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Socio-Cultural Factors Associated with Reporting and Barangay Responses to Violence against Women and Children

Ansherina M. Brioso[1,2]*

[1]University of the Cordilleras, Baguio City, Philippines
[2]Mariners Polytechnic Colleges Inc, Naga City, Philippines
*Corresponding author: briosoansherina@gmail.com, ORCID: https://orcid.org/0009-0002-1178-8182

ABSTRACT: Violence Against Women and Children (VAWC) is shaped not only by legal and institutional responses but also by social norms, family expectations, gender roles, and barriers to help-seeking. This study addressed the local evidence gap on how these socio-cultural conditions are perceived in relation to VAWC reporting and barangay response in Naga City, Philippines. A descriptive-comparative survey was conducted among 81 barangay officials from the city's 27 barangays, with three officials represented per barangay. Frequency and percentage summarized reported case profiles, weighted means described the measured socio-cultural and response dimensions, and independent-samples t-test and one-way analysis of variance examined differences across the demographic groupings specified in the study. The reported case profiles were predominantly female, most frequently aged 26–35 years, living with a partner, and identified as housewives. Physical abuse was the largest reported category (45.7%), followed by economic abuse (34.6%). Victim-survivors were the most frequently identified reporters (74.1%), while the VAWC Desk Office was the most commonly identified barangay intervention mechanism (53.1%). Social norms (M = 2.94), family expectations (M = 3.19), gender roles (M = 3.00), and reporting barriers (M = 2.99) were rated High, whereas barangay response was rated Very High (M = 3.26). No statistically significant differences were detected according to age (p = .507), gender (p = .640), civil status (p = .714), or occupation (p = .458). The findings indicate that the identified socio-cultural concerns are broadly shared across the demographic groupings examined and support community-wide, culturally responsive, and victim-centered interventions that combine norm transformation with accessible reporting, referral, and barangay support mechanisms.

1. INTRODUCTION

Violence against women remains a major public-health and human-rights concern. Global estimates show that intimate partner violence affects women across regions and socioeconomic settings, with consequences that extend beyond physical injury to psychological distress, economic insecurity, family disruption, and reduced access to health and social services [1]. In the Philippines, Republic Act No. 9262 defines and penalizes physical, sexual, psychological, and economic forms of violence against women and their children and provides protective measures for victim-survivors [2].

Formal protection, however, operates within a social environment. Gender norms and social norms can shape what communities regard as acceptable, private, shameful, or worthy of intervention [3]. Restrictive gender norms are also linked to unequal distributions of authority, resources, and social roles [4]. Social Role Theory further explains how recurring divisions of labor and family responsibility become translated into expectations regarding male authority, female caregiving, obedience, and family preservation [5]. In violence-prevention research, this has led to increasing attention to community-level norm transformation rather than relying only on individual awareness [6].

Violence against women and violence against children also overlap within family and household systems, and effective responses often require coordination across community, legal, health, and social-service mechanisms [7]. Help-seeking can be constrained by fear, economic dependence, stigma, family pressure, and beliefs that violence should remain private [8]. These constraints are especially important at the local level, where victim-survivors may first approach community authorities for assistance.

Naga City provides a relevant setting for examining these issues. City Ordinance No. 2014-029 institutionalized Barangay VAWC Desks in all 27 barangays and recognized their role in legal counseling, referral, rehabilitation, service delivery, reporting, monitoring, and community advocacy [9]. Yet the presence of formal mechanisms does not by itself establish how socio-cultural expectations are perceived in relation to reporting and local response.

The present study addressed this local evidence gap by assessing social norms, family expectations, gender roles, reporting barriers, and barangay response from the perspective of local authorities. It also examined whether perceived socio-cultural determinants differed across the demographic groupings specified in the study. Consistent with the approved thesis title, the term impact is used operationally to refer to measured levels and comparative patterns rather than experimentally established causation.

2. MATERIALS AND METHODS

2.1 Study Design and Setting

A descriptive-comparative design was used to characterize reported VAWC case profiles, assess the perceived level of socio-cultural determinants and response-related dimensions, and compare these perceptions across selected demographic groupings. The study was conducted across the 27 barangays of Naga City, Camarines Sur, Philippines. The quantitative survey component constitutes the analysis reported in this article.

2.2 Participants and Sampling

The study included 81 barangay officials selected purposively because their functions placed them in roles relevant to VAWC reporting, referral, intervention, and community response. Three officials were represented from each barangay: the Barangay Captain, the Barangay Kagawad responsible for family-related concerns, and the VAWC Desk Officer. The study did not directly survey VAWC victim-survivors; information on case profiles reflected the observations and reports of the participating local authorities.

2.3 Instrument and Measures

A structured questionnaire was used as the principal data-gathering instrument. Part I described commonly reported VAWC case profiles, including age, gender, civil status, occupation, type of violence, usual reporter, and available intervention. Part II assessed socio-cultural determinants through items grouped under social norms, family expectations, and gender roles. Part III assessed reporting-related barriers and barangay response. The attitudinal and response items used a four-point frequency scale from 4 (Always) to 1 (Never). Mean scores were interpreted as Very High (3.25–4.00), High (2.50–3.24), Low (1.75–2.49), or Very Low (1.00–1.74). The instrument underwent expert review for relevance, clarity, and contextual appropriateness.

2.4 Data Collection and Ethical Considerations

Formal authorization was obtained from the participating barangays before data collection. Respondents were informed of the purpose of the study, the voluntary nature of participation, confidentiality protections, and their right to decline or discontinue participation. Informed consent was obtained before questionnaire administration. No names were required on the questionnaire, and the study avoided collection of unnecessary personally identifying information about individuals involved in VAWC cases.

2.5 Statistical Analysis

Frequency and percentage were used to summarize the reported case profiles. Weighted means summarized social norms, family expectations, gender roles, reporting barriers, and barangay response. The independent-samples t-test was used for the two-category gender comparison, while one-way analysis of variance was used for age, civil status, and occupation. Statistical significance was set at $\alpha = .05$. Because the source inferential tables reported p-values without the corresponding test statistics and degrees of freedom, the present article reports only the statistics supported by the archived results.

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3. RESULTS AND DISCUSSION

3.1 Profile of Reported VAWC Cases

The case profiles described by barangay officials were concentrated among individuals aged 26–35 years (38.3%), followed by those aged 18–25 years (27.2%) and 36–45 years (19.8%). Female cases accounted for 96.3% of the source table and male cases for 2.5%; one of the 81 observations was not classified by gender in the archived summary and was not imputed. Nearly half of the reported cases involved individuals living with a partner (49.4%), while 33.3% involved married individuals. Housewives comprised 45.7% of the occupational profile, followed by unemployed individuals at 32.1%. These figures describe the cases represented in the study and should not be interpreted as citywide prevalence estimates.

Table 1. Profile of VAWC cases reported by participating barangay officials

Characteristic / category	%
Age: Under 18	8.6
Age: 18–25	27.2
Age: 26–35	38.3
Age: 36–45	19.8
Age: 46 and above	6.2
Gender: Female	96.3
Gender: Male	2.5
Civil status: Living with partner	49.4
Civil status: Married	33.3
Civil status: Single	11.1
Occupation: Housewife	45.7
Occupation: Unemployed	32.1
Occupation: Employed	12.3
Type: Physical abuse	45.7
Type: Economic abuse	34.6
Type: Psychological abuse	18.5
Type: Sexual abuse	1.2
Usual reporter: Victim-survivor	74.1
Usual reporter: Family/relative	16.0
Usual reporter: Neighbor/concerned citizen	8.6
Usual reporter: Health worker	1.2
Intervention: VAWC Desk Office	53.1
Intervention: CSWDO/shelter referral	16.0
Intervention: Police referral	12.3
Intervention: BPO issuance	8.6

Characteristic / category	%
Intervention: Mediation/settlement	7.4
Intervention: Counseling	2.5

Physical abuse was the largest reported category (45.7%), followed by economic abuse (34.6%) and psychological abuse (18.5%). This pattern supports a multidimensional understanding of VAWC rather than one limited to bodily harm. Republic Act No. 9262 likewise recognizes physical, sexual, psychological, and economic abuse [2], while global research has emphasized the intersections between violence against women and violence against children within family systems [7].

Victim-survivors themselves were the most frequently identified reporters (74.1%), and the VAWC Desk Office was the most commonly identified intervention mechanism (53.1%). The prominence of barangay mechanisms is consistent with Naga City's institutionalization of VAWC Desks across all 27 barangays [9]. At the same time, the concentration of case profiles among housewives and unemployed persons provides important context for the strong reporting barrier associated with financial dependence.

3.2 Socio-Cultural Determinants and Response Dimensions

Table 2. Overall levels of socio-cultural determinants and response dimensions

Dimension	Weighted mean	Interpretation
Social norms	2.94	High
Family expectations	3.19	High
Gender roles	3.00	High
Reporting violence / barriers	2.99	High
Barangay response	3.26	Very High

Family expectations recorded the highest mean among the three principal socio-cultural dimensions (M = 3.19), followed by gender roles (M = 3.00) and social norms (M = 2.94). Item-level patterns indicated strong perceptions of male household authority, women's caregiving responsibilities, economic dependence, family preservation, and the expectation that domestic concerns remain private. These findings are compatible with the distinction between social norms and gender norms described by Cislaghi and Heise [3] and with evidence that restrictive gender norms are embedded in social relationships and institutions [4].

The findings are also consistent with Social Role Theory, which explains how recurring distributions of women and men into caregiving, provider, and authority roles generate expectations about appropriate behavior [5]. Such expectations may become self-reinforcing within families and communities. In the context of VAWC, these role expectations can influence whether controlling behavior is normalized, whether family unity is prioritized over safety, and whether disclosure is encouraged or discouraged.

Reporting barriers were rated High overall (M = 2.99). Fear that reporting would worsen the situation and financial dependence were the strongest perceived barriers. This pattern is consistent with international evidence showing that help-seeking may be constrained by fear, cultural expectations, socioeconomic insecurity, and family pressures [8]. In contrast, the belief that authorities would not take VAWC reports seriously received comparatively low endorsement in the thesis results, suggesting that the principal barriers identified in this setting were more strongly linked to safety, dependence, and social context than to generalized distrust of formal authorities.

Barangay response was rated Very High (M = 3.26), reflecting strong recognition of the importance of immediate intervention and community support. However, respondents simultaneously identified cultural and family expectations as barriers to effective response. This coexistence is analytically important: formal response capacity and restrictive socio-cultural

expectations can operate at the same time. A strong barangay mechanism therefore does not remove the need for norm-transformative prevention and survivor-centered support. Multisectoral policy guidance similarly emphasizes coordinated health, social, legal, and community responses to violence against women [10].

3.3 Differences Across Demographic Groupings

Table 3. Differences in perceived socio-cultural determinants across demographic groupings

Grouping variable	Overall p-value	Interpretation
Age	.507	Not statistically significant
Gender	.640	Not statistically significant
Civil status	.714	Not statistically significant
Occupation	.458	Not statistically significant

None of the selected demographic grouping variables produced a statistically significant difference in the overall perceived socio-cultural determinants. The overall p-values were .507 for age, .640 for gender, .714 for civil status, and .458 for occupation. All exceeded the .05 significance threshold. The results therefore do not support the conclusion that perceptions systematically differed across these groupings.

The nonsignificant findings do not prove that the groups held identical views. Rather, the study did not detect differences sufficiently large to reject the null hypothesis at the specified alpha level. Substantively, the pattern suggests that social norms, family expectations, and gender-role beliefs may operate as shared community-level conditions rather than as perceptions restricted to a particular demographic group. This interpretation is consistent with social-norm perspectives that locate expectations within reference groups and institutions [3] and with gender-norm scholarship emphasizing that restrictive norms can structure the experience of people across social categories [4].

3.4 Integrated Discussion

Taken together, the findings portray VAWC response as an interaction between socio-cultural expectations and local institutional mechanisms. The case profiles point to intimate and household contexts in which physical, economic, and psychological forms of abuse are reported. The high ratings for social norms, family expectations, and gender roles indicate that community beliefs concerning authority, caregiving, family cohesion, and silence remain salient. At the same time, strong support for formal reporting and a very high assessment of barangay response demonstrate that restrictive norms coexist with protective orientations.

This tension is central to the study's theoretical framework. Social Norms Theory explains how beliefs about what others approve or expect can influence behavior [3]; feminist and gender-inequality perspectives emphasize the role of power and unequal access to resources [4]; and Social Role Theory explains how repeated divisions of responsibility become translated into expectations regarding men and women [5]. The results therefore support interventions that address not only individual awareness but also the community expectations and institutional routines through which VAWC is recognized and managed.

The practical implication is a dual strategy. First, barangay reporting, referral, documentation, and support pathways should remain accessible, confidential, and survivor-centered. Second, prevention should directly address norms that equate masculinity with control, require women to endure abuse for family unity, or frame violence as a private matter. Engagement of men and boys, family-focused education, economic-support pathways, and continued competency-based training for local officials are consistent with norm-transformative approaches advocated in violence-prevention literature [6,10].

4. CONCLUSION

This study provides locally grounded evidence on the socio-cultural environment surrounding VAWC reporting and barangay response in Naga City. Social norms, family expectations, gender roles, and reporting barriers were all rated High, while barangay response was rated Very High. Fear of escalation and financial dependence emerged as prominent reporting barriers, whereas the VAWC Desk Office was the most frequently identified local intervention mechanism. No statistically significant differences

were detected according to age, gender, civil status, or occupation. These findings indicate that the principal concerns identified in the study are better understood as broadly shared community-level conditions than as demographic-specific perceptions. Strengthening VAWC response therefore requires both effective institutional mechanisms and sustained efforts to transform norms concerning authority, family privacy, economic dependence, and the expectation that victim-survivors should preserve family unity at the expense of safety. Because the design was descriptive-comparative and based on local-authority perceptions, the findings should not be interpreted as causal effects or population prevalence estimates. Future research should incorporate direct survivor perspectives where ethically appropriate, verify construct-level measurement properties, and evaluate the effectiveness of specific community interventions.

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AUTHOR CONTRIBUTIONS

Ansherina M. Brioso: Conceptualization, Methodology, Investigation, Data Curation, Formal Analysis, Writing—Original Draft, Writing—Review and Editing.

CONFLICT OF INTEREST

The author declares no conflict of interest.

ETHICS STATEMENT

Participation was voluntary, informed consent was obtained, and confidentiality safeguards were observed. The study did not directly survey VAWC victim-survivors.

DATA AVAILABILITY STATEMENT

The data supporting the findings of this study may be requested from the corresponding author, subject to confidentiality, ethical, and institutional restrictions.

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