



THE EFFECT OF RECOGNIZING SYMPTOMS OF VIOLENCE AGAINST WOMEN ON REPORTING INTENTION IN GENERATION Z AND Y NURSES: AN INTERGENERATIONAL COMPARISON

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ARTICLE INFO

Article Type: Research Paper
Article history:
Received: 10.07.2025
Received in revised form: 19.08.2025
Accepted: 04.09.2025
Published Online: 01.12.2025

Keywords:
Generations
Intention to Report
Nurse
Violence Against Women

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ABSTRACT

This study aims to investigate the effect of recognizing violence against women in nursing on the intention to report, according to generations Z and Y. The cross-sectional study was carried out with 453 participants, consisting of 202 currently employed nurses and 251 nursing students. Data were analyzed using the Structural Equation Model. As nurses' knowledge level of recognizing VAW symptoms increases, their intention to report also increases positively ($\beta = 0.25, p < 0.01$). Generation Z has a higher knowledge level ($\beta = -0.21, p < 0.01$) and a more positive intention to report compared to Generation Y ($\beta = -0.052, p < 0.01$). These results indicate that Generation Z nurses are more sensitive to such social problems and can take a more active role in this regard. This study may provide healthcare professionals with insight into how intervention strategies should be customized for different generations.

1. INTRODUCTION

Violence against women (VAW) is a health problem that threatens women's health both in Turkey and in the world and needs to be solved to ensure the continuity of society with healthy generations (Çıkrık & Şahin, 2023). The solution to this problem is not limited to assisting only victims of violence but also requires understanding the level of knowledge, attitudes, and intention to report violence of individuals. In this context, understanding how generations affect the level of knowledge and intention to report VAW is a critical step for developing effective strategies for combating violence (Hamel & Russell, 2014).

Recognizing VAW is the process by which nurses recognize the violence women are subjected to, acquire the skills to assess it, and correctly interpret potential risks. This skill is developed through data such as body language, behavioral cues, signs of trauma, and patient history (Turan

Miral & Ödül Özkaya, 2024). Intention to report is nurses' tendency to report VAW to the competent authorities (Koştu & Toraman, 2021). It is very important for nurses, who are the primary source of help that women contact first, to recognize and report VAW (Akın et al., 2022). Nurses should take a detailed history, evaluate the presence of violence, screen for and recognize violence and observe symptoms that suggest violence, educate the community about available support resources, and be effective in preventing violence (Çıkrık & Şahin, 2023). Despite this, it has been reported that some healthcare professionals are hesitant to report VAW cases and are reluctant to intervene (Akın et al., 2022; Cerit & Porsuk, 2023). In a study, it was reported that 72.6% of healthcare professionals encountered VAW, 24.5% had difficulty in taking a history, and 55.1% had difficulty in reporting (Kara et al., 2018). Not knowing what to do for women who are victims of violence in health institutions has been associated with insufficient information (Şahin & Satılmış, 2020). In addition, it has been determined that midwives and nurses who are older, have a good socioeconomic level, live in rural areas, have been subjected to violence in the past, and have encountered women who have been subjected to violence have a more approving attitude towards violence (Kıyak & Akın, 2010).

Individuals' intention to recognize and report VAW is affected by factors such as sociocultural context, generations, level of education, and interaction with the media. For example, Baby Boomers (1946-1964) may be more hesitant to recognize and report violence because they grew up with more traditional gender roles. Generation X (Gen X) (1965-1980) grew up in a relatively modern environment. The most important feature that distinguishes them from the previous generation is the importance they give to gender equality and independence. It can be said that Generation X women are entering the workforce for the first time. Since Generation Y (Millennials) (1981-1996) grew up in a period when issues such as women's rights, gender equality, and women's actions were more frequently on the agenda, their level of knowledge and awareness about VAW may be higher (Akgül, 2022). They actively use social networks to take action or help each other (Aygün & Söylev, 2023). Since Generation Z (Gen Z / iGen) (1997-2012) is the crystal generation that opened their eyes in the Internet age and technology, their awareness of recognizing and reporting VAW may be higher than other generations due to the influence of digital and social media (Akgül, 2022; İçli, 2018; Twenge, 2017). Generation Z, who grew up in a period of rapid social change and technological growth, is deeply concerned with social justice issues such as VAW. They frequently use social media and other platforms (#MeToo, #TimesUp, etc.) to raise awareness and advocate for victims of abuse (Zay, 2021).

Understanding the differences between generations in nursing services plays a critical role in increasing cooperation, resolving conflicts, and providing motivation. In addition, these are considered important for a quality work life and the sustainability of health services (Alan et al., 2020). The organizational/professional commitment, participation in the workforce, job satisfaction, satisfaction levels, and intentions to leave the job and profession of nurses according to their generations have been examined (Alan et al., 2020; Hisel, 2020; Waltz et al., 2020). In the literature review, no study was found examining the effect of recognizing VAW in nurses according to generations on the intention to report. This study aims to investigate the effect of recognizing VAW in nurses according to generations on the intention to report. Understanding nurses' intentions to recognize and report VAW is of great importance both in terms of increasing the quality of support to be provided to VAW victims and in terms of ensuring social transformation. They may also provide important clues to understand which factors hinder or facilitate reporting by healthcare professionals (Heron & Eisma, 2021).

2. MATERIALS AND METHODS

2.1. Design

This cross-sectional study was conducted between April 2023 and August 2023.

2.2. Sample

The sample included currently employed nurses and practicing undergraduate student nurses at the XXX University Hospital in Türkiye. In this study, the sample was calculated as 95%, the margin of error was 5%, the VAW reporting rate was 8% (Güneş et al., 2018), the universe size was 1003 (the number of nursing undergraduate students in 2023 was 503, the number of currently employed nurses was 500) and the sample was calculated as 186 (Calculator.net, 2024).

Inclusion criteria for the study were: being 18 years of age or over, being a nursing student or working as a current nurse, not having any diagnosed chronic or psychiatric disorders, and agreeing to participate in the study voluntarily. Those criteria did not met who were excluded from the study.

Data were collected from a total of 460 participants. However, due to the insufficient number of nurses from Generation X (1965–1980) (n=7), this group was excluded from the analysis.

Therefore, data from a total of 453 participants, consisting of 202 currently employed nurses and 251 nursing students, were evaluated in the study.

2.3. Data Collection

Data was collected with a questionnaire. It consisted of three sections:

2.3.1. Sociodemographic Information

It included the participants' age, date of birth, marital status, socioeconomic level, etc. Generation Z (born in 1997 and later) is coded as "1" and Generation Y (1981–1996) as "2" based on their birth dates.

2.3.2. Recognizing VAW Symptoms

The Scale for Recognizing VAW Symptoms of Nurses and Midwives was developed by Baysan Arabacı and Karadağlı (2006) and consists of a total of 31 items. The scale has two sub-dimensions: physical symptoms and emotional symptoms. Items are scored as 1 "true" and 0 "false." The total score ranges from 0 to 31. As the total score increases, the level of knowledge regarding recognizing VAW symptoms increases. Cronbach's alpha (α) coefficient was 0.76 in the original scale (Baysan Arabacı & Karadağlı, 2006) and 0.67 in this study.

2.3.3. Intention to Report VAW

Healthcare Workers' Intention to Report Intimate Partner VAW Scale was developed by Koştu and Toraman (2016) based on the Theory of Planned Behavior and consists of 27 items with a 7-point Likert scale. Items are scored from 1 "Strongly Disagree" to 7 "Strongly Agree". The total score ranges from 27 to 189. As the total score increases, the intention to report on VAW. The α was 0.96 both in the original scale (Koştu & Toraman, 2016) and in this study.

2.4. Statistical Analysis

Descriptive statistics of the variables (mean \pm standard deviation or number and percentage) were given. The conformity of the data to normal distribution was evaluated with skewness and kurtosis coefficients. In the analysis of data, the t-test for independent samples was applied to determine the difference in scale scores between the two groups. Since the skewness coefficients were less than three and the kurtosis coefficients were less than 10, the assumption of normality was accepted (Kline, 2011). For the multicollinearity problem, the relationships between numerical variables were tested with the Pearson correlation coefficient. The direct

and indirect effects were tested in the Structural Equation Model. First, the hypothetical model was tested, and then it was examined using the Bootstrap Estimation Method (Figure 1). The one-way arrows in the model represent the research hypotheses. The ratio of the chi-square statistic to the degrees of freedom (χ^2/df), the Goodness of Fit Index (GFI), the Adjusted Goodness of Fit Index (AGFI), the Root Mean Square Error of Approximation (RMSEA), the Normed Fit Index (NFI), the Tucker-Lewis Index (TLI), and the Comparative Fit Index (CFI) were used to determine the model fit. A value of 0.90 or more for GFI, AGFI, NFI, TLI, and CFI; a value of 0.08 or less for RMSEA indicates a good fit. A ratio of 2 or less for χ^2/df reflects a perfect fit (Kline, 2011). SPSS 24.0 and AMOS 22 software were used for statistical analysis. The type 1 error level below 5% is statistically significant.

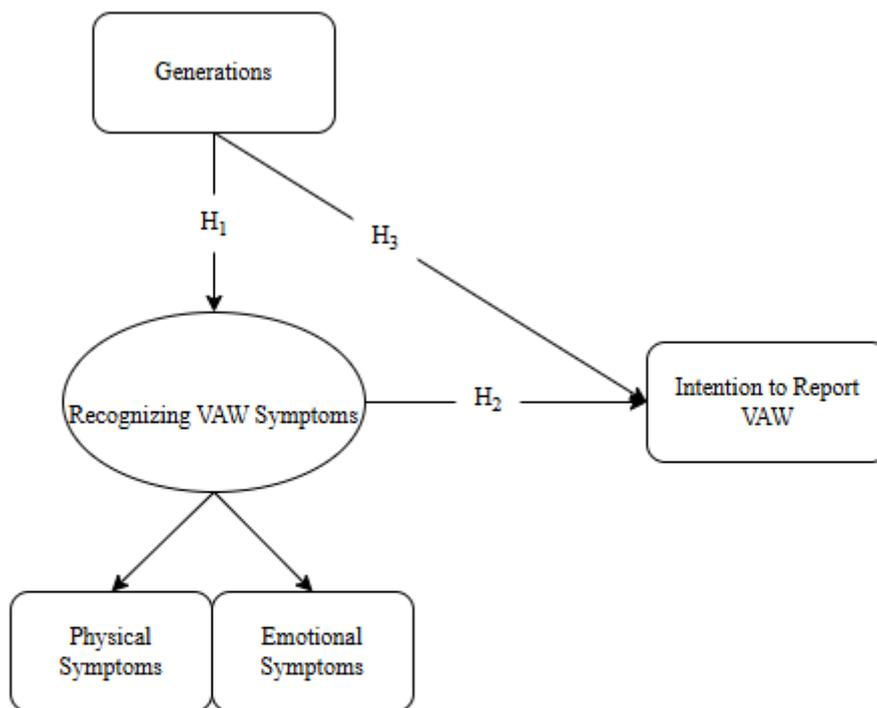


Figure 1. Hypothetical model and research hypotheses:
H1: Generations affect recognition of VAW (violence against women) symptoms.
H2: Recognition of VAW symptoms affects the intention to report VAW.
H3: Generations affect the intention to report VAW.

2.5. Ethical Issues

This study was conducted following the principles of the Declaration of Helsinki. The permission was obtained from the XXX University Clinical Research Ethics Committee (dated 03.02.2023 and numbered 2023/2) and the institutions where the research was conducted. In addition, consent was obtained from the participants.

3. RESULTS

3.1. Characteristics of The Participants

The average age of the participants is 25.26 ± 6.39 , 74.2% were women, and 55% were student nurses. 53% of the participants are in Generation Z (born in 1997 and later) and 47% in Generation Y (1981–1996).

3.2. Preliminary Analyses

The descriptive statistics and the correlation matrix between the variables in the hypothetical model are presented in Table 1. The correlation coefficients of the variables with significant correlations (r) range from 0.10 to 0.32 ($p < 0.05$). This result shows that there is no multicollinearity problem among the variables.

Table 1.
Descriptive characteristics of the participants and correlations between variables (N=453)

Variable	Variable levels	n (%)	Pearson Correlation (r)					
Sex	Women	336 (74.2)	Mean ± SD	Skewness	Kurtosis	Age	PS	ES
	Men	117 (25.8)						
Employment status	Student nurse	251 (55.4)	8.23 ± 1.76	-0.237	-0.373	-0.051	.318**	
	Currently employed nurse	202 (44.6)						
Generations	Z (1997-2012)	240 (%53)	11.22 ± 2.34	-0.209	-0.415	-.127**	.104*	.151**
	Y (1981-1996)	213 (%47)						
Age		25.26 ± 6.39		1.261	0.759			
Recognizing VAW Symptoms	Physical Symptoms (PS)	8.23 ± 1.76						
	Emotional Symptoms (ES)	11.22 ± 2.34						
Intention to Report VAW		128.74 ± 19.84		-1.606	1.691	-.102*	.104*	.151**

Note. VAW: Violence Against Women; * $p < 0.05$; ** $p < 0.01$.

3.3. Group Statistics

Table 2 shows group comparisons of scale scores. A statistically significant difference was found between Generation Z and Generation Y nurses in terms of their intention to recognize signs of violence against women and their intention to report violence. Generation Z scored higher in both their intention to recognize signs of violence against women ($p < 0.05$) and their intention to report violence ($p < 0.05$).

Table 2.
Group comparisons of scale scores.

Variable	Generations	n	Mean±SD	t	df	p
Recognizing VAW Symptoms	Z	240	8.42 ± 1.75	2.385	451	0.017
	Y	213	8.02 ± 1.76			
	Z	240	11.46 ± 2.2	2.325	451	0.021
	Y	213	10.95 ± 2.47			
Intention to Report VAW	Z	240	130.98 ± 16.44	2.525	380.369	0.012
	Y	213	126.21 ± 22.85			

Note. VAW: Violence Against Women.

3.4. Testing The Hypothetical Model

Firstly, it was observed that the goodness of fit values of the measurement model were good ($\chi^2/sd = 0.402$, GFI = 1.000, AGFI = .99, TLI = 1.053, CFI = 1.000, RMSEA = .000, SRMR = .0074). Thus, the measured variables and the latent variables were adequately defined for the hypothetical model.

Secondly, the standardized regression coefficients of the measurement model were examined in SEM with the standard errors and statistical significance. The path between generations and intention to report intimate partner violence was deleted because it was not significant ($p = 0.101$). After repeating the analysis, the remaining paths were significant ($p < 0.05$) and the model fit goodness values were at an acceptable level (Figure 2) ($\chi^2/sd = 0.402$, GFI= 1.000, TLI= 1.053, CFI= 1.000, RMSEA= .000, SRMR= .0074).

3.5. The Direct and Indirect Effects

The direct and indirect effects in the hypothetical model are presented in Table 3. Generations directly affect the level of knowledge regarding recognizing VAW symptoms (H1: $\beta = -.21$, $p < 0.01$). The level of knowledge of Generation Y is lower than that of Generation Z. The level of knowledge directly affects the intention to report VAW (H2: $\beta = .25$, $p < 0.01$). A higher level of knowledge reflects a more positive intention to report VAW. Generations indirectly affect the intention to report VAW (H3: $\beta = -.052$, $p < 0.01$). The intention to report VAW of Generation Z is more positive than Generation Y.

Table 3.

Results for testing hypotheses (N = 453).

		Hypotheses	b	β	SDE	SIE	SMC
H1	Generations	– Recognizing VAW Symptoms	-0.604	-0.21**	-.213**		.045
H2	Recognizing VAW Symptoms	– Intention to Report VAW	3.448	.25**	.247**		.061
H3	Generations	– Intention to Report VAW				-.052**	

Note. VAW: Violence Against Women; b: Unstandardized Regression Weights; β : Standardized Regression Weights; SDE: Standardized Direct Effect; SIE: Standardized Indirect Effect; SMC: Squared Multiple Correlations; ** $p < 0.01$.

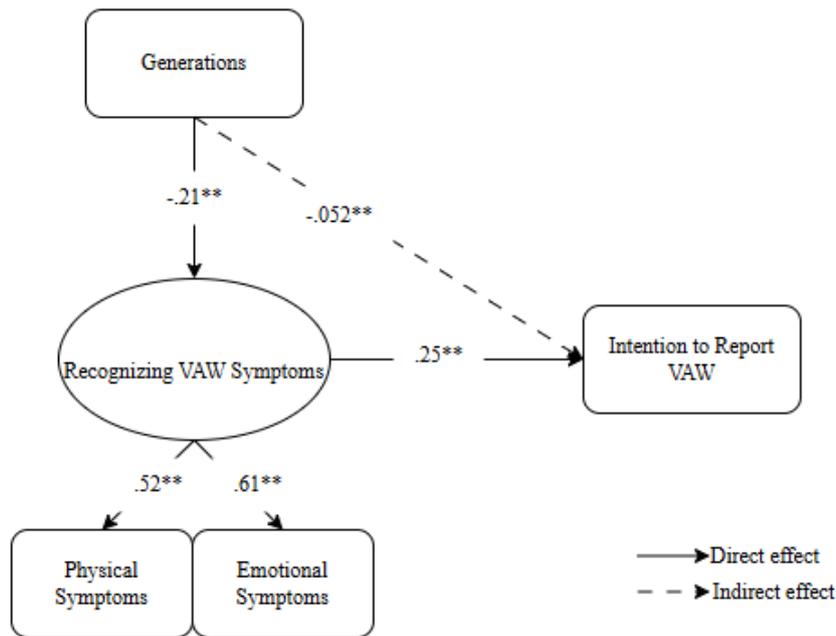


Figure 2. Final model
 VAW: Violence Against Women.

4. DISCUSSION

The findings of this study show that the knowledge levels of Generation Z and Generation Y on VAW and their intention to report VAW differ. The fact that Generation Z has a higher level of knowledge in recognizing VAW symptoms is closely related to the flow of information brought by the digital age. As active users of social media, Generation Z can instantly access information about social issues. For example, online campaigns, awareness programs, and activist movements on digital platforms increase the awareness of this generation by making different forms of violence more visible (Li et al., 2021; Malik, 2022). The use of digital technologies as a tool to advocate for VAW contributes to this generation developing a more critical approach to social issues. These results reflect the fact that Generation Z is often referred to as the “net generation” or “digital natives.” This generation is significantly different from previous generations in terms of the speed of access to information and the level of participation in social events. Awareness-raising activities conducted through educational and media platforms enable this generation to recognize the symptoms of violence more easily (Twenge, 2017, 2023). These findings indicate that more effective campaigns can be conducted with young individuals through digital tools regarding the fight against VAW.

The fact that the level of knowledge directly affects the intention to report VAW reveals that the level of awareness of individuals is directly related to behavioral responses. The conclusion that knowledge-based awareness increases the intention to report VAW is consistent with the literature (McQueen & Kelty, 2019). In this context, individuals' skills in recognizing and reporting violence are of critical importance in the fight against VAW. The high level of knowledge of Generation Z, in particular regarding recognizing VAW symptoms, leads this generation to question social norms more and not to remain silent in the face of violence. However, the fact that the intention to report VAW is more negative in Generation Y can be explained by the fact that violence is considered something secret, daily, and normalized, and that social norms still have a strong influence on this generation (Maquibar et al., 2017). To reduce VAW in this generation, it is essential to change cultural values in countries with similar cultural norms, such as Türkiye, by minimizing traditional gender norms and expectations (Alonzo & Zubaroglu-Ioannides, 2024).

Generation Y has a more negative intention to report VAW than Generation Z. This result shows that conservative social structures still put pressure on this generation (Mohammadi Ghanbarlou, 2020). The fact that violence is perceived as a "domestic" problem in conservative cultures and is closed to external intervention may have led to individuals in this generation having reservations about reporting VAW incidents (van Veen et al., 2018). A study conducted in 20 low- and middle-income countries found that married women with low education levels, getting married at a young age, living in male-dominated households, who cannot participate in decision-making processes, and residing in rural areas were the most vulnerable groups to VAW acceptance (Gunarathne et al., 2024). Some studies have found that as the average age increases, individuals have more traditional attitudes towards gender. Recent studies have reported that Generations Y and Z have more egalitarian gender attitudes than Generation X (Akgül, 2022; Dogan Gangal et al., 2024), that the prevalence of those reporting any experience of violence decreases with age (Dogan Gangal et al., 2024), and that Generation Z is particularly exposed to digital violence. According to the Digital Violence Research in Turkey, young people encounter digital violence the most on Instagram and Twitter, and this rate decreases with age. Women are exposed to more digital violence due to their gender and appearance. 51% of women receive harassing messages, while 46% are followed persistently. The two most frequently used methods to combat digital violence are blocking (65%) and reporting (39%) (Şener & Abınık, 2021). These results show that the language of violence between generations

has changed and that intervention strategies should be planned by taking these differences into account.

4.1. Strengths and Limitations

This study is valuable in that it is one of the first studies to structurally compare the level of recognition of VAW and intention to report VAW of different generations (Y and Z) in the field of nursing. The Structural Equation Model provided the opportunity to test direct and indirect relationships between variables, allowing for in-depth interpretation of the findings. By including both nurses currently working in the clinic and nursing students in the study, the effects of different professional experience levels as well as age groups were indirectly examined. In addition, revealing generational awareness differences offers a new window in terms of generation-focused education and policy development in combating violence against women.

The most important limitation of the study is that it is limited to a single center/cultural context, which prevents the generalizability of the results. Due to the insufficient number of participants from Generation X, this generation was excluded from the analysis; this situation limited the more holistic generational comparison. Due to the cross-sectional design of the study, causality cannot be interpreted; only relationships can be evaluated. Data were collected through self-reporting, and participant responses may be open to social desirability effects.

4.2. Directions for Future Research

Longitudinal designs with large samples should be preferred to monitor changes in nurses' knowledge level and reporting intentions regarding recognizing VAW symptoms over time. Qualitative studies are recommended to examine more deeply the ethical, professional, or personal reasons affecting participants' reporting decisions. Examining similar generational differences in different countries may contribute to understanding cultural effects. In addition, the effects of generation-specific educational programs on knowledge level and reporting intention can be tested with experimental designs.

5. CONCLUSION

This study is the first quantitative study to demonstrate how different generations affect nurses' intention to recognize and report symptoms of violence. Our results show that nurses with higher levels of knowledge about recognizing symptoms of VAW have more positive intentions

to report violence. In addition, nurses in Generation Z were found to have higher levels of knowledge and more positive intentions to report violence. These results indicate that nurses in Generation Z are more sensitive to such social problems and can take a more active role in this regard.

This study may provide nurses and other professionals working in the field with insight into how intervention strategies should be tailored for different generations. Emphasizing social media and digital platforms in strategies targeting Generation Z and implementing long-term programs to transform social norms in strategies targeting Generation Y may provide more effective results. Therefore, the issue of violence against women should be addressed more comprehensively in nursing education programs; learning processes should be supported with digital content (e-learning modules, simulations) aimed at Generation Z. Long-term in-service training and efforts to transform social norms should be planned for Generation Y nurses. Social media and digital platforms can be used as effective education and awareness tools, particularly to reach Generation Z. Based on these findings, healthcare administrators and policymakers should develop institutional and national policies that include generation-specific education and intervention strategies.

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