Personality Traits, Emotional Intelligence, Socio-contextual Factors and Spousal Violence: The Trajectory of COVID-19 Pandemic Lockdown

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Abstract

Introduction: Media has revealed several Spousal Violence (SV) during COVID-19 pandemic lockdown in Nigeria whereas researchers have not delved into reasons for this surge. This study investigated the psychosocial factors influencing SV during the COVID-19 pandemic lockdown.
Method: A web-based cross-sectional study utilizing snowballing sampling technique was adopted and participants were recruited in Lagos, Nigeria via social media platform, Facebook and WhatsApp using google form from March 30 to April 4, 2020. For this purpose, 356 participants consisting of 141-male and 215-female responded to the Big Five Personality Inventory, Trait Emotional Intelligence and Composite Abuse Scales.
Results: Personality Traits (PT) and Emotional Intelligence (EI) jointly predicted SV (R=.267; R2=.077; F (6, 556), t=3.281). This is while, only patterns of neuroticism had independent significant prediction on SV with a positive impact (t=3.64, β=.23). Additionally, PT as a whole (t=2.54, β=.22) and EI (t=2.31, β=-.150) showed an independent prediction of SV (significantly) among the sampled participants with a negative impact. Also, the effect of living conditions (F=2.9) and job status (F=4.912) differ on SV among the selected participants.
Conclusion: The study concluded that the surge in the SV outcomes during the COVID-19 crisis among Nigerians was caused by both psychological and socio-contextual factors. Therefore, better attention should be paid to psychological interventions and palliative measures during this pandemic or future lock-down.

Keywords: Personality Traits, Emotional Intelligence, Spousal Violence, Socio-contextual Factors

Introduction

Almost all the nations across the world are battling with the spread of COVID-19 especially at early March of 2020. Avoiding social interaction, self-isolation, quarantine, restriction of movement etc. have been implemented throughout the world. Residents in Nigeria are told to stay at home, for both personal safety and the safety of others [1]. Being at home with delayed or no salary (for civil or public servants) and no income to take care of the family (for small scale business owners) while the government was raising no adequate palliative measures to reduce the impacts may raise some concern such as SV. The unprecedented stress of the COVID-19 pandemic could predispose spouses for violence in homes [2]. According to the Centers for Disease Control and Prevention [3], 1 in 3-female and 1 in 4-male spouse in the United States have experienced violence from their spouse or are at the risks of being victims. The COVID-19 outbreak has increased this psychosocial challenge in Nigeria [3].

A lot of studies have contributed to the awareness of SV, however, there is a lack of literature focusing on SV during the COVID-19 pandemic. News in Nigeria has revealed that there has been a sudden increase in the rate of SV across the nation in March 2020 [5]. The pandemic situation in Nigeria may have contributed to this global trend of increased SV. Spousal Violence was revealed to have significantly increased in number immediately after the lockdown began in Nigeria and the most affected states were; Lagos, Abuja (Federal Capital Territory) and Ogun States which were first locked down [5]. In addition, the Lagos State Domestic and Sexual Violence Response Team (LSDSVRT) reported that, there were three surges in the rate of telephone calls received on SV from March to April 2020 [6]. Actually, SV is an abuse that is committed by intimate partners which is manifested through emotional abuse, physical abuse, sexual abuse, economic abuse, and acts of omission [7]. According to UNICEF, SV is the mixture of physical and forcible behaviors with the intention of manipulating and dominating another competent spouse, to achieve compliance and dependence. This involves; partner beating, battering, hitting, relationship violence, victimization and abuses of all types.

Recently, it has been reported that though more cases of violence against wives or female partners are reported, it is not clear that both husband and wife can engage in SV against his/her partner [8]. However, cultural values hinder males to report SV to authority. They actually prefer to conceal it. Previous studies from the Ebola outbreak in countries like Sierra Leone revealed that the economic problem in female-related patterns of employment, school closures, and personal business could lead to serious family challenges [9]. In additional, the economic recession impacted by the COVID-19 pandemic, has left many spouses to be economically down and this frustration could trigger anger, transfer aggression and emotional distress that could lead to vulnerability of SV and negative coping mechanisms as well as harmful relationships such as; sex deprivation, violent sex practice, economic deprivation and battering among others [10]. This issue has led to the need to understand how EI SV.

One who can overcome emotional distress could be referred to as EI. According to Goleman, EI is the ability to validly reason with emotions and use it to enhance thought [11]. The dimensions of EI are related to skills such as; social skills, interpersonal competence, psychological maturity and emotional awareness [11]. According to a study conducted in Gujrat, Pakistan to check out the relationship between marital discord and EI among couples, results revealed that marital discord was high among couples with low EI [12]. The following are the components of EI: (i) Self-awareness: knowing and understanding one's emotions, recognizing feelings as they occur, and discriminating between them, (ii) Mood management: handling feelings so they're relevant to the current situation and to react appropriately, (iii) Self-motivation: "gathering up" one's feelings and directing oneself towards a goal, desPTte self-doubt, inertia and impulsiveness, (iv) Empathy: recognizing feelings in others and tuning into their verbal and nonverbal cues, (v) Relationship Management: ability to maintain interpersonal relationships, conflict resolution, and negotiations in relationships [13]. When individuals lack these skills of EI, it could cause them to be susceptible to unnecessary aggressive behavior which could precipitate intimate partner violence [14]. Previous studies revealed that individuals with higher EI are more likely to develop a positive mindset and have the ability to regulate their aggression and emotions [14,16]. Specifically, one who scores higher on EI may have the tendency to develop a better psychophysical wellness, for instance, social skills that could help partners be romantic with their spouses [16]. As low EI could have a negative impact on individuals' wellbeing and social functioning, personality disorders could motivate SV [17]. This introduces PT into SV.

A previous study found that, 15 to 30% of violent spouses have personality disorders [17]. This shows that a relationship between PT and SV exists. Also, a study conducted in Iran showed that neuroticism predicted spousal abuse [18]. It also revealed that neuroticism is associated with hostility, impatience and low confidence]. For example, individuals with low neuroticism stay composed with high emotional stability while people with high neuroticism are more reactive and aggressive [17]. On the other hand, one who has a high degree of agreeableness, is more likely to be caring, empathic and trustful [19]. According to Pobutsky et al., agreeable partners are more likely to give advice, help and support to their partner who is emotionally unstable and such a person could tolerate or endure spousal abuse. Agreeable individuals, are less likely to feel threatened to share their knowledge and opinion with their spouse, consequently are more likely to become satisfied with their marriage and become non-violent [19]. These findings indicate that spouse's type of personality traits could influence the level of intimate partner abuse [14].

Partner's PT has been found as one of the key factors that could be used to explain the cause of husband or wife abuse and spousal battering [20]. A spouse with a certain PT disorder may need to seek for help in order to reduce its side effects (e.g., spousal abuse) on the family [21]. Studies about association between PT and SV have not been consistent. For instance, in Sharma's study, neuroticism had no significant relationship with SV [22], while in another study conducted among intimate partners in Kermanshah, Iran showed that, there was a positive association between neuroticism and some components of SV such as; the psychological, sexual, and physical components [21]. According to Sharma's study, agreeableness trait significantly had a positive association with sexual and physical SV. Also, conscientiousness was found to be positively related with verbal SV [22]. In the same study, extraversion was found to be negatively related with physical, psychological, and sexual SV. Moreover, conscientiousness was found to be negatively associated with sexual SV and psychological SV. Implicatively, it could be inferred that among the five-

dimension of PT, neuroticism, agreeableness and conscientiousness are very strong predictors of SV [22, 20]. However, the global inconsistency in the past literature on the connection between PT and SV still call for more research especially during the current COVID-19 pandemic lockdown where families have been forced to stay together [6]. However, COVID-19 outbreak is not just a health challenge but a trigger of some psychosocial problems such as; poverty, unemployment, violence, recession, anxiety etc. These factors could predispose husband and wife to intimate partner violence [24]. This introduces socio-contextual factors into SV.

Recently, a study revealed that up to 41 % of married women and 14 % of husbands are experiencing SV during the COVID-19 lockdown [3]. Some of the victims might have experienced at least one form of SV during this period (e.g., sexual, economic and physical SV). Socio-contextual and economic challenges such as; loss of job, financial constraint, poverty, poor living conditions and weak communication, do not only trigger decline in family cohesion but also effect SV [5]. A consistent SV could cause worse health conditions and deformation of the victim, broken home, displacement of the children and even in some cases the death of the victim [6]. It is more necessary than before to investigate the psychosocial determinants of SV during and after the COVID-19 pandemic. There is a need therefore to investigate whether PT, EI and socio-contextual factors predispose residents to SV during COVID-19 pandemic lockdown among couples in Lagos, Nigeria. The hypotheses of this research included: i. Dimensions of PT (extraversion, consciousness, agreeableness, neuroticism, and openness) will have joint and independent prediction of SV (significantly) during the COVID-19 pandemic lockdown, ii. The dimensions of PT as a whole and emotional intelligence will have a joint and independent prediction of SV (significantly) during the COVID-19 pandemic lockdown, iii. There are significant differences in socio-contextual factors (gender, income status, religion affiliation, tribe and living condition) on SV during the COVID-19 pandemic lockdown.

Method

This research was a web-based cross-sectional survey which was conducted via social media (Facebook and WhatsApp posts) using a google form from March 30 to April 4, 2020. It was conducted among residents in Lagos State, Nigeria. The respondents were adults above the age of 18 and, in relationship, literate, who had access to a smartphone and internet. Lagos is the most populated and popular state in South-western Nigeria. This state is mostly dominated with both Muslims and Christians but with low numbers of traditional worshippers and some other religion believers. This area was considered suitable for this study as it was the epicenter of the COVID-19 pandemic in Nigeria, the first state which experienced the lockdown and the state that had the longest lockdown as well as the highest cases of COVID-19 in Nigeria [3]. A snowball sampling technique was used in this study due to the present lockdown and movement restriction which made it very difficult to physically access people at the

time of data collection. The developed online semi-structured questionnaire was appended with a consent form, which participants must had to read, understand and click the agree button to participate before having access the survey. The link of the questionnaire was sent through WhatsApp and Facebook to potential respondents on the contact of the investigators. The prospective respondents were then encouraged to roll out the survey to as many of their contacts (married friends, colleagues and relatives) as possible. Thus, the link was forwarded to married people and only those who gave their inform consent were allowed to participate in the study.

Demographic Data Form: There were 356 participants who responded to the survey instrument via Google Forms. There were 141 (39.61%) males and 215 (60.39%) females (their age range between 18 to 66years). Also, 286 (80.3%) were married, 10 (2.8%) divorced/separated while 60 (16.9%) were cohabiting. In terms of religion affiliation, 147 (41.3%) were Christians and 154(43.3%) were Muslims while traditionalists/other believers were 55(15.4%). Regarding their educational qualifications; 50 (14.0%) had basic education, 80 (22.5%) had Secondary School Certificate, 88 (24.7%) had Diploma and its equivalent, 100 (28.1%) had Bachelor degree and its equivalents, while 38 (10.7%) had postgraduate degrees. Also, 176 (49.4%) were operating a nuclear type of family while 180 (50.6%) were into an extended type of family (Table 1). For the current study, ethical consideration in accordance with the local legislation and institutional requirements were observed. Those who read and signed the informed consent by clicking the next button on the online form were only allowed to participate in this study. Strict adherence to ethical provisions on free participation and exit, willingness to participate, confidentiality and autonomy were also observed in the measuring index.

Big Five Inventory (BFI-10):

The BFI-10 is a 10-item inventory that measures five-dimension of PT (openness to experience, conscientiousness, extraversion, agreeableness and neuroticism) [25]. The scoring format is based on a five point Likert scale which ranges from 1= disagree strongly to 5=agree strongly. The reliability of each dimension was reported; extraversion traits =.79, agreeableness=.69, conscientiousness=.70, neuroticism=.76, and openness to experience =.65 [25]. While the present study recorded a composite Cronbach alpha of .82 for the inventory, some of the items with 'R' denoted reverse scoring while the others were directly scored. The dimension of the inventory included; extraversion (items; 1, 2, 3, 4, 5 and 7, 1R), agreeableness (items; 2, 6 and 7R), conscientiousness (items; 3R, and 8), openness to experience (items; 5R and 10) and neuroticism (4R and 9).

Trait Emotional Intelligence Questionnaire—Short Form (TEIQue-SF):

The TEIQue-SF is a 30-item scale designed to measure global trait of emotional intelligence [13]. Two items from each of the fifteen subscales of the TEIQue were included

in the short form, which were chosen based on their "correlations with the corresponding total subscale scores" [13]. It comprises of four subscales namely; wellbeing (items; 5, 20, 9, 24, 12, and 27), self-control (items; 4, 19, 7, 22, 15, and 30), emotionality (items; 1, 16, 2, 17, 8, 23, 13, and 28), and sociability (items; 6, 21, 10, 25, 11, and 26). Items 2, 4, 5, 7, 8, 10, 12, 13, 14, 16, 18, 22, 25, 26, and 28 are reverse-coded. While questions 3, 14, 18, and 29 only contribute to the global trait EI score. There are seven possible responses to each statement ranging from 'Completely Disagree' (number 1) to 'Completely Agree' (number 7). The reversely scored items are; 2, 4, 5, 7, 8, 10, 12, 13, 14, 16, 18, 22, 25, 26 and 28 while others are directly scored. The Cronbach alpha recorded in the current study was .730.

The Composite Abuse Scale (Revised)—Short Form (CASR-SF):

The CAS$_R$-SF is a 15-item scale developed to measure intimate partner violence experience in individual spouses [26]. The response format includes; not at all=0, 'once'=1, 'a few times'=2, 'monthly'=3, 'weekly'=4, and 'daily or almost daily=5. The scale covers three SV domains thus: physical, sexual and psychological. Some of questions in the CAS$_R$-SF asked respondents to assess lifetime, recent and current exposure, and abuse frequency. Moderate correlations were observed between the CAS$_R$-SF and the measures of depression, post-traumatic stress disorder and coercive control. The composite internal consistency of the CAS$_R$-SF ranged between 0.942 to 0.975 while each subscale had an acceptable Cronbach alpha (0.938 for psychological abuse, 0.847 for physical abuse, and 0.884 for sexual abuse). The scale is scored by adding all responses together. Scores range from 0-75; below 30 is considered low, 31 to 45 is considered moderate while above 45 is high. The present study recorded reliability Cronbach's alpha of .77.

Data was analyzed using (statistical packages for the social sciences) SPSS 21.0. Descriptive statistics such as; frequency, mean, standard deviation and variance were used to describe participants' demographic information. The reliability analysis of the study instruments was ascertained and reported as local reliability for future reference. Hypothesis 1 and 2 were analyzed using multiple regression while hypothesis 3 was analyzed utilizing means analysis.

Results

Table 1 revealed the results for hypothesis 1 of this study which stated that extraversion, consciousness, agreeableness, neuroticism, and openness to experience as the personality dimensions have a joint and independent prediction of SV (significantly). The results showed that extraversion, consciousness, agreeableness, neuroticism, and openness have joint prediction on SV significantly [R=.267; R^2=.077; F (6, 556), t=3.281, p<.01], and contributed to 8% of the variance observed in SV. This is while neuroticism was revealed as a significant predictor of SV [t=3.64, p<.01, β=.23]. This implies that neurotic individuals can be violent in romantic relationships or marriage. Therefore, for hypothesis 1, neuroticism as a sub-dimension of PT was identified as a determinant of SV with a positive impact (Table 1).

In regards to the second hypothesis which stated that PT and EI will have a joint and independent prediction on SV (significantly); the results showed that PT and EI have a joint prediction on SV (significantly) (R=.313; R^2=.099; F (6, 558), t=3.372). However, PT independently determined SV (t=2.54, β=.22). Moreover, EI showed an independent prediction of SV (significantly) among the sampled participants (t=2.31, β=-.150) with a negative impact. This implies that the pattern of EI and PT among the participants can be used to explain the tendency for SV (Table 2).

The results of hypothesis 3 states that there are significant differences in the socio-contextual factors on SV among couples during COVID-19 pandemic Lockdown. The findings showed that there are significant differences in the living conditions (F=2.91) and job status of the participants (F = 4.912) on SV (Table 3). However, there are no significant differences in gender (F=.05), religion affiliation (F=1.80) and type of family (F=1.23) in SV. The hypothesis is therefore rejected for gender, religion, and type of family. However, the hypothesis is accepted for living conditions and job status. This implies that those who have a government job or have a secured private job scored lower on SV during the lockdown, compared to those who were self-employed, petty trader or artisans (Table 3).

Table 1. Significant prediction of SV using linear regression

Variables	R	R^2	F	Sig.	Beta	t	Sig.
Extraversion					-.04	-1.05	.28
Conscientiousness	.26	.07	4.12	.001	.006	.104	.71
Neuroticism					.23	3.64**	.0001
Agreeableness					-.00	-.01	.98
Openness					.10	1.55	.15

**p < .01
Dependent variable: Spousal Violence (SV)

Table 2. Significant prediction of SV using linear regression

Variables	R	R^2	F	Sig.	Beta	t	Sig.
Personality					.218	2.53**	.012
EI	.313	.099	5.58	.0001	-.150	2.31*	.039

**p < .01, *p < .05
Dependent variable: Spousal Violence (SV)

Table 3. Significant mean differences of domestic violence in socio-demographic factors

Variables	Mean	SD	F	p
Gender				
Male	14.20	1.87	.048	> .05
Female	14.14	2.08		
Living Condition				
Living in Own House with Third Party	12.22	1.78		
Living in Rented Apartment with Third Party	14.70	2.40	2.91*	< .05
Living in Rented Apartment with no Third Party	13.33	1.98		
Religion				
Christianity	13.99	2.04		
Islam	14.49	1.69	1.80	> .05
Others	13.50	2.12		
Type of Family				
Nuclear	14.30	2.06	1.23	> .05
Extended	13.93	1.40		
Tribe of the Spouse				
Intra-tribe	13.38	1.77	1.61	> .05
Inter-tribe	13.97	2.33		
Types of Job/Employment				
Public Job	13.10	1.73		
Private Job	13.99	1.93	4.91**	< .01
Small Scale Business/Artisan/Trader	14.55	2.16		

$**p < .01, *p < .05$

Dependent variable: Spousal Violence (SV)

Discussion

Findings from the present study tend to support what many other previous studies have found. However, disparity in between the findings of the present and previous studies still exists. Hypothesis 1 stated that the dimensions of PT (extraversion, consciousness, agreeableness, neuroticism, and openness) have a joint and independent prediction of SV (significantly) during the COVID-19 pandemic lockdown. It was only neuroticism that significantly predicted SV with a positive impact among the sampled intimate partners. Also, PT as a whole have a significant joint prediction on SV. This implies that individual intimate partners with neuroticism are likely to have difficulty in maintaining either a peaceful home, marriage or romantic relationship. The findings of the present study are similar to previous studies [16, 15]. The current findings contradicted the results obtained in an Iranian study that found that neuroticism does not have a significant prediction on SV whereas, extraversion, openness, agreeableness, and conscientiousness do [22]. This contraction could be a result of the difference in the context by which these two studies were conducted. For instance, the study of Sharma was not conducted during a disease outbreak that necessitated a public restriction. Also, these differences may be because of the social and cultural differences which exist between Iranians and Nigerians. Moreover, the economic distress and poor living conditions caused by the present pandemic in Nigeria could trigger SV [3].

Hypothesis 2 stated that PT as a whole and EI will have a joint and independent prediction of SV (significantly) during COVID-19 pandemic lockdown. Results from this study showed that the PT of the respondents had a significant association with SV among the sampled participants. Results of the second hypothesis revealed that extraversion, agreeableness, conscientiousness and openness to experience do not significantly determine SV. This is similar to the previous studies which found that the personality of individuals is a strong determinant of SV [15, 20, 21, 22, 27]. Personality as an enduring trait by which individuals view their world and determine how they will react to things, persons, objects and situations, could serve as an identifier or predictor of SV among intimate partners.

On the other hand, the findings of this study showed that EI is an important determining factor of SV among the sampled participants. Though there is inadequate literature (especially those conducted during pandemic or lockdown) to back up this finding as at the time this research was conducted, a study revealed that marital discord was high among individual couples with low EI [12]. Furthermore, this finding is similar to the results of a study carried out in Poland which revealed that people experiencing SV were the worse at recognizing one's emotion and find it difficult in utilizing EI to regulate their life challenges [15]. Individuals who perpetrate SV may display lower levels of EI as well as decrease in social skills. Such partners may lack emotional skills to regulate their anger in conflictual and challenging moments like the COVID-19 pandemic lockdown period.

The third hypothesis stated that there are significant differences in demographic factors (gender, religion affiliation, job status, types of family and living condition) on SV during COVID-19 pandemic lockdown. Only the job status and living conditions of the participants showed significant differences in the level of SV. While sociodemographic factors like; gender, types of family, and religion affiliation have no significant difference on SV. These results showed that those who are employed especially those with perceived job security (mostly government workers) scored the lowest means on SV followed by the private companies' employees while

those with a personal business whom their income has stopped or obstructed as a result of the lockdown (self-employed, traders, artisans, unemployed etc.) scored higher on SV during COVID-19 pandemic lockdown in Lagos State (Nigeria). The inadequate economic or financial where-wither and the helplessness of family members with economic distress might have caused the surge in the SV. Those living in rented apartments with a third party might have witnessed financial constraints too and the intruders (the third party) might have also caused the dyadic relationship outcomes. Several studies have found similar results [28,29,8], though those studies were not conducted during a pandemic era nor lockdown.

Conclusion

This research examined the psychosocial and contextual factors that predisposed intimate partners to SV as implicated by the trajectory of COVID-19 pandemic lockdown. The research concludes that PT as a whole predicted SV while only neuroticism predicted spousal independently. Also, among couples EI predicted SV. The job status and living condition of the participants showed significant differences in the level of SV while gender, religion affiliation and tribe of spouse did not affect SV. On the basis of the findings of this study, the following measures are suggested in order to reduce SV in the present and also future pandemic lockdowns:

1. Personality assessment and insightful counseling should be encouraged among couples; this will allow them to understand each other better and they will be able to build social skills that will aid stable, strong and peaceful homes in the society especially during difficult moments.

2. Experts in behavioral science should engage communities in training and education of emotional intelligence through mass media in order to curb the surging levels of SV during and after the current pandemic.

3. There is a need for mental health experts and stakeholders in Nigeria's economy to form a synergy in policy formulation, follow up in community services and media awareness/campaign. They should also champion immediate preventive measures to overcome economic distress in order to contain the surging level of SV in the society (both at the present pandemic and in the future).

This study utilized relatively small numbers of participants, as a result, the findings of this study should be carefully generalized as there is a likelihood that if more respondents were to be involved, the outcomes would have changed. Finally, response bias in this type of survey maybe difficult to rule out. Future studies should consider these factors.

Acknowledgement

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