, voice recordings, and digital interactions via WhatsApp and text messaging. Most respondents preferred online methods due to logistical constraints, such as time limitations and faculty members' differing locations. This flexibility ensured a smooth data collection process, allowing respondents to provide transparent feedback regarding their perceptions of domestic violence. To ensure high-quality data, researchers applied two primary techniques, as follows:

- **In-Depth Interviews:** Open-ended questions were utilised to give respondents space to elaborate on their answers. In cases where responses were limited, researchers employed probing techniques, such as asking respondents to "elaborate further on..." to ensure data saturation.

- Observations: During the interview sessions (particularly face-to-face), researchers applied observational skills. This included noting actions, spontaneous reactions, facial expressions, and the manner of answering to understand the emotional weight behind the narrative better.

d. Data Analysis

The collected data were analysed using a Grounded Theory approach. Grounded Theory coding is a form of content analysis used to identify and conceptualise underlying issues within complex data (Allan, 2003). Throughout this process, researchers paid close attention to the interviewees' speech, identifying words and phrases that highlighted key points related to the research topic. This systematic process involves "coding", in which short descriptor phrases (codes) are assigned to data segments to categorise and organise information, ultimately leading to the development of valid research findings.

4. RESULT AND FINDING

4.1 Objective: To Explore Respondents' Understanding Of The Concept Of Domestic Violence

Thematic analysis of the respondents' feedback revealed three overarching themes regarding their understanding of domestic violence: (a) violence as an instrument of power and control, (b) violence as manifestations of abusive acts and behaviours, and (c) violence defined by its impact on victims.

4.1.1 Violence as an Instrument of Power and Control

- **Subtheme 1.1: Systematic patterns of domination.**

A dominant understanding among respondents conceptualised domestic violence as a deliberate and recurring pattern of behaviour used to establish dominance and maintain control within intimate or family relationships. Rather than viewing violence as isolated incidents, respondents described it as an ongoing process through which perpetrators exercise power over others. As R8 explained:

"... Domestic violence is a pattern of abusive behaviour in any relationship that one partner uses to gain or maintain power and control over another..."

Similarly, respondents R3, R5, R6, R8, and R9 consistently described domestic violence as intentional, repetitive, and coercive, emphasising that abusive behaviours are employed to reinforce unequal power dynamics within the family. Their responses indicate an understanding of domestic violence that extends beyond physical aggression to encompass the broader issue of coercive control and domination.

4.1.2 Violence as Manifestation of Abusive Acts and Behaviours

- **Subtheme 2.1: Physical assault within the household.**

Several respondents understood domestic violence primarily through visible acts of physical aggression, threats, and intimidation directed towards family members. In this perspective, domestic violence is viewed as a series of concrete incidents that occur within the domestic environment. R7 described domestic violence as:

"... Domestic violence is an incident that normally happens in a household where the father will beat the mother, or the parents will beat up the children. It is where the people with power show violent behaviour to the weak."

Respondents R2, R4, and R7 defined domestic violence using concrete examples of physical abuse, reflecting a perception that violence is primarily characterised by visible acts of harm occurring within the family environment.

- **Subtheme 2.2: Multiple forms of abuse beyond physical harm.**

Beyond physical violence, some respondents recognised that domestic violence encompasses a broader range of abusive behaviours. These respondents acknowledged that emotional manipulation, financial control, psychological abuse, and intimidation are equally significant forms of violence that can adversely affect victims' well-being.

4.1.3 Violence Defined by Its Impact on the Victim

- **Subtheme 3.1: Long-life Psychological and Physical Impact.**

Some respondents defined domestic violence primarily through the enduring consequences it has on victims' lives. Although this perspective was mentioned less frequently, it provides valuable insight into the profound and lasting nature of domestic violence. As R1 stated:

"... It has a great impact on a person's life; it brings a lifelong impact mentally and physically towards the person."

Respondents within this category emphasised that the consequences of domestic violence often extend beyond the immediate incident, affecting victims' psychological well-being, physical health, personal development, and overall quality of life. Overall, respondents demonstrated a multifaceted understanding of domestic violence. While the majority conceptualised it as a systematic mechanism of power and control, others focused on specific acts of abuse occurring within the household. A smaller group emphasised the long-term psychological and physical consequences experienced by victims.

4.2 Objective: To Explore Respondents' Personal Experiences, Emotional Impact, And Consequences Of Domestic Violence

This section examines respondents' narratives concerning their firsthand experiences of domestic violence, either as direct victims or as witnesses. The findings were organised into three overarching themes: (a) incident typology and triggering factors, (b) emotional and psychological reactions, and (c) long-term consequences and coping mechanisms.

4.2.1 Incident Typology and Triggering Factors

The majority of respondents (R1, R3, R4, R5, R7, R8, and R10) shared accounts of severe and recurring forms of domestic violence. Two subthemes emerged: (a) alcohol-fuelled physical violence and (b) the use of dangerous objects and armed conflict within the home.

- **Subtheme 1.1: Alcohol-fuelled physical violence.**

Analysis revealed that excessive alcohol consumption, particularly among father figures, was a significant trigger for physical aggression within the household. Several respondents described how alcohol intoxication intensified violent behaviour, resulting in repeated episodes of abuse. In some cases, violence involved the use of dangerous objects, including chairs, lit cigarettes, and boiling water. R3 recalled:

"My father is a hard-core drinker, and he often beats me when he is drunk."

This finding suggests that substance abuse may act as a catalyst for violent behaviour, increasing both the frequency and severity of abuse experienced by family members.

- **Subtheme 1.2: Use of dangerous objects and armed conflict within the home.**

Several respondents described situations in which domestic violence escalated beyond physical assaults to involve dangerous objects and threats of serious harm. R4 and R7 portrayed their homes as environments characterised by chronic conflict, where family members, particularly mothers, were compelled to use knives for self-defence during violent confrontations. Similarly, R8 recounted an experience of intimate partner violence (IPV) that resulted in severe physical injury, including a fractured cheekbone requiring hospitalisation. These narratives demonstrate the extreme nature of violence experienced by some respondents and highlight the extent to which domestic spaces can become sites of ongoing danger and insecurity.

4.2.2 Emotional Reactions: Fear and Powerlessness

Respondents reported a wide range of emotional responses during and after incidents of domestic violence. Feelings of fear, helplessness, and emotional paralysis were among the most commonly reported experiences.

- **Subtheme 2.1: Chronic fear and loss of a normal childhood**

For respondents who were exposed to violence from an early age, fear became a persistent aspect of daily life. Rather than experiencing a secure and nurturing childhood, these individuals described growing up in environments characterised by uncertainty and emotional distress. R6 reflected:

“Unfortunately, my upbringing was marked by constant fear... fear became a dominant emotion throughout my early years.”

The findings suggest that prolonged exposure to domestic violence can fundamentally alter childhood experiences, replacing feelings of safety and stability with chronic anxiety and hypervigilance.

- **Subtheme 2.2: Powerlessness and confusion as bystanders.**

Respondents who witnessed violence directed towards other family members frequently described feelings of helplessness and emotional overwhelm. Observing the suffering of loved ones without the capacity to intervene often generated profound psychological distress. R4 and R10 reported experiencing powerlessness, confusion, and emotional exhaustion while witnessing violent incidents involving family members. Their narratives reveal the psychological burden borne by bystanders, who may experience significant trauma despite not being the direct targets of abuse.

4.2.3 Long-Term Consequences and Coping Mechanisms

The third theme explores the enduring social and psychological consequences of domestic violence, as well as the strategies respondents employed to cope with their experiences. Three subthemes emerged: (a) concealment and social functioning difficulties, (b) cultural normalisation of violence as an expression of love, and (c) resilience and commitment to breaking the cycle of abuse.

- **Subtheme 3.1: Concealment and social functioning difficulties.**

A common coping strategy among respondents was the concealment of abuse from authority figures and members of the wider community. Feelings of shame, fear, and stigma often discouraged victims from seeking help or disclosing their experiences. R4 described hiding the reality of the abuse from teachers, while R6 highlighted the lasting psychosocial consequences of trauma:

“... The impact on my ability to express emotions and connect with people is something I continue to navigate.”

These findings suggest that domestic violence can significantly impair interpersonal functioning, making it difficult for survivors to build trusting relationships and communicate their emotions effectively.

- **Subtheme 3.2: Cultural normalisation of violence as ‘love’.**

Some respondents highlighted how certain forms of violence, particularly physical punishment, are culturally rationalised as expressions of care or discipline. R2 observed that violent disciplinary practices are often framed as acts of parental love, thereby obscuring their harmful effects. This perception reflects the cultural normalisation of violence within some family contexts, where abusive behaviours become socially accepted and are perpetuated across generations.

- **Subtheme 3.3: Resilience and commitment to break the cycle.**

Despite the profound challenges associated with domestic violence, several respondents demonstrated remarkable resilience and personal growth. Their narratives reflected ongoing healing processes, increased self-awareness, and a conscious commitment to preventing the recurrence of violence in future relationships and families. These accounts illustrate the potential for post-traumatic growth, whereby survivors transform adverse experiences into opportunities for personal development and positive change. Overall, respondents’ experiences reveal that domestic violence extends far beyond isolated incidents of physical harm. The findings demonstrate that violence is often triggered by recurring factors such as substance abuse, accompanied by profound emotional reactions characterised by fear and helplessness.

4.3 Objective: To Explore the Implications of Domestic Violence On Respondents’ Life Continuity and Personality

This section examines the long-term implications of domestic violence on respondents’ personal development, behavioural patterns, and psychological well-being. The findings were organised into two overarching themes: (a) behavioural manifestations and defence mechanisms, and (b) mental impact and self-concept formation.

4.3.1 Behavioural Manifestations and Defence Mechanisms

Theme 1 is behavioural manifestations and defence mechanisms. The findings indicate that experiences of domestic violence significantly influenced respondents’ behavioural patterns and coping strategies. To protect themselves from further emotional or physical harm, respondents developed various defence mechanisms that shaped their interactions with others and their responses to stressful situations.

- **Subtheme 1.1: Hypervigilance, Phobias, and Social Withdrawal**

Several respondents reported heightened vigilance and persistent fears that developed as a result of their traumatic experiences. Respondents (R1, R3, R4, R5, and R9) described specific phobias, particularly towards alcohol consumption and male figures who displayed dominant or aggressive physical characteristics. These experiences contributed to the development of emotional barriers and social withdrawal as protective mechanisms. For example, R5 described profound trauma that resulted in social isolation, compounded by visible physical scars and experiences of bullying during school years. The findings suggest that domestic violence can foster chronic hypervigilance, causing survivors to perceive social interactions as potential sources of danger rather than safety.

- **Subtheme 1.2: Internalisation of Emotions as Self-Protection**

Another prominent behavioural response was the tendency to suppress emotions and avoid expressing vulnerability. Respondents frequently described internalising their feelings as a strategy to prevent further victimisation or emotional harm. As R6 explained:

“The tendency to internalise emotions has become a coping mechanism, stemming from a past where expressing vulnerability could lead to further harm.”

This finding highlights how survivors often learn to conceal emotional distress in environments where expressing feelings may invite criticism, punishment, or further abuse.

- **Subtheme 1.3: Somatic and Automatic Responses**

For some respondents, the effects of trauma manifested through involuntary physical and behavioural reactions. These responses appeared to be automatic and triggered by reminders of past experiences. For instance, R8 reported difficulties maintaining academic concentration due to intrusive memories of violence. Similarly, R9 described experiencing physical reactions, such as trembling, when in proximity to a romantic partner or when discussing personal relationships. These findings suggest that traumatic experiences can become deeply embedded within survivors' physiological responses, causing their bodies to react defensively even in the absence of immediate danger.

4.3.2 Mental Impact and Self-Concept Formation

Beyond behavioural changes, domestic violence profoundly influenced respondents' psychological well-being and perceptions of themselves.

- **Subtheme 2.1: Inferiority, Self-Blame, and Feelings of Worthlessness**

Many respondents reported experiencing diminished self-worth, chronic self-doubt, and feelings of inadequacy. Narratives of self-blame and emotional devaluation were particularly prominent among survivors who had been repeatedly exposed to violence. R2 described these experiences metaphorically as existing within an “abyss,” characterised by feelings of invisibility, isolation, and a perceived lack of value:

“I feel like I am in an abyss where nobody sees me or values me.”

These findings suggest that domestic violence can significantly distort an individual's self-concept, leading survivors to internalise negative beliefs about themselves and their place within social relationships.

- **Subtheme 2.2: Sleep Disturbances and Recurring Nightmares**

The psychological effects of domestic violence also manifested through disruptions in sleep and persistent trauma-related symptoms. Respondents reported recurring nightmares, intrusive memories, and difficulties achieving restful sleep. For example, R4 described experiencing recurring nightmares linked to past incidents of violence. Such experiences indicate that traumatic memories often remain psychologically active long after the abusive events have ceased, continuing to affect emotional well-being and daily functioning.

- **Subtheme 2.3: Resilience, Support Systems, and Post-Traumatic Growth**

Despite the substantial challenges associated with domestic violence, several respondents demonstrated resilience and positive adaptation. Supportive relationships, personal determination, and positive coping strategies emerged as important protective factors in the recovery process. R10 highlighted the significant role of familial support, particularly from a grandmother, in mitigating the psychological impact of trauma. Likewise, R6 reflected on the enduring emotional scars of abuse while recognising the personal strength gained through overcoming adversity:

“While the scars persist, they serve as a testament to my strength and determination to break free from the cycle of abuse.” (R6)

These narratives illustrate elements of post-traumatic growth, whereby survivors transform painful experiences into sources of resilience, self-awareness, and motivation for personal change. Overall, the findings demonstrate that domestic violence exerts significant and enduring effects on respondents' behavioural patterns, emotional functioning, and self-concept. Survivors commonly developed defence mechanisms such as hypervigilance, emotional suppression, and automatic physiological responses to perceived threats. At the psychological level, experiences of violence contributed to feelings of inferiority, self-blame, and trauma-related sleep disturbances.

4.4 Objective 4: To Analyse Abusive Behaviour and Fear Triggers Among Respondents

This objective aimed to identify specific behaviours, situations, and cues exhibited by perpetrators that triggered fear among respondents, whether as direct victims or witnesses of domestic violence. Analysis of the respondents' narratives revealed three primary sources of fear: (a) physical violence and the use of dangerous objects, (b) verbal and emotional abuse, and (c) non-verbal cues and psychological manipulation.

4.4.1 Physical Violence and the Use of Dangerous Objects

- **Subtheme 1.1: Weapons and Property Destruction as Intimidation**

The most immediate and explicit source of fear stemmed from aggressive behaviours involving the destruction of property or the use of dangerous objects as instruments of intimidation. Respondents described incidents in which perpetrators smashed household items, threw objects, or brandished weapons to assert control and instil fear. As R9 reported:

“From my friend’s view, my friend’s partner is holding a knife to pressure my friend to go inside the house.”

Similarly, R3 and R10 described situations in which perpetrators damaged property or displayed objects such as chairs and canes in a threatening manner. Although physical violence did not always occur during these incidents, the presence of weapons and aggressive actions created a pervasive sense of danger.

4.4.2 Verbal and Emotional Abuse

Fear was also triggered through verbal aggression and emotionally abusive behaviours. Respondents described how shouting, profanity, and displaced anger generated feelings of anxiety and anticipation, particularly when such behaviours frequently preceded physical violence.

- **Subtheme 2.1: Shouting, Profanity, and Displaced Anger**

Raised voices, verbal insults, and expressions of uncontrolled anger emerged as common triggers of fear. Respondents reported that verbal aggression often served as an early warning sign of impending violence, leading them to anticipate further abuse. For example, R1 explained that fear frequently arose when parents returned home in an angry mood after work, as their frustration would often be directed towards family members.

4.4.3 Non-Verbal Cues and Psychological Manipulation

Beyond overt violence and verbal aggression, respondents identified subtle non-verbal behaviours as powerful triggers of fear. These cues often carried implicit threats and created psychological distress through uncertainty and unpredictability.

- **Subtheme 3.1: Silence and Body Language as Threats**

Several respondents described how changes in an abuser's body language, facial expressions, or silence could generate intense anxiety. Unlike physical or verbal aggression, these behaviours were

often ambiguous, forcing victims to interpret their meaning and anticipate potential consequences. R2 reflected:

“Whenever he does not speak, I get scared, and I try to remember if I did something wrong.”

This response illustrates how prolonged exposure to violence can condition individuals to perceive silence as a warning sign of impending conflict. Respondents frequently described monitoring perpetrators’ behaviour to predict potential outbursts and minimise risk. Furthermore, R8 explained that subtle emotional expressions, including displays of sadness, changes in facial expression, and slight hand movements, often functioned as implicit warnings. These behaviours were understood as coded signals that conveyed displeasure, threats, or expectations without requiring explicit verbal communication. Overall, the findings indicate that fear among respondents was triggered by a combination of physical, verbal, and psychological forms of abuse. While overt acts such as weapon use and property destruction generated immediate fear, verbal aggression and non-verbal cues also played a significant role in maintaining an atmosphere of intimidation.

4.5 Objective: To Explore the Impact of Domestic Violence on Respondents’ Self-Esteem and Self-Worth

This objective examines the emotional and psychological consequences of domestic violence, particularly its influence on respondents’ perceptions of self-worth, personal value, and social identity. The findings suggest that experiences of domestic violence not only undermine confidence in social and academic settings but also shape respondents’ perceptions of interpersonal relationships and future life choices. Two primary themes emerged from the analysis: (a) deterioration of social and academic confidence and (b) erosion of self-worth and social stigma.

4.5.1 Deterioration of Social and Academic Confidence

- **Subtheme 1.1: Social Anxiety and Somatic Symptoms in Academic Settings**

Several respondents described experiencing anxiety and discomfort in routine social interactions. Feelings of low self-esteem often manifested through avoidant behaviours, including difficulty maintaining eye contact and engaging confidently with peers. R1 explained:

“In college, I will avoid eye contact when meeting my friends’ friends. I will also get headaches when the lecturer is aggressive”.

This account illustrates how the psychological effects of domestic violence can extend into academic environments, influencing both social functioning and learning experiences. Similarly, R3 described experiencing self-loathing and viewing life as mundane and meaningless. Such narratives indicate that domestic violence may diminish intrinsic motivation, reduce self-confidence, and negatively affect an individual’s capacity to derive satisfaction from everyday experiences.

4.5.2 Erosion of Self-Worth and Social Stigma

Beyond its effects on confidence, domestic violence was found to profoundly influence respondents’ perceptions of their own value and social identity. Experiences of stigma, bullying, and negative social interactions often reinforced feelings of inadequacy and victimisation.

- **Subtheme 2.1: Bullying, Pity, and Reinforced Victim Identity**

Several respondents reported that the reactions of peers, neighbours, and members of the wider community contributed to the deterioration of their self-worth. Rather than receiving support and understanding, some respondents encountered bullying, judgment, or excessive pity, which further

reinforced their sense of being different or damaged. R4 explained that classmates often looked down on them, while neighbours attached stigma to their family circumstances. These responses from others intensified feelings of shame and social exclusion, contributing to a reinforced victim identity.

- **Subtheme 2.2: Negative Perceptions of Marriage and Long-Term Relationships**

Experiences of domestic violence also influenced respondents' perceptions of future intimate relationships and family life. Witnessing violence within the household often led to negative assumptions about marriage, trust, and long-term commitment. R7 reflected:

"...the bad side of marriage through my family's incidents made me think that marriage is not necessarily a good thing... so I think it is better to be alone sometimes."

This narrative demonstrates how exposure to domestic violence can shape an individual's expectations of future relationships. Rather than viewing marriage as a source of companionship and security, respondents may associate intimate relationships with conflict, instability, and emotional harm. Overall, the findings demonstrate that domestic violence has profound implications for respondents' self-esteem and self-worth. Exposure to abuse undermines confidence in social and academic settings, contributes to feelings of inadequacy, and may result in anxiety-related somatic symptoms.

4.6 Objective: To Explore the Psychological Changes in Behaviour and Emotional Stability Post-Incident as a Coping Mechanism

This study explored psychological and behavioural changes following participants' exposure to violence as a coping mechanism. Thematic analysis identified two overarching themes: (a) negative psychological and behavioural changes and (b) positive psychological adaptations. The majority of participants reported adverse psychological outcomes, while a minority described experiences consistent with adaptive change and personal growth.

4.6.1 Negative Psychological and Behavioural Changes

- **Subtheme 1.1: Social withdrawal and avoidance of crowded environments**

Participants commonly reported social withdrawal and avoidance of social situations following exposure to violence. Participants (R1, R3, R5) described reduced social engagement and a preference for isolation, particularly within university settings. For some participants, crowded environments were associated with significant emotional distress and physiological symptoms. R1 stated:

"I do not like socialising... If it is too crowded, I cannot breathe and feel like vomiting".

These accounts indicate that avoidance behaviours were accompanied by somatic and anxiety-related responses in socially dense environments.

- **Subtheme 1.2: Increased anger and emotional suppression**

Participant R4 reported heightened anger and persistent dissatisfaction following the incident. This was accompanied by emotional suppression strategies, including the development of an "emotional wall" to avoid discussing traumatic experiences. Across respondents, emotional instability was characterised by increased irritability, restricted emotional expression, and sustained negative affect.

4.6.2 Positive Psychological Adaptations

- **Subtheme 2.1: Increased empathy and assertive communication**

Although most participants described negative psychological outcomes, a subset reported positive psychological changes following exposure to violence. These included increased empathy, enhanced self-awareness, and improved communication skills. These changes were described as part of efforts to prevent the recurrence of violence and to improve interpersonal functioning. R10 stated:

“I feel more confident after the incident... I know how to care more towards a person and become good at communication to speak out my needs”.

- **Subtheme 2.2: Preference for healthier relationships and increased appreciation of kindness**

Participant R2 described a stronger preference for healthy interpersonal relationships and an increased appreciation of others' kindness following the incident. These changes reflect adaptive relational adjustments following exposure to trauma. Overall, the findings demonstrate a predominance of negative psychological outcomes, including social withdrawal, emotional instability, and emotional suppression. However, fewer participants reported adaptive changes characterised by improved interpersonal awareness and relational functioning.

4.7 Objective: To Identify the Respondent's Perceptions of Domestic Safety and the Concept of “Home”

This objective examined participants' perceptions of safety and well-being within their domestic environments. While the concept of home is conventionally understood as a place of safety and security, findings from this study indicate that this assumption is largely absent among participants who experienced domestic violence. The majority of respondents no longer perceived their residence as a safe environment, with some reporting a complete disruption of their sense of belonging and residential identity.

4.7.1 Erosion of Safety as “Home as a Threatening Environment”

- **Subtheme 1.1: Home as a site of fear and distress**

Findings indicate that participants frequently described their home environments as unsafe and emotionally distressing. Some participants used strong figurative language to describe their lived experiences. For example, R3 described their home as:

“No. It is like a living hell for me.”

Similarly, R5 reported that the presence of the abusive father within the home was sufficient to create a persistent sense of threat, resulting in a lack of emotional safety and ongoing tension among family members.

4.7.2 Domestic Alienation and Loss of Residential Belonging

- **Subtheme 2.1: Experiencing disconnection and “feeling homeless” within the family home**

Respondents reported feeling disconnected from their domestic environment despite biological ties to their family. R2 stated:

“Even though I was born into that family, it is not my home.”

This reflects a perceived loss of belonging and emotional attachment to the household, despite its physical designation as their home.

- **Subtheme 2.2: Location avoidance as a coping and survival strategy**

Some participants described behavioural strategies aimed at avoiding exposure to domestic violence within the home. R4 reported spending extended periods outside the home, including staying at a playground until late at night, in order to avoid encountering the abuser. This behaviour illustrates location avoidance as a coping strategy for managing perceived threats within the domestic environment. Overall, the findings demonstrate a substantial erosion of perceived domestic safety among participants. The home environment was frequently described as a site of fear and emotional distress.

4.8 Objective: To Explore the Interpersonal Relationship Dynamics and Perceptions of Intimacy among Respondents.

This objective explored how experiences of domestic violence influence respondents' perceptions of intimacy and their ability to form interpersonal relationships in the future. Thematic analysis revealed a complex range of responses, organised into three overarching themes: (a) resistance and fear of intimacy, (b) intimacy as a coping mechanism, and (c) compartmentalisation of trauma in relation to new relationships.

4.8.1 Resistance and Fear of Intimacy

- **Subtheme 1.1: Avoidance of close relationships and physical contact**

The majority of participants (R3, R5, R9) reported avoiding close interpersonal relationships and maintaining emotional distance in their social interactions. These responses were commonly linked to reduced trust and the development of emotional barriers following exposure to violence. R5 described a direct association between past physical abuse and avoidance of physical intimacy:

“After this experience, I was very resistant to intimacy, and I showed a refusal to let anyone touch me because it brought back images of my dad hitting me in anger.”

In addition, R9 reported that witnessing domestic violence in others contributed to fear and avoidance of long-term relational commitments, including marriage.

4.8.2 Intimacy as a Coping Mechanism

- **Subtheme 2.1: Emotional deprivation and seeking affection in external relationships**

In contrast to avoidance patterns, some participants described increased reliance on intimate relationships as a coping strategy for unmet emotional needs. R2 reported that a lack of affection within the family environment contributed to a strong desire for emotional closeness with others:

“Because I do not have love in my family, I will crave intimacy. Putting my emotions in people around me is my way of trying to find the love I am missing from my family.”

These accounts suggest that experiences of domestic violence and emotional neglect may contribute to heightened emotional dependency and efforts to seek validation and affection outside the family system.

4.8.3 Compartmentalisation of Trauma in Relation to New Relationships

- **Subtheme 3.1: Separation of past trauma from future relational experiences**

A small number of respondents demonstrated an ability to cognitively separate past traumatic experiences from their expectations of future relationships. R10 indicated no reluctance toward

forming intimate relationships and described maintaining a distinction between past violence and present relational possibilities. This reflects a form of cognitive compartmentalisation, where prior adverse experiences do not necessarily determine future relational outlooks. Overall, findings indicate a broad spectrum of relational responses following exposure to domestic violence. While most participants reported fear of intimacy and relational avoidance, others described increased emotional dependency and a search for affection as a coping strategy.

4.9 Objective: To Examine the Impact of Domestic Violence on Concentration and Academic Performance among University Students.

This objective examined the extent to which experiences of domestic violence influence students' cognitive functioning and academic performance. Thematic analysis revealed three overarching themes: (a) cognitive interference from traumatic memories, (b) academic performance decline and behavioural disruption, and (c) academia as a form of motivation for self-liberation.

4.9.1 Cognitive Interference from Traumatic Memories

- **Subtheme 1.1: Intrusive memories and flashbacks during academic tasks**

Participants who reported academic disruption (R8, R10) indicated that difficulties in concentration were primarily due to intrusive traumatic memories rather than lack of effort or motivation. These memory intrusions were described as spontaneous and disruptive during academic activities. R10 stated:

“Whenever I am doing my things, my mind will flash back to the incident... it is kind of vivid in my mind.”

R8 similarly reported experiencing recurrent flashbacks during study sessions, which interfered with concentration, disrupted cognitive flow, and reduced productivity.

4.9.2 Academic Performance Decline and Behavioural Disruption

- **Subtheme 2.1: Decline in academic performance and truancy**

Some participants reported noticeable declines in academic performance and increased difficulties in maintaining academic responsibilities. R4 described a significant drop in academic ranking, resulting in a transfer to a lower-performing class. In addition, emotional distress associated with the domestic environment contributed to reduced school attendance and disengagement. R3 reported:

“I did not perform well in school because I was always skipping classes.”

These findings indicate that domestic violence may contribute to both academic underperformance and reduced institutional engagement, including truancy.

4.9.3 Academia as a Motivation for Self-Liberation

- **Subtheme 3.1: Education as an escape and future-oriented coping strategy**

In contrast to participants who reported academic disruption, several respondents (R1, R2, R7) indicated that their academic performance remained stable despite exposure to domestic violence. For these participants, education was described as a pathway toward independence and escape from adverse home environments. R1 expressed a strong, future-oriented motivation to succeed academically to achieve financial and personal autonomy. These accounts suggest that, for some individuals, academic engagement functions as a resilience-based coping strategy and a mechanism for self-determination. Overall, the findings demonstrate varied academic outcomes following exposure to domestic violence. While many participants experienced cognitive interference,

reduced academic performance, and behavioural disengagement, others maintained academic stability by reframing education as a motivational and liberating force.

4.10 Objective: To Analyse the Forms of Physical Abuse and Instruments of Violence Experienced by Victims of Domestic Violence

This objective examined the forms and mechanisms of physical abuse experienced by participants, with particular attention to the modus operandi of violence and the severity of harm inflicted. Thematic analysis indicated that domestic violence was primarily characterised by the use of direct physical force as well as the weaponisation of everyday household objects. Two overarching themes were identified: (a) use of physical force (body parts), and (b) improvised weapons derived from domestic objects.

4.10.1 Use of Physical Force (Body Parts)

- **Subtheme 1.1: Direct bodily assaults**

The majority of participants (R1, R2, R5) reported that physical abuse commonly involved the use of the abuser's body as the primary instrument of violence. Forms of assault included slapping, punching, and ear-pulling, which were described as recurrent methods of punishment or aggression. R1 described the physical consequences of such actions:

“They pull my ears, hit me in the head, slap me. It makes me have tinnitus a lot of times. But I did not say anything.”

This indicates that repeated physical assaults were associated with lasting physiological effects, including reported hearing-related symptoms such as tinnitus.

4.10.2 Improvised Weapons from Domestic Objects

- **Subtheme 2.1: Weaponisation of household items**

Findings also indicate that everyday household objects were frequently repurposed as instruments of violence, often intensifying the level of threat and physical harm. Participants (R4, R5) reported that a range of domestic items could be used when the abuser became emotionally dysregulated. R4 described the use of objects such as broomsticks and canes, while R5 reported incidents involving glass objects:

“Often by hand, and occasionally by a glass bottle of alcohol when he gets angry.”

These accounts suggest that violence extended beyond direct bodily force to include opportunistic use of accessible objects within the home environment. Overall, the findings indicate that physical abuse occurred through both direct bodily violence and the use of improvised household weapons.

4.11 Objective: To Analyse the Persistent Physical Effects and Somatisation of Trauma Among Victims of Domestic Violence.

This objective examined the long-term physical consequences of domestic violence among participants, with particular attention to the persistence and frequency of trauma-related symptoms. Findings indicate a consistent pattern whereby visible physical injuries had largely resolved; however, psychological distress and somatic manifestations of trauma persisted. Two overarching themes were identified: (a) absence of permanent physical injury, and (b) somatic reactions and heightened sensitivity to physical contact.

4.11.1 Absence of Permanent Physical Injury

- **Subtheme 1.1: Resolution of visible injuries with residual cognitive and sleep-related effects**

The majority of participants (R4, R7, R10) reported no ongoing visible physical injuries at the time of the interview. However, some participants described lingering cognitive and sleep-related disturbances associated with prior experiences of violence. R4 noted:

“No, perhaps I just had trouble concentrating due to nightmares. But now, everything has become well.”

These accounts suggest that while acute physical injuries may be temporary, the psychological sequelae of domestic violence may persist beyond physical recovery, particularly in relation to concentration and sleep quality.

4.11.2 Somatic Reactions and Heightened Sensitivity to Physical Contact

- **Subtheme 2.1: Bodily responses and trauma-related physical sensitivity**

Despite reporting an absence of ongoing physical injuries, several participants described persistent somatic and physiological responses triggered by trauma-related cues. R2 reported discomfort and fear in response to certain physical gestures:

“Physical contact is hard for me. I do not like it when people raise their hands. There is something about it that scares me.”

These indicate trauma-related bodily sensitivity, where specific movements or physical proximity act as triggers for fear responses. Overall, the findings suggest that although participants no longer experienced visible physical injuries, the impact of domestic violence persisted in the form of psychological distress and somatic responses. Table 1 presents a consolidated summary of the research objectives, major themes, and key findings derived from the thematic analysis of participants' responses.

Table 1
Summary of Research Result

Objective	Major Themes	Key Findings
Objective 1: Understanding of Domestic Violence	1. Violence as Power and Control 2. Violence as Abusive Acts and Behaviours 3. Violence Defined by Victim Impact	Respondents predominantly understood domestic violence as a systematic mechanism of power and control. Others defined it through physical, emotional, psychological, and financial abuse, while some emphasised its long-term psychological and physical consequences on victims.
Objective 2: Personal Experiences, Emotional Impact, and Consequences	1. Incident Typology and Triggering Factors 2. Emotional Reactions: Fear and Powerlessness 3. Long-Term Consequences and Coping Mechanisms	Domestic violence was commonly associated with alcohol-fuelled aggression, physical assaults, and the use of dangerous objects. Respondents experienced chronic fear, helplessness, and emotional distress. Long-term consequences included social difficulties, concealment of abuse, normalisation of violence, and efforts to break the cycle of abuse.

Objective 3: Implications on Life Continuity and Personality	1. Behavioural Manifestations and Defence Mechanisms 2. Mental Impact and Self-Concept Formation	Participants developed defence mechanisms such as hypervigilance, social withdrawal, emotional suppression, and trauma-related physiological responses. Domestic violence negatively affected self-esteem, self-worth, and sleep quality, although some respondents demonstrated resilience and post-traumatic growth.
Objective 4: Abusive Behaviour and Fear Triggers	1. Physical Violence and Dangerous Objects 2. Verbal and Emotional Abuse 3. Non-Verbal Cues and Psychological Manipulation	Fear was triggered not only by physical violence and weapons but also by shouting, hostility, silence, body language, and subtle behavioural cues. Respondents developed heightened vigilance toward signs of impending conflict.
Objective 5: Impact on Self- Esteem and Self- Worth	1. Deterioration of Social and Academic Confidence 2. Erosion of Self-Worth and Social Stigma	Domestic violence reduced confidence in academic and social settings, contributing to anxiety, self-doubt, and avoidance behaviours. Stigma, bullying, and negative community perceptions reinforced feelings of worthlessness and influenced attitudes toward future relationships and marriage.
Objective 6: Psychological Changes and Emotional Stability Post-Incident	1. Negative Psychological and Behavioural Changes 2. Positive Psychological Adaptations	Most respondents experienced social withdrawal, emotional instability, anger, and emotional suppression. However, some reported increased empathy, improved communication skills, and greater appreciation of healthy relationships, reflecting adaptive coping and personal growth.
Objective 7: Perceptions of Domestic Safety and the Concept of Home	1. Erosion of Safety: Home as a Threatening Environment 2. Domestic Alienation and Loss of Residential Belonging	Participants frequently perceived their homes as unsafe and emotionally distressing spaces. Many reported feeling disconnected from their family home, while some avoided the home environment altogether as a survival strategy.
Objective 8: Interpersonal Relationship Dynamics and Perceptions of Intimacy	1. Resistance and Fear of Intimacy 2. Intimacy as a Coping Mechanism 3. Compartmentalisation of Trauma	Experiences of domestic violence influenced future relationship patterns. Many respondents avoided intimacy and physical contact due to trust issues and trauma. Others sought affection to compensate for emotional deprivation, while a minority successfully separated past trauma from future relationship expectations.
Objective 9: Impact on Concentration and Academic Performance	1. Cognitive Interference from Traumatic Memories 2. Academic Performance Decline and Behavioural Disruption 3. Academia as Self-Liberation	Trauma-related flashbacks and intrusive memories disrupted concentration and academic performance. Some respondents experienced truancy and declining grades, whereas others viewed education as a pathway to independence and escape from abusive environments.
Objective 10: Forms of Physical Abuse and Instruments of Violence	1. Use of Physical Force (Body Parts) 2. Improvised Weapons from Domestic Objects	Physical abuse commonly involved slapping, punching, and ear-pulling. Household objects such as broomsticks, canes, and glass bottles were also weaponised, intensifying both physical harm and psychological fear.
Objective 11: Persistent Physical Effects and Somatisation of Trauma	1. Absence of Permanent Physical Injury 2. Somatic Reactions and Physical Sensitivity	Although visible injuries generally healed over time, respondents continued to experience trauma-related symptoms such as nightmares, concentration difficulties, fear responses, and heightened sensitivity to physical contact. Psychological and physiological effects were more enduring than physical injuries.

5. DISCUSSION

This study found that domestic violence exerts significant multidimensional impacts on university students in Malaysia, with contusions identified as the most prevalent physical manifestation. This finding aligns with research by Bedi and Kelly (2024), which states that soft tissue injuries caused by blunt objects are the primary clinical indicators in domestic violence cases. From the perspective of Social Learning Theory, the use of everyday household objects such as bottles and belts by abusers demonstrates how aggressive behaviour is manifested through the instruments available in their environment. This reinforces the argument that physical violence is not merely a random act, but a systematic tool used to assert dominance and power over weaker family members.

Regarding the psychological impact, anxiety emerged as the most dominant mental health outcome, which can be explained through the theory of Learned Helplessness. The prominence of anxiety suggests that prolonged exposure to unpredictable and threatening environments may have fostered a persistent state of hypervigilance among participants. Individuals who experience repeated and uncontrollable threats often lose their ability to anticipate or prevent future harm, leading to chronic anxiety. According to the World Health Organisation (2021) and Al Majali (2020), prolonged exposure to violence keeps the nervous system in a state of heightened alertness, leading individuals to constantly perceive potential danger even in relatively safe situations. This sustained hypervigilance can erode trust in others and the surrounding environment, ultimately contributing to generalised anxiety symptoms that interfere with daily functioning, including academic performance and social interactions among university students.

The dynamics of violence in this study are also heavily influenced by socioeconomic factors and life stressors, consistent with the Family Stress Model. According to Mohamad et al. (2020), economic instability among the heads of household in the Malaysian context is often expressed as aggression, serving as a frustration-aggression release mechanism. The use of alcohol as a primary trigger in the respondents' narratives also supports reports from the Ministry of Health Malaysia (2020), which show that post-pandemic pressure and addiction issues have drastically increased domestic violence statistics. These factors create a toxic household ecosystem where university students become targets of emotional discharge resulting from the structural failures faced by the abuser.

The impact on the respondents' academic performance, which declined drastically, proves that domestic trauma seriously disrupts cognitive functions. Noraide et al. (2023) explain that traumatic memories that are visual and vivid in nature (flashbacks) interfere with the brain's frontal lobe, which is responsible for focus and learning. However, the discovery of a small number of respondents who remained excellent supports the concept of Post-Traumatic Growth studied by Siti et al. (2023). In this context, academia serves as a positive coping mechanism, where students use education as a ticket to achieve personal freedom and break the cycle of family poverty and violence.

Furthermore, this study revealed deep cultural barriers to reporting cases, with respondents tending to hide contusions behind the excuse of accidents. According to Aun and Mustaffarizan (2022), the concept of “family shame” in Malaysian society is a major barrier that makes victims more willing to suffer in silence. This justifies the effectiveness of the researchers' observation and active listening skills. Since victims often experience conflict between the need for protection and the desire to maintain family dignity, a sensitive qualitative approach was found to be more effective in identifying victims compared to formal self-reporting systems.

To address this issue comprehensively, the integration of educational institutions with external protection agencies is urgently needed. Based on the recommendations of Rahman and Hassan (2024), universities should develop more inclusive campus safety protocols, including recognising “domestic trauma” as a valid factor for academic flexibility. The provision of “safe spaces” and counselling services specifically for victims of violence not only assists in mental

recovery but also acts as a critical support system that ensures students do not drop out of the education system due to situations beyond their control.

Overall, this discussion concludes that the effects of domestic violence on university students in Malaysia are systemic and long-lasting. While primary physical injuries such as contusions may heal, psychological effects like chronic anxiety and the erosion of self-esteem require deeper intervention. Future intervention strategies must be multidimensional, combining clinical support, legal literacy, and socioeconomic empowerment to ensure that the university ecosystem truly becomes a safe space for the intellectual and emotional growth of violence survivors.

6. CONCLUSION

In conclusion, this study clearly demonstrates that domestic violence is not merely a private domestic issue but a multidimensional crisis that leaves a profound impact on the physical, mental, and academic well-being of university students in Malaysia. The findings prove that while physical injuries such as contusions may heal over time, psychological scars in the form of chronic anxiety, somatisation of trauma, and the erosion of self-esteem continue to haunt survivors into adulthood. This phenomenon creates an unsafe home environment, which subsequently robs survivors of their sense of belonging and impairs their ability to build healthy interpersonal relationships and to function optimally within the university environment. Ultimately, this research underscores the urgent need for a more holistic and trauma-informed approach to intervention in higher education. Although a minority of survivors exhibit remarkable resilience through academic excellence, the majority remain trapped in a cycle of trauma that requires a systematic support system, including easy access to specialised counselling and legal protection that is safe from cultural stigma. By bridging the gap between victim identification and the provision of clinical assistance, universities can play a pivotal role in breaking the cycle of violence, ensuring that every student can flourish in a fear-free environment, thereby securing the sustainability of their future potential.

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Article received 2026-06-29