

ADOLESCENT RELATIONSHIP VIOLENCE

in Brazil and Honduras

Promundo

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Executive Summary



1. OVERVIEW

There is strong evidence to show that adolescent relationship violence (during non-cohabitating relationships of *namoro* in Portuguese, *noviazgo* in Spanish) can lead to adult intimate partner violence (IPV). However, research and interventions addressing violence among adolescents are limited compared to those focused on adult IPV, and they are especially scarce in Latin American and Caribbean (LAC) countries. As a result, policies and programs in the region miss out on significant opportunities to promote nonviolent relationships throughout life.

In order to advance research in the region and improve potential strategies toward addressing the problem, Promundo and the Inter-American Development Bank led a qualitative study in 2015. The study focused on risk and protective factors surrounding adolescent IPV. In **Brazil**, fieldwork was conducted in an urban site (Rio de Janeiro) and a rural site (Codó, in the northeastern state of Maranhão). In **Honduras**, partners carried out research in urban (Tegucigalpa) and rural sites (in the department of Intibucá).¹ The teams conducted focus groups and a total of **147 in-depth interviews** with girls/young women and boys/young men aged 14 to 24 years. The age range captured younger adolescents' recent dating experiences and young adults' reflections on past relationships.

1. The research received funding and technical assistance from the Inter-American Development Bank. Researchers affiliated with UC Berkeley and ESA Consultores coordinated the Honduras data collection, and Plan International Brazil coordinated the Brazilian rural site data collection. Instituto Promundo (Brazil) collected data in Rio de Janeiro.



2. KEY FINDINGS

Adolescents engaged in diverse intimate relationships, ranging from casual “dating” and sexual experiences to formal relationships and formal or informal unions. Adolescents described aspirations of being in relationships with nonviolent characteristics, such as respect, love, and trust. They generally recognized physical violence as such, but often did not identify nor problematize an array of violent behaviors among partners. Controlling behaviors that appeared throughout nearly every interview of this research are gravely overlooked in policies and interventions. Common examples found in this research in Brazil and Honduras include monitoring a partner’s phone or social media pages with or without permission, restricting a partner’s clothing choices or ability to leave the house, and requiring a partner’s permission to socialize with friends.

These types of violence were especially tolerated in relationships with more commitment compared to the most informal relationships. The following **risk factors**, among others, were identified (with the inverse of these factors serving as **protective factors**):

- **Community level:** Inequitable gender norms, i.e., those that promote risky sexual practices among both sexes; minimizing or normalizing IPV; lack of spaces for courtship due to norms about premarital relationships, leading to couple isolation; limited access to support services and sexual and reproductive health services; recurrent IPV and community violence, in multiple spheres, that is not recognized as violence or considered problematic.
- **Relationship level:** High degree of unequal power in the relationship, often characterized by jealousy and fear of infidelity; age gap in the relationship, typically an older male with a younger female partner; cohabitation in which inequitable gender roles are reinforced and the couple becomes more socially isolated; unwanted sex and unequal decision-making around sex.
- **Individual level:** Sociodemographic factors; misuse of alcohol or drugs; individual and partners’ personality traits and related behaviors, e.g., aggressiveness, victim-blaming, minimizing violence (with the ability to critically reflect upon and assert one’s preference about relationships as a key protective factor); low educational attainment; peers or friendships that support or use IPV; lack of friendships and meaningful connections; lack of a supportive family member or other caregiver to turn to for help; lack of a positive relationship role model; history of inter-family violence.

Additional findings offer implications for addressing adolescent IPV:

Rigid gender norms and dynamics encourage adolescent IPV. For example, adolescent girls are expected to “show respect” by not going out and not dressing provocatively. If they do, male partners are expected to have a role in “making them behave,” as young men who don’t keep their partners in line risk looking weak in front of others. Young men and young women alike justify the use of violence when they perceive women to be “provoking men” by stepping out of their assigned gender roles.

Gender norms around sexuality can also enable sexual violence. Adolescent boys are consistently expected to want and insist on sex to demonstrate their manhood, while girls are expected to resist and give in at the “right” time. Girls experience IPV on multiple occasions, engage in unwanted sexual acts, and stay in relationships they dislike out of fear. Questioning gender norms also exacerbates the risk of IPV.

Reciprocal violence, i.e., the use of IPV by both members of a couple, was especially common among adolescents in the urban site in Brazil, although girls were still more likely to be victims of physical and sexual IPV. Adolescents struggle to negotiate relational boundaries during this pivotal developmental period, and often do so through joking and testing each other.

Controlling behaviors were reported in nearly all interviews. Reasons to control could include jealousy, infidelity, and fear of infidelity. For example, boys and girls often prohibited their partner from having friendships. The resulting social isolation escalates IPV risk, diminishing adolescents’ access to potential sources of support and wider networks beyond their partner. Restricting access to cell phones and social media and monitoring online and in-person social activity are key means by which one partner may exercise control over another. Adolescents may conform to their partners’ controlling behaviors in order to “keep the peace.”

Bystanders are discouraged from intervening when they witness conflict and IPV, and young couples may not seek help; often, they do not recognize their relationship as problematic, or they are afraid. When they do seek help, adolescents are likely to seek it from family members or friends rather than from services.



3. PROGRAM STRATEGIES

Adolescent relationships and IPV are often inadequately reflected in policies and programs meant to serve young people. The findings point to the need to **intervene early**, as relationships are forming, and to offer spaces to openly discuss and critically reflect on them. Programs and policies that incorporate adolescent risk and protective factors should be prioritized, along with approaches that promote nonviolence in relationships throughout the LAC region, including those that:

1. Adapt existing gender-transformative programs aimed at preventing violence among adolescents to include a more explicit focus on healthy relationships (including through comprehensive sexuality education);
2. Support young men's and women's healing from violence and abuse they experienced in their families and communities;
3. Adapt to local sociocultural contexts and evaluate school-based adolescent IPV prevention programs in LAC;
4. Encourage communication, conflict resolution, and mediation skills among all adolescents;
5. Develop and promote healthy spaces for teens to interact with their peers;
6. Support interventions with fathers, mothers, and other family members that promote caregiving and modeling of nonviolent, equitable relationships;
7. Encourage community norm-change programming;
8. Develop adolescent-centered advocacy to prevent IPV;
9. Leverage technology and online platforms as tools for campaigns and messaging to promote equitable, nonviolent relationships (rather than as tools of control);
10. Train providers to offer services that are accessible, meaningful, and supportive to adolescents.



INTRODUCTION

THE PROBLEM

Worldwide, one-third of women have experienced intimate partner violence (IPV), though prevalence levels vary by setting (WHO and LSHTM, 2013). In Latin America, IPV is among the most pervasive types of violence (Heinemann and Verner, 2006), with significant economic and social costs (Agüero, 2013). Across 12 countries in the region, nationally representative demographic and health surveys (DHS) show that between 17 percent (Dominican Republic) and 53 percent (Bolivia) of women aged 15 to 49 who were ever married or in union experienced physical or sexual violence by an intimate partner at some point during their lives (PAHO, 2012).

IPV global prevalence data show that IPV commonly begins to take place early in life. Prevalence data based on 81 countries show that lifetime prevalence of physical and/or sexual intimate partner violence among ever-partnered adolescent girls (aged 15 to 19) is 29 percent, and 32 percent among young women aged 20 to 24 years (WHO and LSHTM, 2013). In an analysis of nine countries² included in the World Health Organization (WHO) multi-country study of young women aged 15 to 24, lifetime prevalence of IPV ranged from 19 to 66 percent, with women in this age group reporting prevalence of more than 50 percent in most sites (Stockl et al., 2014).

Adolescent IPV is increasingly recognized as a form of gender-based violence on a global scale. Adolescence is an essential stage in the development of gendered behaviors and relationship practices. As young people develop physically and emotionally, they are heavily influenced by relationship norms and experiences. Healthy relationship behaviors can have a positive effect on an adolescents' emotional development (UNICEF, 2014). Often new to dating and similar relationships, few girls or boys are equipped to deal with the feelings and conflicts that may arise (UNICEF, 2014). As this research found, they are expected to deal with it on their own or without strong social support networks, especially as adolescents may not tell others about IPV they are experiencing out of embarrassment or because they do not consider their experiences to be inappropriate or harmful to them (see Annex 1).

2. These countries were included in the WHO Multi-country Study on Women's Health and Domestic Violence against Women, a population-based survey conducted in ten countries between 2000 and 2004.

ADOLESCENT IPV IN THE LATIN AMERICAN AND CARIBBEAN (LAC) REGION

Despite an increasing interest, on the part of funders and practitioners, in addressing adolescent relationship violence, research and evaluated interventions targeting adolescent IPV have been limited in geographic scope. Efforts mostly focus on high-income countries – especially North American high-school-based populations (Offenhauer, 2011). The evidence in low- and middle-income countries is scarce (Lundgren and Amin, 2015). Examples from Mexico (Peña Cárdenas, 2013; Ramirez Rivera, 2010; Castro Pérez & Casique, 2010), Chile (Instituto Nacional de la Juventud, 2013), and several empirical studies in Brazil (Minayo et al., 2011) constitute significant exceptions in terms of research contributions on adolescent IPV in the region.

An ample body of evidence supports that adolescent IPV increases the likelihood of IPV in adult relationships. This evidence constituted a central rationale for initiating this study.

(Exner-Cortens et al., 2013; Manchikanti Gómez, 2011; Smith et al., 2003; Adams et al., 2013; Halpern et al., 2009; Wekerle and Wolfe, 1999; WHO, 2010).³

Available literature in the LAC region tends to focus on male youth violence, or adolescent pregnancy and sexually transmitted disease (STDs), at the expense of a broader analysis of risk and protective factors related to adolescent relationships. Available data often lack specificity in terms of age ranges. For example, DHS surveys often include the most current or recent partner, or ask about the past year, but not lifetime experiences of IPV (PAHO, 2012). Furthermore, these partner relationships include cohabitating or formal/registered unions and marriages but not the less formal relationships in which adolescents are commonly involved. These emphases on more

formal/long-term and/or recent relationships limit the surveys' ability to capture IPV during women's earliest relationship experiences. Since adolescent IPV can lead to adult IPV, research is critical to understand potential entry points for interventions.

Furthermore, the use of physical aggression before marriage has been found to be indicative of a 51 percent probability that this aggression will be repeated throughout the first year and a half of cohabitation (Peña Cárdenas et al., 2013). Among adult victims of rape, physical violence, and/or stalking by an intimate partner in the U.S., 22 percent of women and 15 percent of men first experienced some form of partner violence between 11 and 17 years of age (Black et al., 2011).

3. Some studies on adolescent IPV focus on shorter- and medium-term adverse outcomes into young adulthood, in part due to the difficulties of longitudinal research far into adulthood. Others demonstrate the longitudinal effects, not only on future IPV in young adult and adult relationships, but on women's educational attainment and earnings and broader health outcomes. Longitudinal studies of this nature are almost nonexistent in the LAC region. It is beyond the scope of this research to conduct a longitudinal study, but the researchers anticipated that capturing a decade-long age range would allow for a better understanding of some of the patterns that emerge from early to older adolescent/young adult relationships.

Unhealthy, abusive, or violent relationships can have both short- and long-term negative consequences (Roberts et al., 2003). Young victims of relationship violence are more likely to do poorly in school and to report binge drinking, risky sexual behavior, suicide attempts, and physical fighting (UNICEF, 2014). The implications, in terms of human rights and public health, including sexual and reproductive health outcomes, are major (WHO, 2013; WHO, 2010).

STUDY OBJECTIVES

This study has the following objectives:

- A. Identify the *kinds of relationships* in which adolescent girls and boys engage and the *types of violence* present in these relationships;
- B. Understand the *risk and protective factors* that shape adolescents' experiences with regard to IPV at the community, relationship, and individual levels;
- C. Identify *implications for program interventions, policies, and research* in urban and rural sites in Latin American settings.

APPROACH

In order to address these objectives, Promundo, in partnership with a team of researchers based at UC Berkeley, ESA Consultores, and Plan International Brazil, led a one-year qualitative research project.⁴ The teams conducted research in Brazil and Honduras, in an urban and a rural site in each country.

By exploring adolescents' experiences of IPV in Honduras and Brazil, this research offers insights into male and female adolescents' own subjective understandings of what does and does not constitute violence or IPV. The research identified a qualitative approach as relevant to understanding relationship violence in settings where no previous research on the topic had been conducted. Qualitative interviews were designed to explore types of relationships and violence by asking about scenarios and experiences rather than eliciting definitions of violence.

4. Promundo coordinated the study overall, and most directly, the fieldwork in Rio de Janeiro (urban site). Promundo oversaw fieldwork that a partner, Plan International, conducted in Codó, Maranhão (rural site). In Honduras, Erin Murphy-Graham and two graduate students from UC Berkeley and research consultants from ESA Consultores carried out the research in Tegucigalpa (urban site) and La Esperanza (rural site). The IDB provided guidance and technical inputs during instrument design and fieldwork, and reviewed and commented on the intermediate and final reports.

CONTRIBUTION OF THIS RESEARCH

The study makes several contributions to the field of adolescent relationship violence, addressing some of the limits of the existing literature and strengthening the available evidence base for more targeted prevention and response in the LAC region.

First, the study explores the experiences of girls as well as boys, and of both victims and perpetrators. Even though pilot interviews conducted for this study showed girls reporting much more physical and sexual violence from their partners, it should be noted that both sexes reported frequent use and experiences of a range of controlling behaviors. By contributing to the understanding of reciprocal forms of violence as identified in the pilot phase, this research aims to foster a gender-relational perspective on adolescent IPV.

Second, within the realm of adolescent relationship experiences beyond North American and European conceptualizations of “dating,” the research sheds light on specific manifestations of and dynamics in which violence occurs. By understanding these dynamics and adolescent perceptions of what constitutes violent behavior, this study can inform more accurate interventions, evaluations, and quantitative as well as qualitative research.

Third, by examining both in-school and out-of-school settings in Honduras and Brazil, the study contributes to the evidence base of adolescent IPV in under-researched settings, as the applicability of existing studies is limited when it comes to not only the LAC region in general but to out-of-school settings in particular. Moreover, the research allows for the analysis of similarities and differences across urban and rural adolescents’ lives, in sites where expectations and practices around adolescent dating relationships vary and the implications for which can be translated to similar settings in the region.

Finally, the research offers insights for practitioners who seek to address IPV risk factors and enhance IPV protective factors in the pursuit of providing better support to adolescent girls and boys at risk. The study design also enables exploration of the role of gender norms and how these norms contribute to the intergenerational transmission of violence and to adolescent IPV. Multiple studies show the interrelationship of different forms of violence (Wilkins et al., 2014); in particular, the conflict-affected urban settings in this study lead to increased knowledge of how adolescent IPV operates in complex cities. By putting adolescents’ own experiences and aspirations at the center of the analysis and exploring relevant norms, risk factors, and protective factors, the study offers important insights for the design of interventions intended to promote nonviolent, equitable relationships and reduce the prevalence of IPV among adolescents.

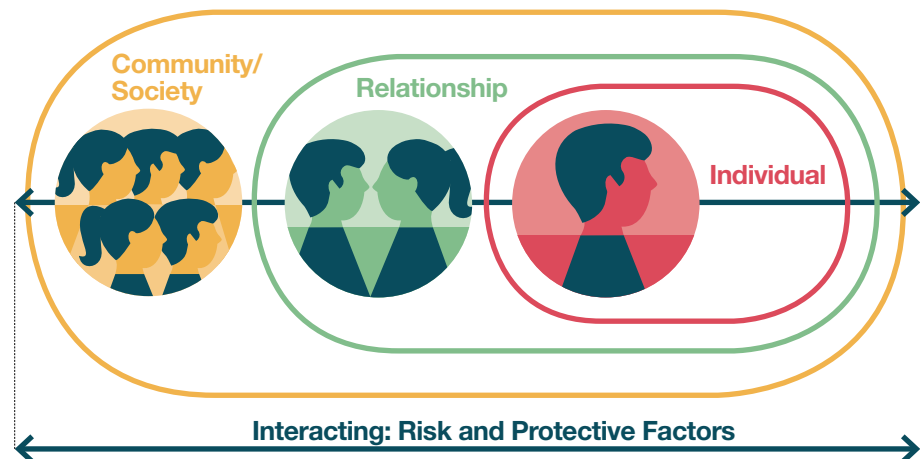
Overall, this study’s review of existing research revealed a dearth of studies specific to adolescent IPV in both Brazil and Honduras – and in the LAC region more broadly. This gap reinforces the importance of conducting qualitative research on the topic in these settings, as a basis for future mixed-method and quantitative studies, and ultimately to shape policies and programs based on the realities of adolescents.

Heise’s adaptations of the ecological model (1998) provide insights for predicting abuse at different levels of social ecology, and they expand to international/cross-cultural settings. Building on Heise’s models, this study sought to better understand the ways in which risk and protective factors influence adolescent IPV at the individual level (from both girls’ and boys’ points of view), between individuals at the relationship level, and at the broader level of the community and society. By doing so, the findings of this study demonstrate the potential of such models – which were designed for the study of sexual and physical violence – for expanding their reach to capture the nonphysical forms of violence, i.e., psychological and emotional violence, as well as risk and protective factors.

Conceptual framework: Adolescent IPV in Brazil and Honduras according to the ecological model

In order to explore the risk and protective factors of adolescent IPV, the research draws upon an **ecological model** for theorizing three sometimes overlapping levels of intimate partner violence:⁵

- A.** Individual
- B.** Relationship
- C.** Community/Society



5. See Heise’s adaptation to violence against women (1998) and Bronfenbrenner (1977).

WHAT IS ADOLESCENT IPV?

This research focuses on “adolescent relationship violence” or “adolescent IPV,” defined for the purpose of this study as:

Any act of violence committed toward an adolescent by a partner with whom he or she is or was involved in a dating or intimate relationship (e.g., a union, a marriage, or a relationship defined by an absence of cohabitation). Such acts of violence result in, or are likely to result in, physical, sexual, or psychological harm or suffering.

In the case of psychological violence, the definition includes acts committed both in person and electronically.⁶ This definition also expands the 1993 UN Declaration on the Elimination of Violence against Women definition of gender-based violence by including the possibility of men as victims (while recognizing that women are predominantly the victims of IPV), and by accounting for adolescent, in addition to adult, experiences.

In the definition used in this report, violence is conceptualized according to intentionality, behavior, and consequences. The concept of *harm* recognizes that violence may manifest in the form of physical, sexual, or psychological harm or deprivation, and that the possible consequences include death. In addition, the literature reviewed (especially that regarding Brazil, but, to a lesser extent, the international literature as well) acknowledges that non-physical forms of violence are often not recognized as violence.

6. The definition draws from the Centers for Disease Control and Prevention (CDC) and other definitions. For further information, see: <http://www.cdc.gov/violenceprevention/pdf/teen-dating-violence-factsheet-a.pdf>. The terms used to describe these types of conflict among adolescents include relationship abuse/violence, intimate partner violence, or dating abuse/violence.

UNDERSTANDING ADOLESCENT IPV: OVERVIEW OF RISK AND PROTECTIVE FACTORS

Tables summarizing risk and protective factors identified in the literature can be found in Annex 1. A discussion of additional themes relevant to the report is also presented in Annex 1.

Risk Factors:

A risk factor, broadly speaking, is “an individual or environmental hazard that increases an individual’s vulnerability to negative behavioral or developmental outcomes” (Werner and Smith in Small & Kerns, 1993: 941). For the purpose of this research, it includes factors that increase the likelihood that one will experience violence (Wilkins et al., 2014). Researchers have studied myriad risk factors associated with the vulnerability of adolescents to becoming perpetrators or victims of teen IPV. While some risk factors are unique to a certain type of violence (in this case, IPV), different kinds of violent behaviors share a number of risk factors (Krug et al., 2002). Furthermore, while there has been a focus on individual-level risk factors, analyses of relationship- and community-level risk factors are more recent.

It should be noted that risk factors are not necessarily causal and might be correlates or by-products. For example, depression and low self-esteem can act as antecedents to IPV; however, they can also be consequences of adolescent involvement in violent relationships. It is important to establish differences between causal factors and correlates of IPV because this “temporal sequence” can have “significant implications for design of programs intended to ameliorate abuse” (Offenhauer, 2011: 12).

Protective Factors:

Far fewer studies have looked at protective factors compared to risk factors. For example, in a large-scale review of studies conducted over a decade, Vagi and colleagues (2013) found 53 risk factors from this literature and only six protective factors. It is possible to infer that the inverse of some risk factors are protective factors. Most of the literature also cites complementing risk and protective factors.



METHODOLOGY

RESEARCH DESIGN

Given the paucity of research on the topic in the region, the research team identified a qualitative research design as best suited to explore the significance, attitudes, and practices around intimate relationships and to gain a more nuanced understanding of risk and protective factors associated with adolescent IPV. Such a design also enables the findings to shed light on the reasons and motivations for IPV in relationships.

In designing the research tools for this study, the researchers drew primarily from the literature review and pilot interviews and focus groups. They also consulted several existing quantitative instruments for themes (rather than exact measures), i.e., the WHO; Sexual Relationship Power Scale (SRPS) (Pulerwitz, Gortmaker, DeJong, 2000); the Brazilian Instituto Avon and Data Popular survey; and the Conflict Tactic Scale. Further details of the instrument development and structure can be found in Annex 2.

Site and sample selection

The research teams conducted a total of 147 in-depth qualitative interviews, 71 in Honduras and 76 in Brazil.⁷ Interviews were conducted between July and November 2015. In each country, urban and rural sites were selected:

- **Brazil:** Rio de Janeiro (urban) and communities surrounding Codó, in the northeastern state of Maranhão (rural)
- **Honduras:** Tegucigalpa (urban) and selected villages near La Esperanza, in the department of Intibucá (rural)

7. In Honduras, the research team conducted 73 interviews. Two were considered not viable for analysis purposes, as one individual did not have any relationship history, and another was judged by the interviewer to be low quality (the interviewer had the sense the respondent was not being honest). This leaves a total of 71 interviews for analysis. In Brazil, 79 interviews were originally conducted and three of those excluded, leaving a total of 76 in the sample. The three excluded were pilot interviews in which the participants did not fall within the sample, or in one case, because the participant had previously participated in a Promundo intervention and thus her responses were considered to be biased.

DATA ANALYSIS

All interviews were transcribed verbatim. The research teams used the qualitative software program Dedoose for interview analysis and developed a code book for use across all interviews (Annex 2).

ETHICS AND CONFIDENTIALITY

The research project was approved by institutional review boards (IRBs) in both countries.⁸ Close attention was paid in the trainings and throughout fieldwork to preparing interviewers to develop rapport, establish trust, seek on-going consent, and probe and pause where appropriate. Fundamentally, the instrument was designed, and interviewers trained, not to introduce definitions of violence. Instead, acts and situations were described, and participants described experiences and “named” violence spontaneously. Interviewers were also trained to approach sensitively and professionally the diverse emotional reactions and difficulties that could arise during interviews.

The teams used oral and written consent procedures and forms. Interviews were audio recorded and transcribed according to procedures established for data confidentiality and management so as not to include identifying characteristics in any text files. Pseudonyms are also used in this report’s vignettes. Limitations, challenges, and additional discussion of the methodology, ethics, and confidentiality are provided in Annex 2.

8. In Brazil, the research project was approved by the Centro de Filosofia e Ciências Humanas (CFCH), Universidade Federal do Rio de Janeiro (Center of Philosophy and Human Sciences, Federal University of Rio de Janeiro). For Honduras, a private IRB – Solutions IRB – was used, as a local social sciences IRB was not identified.



CONTEXT

OF THE SITES AND SAMPLE

Brazil and Honduras were chosen as countries, and the corresponding sites selected, because they enabled exploration of the topic in a Central American and a South American country according to characteristics described in this section.

Available IPV prevalence estimates range from 23 to 34 percent in Brazil and Honduras (ENDESA 2013; Stockl et al., 2014). In Brazil, IPV prevalence levels are reported for women who have ever experienced physical and/or sexual violence (Stockl et al., 2014).⁹

Table 1.
IPV Prevalence Levels – Brazil

	Brazil city	Brazil province
% of 15- to 24-year-old women currently or ever partnered	56.8%	54.7%
Total number of 15- to 24-year-old, ever-partnered women	188	267
% of ever-partnered women between 15 and 24 years old who have experienced IPV	22.9%	34.8%
% of ever-partnered women between 15 and 24 years old who have experienced IPV in the last 12 months	14.4%	23.2%

Source: Stockl et al., 2014

The most recent Honduran DHS survey (ENDESA, 2013) found that 27 percent of women have ever experienced physical violence by the age of 15. (The sample includes women aged 15 to 49 of any marital status.) These rates were higher in urban (30 percent) compared to rural areas (25 percent). Again, evidence points to adolescent IPV predicting adult IPV.

In both countries, available data focus on couples in formal marriages rather than informal dating relationships or even unions – leaving these less formal and adolescent relationships under-documented.

Additional background data offer further insight into the sites and sample. Although the countries vary immensely in size, they share high levels of income inequality; according to the World Bank World Development Indicators, Gini index scores are 53.7 and 52.9 in Honduras and Brazil, respectively. Global evidence suggests associations between IPV and poverty at various levels, or the inverse: that high socioeconomic status is a protective factor to IPV (Abramsky et al., 2011; Ellsberg et al., 2015). Employment and economic variables are

9. 2000 to 2004 data, WHO Multi-country Study on Women's Health and Domestic Violence against Women.

inconsistently related to risk of IPV (Heise, 2011) and cannot alone predict risk of IPV, nor can results from studies primarily with adults be generalized to younger populations.

Both countries also have high homicide rates (the number of homicides per 100,000 people), mostly involving low-income young men. Between 2012 and 2016, homicide rates reportedly decreased in Honduras. They rose in Brazil, including in the locations of the fieldwork. These contexts of violence, inequality, and poverty influence risk factors related to adolescent IPV.

Table 2.
Fieldwork Sites: Secondary Background Data^{10,11}

	Population (est.)	Socioeconomic Status	Public Security Context	Access to Services
HONDURAS	8.6 million	Urban populations: 18.8% live in moderate poverty and 27.5% in extreme poverty Rural populations: 15.3% live in moderate poverty and 69.2% in extreme poverty (2013 data in IDB, 2015: 39)	Homicide rate: 60 (IUDPAS, 2015 data)	Disparities in rural versus urban access to services such as education, health care, water, sanitation, and electric services
Honduras: Urban Site (Tegucigalpa)	1.1 million	Low- to middle-income participants; most are low-income	Homicide rate of 65.5 in the department in which Tegucigalpa is located Violence concentrated among male youth, aged 20–24 in the country's major cities Several neighborhoods in which interviews took place are controlled by gangs	Communities where interviews took place were low-income, but they had access to public services

10. **Honduras sources:** Instituto Nacional de Estadística (INE) (<http://www.ine.gob.hn/index.php/25-publicaciones-ine/87-encuesta-permanente-de-hogares-de-propositos-multiples-ephpm>); violence statistics from IUDPAS (iudpas.org/pdf/Boletines/Nacional/Ned40EneDic2015.pdf and <http://www.iudpas.org/boletines/boletines-nacionales>). **Brazil sources:** Population, IBGE estimate as of August 2016 for Brazil, and 2010 census estimates for the remaining Brazil population estimates; DATASUS 2010 for socioeconomic data in Codó; IDB (2015) comparable data for urban/rural poverty incidence: https://publications.iadb.org/bitstream/handle/11319/6878/Poverty_vulnerability_and_the_middle_class_in_Latin_America.pdf. Homicide rates found in the 2016 Atlas da Violência: http://www.agencia.patriciagalvao.org.br/dossie/wp-content/uploads/2016/03/IPEA_FBSP_atlasdaviolencia2016.pdf.

11. A homicide rate is defined by number of homicides per 100,000 inhabitants. The WHO considers a homicide rate above ten to be an epidemic. Estimates can vary greatly by source and method of data collection, often omitting homicides that are not investigated. The homicide rate in Honduras is reported to have decreased from 85.5 to 60 from 2012 to 2015, and in the city of Rio de Janeiro from 62.8 in 2012 to 32.3 in 2014, as presented in the table (Mapa da Violência, 2014). Furthermore, girls/women especially, but also boys/men, are victims of non-lethal crimes such as sexual violence that should be considered in an inclusive analysis of security.

	Population (est.)	Socioeconomic Status	Public Security Context	Access to Services
Honduras: Rural Site (near La Esperanza, Intibucá department)	About 12,000 in La Esperanza; 224,000 in Intibucá department	Most participants are low-income, relying on subsistence agriculture	Homicide rate of 33.1 Participants described their communities as safe, perhaps because they are smaller/less affected by gang activity	Participating communities have access to education and health services up to about a 30-minute drive from La Esperanza, the major city of the department Four of the participating communities did not have electricity
BRAZIL	206.2 million	Urban populations: 9.6% live in moderate poverty and 7.5% in extreme poverty Rural populations: 17.5% live in moderate poverty and 26.5% in extreme poverty (2013 data in IDB, 2015: 34)	Homicide rate of 29.1 (2014 data reported in Atlas da Violência, 2016)	Access to and quality of services vary by income level, region, and urban/rural location
Brazil: Urban Site (Rio de Janeiro)	6.3 million	Low- to middle-income participants; most are low-income	Homicide rate of 32.3 (2014 data reported in Atlas da Violência, 2016) Both favelas in which fieldwork took place are subject to ongoing conflicts over territorial control by the police and/or drug trafficking factions	Low in favela communities, especially the ones farthest from center; low for adolescent services but moderate access to services overall
Brazil: Rural Site (near Codó, state of Maranhão)	37,000 (rural communities surrounding Codó); 81,000 in the city of Codó; 6.6 million in the state of Maranhão	69.8% of families earn less than half the monthly minimum wage salary, or around R\$510 per month (DATASUS, 2010)	Homicide rate of 35.1 in the state of Maranhão and 20.3 in Codó; Codó is among the 20 Brazilian cities in which homicide rates have increased the most (2014 data in Atlas da Violência, 2016)	Location of rural communities range from 20 minutes to 2 hours drive from Codó city, which has health centers and NGOs; very few services in communities themselves apart from schools and churches

BRAZIL

Urban site: In Brazil, four urban sites within Rio de Janeiro were selected in order to include a profile of adolescents in and out of school, and from lower- to middle-income households. Two public schools located in the center of Rio de Janeiro that admit lower- to middle-income students who come from diverse parts of the city were selected.

In addition, two favelas, or low-income communities, were selected, one located closer to the center of the city and the other in the North Zone of the city, distant from the center. Although the first favela has a Pacification Police Unit, it was the least secure site throughout the fieldwork. Local health centers provided initial entry points for both of these favelas (i.e., via community health workers), although the researchers relied on snowball sampling throughout all sites via NGOs, a church, local leaders, and other adolescents.

Rural site: The sites chosen for the rural fieldwork in Brazil were three rural communities surrounding Codó, a small city in the northeastern state of Maranhão. Houses there are built from mud, thatch, and cement. All of these sites receive very few social services, projects, or research, especially the most isolated, which is 80 kilometers from Codó.

There is a lack of data, especially in the rural sites, but the local research partner reported that common violence in two of the communities studied include bar fights and fights in places along the river where residents swim. They reported that, while some youth use drugs, drug trafficking does not have an active presence. Reports indicate a rise in sexual abuse among children since 2014, and official data show a rise in the homicide rate in the city of Codó.

HONDURAS

Urban site: In Honduras, the capital city, Tegucigalpa, was selected as a site because it is the largest city in the country and the researchers had contact with a number of organizations that work with youth in low-income and underserved neighborhoods there. In Tegucigalpa, the youth have access to secondary education, health services, and NGOs, but with varying quality. They were recruited through local NGOs that work in their communities and schools, such as World Vision, Red Cross, CADERH (Centro Asesor para el Desarrollo de Recursos Humanos), and other local youth organizations. Some of the participants were also post-secondary students from INFOP (Instituto Nacional de Formación Profesional) and Universidad Nacional

Pedagógica.

Rural site: Communities near the department of Intibucá were selected. The department is located in what is known as the *corredor seco* (the dry corridor), where a large investment is being made by international donors in improving irrigation and thereby agriculture and food security. Because of this investment, some NGOs are present. Intibucá ranks very poorly in terms of education, nutrition, and provision of social services. The main source of income in these villages is production of potatoes and other cash crops on small farms.¹²

In Intibucá, the researchers recruited youth in communities that had *Sistema de Aprendizaje Tutorial* (SAT) centers. Since La Esperanza is the capital of the department, people have access to governmental institutions such as the office of the public prosecutor's office, which has a division dedicated to women (*Fiscalía para la Mujer*), as well as NGOs such as Child Fund and World Vision, and others that promote women's rights.

SAMPLE

Researchers reached out to those youth commonly identified as “at risk” due to poverty and lack of educational opportunities; prior research suggests that these youth are at higher risk for IPV. Within these groups, the team initially aimed for an

Using a 14 to 24 age range

The 14 to 24 age range was selected for this study in order to capture the life trajectories of young people from early adolescence through young adulthood, looking at the implications of teen dating violence over a decade in the life of a young person. Additionally, this range enables a better understanding of the implications and consequences of dating for adolescents (including the ways in which it affects their identity formation), as well as risk and protective factors (and how these evolve over time) at a time when girls and boys are especially vulnerable to dating violence. Finally, the broad age range makes it possible to capture the experiences of young women and men in their early twenties, who have had a chance to reflect on their past relationships and how they affect their current experiences.

12. SAT is an alternative secondary education program that operates in partnerships with a local NGO and the Honduran government: <http://www.bayanhn.org/programs-sat.php>. SAT reaches communities and students that do not have access to the traditional educational system.

age distribution of between 14 and 24 years, with about 50 percent from each sex.

The sample size was not representative of any group, and findings cannot be generalized. However, the sample does allow for comparison among factors in order to better understand the dynamics of teen dating violence in these settings. It also offers insights into the risk and protective factors affecting under-studied populations (in both urban and rural sites, and at national and regional levels).

In order to recruit participants, the research teams interviewed adolescents and youth in schools and communities, relying on snowball-effect methods to ensure the inclusion of participants with experiences relevant to the research inquiry. In other words, the teams sought a purposive sample (Maxwell, 2013; Creswell, 2013) of individuals who could speak about experiences with violence in intimate partner relationships. To this end, adolescents identified early in the research process were asked to help identify friends and peers who could also be approached to participate. In addition, contacts from relevant projects and NGOs were asked if they knew of any adolescents who might participate. It is important to stress that, in accordance with the ethics protocol, adults were never asked to identify participants based on having experienced/used teen dating violence – rather, a more general description was provided to them, i.e., describing the research as a study on adolescent relationships instead of IPV. These snowball techniques were very effective in identifying youth in urban and rural sites with experiences relevant to the study.

Only women interviewed women/girls, and men interviewed men/boys. In both Brazil and Honduras, the researchers leading the fieldwork were identified for having experience working with youth on issues of gender and relationship violence. All members of the research teams had extensive experience working with and conducting in-depth interviews with youth in these contexts.

SOCIODEMOGRAPHIC CHARACTERISTICS OF THE TOTAL SAMPLE (BRAZIL AND HONDURAS)

Tables 3 and 4 summarize the sample in Honduras and Brazil by age, sex, and location.

Across the full sample in both countries, the researchers obtained the target age distribution, with the highest percentages being 18 to 19 years old (27 percent) and 16 to 17 years old (27 percent) (Figure 1). Among adolescents, the most commonly reported religions were Catholicism (45 percent) and Protestant/Evangelical denominations (30 percent) (Figure 2). About half consider themselves practicing the religion they declared, with 27 percent not considering themselves practicing the religion (and 20 percent not responding to this question).

Table 3.
Sample Division by Age and Sex in Honduras (Number of Participants)

Age	Urban Honduras		Rural Honduras		Total
	Female	Male	Female	Male	
14-15	1	3	2	0	6
16-17	4	2	3	3	12
18-19	3	10	0	10	23
20-21	5	3	3	2	13
22-24	9	4	1	3	17
TOTAL	22	22	9	18	71

Table 4.
Sample Division by Age and Sex in Brazil (Number of Participants)

Age	Urban Brazil		Rural Brazil		Total
	Female	Male	Female	Male	
14-15	6	2	4	1	13
16-17	12	9	1	3	25
18-19	2	9	1	5	17
20-21	2	4	0	5	11
22-24	2	3	4	1	10
TOTAL	24	27	10	15	76

Table 5.
Sex and Socioeconomic Indicators of the Sample

Adolescent Participants (Total Sample)	Percent
Sex - Female	44%
Location - Urban	65%
Ever had a paid job	45%

In terms of the sample's socioeconomic status, in Brazil, 34 percent of the youth lived in a household that receives a conditional cash transfer (Bolsa Familia) while 29 percent did not receive any form of government support. Among the Honduran sample, 84 percent reported living in a household that receives no government support while 25 percent received a remittance.

Race/ethnicity (Figures 3 and 4) was reported according to self-reported categories used in the census, with the option for "other." The greatest number of adolescents reported being mixed-race, of indigenous and/or African and European descent – *mestizo* or *ladino* (Honduras) or *parda* (Brazil). In Honduras, these are followed by *lenca* (32 percent), no response (9 percent), *Garifuna* (7 percent), indigenous and white (1 percent each). Other races/ethnicities reported in the Brazil sample include *preta* or black (31 percent), *branca* or white (16 percent), and *negra* as another category related to African descent that is self-identified but is not on the census as the other categories are (7 percent), followed by *morena* and indigenous.

Figure 1.
Distribution of Age Across the Full Sample

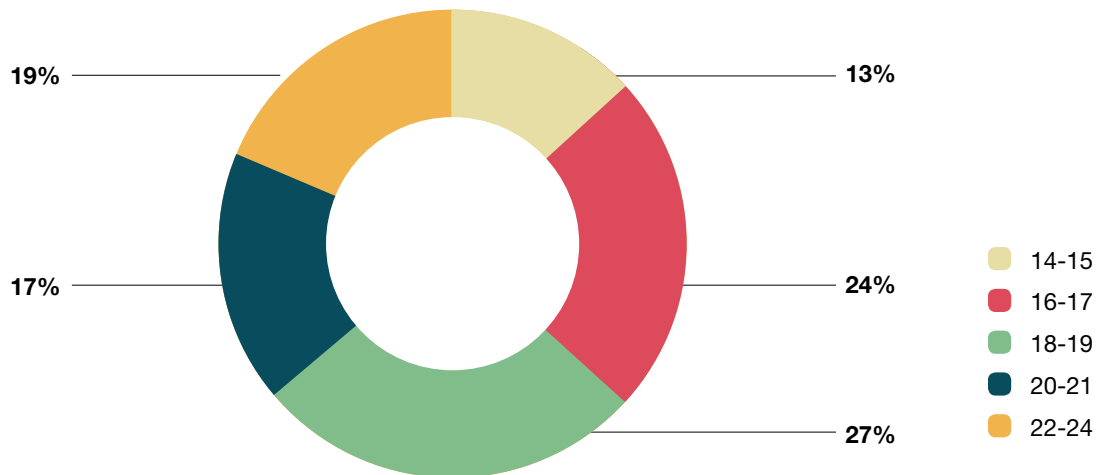


Figure 2.
Distribution of Religion Across the Full Sample

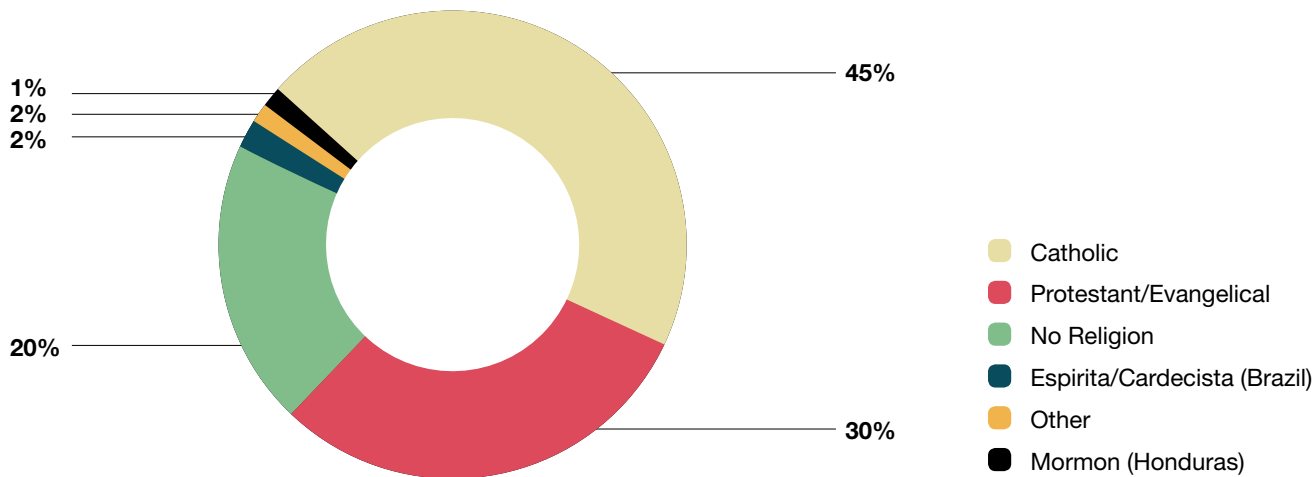


Figure 3.
Race/Ethnicity of the Honduran Sample

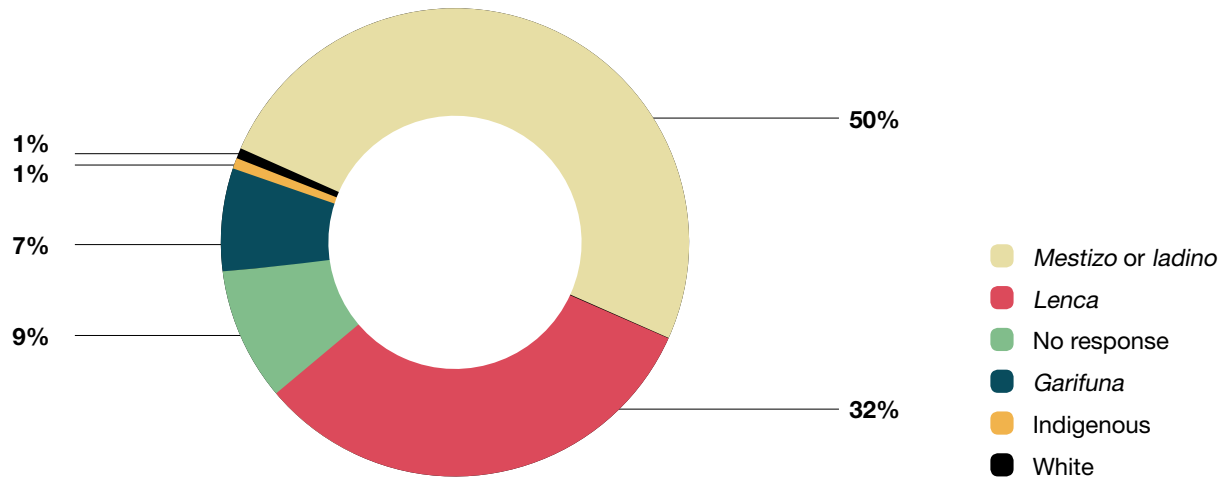
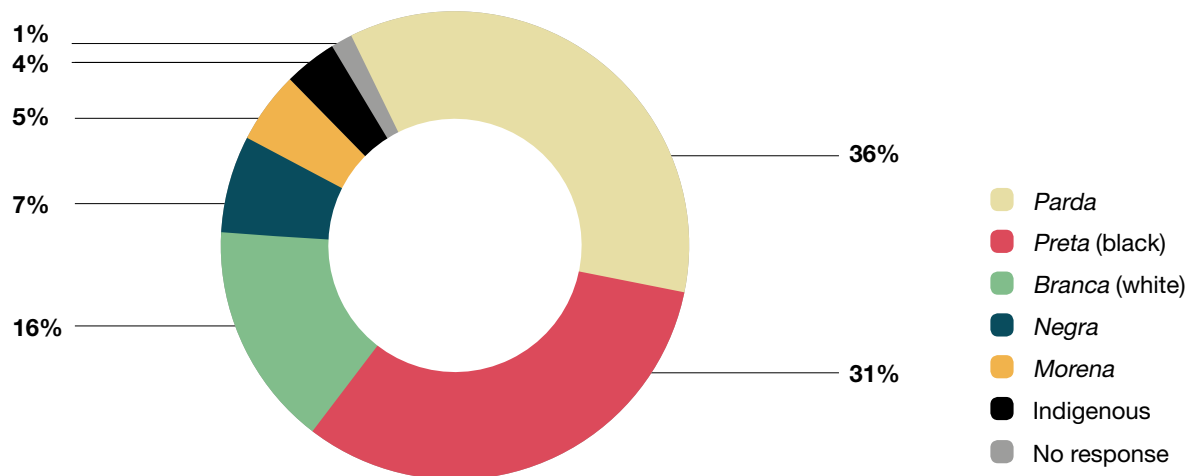


Figure 4.
Race/Ethnicity of the Brazilian Sample





FINDINGS

Findings from this study are presented in two sections. The first section provides a brief overview of the types of relationships and violence that adolescents experience. The second section provides an in-depth analysis of the risk and protective factors for IPV according to community, relationship, and individual levels.

The majority of findings apply to both countries. Where relevant, the report indicates when findings apply to just Brazil or Honduras, or rural or urban sites. This research found significant similarities in the relationships of urban and rural youth and in Brazilian and Honduran youth, with several notable differences.

Differences between rural and urban settings are found with regard to the following aspects: use of technology (rural areas have limited access and most rural respondents did not make regular use of communication tools such as mobile phones and the Internet, especially social networks); reporting of sexual orientation other than heterosexual (with no reporting of non-heterosexual relationships in the rural sites, suggesting prevailing taboos around queer identities and/or homophobia); a greater number of long-distance relationships in rural areas (in which young people establish relationships with others in neighboring communities/municipalities, thus restricting their time together); and a higher number of marriages among youth in rural areas (both in references to acquaintances who married young – at age 14 to 16, for example – and their own personal experiences).

Finally, the researchers use the terms “adolescent girls” and “adolescent boys” to refer to participants aged 14 to 17 years, and “young women” or “young men” to refer to those aged 18 to 24 years. Notions of whether one is a “child,” an “adolescent,” or a “young adult” vary by setting and whether participants or adults are asked. These notions of life phases also fundamentally influence norms around when adolescents perceive themselves to be “ready” for certain types of relationships and sex, as well as the ways in which adolescents perceive their power and roles within a relationship. The findings also discuss gender differences in risk and protective factors where they arise.

4.1 Types of relationships

The research explores the different types of relationships that adolescents envision or experience. Understanding the nature of relationships in Brazil and Honduras is essential for the purpose of this research: the findings show that the type of relationship influences the healthy or abusive dynamics that develop between members of a couple. For example, in more serious relationships, the researchers note controlling behaviors and physical and sexual forms of IPV tend to be more common.

To this end, research participants were asked to describe the types of relationships possible among their age groups, based on what they had experienced.

Adolescents in all sites in Brazil and Honduras described similar types of relationships involving a boyfriend or girlfriend. However, there are some differences between the two countries in the sociocultural meanings of relationships and the terminology used to describe them.

In Brazil, adolescent relationships include those of *namoro*, i.e., more formal dating relationships; and *ficar*, referring to more informal and/or shorter-term relationships that usually include sexual relations.¹³ The interviewers used the term “involvement” to offer a broader scope to the question and allow adolescents to describe their own situations. Across Brazilian sites, adolescents generally understood relationship as a more formal or committed arrangement. When they discussed relationships, adolescents used many terms to describe them, such as “tangled” (when an uncertainty exists), “passing,” “open,” and “serious.”

In Honduras, the researchers used *relaciones sentimentales* to refer to a wide-range of both informal and formal relationships, distinguishing romantic or sexual relationships from platonic or non-romantic relationships. Adolescents and young adults in Honduras identified *unión libre*, *noviazgo*, *parejas*, or *casados* as types of formal relationships, while informal and/or short-term relationships were generally described as *pasatiempos* or *pasajeros*. In both countries, each type of relationship was associated with particular expectations, durations, degrees of emotional attachment, and levels of commitment and security, related to gender, sex, age, and social pressures.

13. Based on their research in Brazil, Minayo and colleagues (2011) described *ficar* as experimenting, engaging in casual sexual and affective relationships, getting involved “just for fun.” *Namoro* involves commitment and the cultivation of deeper feelings. The authors found, as does this study, that traditional gender roles and stereotypes continue to be reproduced. Also see Justo, 2005.

Long-lasting formal relationships (dating)

Namoro and *noviazgo* (roughly translated as “dating” or “serious dating”) were terms used in Brazil and Honduras, respectively, to designate long-lasting, formal relationships (or those intended to last). The terms indicated greater emotional involvement and designated a relationship as committed, meaning that partners are expected to adhere to certain requirements, such as fidelity and monogamy, constant or frequent presence, emotional attachment, expectation of a common future, and involvement of family members/family being aware of the relationship.

Preferences regarding degrees of commitment varied across the research sites. These conceptions of commitment also influenced the sense of ownership, meaning the control exerted by one over the other in a relationship. On the one hand, youth valued committed or formal relationships, such as *noviazgo* in Honduras, as ideal forms of mutual support and security. On the other, these relationship types were associated with controlling behaviors (described in greater depth in subsequent sections) such as monitoring mobility, reviewing one’s cell phone and use of social media, or policing friendships and other peer contact.

Informal and short-term sexual encounters (hook-ups)

In Brazil, *ficar* was used in urban and rural environments alike to designate informal relationships, generally characterized by fewer obligations between partners, although these relationships may vary significantly in terms of extent or duration. *Ficar* could mean a single, brief encounter with a partner or even multiple encounters with different durations over a period of time (from weeks to months). Variations of the term also exist.

Amigos con derechos or *amizade colorida* – “friends with benefits” – relationships were commonly described in both countries. These terms referred to relationships in which partners have certain “rights” to sexual contact, such as kissing, touching, or intercourse, without any formal partnership or obligation to the other person.

Cohabitation and marriage

Adolescents also discussed marriage, more frequently in rural areas, and in urban and rural areas of both countries they often framed it as a future expectation. Research participants used particular terms to designate a committed relationship in which the couple cohabitates without being married, yet refer to each other as husband and wife: *unión libre* or *amachinada* in Honduras, and *se juntar*, *amigar*, or *casar* in Brazil.

As discussed in Section 3.2, unions often constituted a risk factor for IPV in adolescent relationships. It is important to stress that in both countries, there were terms – for couples’ cohabitating, being in a relationship more serious than dating, and/or associated with having children together – that hold the same meaning and implications as marriage, even when the couple has not engaged in a civil or religious ceremony.

EXPECTATIONS AND IDEALIZATIONS

In their interviews, adolescents discussed the characteristics they expect and consider to be ideal in a relationship. The vast majority of boys and girls across all settings mentioned trust and respect as core values for a good relationship. Other commonly cited attributes included affection, loyalty, love, and dialogue. Girls and boys both described ideal relationships as incorporating the notion of *ser libre/livre* – that is, personal freedom without imposition from one's partner or social pressures.

Similarly, adolescents shared expectations that a good relationship ought to last and have the potential to become a more stable union or marriage. The majority of respondents described a preference for dating relationships, for their security and their potential for establishing a common life together with a partner.

Respondents often referred to jealousy, infidelity, and betrayal as the most distressing and damaging factors for a relationship. These factors are closely tied to controlling behaviors, further discussed in Section 3.2. Fighting, and various forms of violence (e.g., beatings, control), also appeared in the respondents' descriptions of threats to a relationship, especially among the girls.

The findings suggest that adolescents strive for trust and dialogue in their relationships, and do not like fighting. However, in practice they often struggle to achieve these goals. While the findings also suggest that the respondents' relationships largely reflect traditional gender norms, they also demonstrate points of resistance against such norms, such as the *ficar* relationships previously described.

4.2

Types of violence and controlling behaviors

This section discusses controlling behaviors and the various types of intimate partner violence identified throughout this research. The findings are generally consistent with earlier empirical and review studies about adolescent IPV in Brazil (Minayo et al., 2011), in Honduras (Rivera Sierra, 2012), and internationally (UNICEF, 2014; Lundgren & Amin, 2015; Offenhauer, 2011; Tharp et al., 2013; Glass et al., 2003). The researchers recognize variation across the literature in conceptualizations of controlling behaviors and types of violence. Attention has been paid to presenting experiences that reflect empirical findings and noting diverging terms when appropriate.

The most prominent finding for both Brazil and Honduras was that, while adolescents tended to identify physical forms of violence, they were much less likely to recognize other harmful behaviors or acts as violence. Controlling behaviors, for example, were pervasive, often reciprocated, and sometimes described as caring. Like psychological and emotional forms of abuse, they are often overshadowed by physical and sexual IPV (Jewkes, 2010), yet they can trigger and enhance negative health and other outcomes both independently and coupled with other forms of violence (Ludemir et al., 2010; Jewkes et al., 2015; Sears, Byers, Price, 2007). Further research is thus crucial in order to understand the role of controlling behaviors among adolescents and in the region.

It is noteworthy that a majority of respondents in both countries, during childhood and into adolescence, had been exposed to violence in their families and among their peers and neighbors. In some cases, the violence was severe. Domestic violence in the home of origin was reported by both male and female respondents in Brazil and Honduras alike, most often in the form of witnessing their fathers use physical violence against their mothers. In both countries, several adolescents also reported having been sexually abused by relatives during their childhood.

This study also found context-specific linkages between some forms of chronic urban violence and IPV that may shed light on the ways in which IPV in the Latin American context is distinct from analyses of other settings worldwide, considering high rates of homicide, police violence, and drug-trafficking violence in the region. Many participants experienced risks associated with urban violence in the major cities included in this research.

CONTROLLING BEHAVIORS

Controlling behaviors were especially prevalent throughout interviews. The literature demonstrates a lack of consensus about what constitutes controlling behaviors, and whether they constitute a form of violence or are a risk factor (Garcia-Moreno et al., 2005; Minayo et al., 2011; Catalozzi, 2011; Friedemann-Sánchez and Lovatón, 2014; Jackson, 2000). The WHO Multi-Country study on domestic violence measured the following acts as controlling behaviors among women ages 15 to 49: “tried to keep her from seeing friends, tried to restrict contact with her family of birth, insisted on knowing where she was at all times, ignored her and treated her indifferently, got angry if she spoke with another man, was often suspicious that she was unfaithful, expected her to ask permission before seeking health care for herself” (Garcia-Moreno et al., 2005).

In both countries of this research, controlling behaviors most commonly included adolescent girls and boys inspecting their partner’s phone or social media pages with or without permission, restricting their partner’s style of clothing or ability to leave the house, and requiring permission for their partner to socialize with friends.

Control and possessiveness emerged in conversations regarding jealousy, suspicion of infidelity, and lack of trust in particular. In Brazil, for example, control could be expressed in the form of a hickey left by a young man on his girlfriend to “mark” that she was with him; this occurred in the case of a male partner otherwise considered by the girl herself to be a more equitable partner than her previous boyfriend, who used physical violence. The 15-year-old girl from Rio de Janeiro reported:



**ADOLESCENT
GIRL**

Urban Brazil

“Recently when he gave me a hickey, [he said]: ‘Now the girl’s registered, she’s showing that she has a boyfriend.’ I said, ‘My mom thinks that thing’s nasty,’ and he goes ahead and does that, and I told him, ‘Dang, my mom’s going to see it and mess with my life.’ And he said: ‘No, she’s not, my bad, it was just a joke.’ [...] It got really red, then I showed him, and he got angry because I said I didn’t like it.”

In Rio de Janeiro, one of the most physically violent episodes related to possessiveness was that of a 13-year-old girl who suffered permanent brain damage as a result of being beaten with a pressure cooker by her boyfriend, who thought her tattoo of his name was too small.

Overwhelmingly, girls did not identify their partner's control over their mobility as a form of violence, as shown in the following example from a 20-year-old young woman in urban Honduras:



**YOUNG
WOMAN**

Urban Honduras

“Do you think he had the right to know where you were or to behave that way [to ask where you were]?”

“Well, maybe if I left Tegucigalpa, maybe yes, but if I was near my sister’s house he would say things – that I went out without permission, that I didn’t call him. So even to go out to the grocery store I would have to ask permission from him.”



INTERVIEWER

A 19-year-old young man from rural Honduras described getting upset when his girlfriend goes to parties:



**YOUNG
MAN**

Rural Honduras

“Also, I didn’t like it when she would go out to parties... she asked me for permission to go to a party, I would tell her not to go, and I told her, ‘You are not going to go and that’s it.’ And she told me she wasn’t going to go, and then a friend of mine who went to the party told me that she was there, so I felt bad, so the next day I told her so.”

“What did you say to her?”

“That she doesn’t take me seriously – or that she thinks I’m some toy, that she takes me for a toy. I told her, ‘If you really love me, you need to obey me.’ But I was a little angry.”



INTERVIEWER

As the previous quote demonstrates, findings show that masculine social norms imposed upon boys can trigger IPV. For example, young men often described feeling upset or belittled when they are made to look bad in front of others. In the previous example, the young man’s perceived loss of control over his girlfriend equates to a perceived threat to his manhood (being treated like “a toy”).

PSYCHOLOGICAL VIOLENCE

Psychological violence – also often called emotional violence, or abuse – includes threats (e.g., to hurt the partner or someone she cares about, to end the relationship, or to take her children away); forms of humiliation such as insults, belittling, and ignoring; and scaring or intimidating a partner (e.g., by destroying another’s property).¹⁴ Some conceptualizations thus overlap with controlling behaviors, posing challenges and variance in measurement including with understanding overlapping forms of violence (Sears, Byers, Price, 2007).

The following patterns related to psychological violence were identified over the course of the interviews.

1) Threats of death and physical violence

In both countries, participants received death threats and threats that they would be physically attacked. Girls most often reported receiving threats from jealous male partners around perceived or feared infidelity.

A young woman from a community near Codó had her first sexual experience at age 11 with a 25-year-old man who said he wanted a wife and threatened to kill her if she left his house, like his father had killed his mother. Two young women had similar experiences of death threats in their early relationships in Codó. One 24-year-old woman from a rural site near Codó reported being chased with a knife when she was an adolescent:



**YOUNG
WOMAN**

Rural Brazil

“So he came, went straight for my throat, saying: ‘Hey, bitch, if you really leave, I’ll kill you, the way my father killed my mother, I’ll kill you, I’ll just put one bullet into your neck.’ So I was scared. Then his relatives gave him advice: ‘If you don’t want to disgrace another’s daughter, then dump her, leave her where you found her. Why do you want to mistreat, beat her up – you think that’s pretty? No, it’s not a pretty thing.’”

In some instances, violence came from previous partners, as in the case of a 17-year-old high-school girl from Rio de Janeiro who was too startled by her former boyfriend’s threat to tell her mother:

14. These forms of psychological or emotional violence and abuse draw from Bott et al. 2012; Garcia-Moreno et al., 2005.



**ADOLESCENT
GIRL**

Urban Brazil

“What has Tiago threatened to do?”

“If I find someone else, he’d kill me... He said, ‘I just want you for myself, just for me, just for me.’”



INTERVIEWER

A 15-year-old girl from Salgueiro, a community in Rio de Janeiro, was similarly threatened:



**ADOLESCENT
GIRL**

Urban Brazil

“I wanted to break up with him because he was beating me. And yet, at the same time, I didn’t because I liked him, and he said all sort of things to me: ‘Ah, if you break up with me, I’ll kill you.’ ‘You will not get with anyone else or I’ll kill you and the guy.’ And I stayed with him because I was young. I was afraid he would do something to me.”

Control can take place even in the absence of physical proximity. In both Honduras and Brazil, men controlled their girlfriends even while incarcerated. In Brazil, a man who had dated a girl for two months prior to being sent to prison kept control over her from prison, asking her not to go out and saying he would kill her if she began a relationship with someone else.

2) Threats of suicide

In Honduras, some of the respondents in the urban site reported that their partners threatened to kill themselves if their boyfriend/girlfriend ended the relationship. No such threats were reported in the rural site or in Brazil, though this may also be due to the sample size.

A 23-year-old young man from Tegucigalpa recalled his experience:



YOUNG MAN

Urban Honduras

“Has there ever been a time that a girl has done something to scare or intimidate you intentionally?”

“Yeah [she said] that she was going to kill herself and so... I went to talk with her brother and told him: ‘Look, your sister is saying that she is going to kill herself for me.’ But I think it was all just to intimidate me, I don’t think that she would make that decision, but rather it was more like she did that so I would go back with her again.”



INTERVIEWER

3) Threats of taking a partner's children away

Another form of threat was to take a partner's children away. A woman from Honduras explained, for example, that her ex-boyfriend threatened to take her daughter away, as well as to turn her friends against her:



**YOUNG
WOMAN**

Rural Honduras

“Well, my last partner would threaten to take my daughter away and kick me out of the house. He was a bit aggressive and on various occasions he took a sweatshirt from me that until this day he’s never given me back. Even so he would say to me that he was going to turn my friends against me.”

4) Degrading, belittling, ignoring¹⁵

Of the forms of psychological violence, belittling was the most commonly cited, often in the context of boyfriends discouraging girlfriends from doing what they like, such as pursuing a hobby, hanging out with friends, taking a course, or going to school. A 24-year-old young woman from rural Brazil described a situation of belittling:



**YOUNG
WOMAN**

Rural Brazil

“He always says that, ‘You’re dreaming too high.’”

“Did a situation happen in which you thought something was important and he thought it was foolish?”

“Yes, when I wanted to learn how to crochet.”

“And did you learn?”

“I know – it was silly, if I had insisted I would have learned.”



INTERVIEWER

15. Similar to the definitions used in WHO and Pan American Health Organization (PAHO) reports, the CDC adds that psychological aggression can include expressive aggression, e.g., name-calling, humiliating, degrading, and acting angry in a way that seems dangerous. See: <http://www.cdc.gov/violenceprevention/pdf/intimatepartnerviolence.pdf>

In other cases, girlfriends ignored boyfriends in front of friends. A 20-year-old young man from Salgueiro favela in Brazil described how his girlfriend ignored him in front of others; she was more jealous and controlling of him than he reported acting toward her.

5) Damaging property (patrimonial violence)

In both Brazil and Honduras, instances of damage to or destruction of a partner's possessions – such as ripping clothing – were primarily reported as being provoked by jealousy and suspicion of infidelity. For example, a 15-year-old adolescent girl in Urubu, in Rio de Janeiro, described how her former same-sex partner broke her cell phone after being very jealous, and tried to discover where she went out. An 18-year-old young man in rural Honduras described his use of patrimonial violence, including breaking a cell phone, after finding messages that made him jealous:



YOUNG MAN

Rural Honduras

“What kind of things did you ruin?”

“Well, I ripped her shirt ...I almost ripped her pants, too [...] I would take her cell phone and I would throw it on the ground until it broke into a million little pieces.”

“How many of her cell phones did you break?”

“Two.”



INTERVIEWER

PHYSICAL VIOLENCE

Both female and male respondents in Brazil and Honduras reported having experienced physical violence in some form. Women reported having experienced beating, hitting, and other forms of physical violence, while men reported hits, slaps, being pushed, and in some cases, threats of physical harm. Overwhelmingly, adolescent girls and young women experienced more physical victimization by their partners than did males.

A 23-year-old young man from urban Honduras described his use of physical violence, which he justified:



YOUNG MAN

Urban Honduras

“Did you ever hit a girl because she made you mad or you did not like something she did?”

“I didn’t hit her, but I did subdue her.”

“How did you subdue her?”

“I grabbed her neck... I think that she was scared because I grabbed her neck and I hit the door, but I did not hit her... That woman was crazy. I was the one that had to leave in order to avoid more problems.”



INTERVIEWER

There were also several reported instances of females using some form of violence against their male partners. An 18-year-old young woman from Tegucigalpa described how she would hit her boyfriend out of jealousy after he cheated on her:



YOUNG WOMAN

Urban Honduras

“Yeah, and so even the smallest thing he did to me would make me hit or scratch him or do things like that, and I would insult him... Slaps on the face, no, more like scratches, something like that, on the arms.”

RECIPROCAL VIOLENCE

The study found instances of reciprocal violence, in which each member of the couple used a form of violence, often in reaction to one another. In the previous quote, the girl used physical violence to respond to the psychological violence of her boyfriend cheating on her. This type of reciprocal exchange was common in both urban and rural sites in the form of mutual controlling behaviors (e.g., monitoring each other's phone and social media messages); socializing and/or having sex with another person to make the partner jealous or to retaliate for real or perceived infidelity; and physical violence.

Reciprocal violence seemed particularly to emerge in relation to adolescents testing their limits, roles, power, and preferences in relationships. Often, when the girl's use of violence was reactive, it was carried out in a situation that she disliked or in which she felt insulted (e.g., being ignored when talking, not having her opinion valued). Girls and boys alike sometimes described girls disparagingly as "bringing up problems for no reason." Many of these examples would qualify as "gaslighting," a term used in English in reference to adult IPV, and a phenomenon that is underexplored in terms of adolescent IPV. Gaslighting refers to a form of psychological manipulation that makes the victim feel incapable, makes her feel irrational, or blames her for being "crazy."

Often, reciprocal violent behaviors revolved around jealousy or revenge in a tit-for-tat, retaliatory dynamic. In several participants' reports in Brazil, girls were unfaithful after their boyfriends were – providing examples of a dynamic in which girls and boys test each other in psychologically violent ways, such as by cheating when one has been cheated on.

SEXUAL ABUSE IN THE FAMILY AND DURING CHILDHOOD

Adolescent girls and boys, in both countries and across both rural and urban sites, described experiencing sexual abuse during childhood, including rape. Many girls and boys also discussed the psychological impacts of these experiences in terms of fear, humiliation, anger, and remorse. In some cases, boys who experienced sexual abuse in childhood later perpetrated violence toward girls as adolescents. Many girls who were sexually abused later became the victims of IPV.

Experiences of sexual abuse are significant for the purposes of this research because, of those who experienced some form of sexual abuse during childhood, almost all became either victims or perpetrators of IPV as adolescents. Prior research suggests that women exposed to sexual abuse as children have a much higher likelihood of experiencing IPV (Barrios et al., 2015). Boys who experience abuse (and witness men beating their mothers) are likewise more likely to go on to perpetrate IPV (Contreras et al., 2012). The high prevalence of childhood trauma in this sample warrants closer attention and intervention as part of any attempts to prevent adolescent IPV.

Many girls experienced rape (sometimes repeatedly) and sexual abuse by adult family members or people close to their families. For example, a 20-year-old young woman in Tegucigalpa was sexually abused and raped several times by her grandfather when she was 13 years old, and remembers the physical damage it did to her (scars, bleeding, and an injury to her head). A 21-year-old young woman from Tegucigalpa reported that when she was 8 years old, her adult cousin took her to the back of her house and sexually abused her.

In Brazil, a young woman, 20 years old, from Rio de Janeiro, reported that she was held down and raped at age 11 by her 41-year-old stepfather. Her mother did not believe her, so the young woman ultimately went to live with her grandmother. Finally, another girl and her sister were sexually abused by their uncle when they were children. They did not seek help, and only told their parents years later.

Adolescent boys also reported experiencing abuse as children, but they had slightly fewer such experiences than did girls. The interviewers noted that the boys had greater difficulty discussing anything further than the fact that they were abused. In the Honduran rural site, Intibucá, a 19-year-old young man reported having been sexually abused as a child, but did not provide any details about the experience. In Brazil, an adolescent boy from Rio de Janeiro reported being sexually abused by his male caregiver in a daycare when he was a child, and only told his parents years later.

One implication of these findings regarding child sexual abuse is that programs to prevent adolescent IPV should offer spaces in which boys and girls alike can receive counseling and therapy if they experienced abuse during childhood. In addition, efforts to prevent IPV and those to prevent child abuse should work in tandem.

SEXUAL VIOLENCE¹⁶ INVOLVING ADOLESCENT PARTNERS

Boys reported perpetrating acts of violence against girls, both partners and non-partners, such as sexual abuse or coercing unwanted sex. In some instances, boys who had perpetrated sexual violence recognized such acts as violent when committed by another person, and they were, to varying degrees, aware of the notion of human rights as a form of protection. This illustrates how an individual's attitude can change without a corresponding change in the individual's behavior. For example, a 19-year-old boy in rural Honduras reported that he forced sex on his girlfriend, but then said people who experience violence can seek help within human rights frameworks.

Another teenage boy interviewed in rural Honduras reported coercing a girl to have sex, which he considered to be an obligation. However, later, he defined it as forced:



**ADOLESCENT
BOY**

Rural Honduras

“She hadn’t been with a man, she would tell me she was scared that she didn’t know anything, that she felt scared.”

“Did you ever hit a girl because she made you mad or you did not like something she did?”

“I forced her.”

“You forced her to have sex?”

“Well, yeah, since she was scared, she didn’t want to, but one has the obligation to demand it.”



INTERVIEWER

16. According to the 12-country PAHO study (Bott et al., 2012), sexual violence includes the following acts: forced unwanted sexual intercourse, forced performing of unwanted sex acts, or unwanted sexual intercourse for fear of what a partner might do if refused.

Nonconsensual and forced sex within a relationship (cohabitating or not) was commonly reported across both research sites. There were several reports from adolescent girls that they are not interested in having sex but feel pressure to do so because they fear that, if they do not comply, their boyfriend will “find another” or use violence.

In Brazil, a 15-year-old adolescent girl from Salgueiro, in Rio de Janeiro, described how the same boyfriend with whom she painfully lost her virginity forced her to have sex many times:



**ADOLESCENT
GIRL**

Urban Brazil


“I didn’t want to have sex with him anymore because it hurt, because I imagined that every time with him, he was going to hurt me. He believed that I had to, he would grab my arm really hard, and say that I was going to be with him, and have sex with him whenever he wanted to... He would pull my arm really hard, pulled my arm really hard, I would say ‘No,’ then he grabbed my arm, said, ‘You’re not going to do what? Are you sure about that?’ He locked up the entire house, then I stopped to think, it’s better that I do something and leave. Then we hooked up, started going out, hooked up, wherever he saw me he thought I had to have sex with him, whenever he wanted, any hour that he wanted. I said, ‘Man, it’s not like that, no, you need to think about me, too, there needs to be respect.’”

Girls from both Honduras and Brazil were unable to stop their partners from perpetrating these violent sexual acts.

4.3 Risk and protective factors

This section presents the risk and protective factors that emerge from the interviews with adolescent girls and boys. They are presented according to the ecological framework, at the community, relationship, and individual levels (see Introduction). The discussion explores the differences and similarities in such factors between the two countries, across urban and rural sites, and vis-à-vis girls and/or boys.

Table 6.
Summary of Risk and Protective Factors Identified in the Research

 COMMUNITY LEVEL	
Risk Factors	Protective Factors
Inequitable norms that promote risky sexual practices, minimize/normalize IPV, and define rigid roles according to gender (i.e., norms that encourage young men to have multiple sexual partners and young women to be chaste and compliant)	Equitable gender norms, i.e., those that promote communication, consensual roles, pleasurable sex; problematizing control and broader forms of IPV
Proximity to and/or involvement in illegal groups/ community violence	Peer groups that are distant from those that promote urban and other forms of violence
Neighborhood/community norms that discourage interfering with IPV	At least some community-level support for interfering with IPV; youth access to institutions, services, and laws (social workers, places for survivors to report)
No spaces for courtship (due to norms about premarital relationships), which leads to couple isolation	Engagement in meaningful social circles (family, friends), including those which are tolerant of relationships so the couple does not have to isolate themselves
Multiple forms of IPV that are recurring, cumulative, and not recognized as violence	A range of types of IPV and risk factors that are recognized as harmful and solutions that are discussed; community members who identify avenues for recourse rather than “letting it go”



RELATIONSHIP LEVEL

Risk Factors	Protective Factors
Age gap in relationship, typically an older male with a younger female partner	Egalitarian relationship similar in age
Cohabitation in which inequitable gender roles are reinforced, contributing to couple's social isolation	Partners and family, friends, and community members who support each member of the couple in socializing and enjoying mobility both as a couple and independently
High degree of unequal power and control in the relationship, often with jealousy, fear	Trust, couple communication, ability to resolve conflict, and shared decision-making
Fighting as part of everyday communication	Mutual trust, use of conflict-resolution techniques, dialogue
Multiple partners, greater infidelity by one partner	Monogamy, or agreement as to relationship terms
Unwanted sex/inequitable decision-making around sex	Consensual sex/equitable decision-making around sex



INDIVIDUAL LEVEL

Risk Factors	Protective Factors
Use of alcohol/drugs	Engagement in spaces where adolescents are not encouraged to binge drink and/or use drugs
Personality traits and related attitudes and behaviors (underpinned by broader social norms), e.g., passivity, aggressiveness, conflict-seeking, blaming oneself for violence, low self-esteem, submissiveness, and belief that IPV is normal	Personality traits and related attitudes and behaviors (underpinned by broader social norms, also shaped by gender), e.g., approval of nonviolence, assertiveness, desire to cooperate when conflict arises, reflection, desire to learn from problems and avoid them in the future
Sociodemographic factors, e.g., young age, low socioeconomic status	Sociodemographic factors, e.g., older age, moderate to high socioeconomic status and being employed
Low educational attainment	High educational attainment, connection to school
Peers, friends that display aggressiveness and/or use IPV	Peers and friendships and social networks that discourage/protect from IPV
Social isolation (lack of friendships/meaningful connections)	Meaningful connection to peers and caring adults
Witnessed IPV during childhood and/or experienced sexual abuse during childhood	Not having witnessed violence in the home/not having been sexually abused in childhood
Absence of a supportive family member or other caregiver to turn to for help, lack of a positive relationship role model	Can turn to a family member or other caregiver for help, presence of a positive relationship role model
Victim-blaming, minimizing or normalizing violence	Recognition of violence and abuse as unacceptable rather than normalizing violence

Rather than operate in discrete categories, the findings show that risk and protective factors sometimes overlap. For example, family and friends could present both risk and protection to adolescents.

4.3.1 Community level

Adolescents' experiences of relationships and relationship violence are embedded in the wider communities and broader societies in which they live. Community-level risk and protective factors for IPV are organized into several themes. First, social norms¹⁷ can act as both risk and protective factors. These include norms about the ways in which young men and women should behave with regard to relationships and sex; norms about the meaning of violence, i.e., whether violence is accepted and normalized or recognized as a problem and rejected; and norms around whether one should interfere when witnessing IPV. Second, the availability and perceived accessibility of institutions, services, and laws represent protective factors. Additional community-level risk factors include: proximity to and/or involvement in gangs and *barras* in Honduras and drug trafficking in Brazil; and an absence of safe spaces for courtship and socializing with peers. The lack of safe and welcoming spaces for adolescents promotes their social isolation, which is, in turn, conducive to abusive relationships and alcohol and drug abuse.

SOCIAL NORMS

In this study, several social norms, or rules of conduct that dictate what is considered “typical” or “appropriate” – in relationships, in this case – emerge as prominent in the interviews. They offer insights into the ways in which gender inequality and expectations of girls' and boys' sexuality persist in relationships, as well as into the ways in which violent behaviors are justified.

Findings from the study stress the relational character of norms – for instance, if adolescent girls are expected to “behave,” adolescent boys are expected to play a role in “making them behave,” especially to avoid being seen poorly by others (due to, for instance, having a promiscuous girlfriend). Similarly, if men insist on sex, girls are often expected to resist and give in at the “right” time.

Examining norms is particularly important for this study, as adolescence is a phase of development in which norms around what it means to be adult men and women are shaped and internalized. In this regard, the norm that adolescent men “pay the bill” is illustrative of the transition from childhood to adolescence: even before being employed as adult men, adolescent boys are expected to pay any expenses incurred as a couple.

17. As defined by Lori Heise (2013), a social norm is a pattern of behavior motivated by a desire to conform to the shared social expectations of an important reference group, i.e., people within and who influence that group. Also see Bicchieri et al., 2014; Markus & Harper, 2014.

As this study will show, rigid, inequitable gender norms are often accompanied by violence, whereas more equitable norms tend to be protective against violence. It is important to note that, even though the norms identified (which are characteristic of the sites and the specific reference groups investigated) may be generalizable to similar urban and rural sites, they are not necessarily prevalent for all of Brazil or Honduras.

NORMS RELATED TO MASCULINITY

Norms supporting *machismo* and discriminatory gender relations are evident throughout the interviews. Such norms operate on such a widespread level that they can be considered community-level risk factors.

“Men pay the bill”

In both countries, situations related to money and expenses are among those where clear gender norms are consistently identified. In particular, the idea of men “paying the bill” is strongly linked to ideas of masculinity and power. In such a context, behaviors against the norm – such as a woman paying for a man – are interpreted as a threat to manhood, as expressed by a 17-year-old girl from Tegucigalpa. She went to buy shoes for herself, and her boyfriend insisted on paying at the store, “as if it makes them feel more manly if they pay,” she described.

Throughout the interviews in Brazil, as well, it was evident that adolescent men are considered responsible for expenses; couples rarely split their expenses. This uneven distribution of financial responsibility was sometimes used, in Brazil, to justify men’s use of violence. In Honduras, adolescents did not commonly describe money as a justification for violence, though it is possible that in Honduras women also endured violence because of their economic disadvantage and more scarce employment opportunities, particularly in the rural site.

It should be noted that the expectation that men pay may stem, in part, from the fact that adolescent boys are remunerated for their work more often than girls are; girls are more likely to be engaged in unpaid care work at home and less likely to be employed outside of the home. However, it is important to stress that boys are expected to pay even when they are unemployed or still studying, which suggests an underlying normative expectation.

Apart from norms regarding men’s role as provider, the most recurring norms around men emerged in terms of sexuality and are discussed in the section on “Norms and Expectations around Sex and Sexuality.”

NORMS RELATED TO FEMININITY

“Show respect, be a good girl”

To be considered a “good girl” (a term not mentioned in the interviews and used here merely to illustrate) was deemed socially desirable across all research sites. When young women met community expectations regarding behavior – such as wearing clothes not considered vulgar, staying home, taking care of the partner, obeying orders/adhering to his preferences, restricting sexual relations, etc. – they experienced notably fewer conflicts. Adolescent male respondents in both countries often discussed expectations that girls behave and show respect by avoiding what they considered to be promiscuous clothing, and, in some cases, by performing traditional gender roles such as caring for the house.

This quote from a 14-year-old adolescent boy from Rio de Janeiro underscores that the shaping of these gendered norms and expectations begins at a young age:



**ADOLESCENT
BOY**

Urban Brazil

“Nowadays... it’s hard to find an ideal girlfriend. Girlfriends today wear revealing clothing – nothing against that – but when you wear short clothes you have to get respect too... People do not respect your girlfriend. You go out and she is in micro shorts, everyone is looking... A girlfriend has to act respectfully.”

Several young men described their ideal girlfriend as one who did not go out, associating staying in with being a “good girl,” as this young man from Honduras described:



YOUNG MAN

Rural Honduras

“My previous girlfriend liked to go out to parties, but my current girlfriend doesn’t. My current girlfriend does not leave the house, she’s almost always confined, and her parents don’t let her go out. If they let her go out, it’s with me or to go for a walk, but we have to come back quickly to her home. With my ex-girlfriend, it was different because I would go to her house and I wouldn’t find her, she’d come back late and sometimes drunk.”

Overall, in both countries, male partners regulate girls’ behavior, mobility, friends, and dress. Partners and family members alike limit girls’ mobility in order to avoid associations with “bad girls,” who are described as those who leave the house – spending “too much time out” – and those who are viewed as promiscuous.

“Don’t cause trouble”

As these quotes show, being a “good girl” encompasses many qualities – and underpinning norms – associated with what men and boys across the research sites considered to be the ideal girlfriend. One of these underpinning norms is that “good girls” do not cause trouble. This norm denotes an expectation that girls be passive, in general, and – when looking at intimate partner relationships – that they avoid conflict, thus placing the onus of maintaining harmony in a relationship on young women and increasing their risk for IPV.

Indeed, while girls’ efforts to avoid conflict may prevent instances of IPV in the short term, they also set the stage for girls to engage in unwanted behaviors – such as sex – to appease the partner. Furthermore, the norm that “good girls” do not cause trouble encourages girls to stay quiet when threatened or at risk of experiencing IPV, rather than seeking help or ending the relationship, as demonstrated in an interview with a 16-year-old adolescent girl from Rio de Janeiro:



**ADOLESCENT
GIRL**

Urban Brazil

“What did you do to avoid a fight?”

“I let him talk and kept quiet, I’d just look at him and keep listening. He’d tell me to say something and I’d say, ‘I don’t want to say anything’ because we’d fight, and then I’d keep quiet, very often I just kept quiet.”

“How did you feel when you kept quiet?”

“It made me angry because I wanted to talk but I saw that if I did, it would cause an argument and it could become something more serious and so I preferred to keep quiet because I thought it was better.”



INTERVIEWER

Going against the norm

While respondents seldom referred to gender norms directly in their accounts, girls, especially, question the expectations associated with norms, particularly that young men can go out and interact with friends but young women ought to stay at home and not interact with friends. Some young women – expressing jealousy and discontent about boyfriends going out – resisted the norms and went out themselves. However, these are isolated examples; the majority of young women take a more reserved approach and avoid conflict.

For girls, not having or spending less time with friends, especially male friends, while in a relationship is considered a norm. Friendships and even interactions with peers, particularly of the opposite sex, are seen as a threat to the relationship. Young women with economic independence, higher educational attainment, and strong assertiveness skills seem more likely to experience equitable relationships (i.e., sharing in decision making, being free to act and have friends without restrictions) – even when their actions counter social expectations. Reversing this norm, meaning boys and girls alike are allowed to have friends of both sexes, would shift friends from potential risk to protective factors.

When discussing deviance from community norms, the risk girls and young women face by questioning norms should be considered carefully. Often, it is not only the existence of rigid gender norms, but adolescent girls' and young women's questioning of gender norms, that exacerbates the risk of IPV by disrupting the expected gender order in the adolescent relationship. Young men and even young women sometimes justify the use of violence when they perceive women to be "provoking men" (i.e., acting out of line, going against the norm) and therefore "asking for it." However, in relationships that are at least somewhat egalitarian, women's assertiveness can act as a protective factor, rather than as a provocation. The interviews show that girls, especially, face challenges navigating assertiveness, considering what they and others perceive as causing fights.

“Maintain your appearance, keep your man happy”

Norms in which girls' and young women's worth is tied to their appearance – compelling them to invest time and money in hair, nails, weight, etc. – were also found to be a risk factor. If a young woman does not uphold her appearance, it could be perceived by a man as disrespectful, making him look bad in front of others.

NORMS AND EXPECTATIONS AROUND SEX AND SEXUALITY

The findings underscore that nearly all adolescent boys and girls expect the male to initiate sex. The young woman's role is to decide whether to continue or not. It thus becomes normalized for adolescent boys to insist on, try, or demand sex while girls are expected to stop or resist it. The most common expectation around girls' roles in sex is that they should resist when boys first ask for it, and that they should accept boys' insistence as normal. Even though adolescent girls can be judged as too willing (“slutty” or “naughty”) if they express desire for sex or initiate it, they are expected to have sex “when it is time,” to show their love for their boyfriend. As several respondents in Honduras described, girls have sex

in order to not “keep him waiting” – their partner would be expecting sex and could “give up” if they did not have sex. In relationships with IPV, adolescent girls’ wishes are, for the most part, disregarded and the girl has difficulty asserting her preferences. These dynamics put a dangerous onus on girls, who are expected to resist sex at the same time as they are subject to judgment about their reputation and their commitment, often exposing them to violent repercussions regardless of their actions.

Harmful norms around sex do not only pressure girls, but also place pressure on men and adolescent boys, who perceive themselves and feel perceived by others as naturally needing or always wanting sex, as previous Promundo research in Brazil has shown. The findings also highlight a norm in which it is assumed that boys just naturally “know what to do when it comes to sex.” When they are put to a test or questioned in this regard, they sometimes feel humiliated for not measuring up to expectations. In turn, these norms can lead to justification of the use of sexual violence to obtain the sex boys are expected to want and have, regardless of how they get it.

In Brazil, young men described “convincing” women to agree to sex as a virtue of men who are able to “conquer” or seduce girls. They also described feeling annoyance, shame, and inadequacy (*chateação, falta de aprovação*) when they try to initiate sex with a girl and are turned down.

Importantly, young men’s disproportionate power in relationships was evident in negotiations around sex. For example, in their efforts to “convince” young women to have sex, they assumed positions of “knowing more” and, in a form of *machismo*, presented girls with myths (which the men may themselves believe), unfounded claims, and accusations of infidelity:

- “Girls cannot get pregnant when they’re menstruating”
- “We don’t need a condom” (because “I don’t feel pleasure” with one)
- “I don’t have an STD”
- “You never ask for a condom, so if you do, it must be because you’ve cheated”
- “If you don’t want sex, it must be because you are satisfied from having sex with another”

Such falsehoods and manipulations can have serious consequences for young women’s sexual and reproductive health, and contribute to the risk of sexual violence.

Furthermore, the findings show dominant masculine norms for adolescent boys when it comes to expectations of their virility. These include: “Men are always ready to have/initiate sex” and “he’s gay if he doesn’t want to have sex,” pressuring boys into

unwanted sex in order to demonstrate their heterosexual manhood. Boys described feelings of humiliation when pressured to have sex and “know what to do” sexually, no matter the age and context. For example, a boy in Honduras reported being pressured to perform sexual acts in front of a gang associated with a football team.

A 19-year-old young man from a high school in Rio de Janeiro described being pressured to accept unwanted touching. Reflecting strong norms that men should be heterosexual and always ready for sex, he also described a female schoolmate’s challenge to him, when he was 16, and his fear of social sanctions should he turn her down:



YOUNG MAN

Urban Brazil

“I had sex with a girl because she said I was gay, so I did it... [When I did it], I felt like a king – it was as if I had done a good deed.”

“What happened next?”

“She had a problem, she got an infection – she had never had intercourse. She went to the hospital. Her mother was pissed off, she made me pay for the medication.”

“And why do you think you did it?”

“Fear, fear of what others would think.”



INTERVIEWER

NORMS AROUND INTERFERING IN IPV AND COUPLES' PERSONAL MATTERS

“In matters of a couple, don’t get involved”

In addition to gender norms, several other community-level norms serve as risk factors for adolescent IPV:

1. Bystanders, peers, and community members are expected to stay out of others’ affairs, in general, and especially in matters pertaining to couples. As such, the norm neutralizes existing protective factors – such as the presence of family, neighbors, and friends – who are reluctant to get involved even when they are aware that something is wrong.

2. At the same time, young men and women keep things to themselves, responding to widespread norms that encourage them to keep relationship matters private. Young people avoid discussing relationships – especially when it comes to problems and violence. Instead of seeking help, when conflict arises, adolescents may feel they have no other option than to “figure things out” or “battle it out” on their own, i.e., engage in physical or psychological violence.
3. The interviews suggested several reasons adolescent girls and boys prefer to avoid interfering in violence. First, adolescents conveyed a belief that one should not interfere in others’ relationships, in general. Furthermore, getting involved in other couples’ matters and/or seeking help were not seen as options when adolescents did not perceive conflict between members of a couple to be violence. Second, even if they perceived violence as such, they may not consider it problematic or believe that it justifies reporting.

In addition, the findings suggest that, in both countries, there are two key barriers preventing third persons from intervening in IPV: the first is that, almost universally, seeking help or intervening is considered appropriate only in serious, emergency situations (i.e., extreme physical violence); the second barrier is fear of retaliation. Respondents in Brazilian favelas and urban neighborhoods of Honduras shared a well-founded fear of retaliation against those who intervene. Indeed, there was a general belief that one should not get involved in *any* type of situation with others because “you never know who you may be dealing with,” and you may upset a gang member, or *narco*, or somebody closely associated (e.g., family members or friends).

Given the frequency with which fear of retaliation was cited as a reason for non-intervention, it is clear that fear is a key factor necessary to take into account in future interventions. Bystander approaches – favored in much of North America – seem to be inappropriate in the contexts of urban violence in Brazil and Honduras, especially in the broader communities, although they may be feasible in some school settings.

Many couples believe they should “keep matters to themselves” (*fica na sua*) “There are just some things you shouldn’t share,” “I keep it to myself” (*guardo para mim*), and “let it go” (*deixa pra la*) were expressions that several young men and women shared, in Brazil especially. A 24-year-old young woman from a community near Codó said she was only 14 when she was raped. Now, she said, she is aware of her rights and would seek help, but at the time she acted out of fear.



**YOUNG
WOMAN**

Rural Brazil

“Did you feel forced? Do you consider that an abuse?”

“Yes, I do consider it an abuse. I was even going to report him, but then I said ‘forget it’... I accepted [the forced sex] because I was scared. During times like that we act more out of fear.”



INTERVIEWER

In both countries, reluctance to seek help was usually associated with concern about what others would think or say (e.g., family, friends, the community, at school). Adolescents’ lack of trust in their social network, absence of close friendships, and social isolation were recurring themes. In addition, for some men, resisting external help may be an assertion of independence. A 24-year-old young man from Urubu in Rio de Janeiro, who had used IPV several times in his relationships, described hating others’ involvement in his life unless he asked for their opinion.

VIGNETTE 1:

CUMULATIVE EXPOSURE TO AND VICTIMIZATION FROM IPV SEEM TO BE STRONG PREDICTORS OF FURTHER IPV VICTIMIZATION

This vignette describes the experience of Mônica, a 15-year-old adolescent girl from Salgueiro (Rio de Janeiro) whose experience reflects a major finding of this research: that is, having witnessed and experienced cumulative IPV normalizes it and heightens risk for further IPV victimization. The vignette also shows the power of community norms around non-interference in cases of IPV.

By the age of 15, Mônica had experienced nearly every type of violence covered in this study. When her boyfriend beat her in a forest near their favela community, she lost consciousness and was taken to the hospital. At first, she did not want to tell her mother out of fear of what the mother might do, but she eventually did and her mother reported her boyfriend.

Prior to experiencing violence in her own relationship, Mônica had received several warnings about her boyfriend. In a clear exception to the “don’t get involved in couples’ matters” norm discussed previously, several of his former girlfriends had contacted her to say that she was better off not getting involved with him because of the violence he had used against them.

Additionally, before becoming involved with her boyfriend, she had witnessed several episodes of violent behaviors between intimate partners in her community. In one especially tragic episode, she witnessed her 13-year-old neighbor and friend being beaten by her then-boyfriend so severely with a pressure cooker that her head split open. The adolescent girl suffered permanent brain damage.

She had also seen another female neighbor, whose husband – often violent whenever the wife was with another man – broke the TV in their home. After witnessing all these incidents and experiencing IPV, Mônica reflected upon her own relationship: “What if this happened to me?”

The case with her friend was difficult for her: she helped the girl take a bath and accompanied her to the hospital. Mônica’s boyfriend at the time, though, said that her friend’s victimization was justified because the girl had “acted out of line.” Later, Mônica said she would not interfere if a similar situation happened again, out of fear:

“If I saw a friend being beaten? I don’t know, I think I would stay put because I wouldn’t be able to do anything. The guy was ready to hit and so if I got involved myself I’d also get beaten.”

Her story prompts the question: Why doesn’t Mônica act upon these warnings and why isn’t she “protected” from IPV, not only by warnings, but by the fact that she considers her family to be “the best in the world,” including a supportive mother?

Mônica then explained that if she dated a “nice guy” who did not use violence, she might want to use it. She was also afraid that men would think she is violent because she has been with violent men previously:

“I don’t know, sometimes it’s fear itself, fear of myself, of becoming involved with a guy, the guy was something else, and it was like, I learned a lot from him, a lot, and if I get with a guy who treats me well, certainly the guy is going to be good and I’m going to be bad, because I’m going to want to hit the guy. Similarly, my mother says to me, when the person is very good, bad people sit on them, so if the guy is really good to me, I will already be in that – a bad rhythm – [I’ll] live getting beaten.”

INTERVIEWER: “But why? Why would you beat on someone you thought was cool?”

MONICA: “I don’t know – for having lived in the world this way, just being beaten so much. I think I was raised that way. There’ll come a time when I’m going to want to beat someone, too.”

INTERVIEWER: “Did you get beaten a lot when you were a child?”

MONICA: “No, not from my mother nor from my family. Damn, I believe I have the best family in the world, I can go there and say ‘Hey, grandma, hi, aunt – my boyfriend did this and that with me.’ They say, ‘Sit down,’ and say ‘You can cry, my niece, cry, cry.’ My grandmother also gives me advice: ‘Dump him, don’t stay with him, you are young’... My uncle, man, my uncle Jonatan, he even looks like he’s my brother, man, I tell him everything and he tells me, ‘Screw him, you think people don’t talk, dump that guy...’”

Even though Mônica considered her family to be very supportive, the greatest risk factor she faced was having experienced cumulative IPV to the point where it seemed normal.

AVAILABILITY AND PERCEIVED ACCESSIBILITY OF INSTITUTIONS, SERVICES, AND LAWS

Overall, when examining the availability of adequate services and providers at the community level – such as places for victims to report and social workers to offer support – it is important to consider the *awareness* of and *perceived ability* to access such services. Similarly, adolescents’ perception of whether services are available to *them* depends on individual- and relationship- level factors (e.g., the couples’ level of social isolation, which could be the difference between having a friend or family member who informs them of or takes them to a service, and having no such friend or family member; and proactive personality traits. At the community level, security factors (or high urban violence) and distance also influence ability to access services.

The capacity of services and institutions to prevent or respond to IPV in the research sites is thwarted by the widespread norms against getting involved in couples’ matters or seeking help for abuse. It should be noted, however, that IPV victims’ tendency to not seek help may also be due to the perceived futility of doing so given the scarcity or inadequacy of services; in a context with so few services that *actually could help*, those in need may not believe help to be available. However, a fundamental recurring finding is that adolescents often do not consider the violence they experience to be a problem to begin with. Seeking help from a service is often not a consideration.

Brazil: Provision of services and laws

Across all the interviews conducted in Brazil, services and institutions – broadly defined as places where IPV victims can report violence and get help – were rarely mentioned spontaneously, except when respondents mentioned a serious case of extreme, explicit violence.

The most severe case was that of a 24-year-old young woman in Codó who had suffered multiple forms of IPV from a partner, and sought help only when he threatened to kill her and her daughter with a fish knife. The police treatment of the case was potentially re-traumatizing: their first reaction was to tell her that they might let her partner go.

Several other young men and women stated that it is not worth going to the police at all, reflecting high levels of police mistrust. This is particularly evident in Rio de Janeiro, where a young man reported that one could even become a joke for seeking help.

It is worth noting that the interviewers sensed that the word “institution” was not always understood in the interviews, meaning that places respondents regard as supportive may not have always been mentioned. Once the term was clarified to the respondents, *women’s police stations* became the most commonly cited institution – if not the only one, except for a few mentions of schools and teachers – in terms of support services. As for legislation, most respondents mentioned the Maria da Penha Law (Brazil’s domestic violence law), though it should be noted that, while adolescents recognized it, they did not necessarily consider it relevant to their lives or experiences.

Honduras: Provision of services and laws

Most respondents in Honduras were aware of their rights and of the institutions that could help them, but few were specific about such institutions. In particular, men could identify institutions that could help women but had trouble thinking of institutions that could help them. A 24-year-old male from Tegucigalpa expressed his concern about the lack of protection and attention for men who suffer violence:



YOUNG MAN

Urban Honduras

“There are more laws for women than for men...There is the law against domestic violence, against psychological and verbal violence, that is the same one... but if we switch it around vice versa there aren’t any for men. I think it’s a sad reality that exists in the country.”

The most frequently mentioned institutions were the police, the prosecutor’s office (*Fiscalía de la Mujer*), and certain NGOs related to women’s rights.

ADOLESCENT IPV AMIDST URBAN VIOLENCE

The findings suggest that in the urban sites, it is common for girls to become involved in relationships with young men in gangs and *barras* in Honduras, and drug trafficking in Brazil. Both cities, like others in the region, face public security challenges related to drug trafficking groups. A set of risks emerged from the interviews concerning the harmful norms often underpinning such relationships, which not only justify the use of IPV but promote it. In many teen relationships in Brazil, young couples adhered to certain rules of possession in which men can have many women but their “main” woman has to remain faithful; men punish their female partners for “acting out” (*vacilar*); and adolescent girls from favelas in Rio de Janeiro are often beaten for going out, talking to other men, wearing clothing that is considered to be too promiscuous, or spending “too much” of the money given to them. However, these kinds of regulations seemed to be applied more severely in relationships involving gang members and drug traffickers. Indeed, other studies show IPV as a norm within such relationships as well (Taylor et al., 2016).

Adolescent girls face specific consequences related to dating a partner involved in illegal activities. Overall, they face heightened risk of violent episodes involving drug use, as well as greater risk that fights will escalate to gun violence. In cases in which their partner is arrested or imprisoned, as several reported, girls may be frisked, caught with drugs or arms, or implicated in their partner’s crimes. While some girls described men’s imprisonment as a protective factor, as they are no longer physically exposed to their perpetrator, others reported continuing to be controlled from prison.

VIGNETTE 2: **CUMULATIVE EXPOSURE TO VIOLENCE, AND INVOLVEMENT IN ILLEGAL GROUPS**

An interview with Suyapa from Tegucigalpa shows the influence of cumulative exposure to violence as well as involvement in illegal groups on her own experiences of adolescent IPV. The teenage mother of a little girl, Suyapa started working for gang members, selling drugs in order to make money. There, she met her current partner, who is one of the leaders of the gang and now in jail. As the official girlfriend of one of the gang leaders, she could not socialize with other men in person, through social media, or on phone calls – even though her partner has other “unofficial” girlfriends. She could not leave her house and she was constantly observed by her boyfriend’s male friends to make sure she did not step out of line.

SUYAPA: “He says I’m really pretty and that in the street they can fall in love with me or that another person can say things to me. So he becomes obsessed with that, he says he is locked up. In other words, he can’t be outside to see what I do. But if I go out people will tell him because a lot of people know him.”

INTERVIEWER: “Has he ever done something to scare or intimidate you intentionally or has he had someone follow you without you knowing?”

SUYAPA: “He does it all the time now. At the beginning, as I said to you, it started as something casual, and that’s what we are talking about, at the beginning he wasn’t like that. Now, yes – I am watched day and night.”

In her relationship with the gang leader, Suyapa endured both psychological and physical IPV:

“No, when he gets really angry – in other words, when he is very furious and very jealous – he thinks that things are the way he says they are. He insults me, and in the end if I answer back at him, he ends up hitting me.”

She did not participate in decision-making processes – a trend seen across the interviews – and faced difficulties contradicting her partner. In order to avert the escalation of violence, she always avoided voicing her concerns or opinions:

INTERVIEWER: “When a problem exists between you and your partner, how do you resolve the issue?”

SUYAPA: “First, we argue, fight, insult, he cusses at me, he tries to make me feel the worst.”

INTERVIEWER: “You’re telling me that he begins telling you all those sorts of things, but afterwards what does he do, or how do you settle things?”

SUYAPA: “The truth is, I only know to respond ‘yes’ to everything, I do not respond back. I don’t like to argue, so I cry. The words hurt me – I try to ignore him every now and then but now it’s become a habit for him, so I just tell him that everything is okay and he then hangs up. Afterwards, he calls the next day as if nothing has happened.”

In Suyapa’s previous relationships, she had experienced controlling behaviors and sexual violence. She was also raped by a stranger when she was 14 years old. Suyapa’s life and the lives of those close to her are surrounded by violence; she said she does not know anyone in her life who can serve as an example of how to have a healthy relationship. She reported having one friend who told her to leave her relationship, but the friend was in an even more violent relationship, so Suyapa did not take her advice. Suyapa said she resents her mother for the violent childhood she experienced, largely because of her mother’s violent partners:

SUYAPA: “[My mother] had two relationships, both relationships were bad for her because [the men] both hit her.”

INTERVIEWER: “And when you witnessed that type of thing, did you ever ask anyone for help or tell anyone about what you had seen?”

SUYAPA: “Well, truth is, my life has been very complicated – that’s why I do not get along with my mom, because with my mom I saw many things that I believe at my age weren’t appropriate for me to see...I was traumatized for some time. I was in treatment with several psychologists because I was resentful towards my mother, towards her partner. She told me not to do this [date my current partner], but I kept doing it to bother her, to infuriate her, to make her feel that she had damaged me. So I wanted to damage her.”

Along with witnessing violence in her own household, Suyapa grew up witnessing domestic violence in her neighborhood, including her neighbor hitting his wife. The exposure that Suyapa had to violence at home, in her neighborhood, and in her relationships shows how cumulative exposure to violence can normalize IPV and increase the risk of IPV victimization. Her experience also sheds light on stalking and other forms of control within IPV that take place and interact with urban violence.

ABSENCE OF SPACES FOR SOCIALIZING WITH PEERS AND ENGAGING IN COURTSHIP

Across all research sites, adolescents had very limited access to safe and appealing places in which to interact with peers, or where they could engage in courtship or spend time with partners.

Social isolation during the initial courtship, as well as further into the relationship, has critical implications for IPV. When couples are socially isolated from the start of their relationship, it can set a precedent for isolation later. If and when IPV occurs, the isolated couple has no network of friends or family on whom they can count for help.

Unsurprisingly, youth are more isolated in the rural areas of both countries, and, as a result, courtship can become more clandestine and socially secluded. Overall, they have fewer opportunities to see their partners, as in rural areas families tend to restrain youth from going out more than in urban areas. Family control of adolescent mobility is also reported in urban areas, but often because family members wish to protect them from threats related to urban violence.

A 20-year-old young woman from Intibucá was not allowed see her boyfriend at her house, so she met with him at her friend's house, or "escaped" from her house, deceiving her parents to see him. Her experience reflects the extent of family control over young people's relationship choices.



**YOUNG
WOMAN**

Rural Honduras

"Well, sometimes my friend would cover for me, she would help me 'escape' so I could see him."

"What do you mean, 'escape'?"

"For example, one time we went to swim, and like I told you, my friend invented [the story] that we were going to go to a friend's house."



INTERVIEWER

Similarly, a 20-year-old adolescent male from the rural site in Honduras, who had permission from his girlfriends' parents to see her at their home, said they could not leave her house; their interactions were limited to conversations there.

In urban areas of Honduras and Brazil, adolescents have more options for entertainment – such as dancing, parties, movie theaters, and malls. In Rio de Janeiro, the adolescents who live in favelas often described recreation as going to bars and *baile funk* (dance parties with DJs, often organized by the drug lords). In the *bailes*, adolescents described exposure to frequent IPV and binge drinking, a risk factor. Thus, while in cities there may be more options for socializing outside the home, spaces that are both attractive to youth and promote equitable, nonviolent relationships are few.

LACK OF COMPREHENSIVE SEXUALITY EDUCATION

Like the lack of safe spaces for adolescents, the absence of education about healthy relationships, sexuality, and gender, whether in school or out of school, is apparent. In Honduras, youth expressed regret for its absence, saying “no one told me about sex.”

The absence of comprehensive sexuality education (CSE) in schools was especially evident in respondents' lack of knowledge about contraception. While a few respondents reported that they would go to their parents if they needed birth control, there were far more examples of young people – especially girls – not speaking with their parents about their sexual lives.

Couples were often misinformed about contraception, and girls commonly had lesser bargaining power around sex. The findings show that this combination of misinformation and relative powerlessness can heighten the risk of IPV.

4.3.2 Relationship level

The research sheds light on a number of risk and protective factors at the level of adolescents' relationships. Risk factors include an age gap in the relationship – typically a young girl faces greater risk when with an older man; cohabitation; and control in the relationship related to jealousy, infidelity or the threat of infidelity, and fear imposed by threats. Key protective factors identified at the relationship level include trust, healthy couple communication, and the ability to resolve conflicts together. Factors that influence couples' norms and decision-making around sex and birth control can also represent either risk or protective factors.

AGE GAP IN THE RELATIONSHIP

Across the sample, young women and girls – and often their family members – preferred for girls to be with older men. They perceived young men to be vagabonds who want nothing serious, while older men are perceived to have more to offer, especially in terms of financial stability, responsibility, and faithfulness. In Honduras, a substantial age difference between couples was fairly common. There was a similar but less prevalent preference for older men in Brazil.

In Brazil, adolescent respondents were generally in relationships with partners of similar age to their own, though there was a small proportion of adolescents dating much older men in this sample. In such cases, in both countries, the findings affirm that a wider age gap can exacerbate a power imbalance, with men having disproportionate power in a relationship with a younger partner. (It should be noted that, in Rio de Janeiro, there were a few cases in which the female partner was older and exercised greater power over the younger male partner.)

The findings reinforce those of previous research that adolescent girls dating older men constitutes a risk factor for IPV. In one example, an adolescent girl from Intibucá started dating her boyfriend when she was 13 and her boyfriend was 21. She had a baby when she was fifteen and was abused by her partner before, during, and after pregnancy.

COHABITATION

In both countries, once a couple began to cohabit, they and the broader community often began to use the terms “spouse” (*esposos*) and “married” (*casados*), even though the marriage was not legal. In rural sites of both countries and in urban

Honduras, relationship dynamics changed when couples transitioned from dating to cohabitating.

Once cohabitation began, there was generally less negotiation between the partners and a more marked power imbalance; cohabitation gave men a greater sense of entitlement to control and use IPV against their female partners. This change was reflected when Claudia from Tegucigalpa explained how dynamics quickly changed when she began living with her boyfriend:



**YOUNG
WOMAN**

Urban Honduras

“At first, he was loving, calm, and all that, but then when we started a life as partners it was all quite different. That’s when I started to notice his change of behavior, because when we were dating, he used to let me wear shorts and all that, but then when we started living together, he didn’t let me dress the same way anymore. He didn’t let me use my phone, anything of the kind.”

Similarly, in Rio de Janeiro, a young man who began to cohabit with his girlfriend, despite his girlfriend’s mother’s disapproval, described having “her in his hands” and using IPV against her. Relationships of *namoro* can also transition to ones of cohabitation and increased risk.

It is noteworthy that couples who cohabit are not only at higher risk of IPV, but are also more socially isolated. The community’s adherence to the norm that others should not get involved in couples’ matters seems to apply to an even greater extent when couples are cohabitating or married. A young woman near Codó described wanting to leave the cohabitation but feeling obligated to stay because of her children.

VIGNETTE 3:

VIOLENCE AND CONTROL DURING COHABITATION

Marcela, a 24-year-old girl from Intibucá, narrated how, after six years of marriage, her husband became possessive and controlling to the point that she considered committing suicide.

Marcela became pregnant at the age of 17 and decided to go live with her then boyfriend because she feared her mother's reaction to her pregnancy. Her partner was 26 years old and her mother threatened to put him in jail for impregnating her underage child. The couple subsequently ran away together, to his house, making them esposos (spouses).

Marcela had a very different conception of relationships than her family, community, and partner did. She believed that girls should not be submissive or be limited by a relationship:

INTERVIEWER: “How do you think a girl should behave in a relationship? For example, when she's out with friends, how should a girl behave?”

MARCELA: “I think that she shouldn't follow what people tell her to do, or what her boyfriend tells her to do. She has to be free to behave, to be who she wants to be, not pretend to be something else.”

INTERVIEWER: “When you mention she has to be free, what do you mean?”

MARCELA: “What I said about not being submissive to anyone [...] to have the freedom to do what she feels like, not what others impose on her [...] when a boyfriend forbids a girl to laugh with others, to be friends with someone [...] to speak to her friend – I think this is a type of psychological violence.”

Marcela wanted to continue with her education and play soccer, but her partner cut these two aspirations short. Her insistence on going to school created tension in the relationship. Marcela also had male friends, but some community members interpreted her friendships with men as inappropriate. Rumors even spread throughout her village that she was being unfaithful. On one occasion, her partner took away her cell phone after he found messages from her soccer coach. She was so upset that she left her home with her daughter; when she returned, she continued to be controlled and insulted. Marcela said that during their six years living together, the situation was unbearable to the point that she had suicidal thoughts:

“The only thing I could think of was to leave. There was a point that our problems were so big that I thought about committing suicide, of taking my life.”

Marcela contacted a friend from her soccer team who was working in San Pedro Sula, a city in northern Honduras. Her friend helped her get a job in San Pedro Sula and she left her controlling partner. She felt her new job saved her:

“Before, when I thought about killing myself, I couldn’t find any way out. But then my friend calls me and tells me there is a job. I don’t know, I think that saved me a little.”

With her salary, Marcela paid her mother-in-law to watch her daughter and was able to regain her independence and freedom. Her independence, however, came at a social cost: while in the relationship, she felt alone, as her friends and family justified her partner’s behavior. After she left him, her family blamed her for her broken home. Marcela’s determination to live according to her own terms exacerbated the psychological violence she suffered and isolated her from her family, who did not support Marcela’s desire for independence. Marcela’s experience shows that when a couple cohabitates, not only does the man often believe he has a right to greater control over his female partner, but society frequently reinforces that belief and encourages the woman to submit to her partner’s dominance. As Marcela’s story exemplifies, economic opportunity plays a vital role in women’s ability to challenge and escape from harmful relationship norms; accessibility of economic opportunity is a key protective factor.

The transition from informal dating relationships to cohabitation is not uncommon during adolescence in both countries; norms around girls’ sexuality reinforce living together as necessary. In both countries, findings show that patterns of control and IPV begin to form early in the relationship, but cohabitation appears to trigger more severe violence. Beginning to cohabit should thus be considered a risk factor, and interventions, ideally, should occur prior to cohabitation.

JEALOUSY, INFIDELITY, AND THE FEAR OF INFIDELITY DRIVE IPV

Jealousy, infidelity, and the fear of infidelity were constant in adolescent relationships in this research: these themes appeared in nearly every interview and more than any other theme used in the analysis of adolescent relationships.

They can be considered forms of controlling behaviors; specifically, adolescents described situations of control in relation to two sets of factors that enhance risk:

- Jealousy, infidelity, and the fear of infidelity as *reasons to control*, and
- Technology and the Internet as key mechanisms with which to exercise control.

Controlling appearance

The most common form of control identified in this study was adolescent boys' commenting on girls' clothing because they think it is too provocative. In Honduras, for example, girls are expected not to wear shorts or short skirts once they have a boyfriend. The reasons may vary slightly but are related to appearance, with both adolescent girls and boys wanting their partner to be "more dressed up" because of concern about what others will think. In one case, in Urubu in Rio de Janeiro, a young man told his then girlfriend she had to change her style not because it was provocative, but because he thought she looked like a boy.

Restricting mobility

Another form of control that men exert over their girlfriends – and one that was highly prevalent across all sites – was preventing their partners from leaving their homes and from socializing with friends. Women who were cohabitating and have children described greater difficulty in stopping such controlling behaviors.

The role of fear

Girls' fear of someone "stealing their man" is one of the most prominent themes that emerged from the interviews. Tension between the couple, motivated by jealousy – often on both sides – is linked to controlling behaviors.

Controlling behaviors, coupled with violent acts, led young women to fear their partners. Fear is highly gendered and it was largely a result of threats from young men against young women, including threats to end the relationship, or death threats. In both countries, fear led girls to suffer IPV on multiple occasions: they engaged in unwanted behaviors, including sexual acts, and stayed in relationships they disliked out of fear. For example, a 22-year-old young woman from Tegucigalpa explained how she had sex to please her partner because she feared he would leave her:



**YOUNG
WOMAN**

Urban Honduras

**"Have you ever done something for fear of your partner's reaction?
You told me that sometimes you had sex to please him?"**

**"Ah hm...I was afraid that he'd leave me so sometimes I
did it for that reason...Because he said he was going to
seek another girl if I did not [have sex]."**



INTERVIEWER

“CONSENSUAL CONTROL?” NON-RESISTANCE TO CONTROLLING BEHAVIORS TO KEEP THE PEACE

This study found that control is so commonplace that couples developed arrangements in which they mutually “collaborate” in controlling behaviors.

First, in some cases, controlling exchanges were a routine and normal part of the relationship. It seems that some young women and men felt pressure to engage in these controlling exchanges out of fear of a fight, violence, or because they believe that such exchanges are normal. For example, couples commonly reported checking each other’s phones and Facebook accounts in front of each other. As a 20-year-old young man from Salgueiro (Rio de Janeiro) reported, while many couples do so behind the other’s back, his girlfriend checks his Facebook while she is right next to him. This open and mutual monitoring was also common in a few relationships in Honduras.

Second, some young men and women described ways in which they collaborate in controlling behaviors, specifically to anticipate potential jealousy triggers. These behaviors can be understood as momentary protective factors to avoid a fight. However, they take place in the context of an already inequitable relationship, represent an inequitable dynamic, and justify unwanted behaviors. For example, girls showed clothes to their boyfriends before wearing them in order to avoid going out in something the boyfriend disliked and provoking a fight. According to an adolescent girl in Rio de Janeiro, while in her last relationship her boyfriend complained about her clothes, in her current relationship the two have an agreement in which she shows him her clothes for his approval before putting them on:



**ADOLESCENT
GIRL**

Urban Brazil

“We entered into an agreement: if he said, ‘No, no, I do not want you to go out in that outfit,’ then I had to accept what he said. Or, as I dressed, he would take the clothes I had laid out for myself, and I would wear what he liked me to wear.”

Some adolescents either avoided going out with friends, or told their partner where they were going beforehand, in order to avoid a potential conflict later, as one 19-year-old young man from Salgueiro reported:



YOUNG MAN

Urban Brazil

“And when you are with someone, or with your current [partner], do you want to know where she is?”

“No, I don’t try and find out. She already tells me when she goes somewhere.”

“When she goes out, she tells you?”

“Yeah, she does.”



INTERVIEWER

In the case of Suyapa from Tegucigalpa, she did everything to avoid upsetting her boyfriend by acquiescing to his demands, but she still ended up “arguing” with him:



YOUNG WOMAN

Urban Honduras

“I do not leave my house; I spend my time closed up. I have no communication with other people other than my partner. Before starting a relationship with my current partner, I used to use social media like WhatsApp, Facebook, Messenger, Tango. So I tried to delete all that – my friends ... I try to only stay at home locked up and not leave. But we still end up arguing.”

In Brazil, when adolescent girls engaged in reciprocal violence, they most commonly first exercised control. In such cases, both parties in the couple take part in controlling, and then later, one or both use physical violence.

Importantly, even though they did not always recognize IPV, adolescents often recognized abusive patterns were not “right.” They said they dislike control, but they struggled to behave differently, reject, or end behaviors they do not like.

CONTROL VS. CARE AND PROTECTION

In Brazil and Honduras, adolescents sometimes interpreted controlling behaviors as expressions of care or protection, both with their partners in intimate relationships and with family members. Often, there were fine lines between knowing where one's partner was for security or "checking in" compared to "monitoring" their location. As a young man in Honduras described:



YOUNG MAN

Urban Honduras

"For example, with your current partner, does she always or often want to know where you are? Has this happened to you?"

"Yes, sometimes she asks me where I am, what I am doing, whether I've eaten."

"Why do you think she does this?"

"I think she's concerned about me. Yes, because it's dangerous, times are rough – but also, one has to show interest in those you care about."



INTERVIEWER

In another case in Honduras, however, a young woman described how her boyfriend wants to "care" for her, yet she finds that this "care" is really a way to make sure no other boys approach her:



YOUNG WOMAN

Urban Honduras

"He acted like he was interested and did not want other people to get close to me. Well, I took it that way at least – he wanted to sort of take care of me."

INFIDELITY AND SUSPICION OF INFIDELITY

Infidelity and suspicion of infidelity were widespread and normalized in most relationships in this research. They led to tension between couples and encouraged controlling behaviors and other forms of violence. Infidelity can therefore be identified a risk factor.

The findings show strong gender differences with regard to infidelity in both countries. Young men described greater fear of infidelity than their partners did, but, for the most part, their fears were not validated by their female partners actually being unfaithful. Girls also worried about infidelity and subsequently exercised controlling behaviors, but their worries were more often based on having experienced infidelity from a current or previous partner.

Adolescents often described controlling behaviors as an indication of a relationship – and as a reflection of the seriousness of or degree of love in a relationship, especially around issues of jealousy and suspicion of infidelity. A 19-year-old young man from a high school in Rio de Janeiro explained that with the start of a relationship come “responsibilities,” or a burden to keep track of each other. In this case, he was especially jealous and said the relationship began in a “bumpy” way because she had previously dated his friend.

In both countries, controlling behaviors were often a way for young men to avoid embarrassment; that is, they were afraid their partner would cheat on them and, by doing so, undermine their masculinity.

Mutual infidelity was not uncommon. For example, in Codó, after a 24-year-old young woman’s boyfriend “tested her” by dating her best friend, she had sex with his best friend:



**YOUNG
WOMAN**

Rural Brazil

“We were together. Then, to test if I was jealous, he began to go out with my best friend, but there was nothing between them, you know?”

“It was just to provoke you?”

“It was just to provoke me, but I didn’t like the idea. I hated it so much I returned the favor.”



INTERVIEWER

JEALOUSY

Infidelity and suspicion of infidelity become the driving force for a related risk factor: jealousy. Jealousy was regarded by adolescent respondents as inevitable and it was rarely questioned or problematized. Many interviewees considered jealousy to be desirable and an indication that the partner is emotionally involved, or in love. Indeed, reports suggested that control/jealousy function as a divider: adolescents were less likely to expect and tolerate jealousy and control in casual/informal relationships, whereas they accepted it in more committed/formal relationships.

Reciprocal violence was often instigated by jealousy related to infidelity or suspicion of infidelity. For example, an 18-year-old young woman from Tegucigalpa hit and scratched her boyfriend because of her jealousy. A 20-year-old young man from Intibucá, when asked about negative aspects of relationships, noted the effort it takes to know where a partner is at all times, and described “taking care of the woman to such a point that it becomes an illness.”

“Who’s in the Photo?” Control and Provocations of IPV through Technology

Technology – most notably, mobile phones and messaging applications such as WhatsApp and Facebook – was widely used by adolescents in the urban areas sampled in this research. Access to the Internet and cell phone technology in rural areas was limited. When available, couples in rural areas also used technology as a tool with which to exercise control over the other. In Intibucá, an 18-year-old young man described how his girlfriend asked him to delete all his contacts:



YOUNG MAN

Rural Honduras

“Has she ever made you erase the contact of a girl who you dated?”

“Yes, my current girlfriend, who I’m with, she made me delete everyone.”

“And did you delete them?”

“Yes.”

“Why did you delete all of them?”

“Because she asked me to do so ‘from the bottom of her heart.’ She asked, pleaded, implored me to delete them all, ‘if you love me.’”



INTERVIEWER

In the majority of relationships in this research, adolescents used technology to exercise control, usually with the consent of their partner and without recognizing it as problematic. Technology was also used to monitor friendships and to control partner interactions such as “posting,” “commenting” on, and “liking” photos.

In both countries, Facebook also served a significant function as a display of the individual and the couple’s relationship to others. Adolescent boys and girls are concerned with how infidelity can make them look in front of others. This dynamic thus differs from cell phone monitoring, which tends to be kept solely within the couple.

Young men, in particular, complained when peers “liked” or posted photos that included their girlfriends because doing so could be interpreted as a sign of possible infidelity, and therefore a cause of embarrassment to young men. For example, a 19-year-old male high school student from Rio de Janeiro became jealous when he saw a photograph that included his girlfriend, taken on the court during a game and posted by his girlfriend’s male volleyball teammate, with comments from the teammate’s friends that made it “look like they were in a relationship.” This student asked his girlfriend to remove these photos from her profile and he entered into her Facebook account so he could check on her fidelity. He was not expected to remove his photos or share his information with her.



YOUNG MAN

Urban Brazil

“It was exactly the photo of her and that friend from volleyball, both of them on the court at a championship in Niterói [a city near Rio]. I asked her to delete it, because I didn’t like him and there were comments from some of their friends as if they were in a relationship.”

Adolescents thus used Facebook and cell phones to “test” their partner’s fidelity. A 19-year-old young man from a community in Rio de Janeiro described how a girl with whom he was in a *rolô* (“hooking up”) relationship tested him:



YOUNG MAN

Urban Brazil

“They send messages saying they wanted to be with me, and then ask another person [to send the message], understand? [...] Let’s just assume I’m in a relationship here – they will grab your cell phone and will send a message from your cell phone, like you are trying to get with me.”

In Intibucá, although most do not have access to Facebook, one young man explained how, when he dated a girl who did have access, he monitored her:



YOUNG MAN

Rural Honduras

“In the case of Facebook, with your other girlfriends – have you looked through theirs?”

“Almost everyone I have gone out with, only a few have had that type of communication. But there was one girlfriend I had – I would go through her Facebook, because I would tell myself there could be a betrayal, that’s why.”



INTERVIEWER

In Brazil, conflicts over infidelity (and attempts to prevent it) also took place as couples tested and negotiated the level of commitment in their relationships.

NORMS AND DECISION-MAKING AROUND SEX AND BIRTH CONTROL

Decision-making around sex and the use of contraception constitutes a key area in which power imbalances and control are evident in adolescent relationships. (For a discussion of the ways in which decision-making around sex is linked to the gendered norms around sexuality, please refer to Section 3.3.)

The findings show that sexual decision-making critically affected two types of IPV and risk factors: (1) Sexual decision-making affected violent cases of sexual IPV, such as locking an adolescent girl in a house, death threats, unwanted sexual acts, and having sex for much longer than a girl wants. Additionally, (2) it affected forms of “conditional” consent in which adolescent girls are convinced to have sex when they initially do not want sex.

While young men are expected to initiate sex, it is left to young women to take the initiative in contraceptive use. In this context, females not only bear the sole responsibility for contraception, but they are also met with resistance from male partners. Young men sometimes use their power to convince girls that contraception is not necessary, and, if the young men agree to use condoms, it is often grudgingly.

In short, the negotiation of contraceptive use is linked to power in the relationship and to the gender norms involved in decision-making about condom usage.

GIRLS' VIRGINITY, VIOLENT FIRST SEXUAL EXPERIENCES, AND IPV RISK

A noteworthy finding from this research is that, across all settings, *many adolescent girls described their first sexual experiences as having been neither wanted nor pleasurable*. Indeed, girls' first sexual experiences often involved or resulted in pregnancy, pain, feeling that they had been treated like an object, or rape. In one case, a 17-year old girl from Rio de Janeiro described feeling used by a man who only wanted to “take [her virginity] and get out of her life” when she was 15.

Several findings from the research in Honduras and Brazil echo themes from the international literature (as discussed in Annex 1). First, social pressure to “lose one’s virginity” constituted a risk factor for both sexes. Such pressure caused adolescent girls and boys to enter unwanted relationships and discouraged them from saying “no” to unwanted situations.

A number of girls interviewed in Rio de Janeiro were embarrassed to say they were virgins and wished to lose their virginity. Those who did not wish to do so had religious reasons. Girls’ embarrassment about not being a virgin, or reticence to talk about sex, was much more common in the rural communities surrounding Codó, where, in general, young women and men convey taboos around talking about sex and virginity.

Second, several girls in both countries shared experiences in which their sexual initiation was violent, unwanted/non-consensual, pressured, or resulted in consequences. For example, a young adolescent girl in Rio de Janeiro lost her virginity when her stepfather sexually abused her. A number of adolescent girls in Codó were forced to have sex for the first time. In one case, a girl was threatened with being killed for leaving a man’s house at age 11. Several girls in Rio de Janeiro suffered sexual violence while in relationships with men involved in drug trafficking.

In Codó, according to interviews, the youngest ages of sexual initiation were 11 and 12, in violent situations. In Honduras, fear of violence if they did not agree to have sex and a lack of accurate information about sex contributed to adolescent girls’ negative first experiences.

In additional cases, first sexual relationships – which occurred in the context of limited sexuality education – resulted in the pregnancy of interviewees. A 22-year-old young woman in Salgueiro community in Rio de Janeiro described losing her virginity to her son's father when she was 16:



**YOUNG
WOMAN**

Urban Brazil

“It was like this: I lost myself [*eu me perdi* – referring to ‘losing’ virginity]. I was going to take the pill. When I was going to take the pill I found out I was already pregnant. I lost myself in May and when June came I was already pregnant.”

The significance of early relationships to adolescents helps explain the tolerance of IPV, engagement in risky sexual behavior, and continuation of unwanted relationships. One Brazilian adolescent girl, for example, stayed with her first boyfriend at age 14 because she did not think she would be able to find anyone else.

Protective factors against negative first sexual and relationship experiences include adolescents' development of a long-term outlook on life and relationships, comprehensive sexuality education, and the presence in young people's lives of a social support network in which the partner is just one of many important parts. At the same time, addressing the societal pressures young men face, to have sex and adhere to rigid gender norms, is critical for the development of successful IPV prevention programs.

PROTECTIVE FACTORS IN RELATIONSHIPS: TRUST, COUPLE COMMUNICATION, ABILITY TO RESOLVE CONFLICTS, AND GENDER-EQUITABLE ATTITUDES

According to the findings, adolescents who described not having experienced IPV developed the following kinds of practices within their relationships, which are labeled as protective factors for the purpose of this study:

- Dialogue, couple communication;
- Taking a break during conflicts and returning after each has calmed down;
- Valuing and fostering trust and respect; and
- Ending relationships when there is conflict, violence, or dissatisfaction.

While the study found evidence of adolescents discovering ways to be resilient after past violence, and taking lessons learned from one relationship to the next, much less evidence was found showing how couples do this together, shifting toward healthier behaviors based on trust and communication within the relationship over time, and breaking away from controlling patterns. This suggests that the realities of adolescents' relational lives stand in sharp contrast to their relationship ideals and expectations. As previously discussed, adolescents often wish for communication and respect in their intimate lives, preferring conflict-free relationships. Yet, in practice, finding agreement in their lived relationships means navigating turbulent dynamics of control and power.

Considering the lack of spaces in which adolescents can discuss healthy relationships and learn about comprehensive sexuality education, it is remarkable that some adolescent couples did develop, to some degree, positive coping strategies and communication mechanisms for violence-free relationships – albeit always within a context largely dominated by norms that generate controlling behaviors and other forms of IPV.

Conversation was cited by the respondents as their main tool for solving conflicts between couples. However, the findings offer little information as to how such communication occurs in practice. The respondents highlighted short-term approaches such as *taking a break* or *being silent* more than they discussed long-term solutions.

Adolescents discussed the role of silence in a variety of ways, including using it to help a couple take a break from a heated exchange, and as an expression of unequal gender power relations between the aggressor and victim (who is often described as “staying quiet” in order to avoid abuse).

Most respondents mention *respect* and *trust* as ideals and view them as fundamental to a relationship, but provide little information as to how they strive to achieve them in practice. Programs should emphasize ways for adolescents to foster respect and trust in their intimate relationships.

4.3.3 Individual level

In addition to the community and relationship levels, IPV risk and protective factors are shaped at the individual level. Drug and alcohol abuse are primary risk factors, particularly in the most severe cases of physical and sexual IPV. Personality traits are also at play: traits that favor aggressiveness, conflict, or blaming oneself for violence contribute to risk; assertiveness, and the ability to reflect and learn from conflict and apply those lessons in the future, constitute protective factors. Sociodemographic factors such as age, socioeconomic status, race, and level of educational attainment also influence IPV victimization and use. Two additional sets of factors can each play risk-heightening or protective roles: friends or peers, and family.

ALCOHOL AND DRUG USE

Across all research sites, alcohol and drug use were associated with the perpetration, by men, of multiple forms of IPV, particularly the most severe forms of physical and sexual violence.

Alcohol was the most frequently used drug, and its use – primarily among male respondents – reflects the lack of spaces, apart from bars, in which teens can socialize with their peers. While in Brazil several girls reported drinking “too much,” in Honduras there was no mention of alcohol consumption among girls.

As for the use of other drugs (such as crack, cocaine, and *loló*, a cheap inhalant), when cited, they were often associated with youth “hanging around the wrong crowd,” i.e., girls dating or being linked to boys in drug trafficking. In Honduras, marijuana and cocaine use were mentioned, and linked to IPV aggression as well.¹⁸

EDUCATIONAL ATTAINMENT

The following table provides data on educational attainment of respondents in the sample. Urban adolescents, overall, had completed higher education levels than rural adolescents. Only a portion of the sample was recruited directly from high schools, but half to three-quarters of participants were studying at the time of the interviews.

18. While alcohol is mentioned in urban and rural sites, cocaine is only mentioned in the urban sites, Rio de Janeiro and Tegucigalpa.

Table 7.
Educational Attainment

Highest Education Level	Urban Brazil (%)	Urban Honduras (%)
Elementary School	23	9
Middle School	n/a	24
High School	71	42
At least some University	6	18
No Response		7
Currently Studying	75	51
	Rural Brazil (%)	Rural Honduras (%)
Elementary School	44	16
Middle School	n/a	12
High School	36	64
At least some University	4	0
No Response	16	8
Currently Studying	60	60

The sociodemographic data on the research participants tended to indicate higher educational attainment as a protective factor against IPV use and IPV victimization. Although conclusions cannot be made from the data, the research offers several insights into the potential links between educational attainment and adolescent IPV.

First, males' controlling behavior may be linked with female school dropout. For example, adolescents in formal relationships shared the expectation that girls prioritize the relationship over other commitments, including school.

Second, and similarly, girls' school dropout rate is linked with early marriage and male control in relationships, particularly in rural areas. As a 20-year-old woman from Intibucá exemplified, girls that cohabit are often prevented from continuing their studies:



**YOUNG
WOMAN**

Rural Honduras

“You know, I wanted to continue studying. So he told me ‘No,’ that continuing my studies was this and that – foolishness. I am not studying now... so I don’t have problems with him.”

Dropping out of and missing school can be understood as risk factors because when girls leave school, they also leave a built-in context for outside relationships and friendships, and thus face greater risks of being isolated should they experience IPV. Furthermore, low educational attainment limits girls' opportunities and, as a result, enhances marriage as a means of support. On the other hand, when a girl continues her education, her options beyond the relationship are increased, her social and financial horizons are widened, and she is more likely to postpone marriage.

Given the finding that girls face greater risk of IPV when they begin to cohabitate, future research should focus on the related phenomena of school dropout, dating relationships, cohabitation, and IPV – especially in rural areas.

Disproportionate pressure on relationships to dominate life trajectories, which discourages adolescent girls from staying in school, can thus be seen as a risk factor. Programs should consider the finding that adolescents perceive dating relationships and marriage to be in opposition to the pursuit of study, and explore the means by which staying in school can occur alongside, rather than instead of, intimate relationships.

FRIENDSHIPS AND PEERS: DOES THE INDIVIDUAL ADOLESCENT HAVE SUPPORT FROM FRIENDS/PEERS?

Adolescents bring their individual-level experiences – such as those influenced by friendships and peers – to dating relationships. In the research, closer, trustful, and meaningful friendship ties tended to act as a protective factor: they offered a wider social network, including for support if IPV occurred. In contrast, having no friendships or only less-intimate acquaintances (neighbors, schoolmates, friends of friends) could act as a risk factor for adolescent IPV because the couple becomes more isolated. In rural areas, the ties were usually with family members (cousins, uncles, etc.).

In both countries, the risk of social isolation and IPV increased when relationships gained significance in a young person's life at the expense of their friendships – isolating him/her from friends, and greatly reducing the role of friends as a protective mechanism. While adolescent boys in relationships still mentioned going out with their friends, girls were more likely to be isolated as a result of being in a relationship, especially in rural areas. In the context of couple isolation, the absence of friends that one could trust *combined with* the perception that it is not worth asking for help enhanced risk.

The remainder of this section reviews the most common reasons cited by adolescents for isolation from friends. Namely, adolescent girls and boys, their partners, and/or family members described friends disparagingly as:

1. negative influences that instigate “bad” behavior;
2. not trustworthy; and
3. sources of gossip.

Such motivations should be explored, along with the different types of friendship dynamics encountered among the study’s respondents: those who did not have friendships prior to the relationship (especially relevant if the individual is no longer in school); those who distanced themselves from friends upon starting to date; and those who chose not to have friends because they are seen as untrustworthy, gossiping, useless, or threatening.

Friends as bad influences

Friends, who are often associated with a “single” lifestyle (partying, drinking, being promiscuous), were commonly considered to be a “bad influence” and prompted controlling behaviors from partners. Both boys and girls tended to tell each other which friendships should be kept or dropped, and girls, especially, cited their boyfriends’ friends as bad influences when the friends did drugs, were in drug trafficking gangs/*barras*, or were seen as promiscuous. As one 21-year-old young man from a rural site in Brazil reported:



YOUNG MAN

Rural Brazil

“I have some friends involved in the drug business and she tells me, ‘Man, this isn’t right, they hang around there smoking.’ They could be caught, [she thinks], ‘If he’s caught with any drugs he [the boyfriend] will end up getting in trouble, too.’”

Girls tended to favor the relationship over their peers. However, there were exceptions. A 15-year-old adolescent girl from Rio de Janeiro lamented the way her previous boyfriend’s behavior – prohibiting her from seeing friends he considered to be promiscuous – caused her to lose friendships. This experience prompted her to reestablish friendships with these girls.

Skepticism about or disparagement of friends as “bad company” can be considered an indicator of the partner’s jealousy or control. On the other hand, discouraging friendships with those who do drugs or engage in other illegal or dangerous activities can be understood as a protective factor.

Lack of trust

Social isolation can be exacerbated when one’s friends cannot be trusted. In Honduras, a 23-year-old male said that he would not turn to his friends. Similarly, an 18-year-old young man from a rural village near Codó explained that he would rather confide in his mother than in his male friends:



YOUNG MAN

Rural Brazil

“When I was going out with her, my friends kept their eyes on her, and never took it seriously, and they’d tell me to ditch her quick, to see if they could have a chance with her... I only really spoke with my mother.”

“And not your friends?”

“No. I only have backstabbing friends. It’s better to speak to my mother because she gives me advice, gives me better advice.”



INTERVIEWER

Other adolescents seemed to avoid confiding in their friends because they advised tolerating violence, as one 24-year-old woman from Intibucá reported:



YOUNG WOMAN

Rural Honduras

“For example, when I told her that I had problems with my boyfriend, she would tell me that it was normal, that women had to put up with it. Well, when my mom suffered – because my mom suffered a lot of physical abuse from my dad – I made up my mind not to put up with that from a man. So when [my friend] told me that, I felt that she wasn’t enough of a true friend that I could tell what I was putting up with, so I don’t think she can help me.”

Gossip

Gossip was discussed frequently in the interviews across all research sites, and it had gendered meanings for girls and boys. For girls, gossip generally involved a fear of being labeled “flirts” or “sluts.” For boys, gossip had to do with cheating or not measuring up to expectations around “being a man,” especially in terms of controlling their partners and increasing the isolation of the couple.

For adolescents in this study, friends could also represent a source of humiliation as a result of gossip. Indeed, one of the most frequently cited reasons for not sharing relationship issues with friends, for not trusting friends, was fear of gossip – gossip about possible flirtations, infidelity, or pregnancies.

Male adolescents especially cited friends as provoking conflict and jealousy (often as a result of gossip about cheating and flirting). Gossip could also be a justification for IPV, as a 22-year-old young man from Intibucá argued. He believed that violence is justified when women are “seen with other men.” An 18-year-old male in Tegucigalpa similarly described being against friendships (for himself and his partner) on the basis that they incite gossip:



YOUNG MAN

Urban Honduras

“I don’t like to have a lot of friends... they gossip and she gets mad. I spoke to her and I asked, is she going to trust her friends or is she going to trust me?”

Far from being confined to the couple, the risk of violence also reaches their peers. Adolescent girls and boys threatened or hurt other peers, demonstrating one of the lesser discussed, but far-reaching consequences of teen IPV. In a Rio de Janeiro high school, a 16-year-old adolescent girl described how she entered the school of another girl who was “dating” her boyfriend and broke her arm. In another example in Brazil, a 24-year-old young man said he intimidated and threatened other men he saw his girlfriend with after she broke up with him; he “instilled fear in them” in person and via Facebook:



YOUNG MAN

Urban Brazil

“Intimidate, intimidate...no, not with them, particularly. Let’s assume that when we ended it ... I didn’t accept the fact. I intimidated the guys that [my ex-girlfriends] would hook up with, man. Like a guy she is hooking up with, like the guy who would go pick her up from her class... Let’s assume my ex, my ex ended things with me, we finished but only very recently, and so there she was already holding hands with another guy, only I was going to pick her up, and that’s it, man, I scared them, man... I scared not her, but the guy. Understand?”

When peers protect

While many respondents reported not having friends, some hypothesized that, if they did have friends, they might turn to them for help. Others described the supportive role of friendship. A 22-year-old woman from Tegucigalpa reflected upon the need to have friends beyond the relationship with her boyfriend:



**YOUNG
WOMAN**

Urban Honduras

“It’s good to socialize with other people... one should socialize with other people, go out, try and forget a little about the relationship.”

Although uncommon, one of the most important roles that peers can have is evident in the practice of girls warning other girls about abusive partners. When a 15-year-old girl from a community in Rio de Janeiro started suffering from physical violence from her first boyfriend, several of his ex-girlfriends said to her – in person and on Facebook – that “if I were you I’d leave him,” or “be careful – I dated him, he hit me and I reported him.”

In the absence of close friendships, *knowing peers are around* seems to be a reliable protective factor at times. This protective factor only works, however, when adolescents are in school or other spaces among their peers. In an important example, a 19-year-old male student in Rio de Janeiro began to rape a girl in a school bathroom, but stopped when he realized others were coming in:



YOUNG MAN

Urban Brazil

“Have you ever insisted, but without using physical force, to do something sexual that the person did not want to do?”

“One time in the bathroom at the school, when I was hooking up (ficando) but I wanted something more, but she didn’t want to. I took it a little too far but right then some people entered the bathroom of the school, that’s when I stopped.”

“And what happened next?”

“People entered and each of us went our separate ways.”



INTERVIEWER

While there are a few positive examples of respondents seeing friends as a protective mechanism, in the majority of cases friends are perceived as causing problems. As a result, many individuals – both male and female – are socially isolated from their peers.

PERSONAL COMPETENCIES: ASSERTIVENESS AND ABILITY TO LEARN FROM PAST EXPERIENCE

The literature identifies several personality traits that influence the likelihood of experiencing adolescent violence. These include a lack of poor behavioral control/impulsiveness; psychological/mental health problems (Vagi et al, 2013); antisocial personality; and the belief that violence is justified or tolerable (Lundgren and Amin, 2015).

Conversely, assertiveness is identified as a trait that acted as a protective factor in this research. It is important to stress that it is a quality that can be taught, and thus has been addressed in public health training programs. Furthermore, research suggests “bargaining assertively is construed as congruent with female gender roles in some contexts” (Amanatullah & Morris, 2010: 256). Research has explored the role of female sexual assertiveness in sexual and reproductive health and the likelihood of sexual victimization (Teitelman et al., 2008; Testa et al., 2007; Rickert et al., 2002), but the extent to which it serves as a protective factor for adolescent IPV is less explored.

Additional factors related to personality that have been identified as important for preventing IPV include skills that individuals bring to relationships, such as nonviolent problem-solving skills (Vagi et al., 2013), social skills, the ability to handle emotions, develop one’s identity and resilience, and the ability to identify abusive behaviors (Caridade et al, 2012; Murta et al, 2013a,b).

Assertiveness

Girls’ ability to know and stand by what they want was seen, in a number of cases, as a protective factor. In particular, the ability to assert their preferences was mentioned in connection to stopping controlling behaviors, negotiating the use of birth control, and exiting relationships that show signs of IPV. In Honduras, girls who reported engaging in more assertive behaviors – for instance, quickly exiting

relationships in case of violence, or negotiating birth control – tended to live in Tegucigalpa, as opposed to rural areas of Honduras. A similar pattern is apparent in Brazil. In the rural communities, some girls began to assert their wishes, but were then more likely to be subjected to controlling behavior, or “put back” in a passive position under a partner’s dominance.

Being assertive can also mean ending relationships upon seeing warning signs of violence. A 20-year-old woman from Tegucigalpa reported that she ended a relationship after only three days because her boyfriend began acting in a controlling and aggressive way: “With him I couldn’t even be five minutes with my friends because he would get angry. He wanted me to be only with him... I did not like it.” She went on to explain that in situations like this, it is better to leave:



YOUNG WOMAN

Urban Honduras

“I would leave the relationship because from the beginning in which there is verbal, physical violence, harassment – I wouldn’t be able to live with it and it is better to detect it than to endure.”

Assertive behavior was also evident when adolescent girls refused to allow boys to control them in any way, including in terms of their dress (a recurring controlling behavior). When asked if she would change her dress or style for her boyfriend, a 17-year-old adolescent girl from Tegucigalpa said, “I would never do that for anyone,” adding:



ADOLESCENT GIRL

Urban Honduras

“I have told him that he doesn’t have a word on how I act... Well, maybe he can get involved in a situation if he considers he does so for my well-being, but he shouldn’t concern himself with how I dress, because he has his way of dressing, and he is he, and I am me, we are different people, together but two people.”

The same adolescent girl also mentioned that she would never tolerate any type of IPV, and she makes this clear with her boyfriends, even hinting at her willingness to use reciprocal violence. She says, “I told him from the very beginning, if he hit me once I would return the favor three times over. Sometimes I think he is afraid of me.”

Young women who are generally assertive in their relationships tended to demonstrate assertiveness in decision-making around sex and sexuality, including stopping unwanted sexual advances and negotiating the use of birth control. For example, a 22-year-old woman explained:



**YOUNG
WOMAN**

Urban Honduras

“And have you ever had a friend of yours disrespect you?”

“Yes, when they have tried to touch me and then I put a stop to it and then afterwards they show respect.”



INTERVIEWER

This same young woman described refusing to have sex with her boyfriend without a condom:



**YOUNG
WOMAN**

Urban Honduras

“He would tell me that we would do it without a condom. I would tell him that if we did not use a condom then nothing would happen.”

Lack of assertiveness

In contrast, girls who struggled to articulate their desires, who acted in opposition to their own wishes, or who used ambiguous language to explain their actions – e.g., “I don’t know why I did it” – appeared to signal potential risk factors because of their inability to articulate their preferences. For example, the 17-year-old who ran off with her boyfriend and was then subjected to multiple forms of IPV at first could not explain what motivated her to go live with her partner: “When a person is in adolescence, they don’t think about anything. They don’t know what they want and don’t want.”

In both countries, girls who lack assertive tendencies commonly stated that they stay quiet or agree to have sex to avoid getting in fights. A 16-year-old adolescent girl from Rio de Janeiro reported trying to prevent a fight by staying quiet (knowing she would be threatened if she did not):



ADOLESCENT GIRL

Urban Brazil

“I wanted to say something, but I could see that if I said something, he would start to cuss me out, and it could turn into something more serious, so I preferred to keep quiet because I thought it was the best thing to do.”

Furthermore, a lack of assertiveness among some adolescent girls was linked to a tendency to blame themselves for provoking IPV – as when girls described “making mistakes” (*vacilar*), or slipping up. A 17-year-old girl from a high school in Rio de Janeiro described how she “messed up” by talking to her ex-boyfriend on Facebook, and her current boyfriend saw. That was a trigger for her boyfriend to increase controlling behaviors against her, such as monitoring her Facebook and phone use, which she tolerates because of “her mistake.” This set the tone for her partner’s greater power over her; he gets his way and can go out, but in order to avoid a problem, she no longer does.

Learning from past experience

The majority of the adolescents interviewed did not demonstrate that they had “learned from previous experiences,” missing out on the potential protection from violence that learning from the past can offer. Furthermore, respondents only rarely made connections between their present lives and prior family issues and/or relationships. Not a single critical remark about control or other, less physical types of violence was made during the interviews. Ideal factors for a good relationship – the most cited being trust and respect – were described abstractly and alongside common and recurrent control practices.

Adolescents want trust in relationships, but they struggle to achieve it. Lack of confidence is prevalent when it comes to relationships, as exemplified by a 17-year-old adolescent boy from Rio who stated, “I’m not good at relationships,” and “not everyone in a relationship knows what to do with it.” Adolescents’ perceived lack of ability to address relationship difficulties is an individual factor, but coincides with the lack of access – in their schools and communities – to spaces in which they can discuss relationships and sexuality. Because of this, their ability to reflect upon conflict and make better choices in subsequent relationships is rare but noteworthy – and an essential protective strategy that could be bolstered at the individual level. In a few examples, youth had developed mechanisms with which to reflect on relationships, such as writing in a diary, but it was rare that they would do this spontaneously.

Several times, young men's ability to recognize that they "went too far" – sometimes in connection with the use of alcohol – arose as an important reflection. A 23-year-old young man from Intibucá explained that he had once touched a girl without her permission. When asked what he thought about that situation, he replied that it is not right to touch anyone where they do not wish to be touched.

Although not overt, young men's reflections may be an indication of their taking responsibility for – rather than justifying – the violence they have used. In the case of a 24-year-old young man from Rio de Janeiro who recognized he was "overreacting," he said he did so because his girlfriend at the time would stay with him under any circumstances:



YOUNG MAN

Urban Brazil

"We were arguing, arguing in the street...because for me a woman is that thing, a woman has to be proper and such, when a woman has given it up to more than three, four including myself, she is already a slut in my mind, and so I slapped her in the face myself, I slapped her in the face."

"And what happened next?"

"At the time she was pissed and threatened to end the relationship, and at the time I felt – I got angry, of course, man. ... I hit the girl, the girl wants to call it quits. She has her reasons, you understand? ... She liked me so much that I knew that even if I slapped her in the face she wasn't going to end our relationship.... No, I don't think it's right. No, during that time... I don't think it's right, it was me reacting, overreacting – you understand?"



INTERVIEWER

The same young man similarly reflected upon his control over what his girlfriend wears and was torn; he knew it was her right to dress as she wishes, but he did not like it:



YOUNG MAN

Urban Brazil

"It's a bit complicated, right, because we need to be equal, but I don't like that, right? But if she has the right – yes, she should have the right. Deep down, deep down, I believe she has the right to, yes, but I don't like it, especially (her wearing) small [revealing] clothing."

Importantly, recognition of “going too far” does not always translate into actually stopping violent or aggressive behaviors, especially in the moment. Rather, “reflection” seems to work by decreasing future IPV. In the case of an 18-year-old young man from Intibucá who admitted to pushing his girlfriend, he did not believe his actions were justified, but he did recognize that his anger got the best of him:



YOUNG MAN

Rural Honduras

“It’s just that, even if it isn’t justified, truth is that sometimes when you feel angry you don’t know what you’re doing, you don’t know what you are thinking.”

In the case of a young man in Rio de Janeiro, group pressure on him and three other boys to take turns having sex with a girl during Carnival outweighed his sense that “it didn’t seem right,” even if the girl is “willing” (and likely drunk or on drugs). Interventions should address stopping violence in these heat-of-the-moment situations and providing real strategies for combatting peer pressure.

Some adolescents described a general preference for nonviolence, such as by saying, “I do not like fighting” or “a good relationship is calm, doesn’t have conflict.” Yet adolescents often stated that it is easier to make preferences a reality through experience in relationships, which allows them to develop an understanding of what they like and do not like in a partner.

After having experienced abusive relationships, several young men and women described looking for signals early on in relationships – for example, looking for partners who do not like to fight, and who do not humiliate them. A 20-year-old man and a 24-year-old woman from a community near the rural Brazilian site explained:



YOUNG MAN

Rural Brazil

“I think that the girls I go out with, I always get the girls that aren’t too violent so that they won’t want to fight with friends. Girls that I know, because just seeing us talking, there are some that are always looking to fight with the person who is talking to the guy, you need to know what it is. I don’t look for someone like that – who’s ignorant.”



YOUNG WOMAN

Rural Brazil

“I’m that way, when the person tries to humiliate me I remove myself from the situation right away, while it’s still early.”

Learning from experience allows individuals to gradually improve the quality of their relationships. For example, a 15-year-old adolescent girl in Rio de Janeiro described the changes she experienced from one relationship to the next. While she still experiences control, she is in a more equitable, nonviolent relationship. In her earlier relationship, she explained, giving presents and having sex made her boyfriend think he had the right to beat her:



ADOLESCENT GIRL

Urban Brazil

“Imagine he’s going to think that he is going to give me a present, he’s going to think that we are dating, because it was like that at the beginning, me and my first boyfriend, he gave me something and already thought he was my husband. Now, because I already was opening my legs for him, he thought he had the right to hit me.”

She told her current partner (not yet a boyfriend) to wait and see how things work out with time. She went from a relationship in which her boyfriend controlled her and did not want her to go out alone, to one where she and her partner make decisions together and go out with both of their friends.

In addition, previous partners discouraged the same adolescent girl from doing martial arts or taking a course that she was interested in, while her current partner encourages her. When it comes to controlling her friendships, her current relationship is an improvement but still a work in progress: her first boyfriend beat her in front of a female friend whom he considered to be “a slut” and with whom he said she should not socialize; whereas her current boyfriend tells her to distance herself from that girl, but does not prohibit her from socializing altogether.

In another case, a 16-year-old girl in a Rio de Janeiro high school described a greater change, comparing her previous relationship, which involved fighting, machismo, and infidelity (on his part), to her current relationship, in which her partner listens to her and they make plans together.

RACE AND SOCIOECONOMIC STATUS

Echoing trends found in the literature on Brazil and in several international studies, the research findings from the Brazilian urban site suggest that non-white adolescent girls suffer more IPV. In one of several examples from Rio de Janeiro, a 17-year-old adolescent girl of Afro-Brazilian descent described the racism that coincides with her victimization from IPV:



**ADOLESCENT
GIRL**

Urban Brazil

“When we’re out in public and everybody is like... everybody keeps staring at us.”

“Everyone keeps staring? And how do you feel?”

“I feel like nothing next to him. Because he’s really white and I am black, so whoever looks at us that way is only looking at him, not at me.”

“You feel like nothing near him?”

“By his side, like nothing.”



INTERVIEWER

The findings point to the need to intervene early, as relationships are forming, rather than placing an undue onus on adolescents to learn from their mistakes. Even when adolescents make gradual improvements in their relationships, their relationships remain, for the most part, distant from the ideals to which they aspire. The findings also highlight the need for IPV prevention programs for adolescents that address intersecting forms of inequality – especially in terms of race, ethnicity, and income – in order to strengthen young people’s self-esteem as a protective factor against IPV, and to prevent violence from the part of perpetrators.

FAMILY: SOMETIMES A KEY PROTECTIVE FACTOR, SOMETIMES AN EXACERBATING RISK FACTOR

Family is identified as the main resource to which adolescents turn, especially in more severe cases of IPV. However, family functions as risk factor when: 1) adolescents witness intra-family violence as children; and 2) the family controls girls' sexuality by restricting access to health care and birth-control methods, and by prohibiting youth (mostly girls) from socializing or engaging in relationships.

Witnessing and experiencing intra-family violence in childhood

Accounts of violence experienced during childhood and in family relationships were common, especially psychological and physical violence (often accompanied by alcohol use).

Several youth recounted witnessing IPV among parents. One 19-year-old young man from a high school in Rio de Janeiro discussed his experience with intra-family violence:



YOUNG MAN

Urban Brazil

“One time the same scene happened with my dad and mom – my mom threw a hot cup of coffee on my dad.”
[Previously, this respondent described the same scene with a girlfriend of his].

“And what happened after?”

“They separated, but it was all the same, after a while it's humorous...they talk, my dad gives her a present, and he comes back home.”

“And did you tell anyone about that?”

“No, I think this is one of the first times I'm talking about that.”



INTERVIEWER

A 24-year-old from Intibucá provided a vivid account of witnessing her father abuse her mother and wishing to reverse this trend in her own relationships:



**YOUNG
WOMAN**

Rural Honduras

“Well, my dad, he always, always hit my mom ever since we were little. Since I was like 5 or 6 years old, I remember he always hit her.”

“How did it influence you?”

“Well, I always said I wasn’t going to marry an alcoholic person nor was I going to let myself be beaten by a man. I believe that got stuck in my head, and as of today I’m conscious of it, I won’t even go to the corner with an alcoholic guy.”



INTERVIEWER

Adolescents interviewed did not tend to associate family situations with their own relationship experiences. While some adolescents remarked that they do not wish to repeat what they consider to be negative qualities of their families, or that they would like to follow the example of relationships they consider to be good models, these statements were not given further analysis or reflection.

Family is whom youth turn to in need

Family – including the mother (most often) and father, siblings, aunts, and uncles – was the most commonly cited recourse in case of violence. However, family cannot always provide support, particularly where gender norms dictate that a woman must *aguantar* (put up with) an abusive spouse. An expression in Honduras states, “*marido quiere marido tiene*,” similar to “you’ve made your bed, now lie in it,” in English.

On the one hand, youth in the study overwhelmingly reported that they are more likely to turn to a family member than to an institution or friend. For the most part, youth felt that they can discuss their problems with at least one supportive family member. As a 17-year-old young man from Rio de Janeiro said, “I would tell my parents who have been with me for 17 years, right?” Adolescents in Honduras described similar preferences for turning to their families.

On the other hand, youth felt that they cannot talk to a family member when there is a lack of trust (e.g., fear of gossip), poor communication, or prohibitions around sexuality and relationships. In these situations, youth may remain isolated. For example, a 22-year-old in Rio de Janeiro considered her family to be present and helpful, and believed she could turn to them if a serious problem arose (protective factors). However, she did not believe that she could talk to them about more immediate concerns, out of fear of getting in trouble, fear that they would gossip

about her, and fear of being embarrassed. Indeed, several boys and girls said that they prefer to first figure out a solution for themselves, and if they cannot, then tell a family member. A 22-year-old woman from a rural community in Brazil explained:



**YOUNG
WOMAN**

Rural Brazil

“Do you think it’s best to keep to yourself?”

“It takes me a while to tell my sister.”

“Afterwards, do you decide to tell her? Why do you spend so many days silent – not saying anything?”

“To really think about what I’m going to do.”



INTERVIEWER

The fear of talking to parents, particularly in Honduras, may explain why some adolescent couples had secret relationships and hid their sexuality from their parents. A 17-year-old adolescent girl from Tegucigalpa explained that her family played a complicated role in her experience with her boyfriend: she decided to cohabit with him because she believed her parents would prefer her to be living with him if she was going to have a sexual relationship. However, it is ultimately her family to whom she turned when she could no longer endure her boyfriend’s abuse, and they accepted her back into the home.

In another case in Tegucigalpa, a young woman (now 24) began cohabitating with a much older man when she was 14, against her family’s wishes. Her grandmother eventually reported her case to the authorities, and she was taken by the child and family protection institution and kept in custody for 27 days. The grandmother’s intervention ultimately resulted in her leaving the relationship.

Family presence protects the couple from isolation and potential abuse

Adolescents perceived family rejection of or restrictions on intimate relationships as controlling, and this was especially common with daughters. In a standard scenario, in Brazil, mothers discouraged or prohibited girls from dating men they consider to be drug traffickers or drug users. In Honduras, girls also described restrictions their parents’ imposed on them with dating; their mothers also gave them relationship advice or helped them after a breakup.

In the context of widespread social isolation of couples from peers, as previously discussed, the presence of family was particularly important; they were often the only contact the couple has with others. In urban Honduras, family members, such as siblings or cousins, were in many cases the only people with whom the couple goes out to have a meal or walk around the mall. Some adolescents described having their partner over to their family's house to watch a movie. Having permission from parents is often referenced as something especially "nice" about relationships. For example, a 17-year-old adolescent girl in Tegucigalpa reported that the most special relationship she had was when "we went out with my parents' permission and it was very beautiful because both of my parents were in agreement with our relationship." A 16-year-old adolescent boy from Tegucigalpa reported that both sets of parents were quite involved in his relationship with his former girlfriend; the parents met and were in agreement as to their approval of the courtship, and often the two families would go to the movies together. He described how he could talk to his parents if issues came up in the relationship.

In addition to protecting couples from complete social isolation, family can directly protect youth from abuse. For example, a 15-year-old adolescent girl from Rio de Janeiro described her cousin standing up for her in front of her boyfriend, and citing her "having a family" as a reason the girl deserves protection. When the abuse continued, she then talked to her mother.

The case of a 16-year-old girl from Rio de Janeiro illustrated how a girl can be simultaneously protected and controlled: her mother stopped gossip about her daughter, but the girl did not like that her mother stays home to "watch" her and her boyfriend and monitors her sexual relationships. In many cases, when the family prohibited the couple from staying at the house, the couple was compelled to find other spaces for their courtship. In Honduras and in the rural site in Brazil, this lack of space prompted some couples to "run away" and enter into a union.

Parents knowing about and sanctioning the relationship was mentioned as especially important when the girl is below age 18. As one young man from Intibucá explained, regarding his decision to marry his underage girlfriend, having the permission of her father was important to formalize the relationship. He added that parents look for "formality" when the child is underage, meaning that the man has to ask the father for permission.

Once in the union, girls reported that their in-laws do not play the same protective role as their own family. When girls acted outside of rigid gender roles, their mother-in-laws often blamed them for provoking their sons into negative behavior. Girls explained that mothers always side with their sons. A now-24-year-old woman explained that when she first started to live with her boyfriend, at the age of 14, things were "bad, bad, bad." Her father-in-law said to her husband,

“Why did you bring her to the house if she is just going to spend her whole life crying?” While this young woman believed her father-in-law was trying to “defend” her, she did not mention any other ways in which he tried to protect her (e.g., by suggesting she return home). Likewise, in the case of a young woman from Tegucigalpa who began living with her partner when she was 16 years old, both her sister-in-law and mother-in-law were aware that their brother/son was beating her, but they did nothing to stop him.

Family thus plays a key role in adolescent intimate relationships. It is family whom adolescents most often reported they would turn to if they were experiencing IPV in a relationship. In several instances, youth shared stories of family stepping in when their relationships were “bad.” At the same time, in-laws were not found to play a role in preventing abuse from occurring; they were seen as coming to the defense of their son in cases of couples in union.

These findings highlight the important role family members can play in adolescent IPV prevention. The findings also suggest ways to mitigate adolescents’ fears and inhibitions around confiding in family (e.g., fear of gossip, getting in trouble, etc.), and underscore the need for adolescents to be supported in healing from violence they witness or suffer within their families early in life.



CONCLUSIONS

AND EMERGING STRATEGIES

Conclusions

As the nature of sexual and romantic relationships evolves – in many cases, beginning at younger ages than for past generations that may have engaged in fewer informal relationships before marriage – controlling behaviors and violence take on new forms and require novel solutions. Understanding risk and protective factors provides valuable insights to addressing adolescent IPV, which has potential lifelong implications for healthy relationships and the prevention of violence during adult relationships.

The fieldwork in Brazil and Honduras discussed in this report shows that adolescent girls and boys must navigate relationships amidst limited educational and employment opportunities and within the broader context of widespread rural poverty and high urban violence. In these settings, adolescents receive almost no sexuality education or support in learning to recognize their own desires and communicate them assertively, but not aggressively, to their partners; and they have minimal trust in social services that may be available to them. Furthermore, societal expectations, in both countries studied, discourage adolescents from having friends, thus leaving dating relationships to take on disproportionately prominent roles in their lives at the expense of other kinds of social connection.

The intensity of the relationship violence as well as controlling behaviors that emerged in this study is alarming, as is the overall scale of the violence witnessed and experienced by adolescents in their homes and communities prior to entering relationships. Amidst the hardships and violence witnessed and experienced in childhood, relationships characterized by control or some other degree of violence are more likely to be perceived as normal and accepted. By the same token, the rare examples of adolescent relationships involving more equitable decision-making, pleasure, consent, and the absence of violence are sometimes the first nonviolent relationships those adolescents have experienced. Based on these considerations, programmatic initiatives promoting healthy relationships, mediation skills, and positive coping mechanisms could play a significant role in empowering adolescents and promoting healthier relationship dynamics – particularly in a context where adolescent girls describe their best relationships as “not having forced sex,” and where adolescent boys consider constant monitoring of clothing and cell phones to be part of the daily routine.

These findings are particularly important at a time when, as the gender equality gap narrows globally, adolescent girls appear to be struggling with being more empowered than their mothers were, while still being expected to adhere to traditional gender roles. Across both countries, girls continue to face the demand that they be faithful at any cost, while boys are consistently expected to be *unfaithful*. At the same time, adolescent boys, too, are navigating generational shifts in what is expected of them as men (for example, fulfilling the role of providers). Overall, at an age when they should be enjoying greater freedom to “date” and explore in their early relationships, boys and girls alike are finding themselves entangled in adult IPV problems.

While many adolescents interviewed for this study demonstrated a degree of resilience, developing remarkable ways to rely on whatever protective factors were available to them, it is important to stress that they often did so on their own, without the support of any public service. For this reason, it is essential to improve both the quality and the accessibility of relevant services – addressing the widespread mistrust and lack of awareness of available support services – so that intervention can occur before IPV escalates.

Breaking the cycle of violence also implies providing support – and exit strategies, if appropriate – to those who have experienced violence in the past or who are currently in violent relationships. To this end, it is vitally important to explore and provide safe ways for adolescents to leave abusive relationships – particularly as the research clearly shows that young men who threatened to kill young women always did so after their partners expressed the intention to end the relationship. With the aim of linking these findings to programming, further research should focus on safe ways to leave an abusive partner, with the aim of linking findings to programming.

The research underscores the need to intervene early, even before relationships start, as the more IPV occurs in adolescent relationships, the more it recurs. When adolescents are able to have healthy relationships from the start of their amorous lives, they will be more likely to recognize patterns and warning signs when they first appear, and to go on to have healthy, nonviolent relationships as adults.



Emerging Strategies for Action

This research suggests several strategies for addressing adolescent IPV through program interventions that prioritize prevention and policy change, and through expanded research on this understudied problem in the LAC region.

Program Strategies

- 1.* Adapt existing gender-transformative programs aimed at preventing violence among adolescents to include a more explicit focus on healthy relationships and curtailing control/ coercion (including via CSE).
 - 2.* Support the healing of young men and women from violence and abuse they were previously exposed to.
 - 3.* Adapt to local sociocultural contexts and evaluate school-based adolescent IPV prevention programs in LAC.
 - 4.* Encourage communication, conflict resolution, and mediation skills among all adolescents.
 - 5.* Develop and leverage healthy spaces for teens to interact with their peers.
 - 6.* Promote interventions, with fathers, mothers, and other family members, that promote their caregiving and ability to model nonviolent, equitable relationships.
 - 7.* Encourage community norm-change programming.
 - 8.* Develop adolescent-centered advocacy to prevent IPV.
 - 9.* Leverage technology and online platforms as spaces for campaigns and messaging that promote equitable, nonviolent relationships (rather than as spaces of control).
 - 10.* Train providers to offer services that are accessible, meaningful, and supportive to adolescents.
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Table 8.
Strategies and Recommendations, According to Risk and Protective Factors

 COMMUNITY LEVEL		
Risk Factors	Protective Factors	Strategies/Recommendations
Inequitable gender norms, i.e., those that promote risky sexual practices; minimizing/normalizing IPV	Equitable gender norms, i.e., those that promote consensual, pleasurable sex; problematizing IPV	<ul style="list-style-type: none"> Encourage community norm-change programming Develop adolescent-centered advocacy to prevent IPV
Proximity to and/or involvement in illegal groups/community violence	Peer groups that are distant from those that promote urban and other forms of violence	<ul style="list-style-type: none"> Given their widespread use, leverage technology and online platforms as spaces for campaigns and messaging that promote equitable, nonviolent relationships (and discourage control/monitoring)
Neighborhood/community norms discourage ever interfering with IPV	At least some community-level support for interfering with IPV	
No spaces for courtship, couple isolation	Spaces for courtship, engagement in meaningful social circles (family, friends)	<ul style="list-style-type: none"> Develop and leverage healthy spaces for adolescents to interact with their peers
Violence recurring and cumulative and not recognized as such	Availability of institutions, services, and laws (social workers, places for survivors to report) for youth	<ul style="list-style-type: none"> Adapt and evaluate school-based adolescent IPV prevention programs in LAC Train providers to offer services that are accessible, meaningful, and supportive to adolescents
 RELATIONSHIP LEVEL		
Risk Factors	Protective Factors	Strategies/Recommendations
Age gap in relationship, typically male with a younger female partner	Egalitarian relationship similar in age	<ul style="list-style-type: none"> Adapt existing gender transformative programs aimed at preventing violence among adolescents to include a more explicit focus on healthy relationships (including via comprehensive sexuality education – CSE)
Cohabitation	Trust, couple communication, ability to resolve conflicts, and broader egalitarianism	
High degree of unequal power and control in the relationship – often with control, jealousy, fear		<ul style="list-style-type: none"> Encourage communication, conflict resolution, and mediation skills among all adolescents
Fighting as part of everyday communication		
Multiple partners, greater infidelity by one partner	Monogamy or agreement on relationship terms	
Unwanted sex/unequal decision-making around sex	Equitable and consensual decision-making around sex	



INDIVIDUAL LEVEL

Risk Factors	Protective Factors	Strategies/Recommendations
Use of alcohol/drugs	Engagement in spaces where adolescents are not encouraged to binge drink and/or use drugs	<ul style="list-style-type: none"> Adapt existing gender-transformative programs aimed at preventing violence among adolescents to include a more explicit focus on healthy relationships and personality traits (e.g., self-esteem, assertiveness), such as via CSE Support healing of young men and women from violence and abuse they were previously exposed to Develop and leverage healthy spaces for teens to interact with their peers Promote interventions with fathers and mothers and family members that promote their caregiving and modeling of nonviolent, equitable relationships
Personality traits, e.g., passivity, aggressiveness, conflict-seeking, blaming oneself for violence	Personality traits, e.g., attitudes toward nonviolence, assertiveness, or – when conflicts happen – reflection, learning from lessons, and striving to avoid in the next relationship; resilience	
Sociodemographic factors, i.e., young age, low socioeconomic status, non-white race (in Brazil)	Sociodemographic factors, i.e., older age, moderate to high socioeconomic status, higher educational attainment	
Low educational attainment	High educational attainment, connection to school	
Peers, friendships that display aggressiveness and/or use IPV	Peers, friendships, and social networks that discourage/protect from IPV	
Social isolation (lack of friendships/meaningful connections)	Meaningful connection to peers and caring adults	
Witnessed IPV during childhood and/or experienced sexual abuse during childhood	Can turn to a family member or other caregiver for help, positive relationship role model	
Victim-blaming, minimizing violence	Attitudes of responsibility rather than normalizing violence	

1. Adapt existing gender-transformative programs aimed at preventing violence among adolescents to include a more explicit focus on healthy relationships (including via CSE). Programs H and M (Promundo; developed for young men and women, respectively), It's All One Curriculum (IPPF), Partnering (UNFPA), and recent adaptations¹⁹ could be adapted to include a stronger focus on relationships/cohabitation and address a wider range of IPV and risk and protective factors tailored to local settings.

- All programming aimed at adolescents and youth should recruit adolescents to participate in order to discuss not only violence but relationships more broadly. Doing so also increases the potential of addressing types of violence that are not recognized as such.
- Such prevention programs should be truly *gender-relational* – that is, working with *both* boys and girls to challenge harmful gender norms and build relevant skills (such as self-esteem, assertiveness, and refusal for girls; and for boys, self-esteem, acceptance of girls' rights to refusal, and stopping the minimizing of violence).
- Both boys and girls need to be reached at younger ages. The exact “entry point” age should be assessed in each setting, but the research findings show sexual initiation (with negative experiences) beginning as early as age 11.
- Programming to prevent IPV should address intersecting forms of inequality and discrimination, such as those related to race, ethnicity, sexual orientation, educational attainment, and socioeconomic status.
- Educational programming should be delivered over time (‘dosage’ varying by context and program), rather than in single sessions. A review of programs addressing adolescent IPV and sexual violence shows that longer-term investments and repeated exposure to concepts delivered in different settings over time have better results than single awareness-raising or discussion sessions (Lundgren & Amin, 2015); results from Promundo evaluations are similar and should be considered in the design and intervention of LAC programming to address adolescent IPV.
- While promoting healthy relationships, programming should also target controlling behaviors – including those related to jealousy and infidelity – as this research found these to be pervasive, often reciprocal, and at times harmful alone and as associated with sexual or physical IPV.

Comprehensive Sexuality Education (CSE) should be offered in order to reinforce gender-equitable norms linked to adolescents’ sexual and reproductive health and rights (SRHR) and healthy relationships. This study highlights the importance of CSE addressing *control and coercion*, given the prominence of such

19. Promundo's Program H|M|D provides a useful basis from which to adapt gender-transformative programming through critical reflection and questioning of the gender roles that appeared in this research. Adaptations include *Agente M*. It can also address the norms that arose in discussion about not getting involved in matters “between a couple.” See <http://promundoglobal.org/resources/?type=educational-materials>. *Partnering: A New Approach to Sexual and Reproductive Health* offers SRH programming that incorporates men and boys: <http://www.unfpa.org/publications/partnering-new-approach-sexual-and-reproductive-health>.

behaviors among the adolescents who participated. Doing so would be a vital step in preventing escalation of IPV.

Findings about sexual abuse and violence, in this study and others (see Decker, Silverman & Raj, 2005), highlight the need for effective prevention programs to include discussion around IPV risk and protective factors. It is important that these efforts be able to withstand religious and conservative political pressures against sexuality education in the region, both for in-school settings and out-of-school settings such as peer-to-peer and entertainment education programs. As such, programming that fosters gender equality and nonviolent intimate partner (and peer) relationships should be integrated in CSE pedagogies and curricula but also in interventions that are not labeled CSE, i.e., more mainstream disciplinary classroom education and programming.

CSE should also address *gendered norms around sexuality* that develop during adolescence and are reinforced by peers, family, and the community. Over the course of this research, harmful norms around boys' sexuality emerge repeatedly as key risk factors for IPV: for example, expectations that boys always want sex, which generates and justifies pressure to initiate sex. Similarly, norms that put impossible and unjust demands on girls – for instance, to refuse sex, on the one hand, and on the other, to satisfy men – must be questioned as part of CSE. CSE has the potential to protect adolescents from IPV and delay marriage and/or cohabitation and pregnancy (Chandra-Mouli et al., 2015). Efforts to prevent adolescent IPV should therefore be linked with those to introduce CSE in schools (see Murphy-Graham and Leal, 2015; Haberland, 2015).

- 2. Support the healing of young men and women from violence and abuse they were previously exposed to.** Adolescent IPV prevention programs should offer safe spaces in which to address violence witnessed or experienced by participants during childhood and/or earlier in adolescence. A preliminary adolescent IPV evaluation shows significant improvement in healthy relationship skills when exposure to past violence is addressed (Ball et al., 2012).

As found in this research, maltreatment and sexual abuse during childhood are risk factors for both the perpetration and the experience of future IPV. The taboos and silence surrounding these forms of violence must be broken so that adolescents can seek help, heal from trauma, and stop the intergenerational transmission of violence. For this reason, IPV prevention programming should include outreach around sexual abuse experienced in childhood or adolescence, which is highly underreported and often associated with women's adult IPV experiences (Bott et al., 2012; Barrios et al., 2015). Similarly, parenting programs that address child abuse represent another avenue with the potential to contribute significantly to adolescent IPV prevention (Lundgren & Amin, 2015).

For youth living in high urban violence settings, two sets of opportunities are noteworthy:

- Programs helping youth heal from trauma and develop positive coping mechanisms – such as Youth Living Peace²⁰ in Brazil – are promising examples of comprehensive ways in which to address past exposure to violence along with current relationships.
- Programs focusing more broadly on youth violence in urban settings should also address IPV among adolescents. The need for this is highlighted by this study’s findings that high levels of IPV are often “justified” in relationships involving a gang member, and the frequency among the research participants of relationships in which the male partner was in a drug trafficking gang/*barra*, or had at some point been imprisoned.

3. Adapt to local sociocultural contexts and evaluate school-based adolescent IPV prevention programs in LAC. According to a recent comprehensive review of IPV prevention programs, school-based interventions have shown considerable success in high-income countries, but have not been adapted and evaluated in other settings (Lundgren & Amin, 2015). An IDB-supported school-based intervention and evaluation directed toward adolescent IPV represents an important exception in Mexico (Bautista Arredondo, 2015). The findings of this research underscore the importance of changing norms and behaviors from within school spaces, for the adolescents who are attending school, and of developing interventions in other spaces for those not attending school.

Promundo’s “Entre Nos” (Between Us) is a school-based radio campaign that encouraged dialogue, safe sex, and HIV prevention. Given its popularity and wide reach among adolescents attending the schools in which it was implemented, similar programs addressing adolescent IPV should be considered. Finally, it should be noted that schools can also represent a safe place in which to offer mental health support to young adolescents who have experienced and witnessed violence during childhood – as the previously mentioned Youth Living Peace program does.

4. Encourage communication, conflict resolution, and mediation skills among all adolescents. The importance of strengthening such skills is emphasized by the research findings, according to which adolescents – who praise and idealize trust, respect, and nonviolence in a relationship – in practice struggle to build such trust and resolve tensions peacefully in their own relationships.

20. See <http://promundoglobal.org/programs/youth-living-peace/>

The findings suggest the importance of providing young people with the skills to recognize problems in their relationships and find healthy ways to manage conflict rather than resort to controlling behaviors or violence. Adolescents' ability to assess the health and viability of their relationships should be developed, and services should provide support for adolescents who wish to end relationships safely.

5. Develop and leverage healthy spaces for teens to interact with their peers.

This recommendation is highly important given the prevalence, observed over the course of this research, of social isolation among couples in which IPV occurs, and its identification as a risk factor. Furthermore, the research noted few spaces beyond bars, for example, for youth to spend leisure time (this was especially true in rural communities and those with high insecurity). Outreach to adolescents could focus on spaces like Internet cafés or others that reflect youth social and cultural preferences for music, arts, and sports, providing alternatives to bars. Programming could also be much stronger in fostering *friendships* among adolescents, both boys and girls – including with members of the opposite sex. Doing so not only counters social isolation of the couple, but also addresses an unanticipated finding of this research: that adolescents often see peers as threats rather than as allies. In addition, fostering adolescent friendships promotes a broader social life of which relationships are just one aspect. Interventions that promote healthy spaces for youth should consider working with facilitators, peer mentoring, or peer leaders as mediators in these spaces. These interventions need to evaluate these approaches in encouraging healthy and safe interactions among adolescents.

6. Promote interventions with fathers, mothers, and other family members.

In both countries, adolescents are more likely to seek help from a family member than from services or institutions. Findings from research with African Americans in the same age groups in the U.S. show similar results: youth prefer seeking support around dating violence from older siblings, parents, and friends rather than from formal resources (Martin et al., 2012). This research and other studies point to the importance of a connection with a caring adult²¹ as a protective factor; such caring relationships should be leveraged for preventing adolescent IPV. In this regard, Program P could be adapted for parents and future parents of adolescents in order to prevent IPV.²²

Until services can be improved to the point that they are more accessible and youth-friendly, as well as fully capable of addressing adolescent IPV, family

21. See Capaldi et al., 2012; Cunningham, 2008; Lundgren and Amin, 2015; and Cleveland et al., 2003.

22. Program P is available at the following link: <http://promundoglobal.org/resources/program-p-a-manual-for-engaging-men-in-fatherhood-caregiving-and-maternal-and-child-health/>

members need to be better equipped to deal with adolescent IPV and to strengthen adolescents' resilience. Training must also be provided for other adult figures in young people's lives – such as teachers, coaches, community health workers, and religious leaders – who provide informal support and on whom adolescents may rely more than on formal institutions.

7. **Encourage community norm change.** Community-based interventions focused on the promotion of normative change and gender-equitable attitudes have been shown to prevent adolescent IPV in multiple settings worldwide (Lundgren & Amin, 2015). Among such interventions, of particular interest for the purpose of this research – also given their potential to reach rural areas – are “edutainment” projects (e.g., via radio or television or local campaigns) that promote positive messages and behavior-change through attractive entertainment programming. Such initiatives can promote community involvement in ways that are appropriate to age and culture, as well as stimulating critical reflection.²³ Culturally sensitive bystander approaches should be considered, as well, but adapted and pilot tested for schools and other community settings in culturally appropriate ways.
8. **Develop adolescent-centered advocacy to prevent IPV.** Previous studies have found suggestive evidence that campaigns, together with group education, heighten effects in terms of positive changes toward gender equality, health, and violence prevention measures compared to group education alone.²⁴ By focusing on preventing IPV beginning in early adolescence, social and feminist movements could be more effective in engaging adolescent boys and girls in the fight for gender equality and ending violence against (adult) women. Examples of networks that could elevate the importance of adolescent IPV prevention in their agendas include the MenEngage and MenCare networks, the UNiTE Campaign, Plan's “Because I am a Girl” Campaign, and others.²⁵
9. **Leverage technology and online platforms.** Given the centrality of Facebook use among the participants of this research, campaigns should leverage this and similar social media to disseminate messages around healthy adolescent relationships – including messages that may encourage questioning and critical reflection on Facebook, a mechanism often used to exert control. Gender and sexuality education has also been delivered in Brazil via online teacher-training portals (Nascimento, Fonseca, Bittencourt, 2014).

23. See, for example, community campaigns initiated in Africa such as Soul City and Sasa! from Raising Voices.

24. See Promundo, Instituto PAPAÍ, Salud y Género and ECOS (2013). *Program H|M|D: A Toolkit for Action/Engaging Youth to Achieve Gender Equity*. Promundo: Rio de Janeiro, Brazil, and Washington, DC, USA.

25. Information about these networks can be found in the following links: MenEngage (<http://menengage.org/>), MenCare (<http://men-care.org/>), and UNiTE (<http://www.un.org/en/women/endviolence/>).

Cell phone applications (or “apps”) also hold promising potential. For instance, since youth do not always have friends they can count on in situations of IPV, apps could link young people to safe and confidential online or in-person referrals. However, caution should be used to take into account partners’ monitoring of each other’s cell phones. Hotlines should also be more widely available and advertised as spaces available for adolescents to talk about a wide range of issues about sexuality, sexual orientation, gender, and relationships.

- 10. Train providers to offer services that are accessible, meaningful, and supportive to adolescents.** Based on findings from Brazil and Honduras that suggest low trust and use of appropriate services, communities should begin by assessing *adolescent* use of and barriers to existing providers. These providers include public health and medical professionals specializing in sexual and reproductive health but also community health workers and staff at clinics; psychologists, school counselors, and teachers; social workers; and legal and law enforcement officials. Addressing issues of adolescent access to services must be met with training so these providers understand gender and adolescent relationships, and are able to identify and address IPV including forms of control and coercion. Central elements to these trainings and better serving adolescents include: (1) prioritizing issues of ethics (confidentiality, safety) and trust – via involving adolescents in designing trainings; (2) demonstrating the “value added” to addressing adolescent IPV; and (3) securing institutional and policy leadership support given providers are often underpaid, overworked, and may not be trained to work with neither adolescents nor IPV.

POLICY IMPLICATIONS

Engage policymakers across broad sectors and levels. Adolescent dating violence has previously been the subject of attention, especially among the public health community; however, in order to increase the response to and commitment toward the problem, it is important to engage policymakers and experts in a broader set of sectors such as youth, gender, social welfare, and public security. Intersectoral collaboration at the regional level among UN agencies, the Inter-American Development Bank, NGOs, governments, donors, and universities is also important for a broader response. Regional human rights mechanisms that address violence against women, such as Organization of American States/Inter-American Commission of Women (CIM), could also be engaged in high-level adolescent IPV prevention efforts in the region.

Secure policy commitments for CSE. In both countries, and more broadly in the region, while comprehensive sexuality education (CSE) initiatives are programmatic strategies, unless policy CSE commitments are made at national – or at least municipal and department/state levels – CSE efforts will be limited in terms of their reach and ability to sustain widespread norm change and prevent adolescent IPV. In the LAC region, there have been attempts to commit to CSE, but there are gaps in the enforcement of such policies.²⁶

Policies aimed at preventing violence against adult women should extend to include prevention of IPV against adolescent girls (and boys). Since this research shows adolescents do not seem to associate adult domestic violence policies and institutions with their own lives, policies must be far more accessible to them. Accomplishing this will require the engagement of agencies in Brazil such as *Delegacias Especializada de Atendimento a Mulher* (DEAM, centers for women victims of domestic violence); *Centro de Referencia de Mulher*; and the *Casa da Mulher* in Bahia. In Honduras, the *Fiscalia de la Mujer*, and programs such as Ciudad Mujer, in El Salvador, present key policy opportunities to address adolescent IPV in Central America.

Such policy initiatives should include appropriate budget and implementation guidelines for frontline workers across all relevant sectors (e.g., education, health, public security, etc.). Schools, health centers, prenatal care services, and social-work services should all implement policies and training that improve professionals' ability to address adolescent IPV in safe and non-stigmatizing ways.

Increase adolescents' awareness of policies that protect them. This research suggests a lack of awareness among adolescents of relevant policies, in addition to ineffective implementation of such policies. Parents, health workers, teachers, and other adults who work with adolescents must also increase their awareness of and ability to prevent adolescent IPV. As part of this, policies for domestic violence and child and adolescent protection must be more effectively articulated.

RESEARCH, MONITORING, AND EVALUATION

Improve the development of measures for behavioral outcomes, research designs, and evaluation of programs for adolescent IPV in LAC. While IPV prevention programs are scarce in LAC, rigorous evaluations are even more

26. See, for example, the Declaración Ministerial “Prevenir con Educación,” an evaluation led by the International Planned Parenthood Federation: <https://www.ippfwhr.org/en/publications/evaluaci%C3%B3n-de-la-implementaci%C3%B3n-de-la-declaraci%C3%B3n-ministerial-prevenir-con-educaci%C3%B3n-su>

rare. The lack of evidence, in turn, limits funding and prohibits IPV prevention from taking a more prominent place in policy agendas. A recent exception is a forthcoming evaluation by the IDB of Programs H/M in El Salvador. Across the board, recommendations from major recent reviews (Lundgren & Amin, 2015), the CDC, and major studies stress the need for stronger evaluations and measures for addressing adolescent IPV.

Themes that require further research include controlling behaviors and their relationship to other forms of IPV, the role of education and schooling in prevention and responses to IPV, and the role of peers – both positive and negative – in adolescent IPV. A set of findings from this research suggests links between first sexual experiences and adolescent IPV, and especially between norms around gender and sexuality, and adolescent IPV. Further research could also strengthen the evidence for what the findings suggest may be a potentially critical moment of transition and opportunity for preventing IPV: when adolescents transition from dating to cohabitating, when couple isolation increases.

Further important issues that require research and attention in prevention programs include how IPV is shaped by race, ethnicity, socio-economic status, and sexual orientation; research on LGBTQ adolescent relationships remains invisible in the region. Research gaps remain too, about links between adolescent IPV and urban violence in Brazil, Honduras, and the LAC region – a vital consideration given the prevalence of gang-related violence and homicide in the region.

Lastly, while existing studies focus more heavily on risk factors, further research into how individuals and couples develop resistance, aspirations, and positive deviance – and ways to sustain healthy relationships – could have valuable implications for the region. These forms of resistance must be understood in the context of structural forms of violence and inequalities that affect adolescents' past, present, and future opportunities.

Findings from this qualitative research in Brazil and Honduras deepen the understanding of adolescent IPV, and should be met with future studies and action. Research on the subject will enable designing more effective policies and interventions and gauging their progress. In doing so, governments, organizations, and adolescents themselves can take measurable steps to mitigate IPV risk factors and to promote protective factors for equitable, nonviolent relationships throughout life.

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Annexes

Annex 1:

Risk and protective factors identified in the literature

Table 9.
Risk Factors Identified in the Literature

Community Level		
International Literature	Brazil	Honduras
<p>Gender-inequitable social norms: Harmful gender norms around masculinities and femininities (Deyoung and Zigler, 1994), cultural norms that support aggression toward others (Reeves and Orpinas, 2012) with social influence (Flisher et al., 2007); masculine gender roles associated with increased sexual risk and men's IPV perpetration (Santana et al., 2006)</p> <p>Gang involvement (Ulloa et al., 2012); youth who are exposed to high crime levels (Thornberry et al., 1995); neighborhood violence with gender attitudes and peer and neighborhood norms that support violence (Reed et al., 2011)</p> <p>Poor neighborhood support and cohesion (Capaldi et al., 2012)</p>	<p>Gender-inequitable social norms: Overall, inequitable gender norms are associated with teen IPV (Gómez et al., 2011); inequitable norms in which jealousy, control are considered 'part of a relationship' (Taquette et al., 2003; Silva et al., 2013); hegemonic gender norms; expectations of family members – that favor production or invisibility of violence (Schleiniger, 2013); social norms normalizing violence (Nascimento et al., 2009, 2011) – especially psychological, emotional (Aldrichi, 2004)</p> <p>Living in low-income, marginalized communities/low socioeconomic status of the household – also tied to lower education level (Moraes et al., 2006)</p>	<p>Gender-inequitable social norms: IPV tolerance, i.e., boys and men who justified partner beating perpetrated more physical, psychological, and sexual violence against their partners; attitudes and behaviors that favor machismo (Sierra Rivera, 2013)</p>

Relationship Level		
International Literature	Brazil	Honduras
<p>For both female victimization and male perpetration, the literature identifies as risk factors having friends with delinquent behaviors and friends who approve of and/or experience IPV (Lundgren & Amin, 2015)</p> <p>In a U.K. study, associated factors, both for experiencing and using adolescent IPV, were aggressive peer networks (Barter et al., 2009)</p> <p>Social isolation/lack of social support, associating with delinquent peers (Capaldi et al, 2012)</p> <p>Having peers who use relationship violence (in 6-month study of over 500 adolescents, having only peers who use IPV in their relationships consistently predicted later dating violence (Arriaga & Foshee, 2004)</p>	<p>Age gap, with girls more likely to be sexually coerced by an older partner than men (Moraes et al., 2006)</p> <p>Having peers who are aggressive and previous dating relationships (Oliveira et al, 2014)</p> <p>In contrast to studies on dating aggression among the general youth population (Arriaga & Foshee, 2004) and a study on aggression among street youth (Baron et al., 2007), an increased number of peers who abused dating partners did not predict a greater frequency of abuse in dating conflicts among Brazilian street youth. It is unclear whether witnessing peers use violence toward dating partners exacerbates the effects of adolescent dating victimization on use of adolescent violence among these youth (Antonio et al., 2012)</p>	<p>Gap in educational achievement: the man has a higher education level than his partner (ENDESA, 2013)</p>
<p>For men's perpetration: bullying and homophobic teasing, partner has concurrent relationships (Lundgren and Amin, 2015)</p>	<p>In a large sample of high school students, adolescents (mostly boys) who bullied were more likely to sexually harass (inconclusive for teen IPV) (DeSouza & Ribeiro, 2005); several other international studies show links between bullying and sexual harassment or sexual violence perpetration</p>	
<p>Relationships characterized by power imbalances, relationship conflict (Lundgren and Amin, 2015)</p>	<p>Young women were more likely to report sexual coercion from a 'partner' and men from a female 'friend' in a study of three Brazilian capitals (Moraes et al., 2006)</p>	<p>Women in consensual unions suffered more psychological and physical violence than women in legal marriages (ENDESA, 2013); implications for teen dating violence are inconclusive but suggest women may face more risks in informal dating relationships</p>
	<p>Reciprocal violence, including forms of control (Minayo et al., 2011, Nascimento et al., 2009, 2011)</p>	<p>Reciprocal violence: ENDESA found that when the male partner exerts control over his female partner, he experiences more violence against him (13%) in comparison when he does not exert control over his partner (4%) (p. 279); yet evidence is inconclusive given that Rivera Sierra (2012) only looked at victimization of women ages 15-29 (thus aggregating adolescents with adult women)</p>
<p>Internet, technology used to control (Draucker & Martsolf, 2010)</p>	<p>Internet/technology as a mechanism of control (Instituto Avon & Data Popular, 2014), e.g., by monitoring and exerting control over social media and cell phone use</p>	<p>Rivera Sierra (2013) also mentions the use of technology to excessively monitor the others' cell phone and social media use in dating relationships</p>
<p>Age gap: 75 percent of girls with a "much older" partner experienced physical violence, 80 percent emotional violence, and another 75 percent sexual violence (Barter et al., 2009).</p>		
	<p>Divorced/separated parents; poor parenting practices (harsh discipline, lack of supervision, and low affective proximity) (Lundgren and Amin, 2015)</p>	

Individual Level		
International Literature	Brazil	Honduras
<p>Low educational achievement (Vagi et al, 2013; Lundgren and Amin, 2015); lack of nonviolent social problem solving skills, poor behavioral control/impulsiveness, psychological/mental health problems (Vagi et al, 2013); antisocial personality, belief that violence is justified/tolerable (Lundgren and Amin, 2015); history of violent victimization (Espelage and Holt, 2007)</p>	<p>In a study on sexual coercion, risk factors are lower educational level of the mother and of adolescent boys and girls, but especially of adolescent girls (Moraes et al., 2006); unemployment (Taquette et al., 2003)</p>	<p>Low educational achievement of women/ girls (ENDESA, 2013)</p>
<p>Harmful substance use (Vagi et al, 2013; Lundgren and Amin, 2015; Nowotny & Graves, 2013; Johnson, 2000)</p> <p>Young women who drink heavily, whether infrequently or frequently, have greater odds of experiencing sexual only or sexual and physical IPV compared to abstainers (Waller et al., 2012)</p> <p>Adolescent girls who experience IPV also exhibit other health risk behaviors. According to a representative epidemiologic study (lifetime prevalence of dating violence among U.S. adolescents, controlling for the effects of potentially confounding demographics and risk behaviors): physical and sexual dating violence against adolescent girls is associated with increased risk of substance use, unhealthy weight control behaviors, sexual risk behaviors, pregnancy, and suicidality (Silverman, Raj et al., 2001)</p>	<p>Drug and alcohol use (Taquette et al., 2003)</p>	<p>Substance abuse (men who suffered from alcohol abuse reported more IPV perpetration and victimization in comparison to those who did not consume alcohol; women who suffered from alcohol abuse reported suffering and perpetrating more physical and psychological violence than those who did not) (ENDESA, 2013)</p>
<p>Family-related factors: Family conflict, poor parent-child relationships, witnessing violence (Vagi et al, 2013); Witnessing or being a victim of violence (Lundgren and Amin, 2015)</p> <p>Childhood exposure to violence is a consistent predictor of involvement in relationships with IPV for both males and females (referring to dating violence among adolescents and college students in the US) (Gover, Kaukinen & Fox, 2008)</p> <p>Associated factors, both for experiencing and using adolescent IPV included previous experiences of child maltreatment, domestic violence in the family (Barter et al., 2009)</p> <p>Adolescents exposed to marital violence during childhood were more likely to justify the use of violence in dating relationships (Lichter & McCloskey, 2004). However it is also noteworthy that, traditional attitudes about male-female relationships and justifying relationship violence were associated with higher levels of adolescent IPV perpetration regardless of marital violence exposure. The ways in which adolescents perceived intimate “dating” relationships was more important than whether they witnessed marital violence in childhood (Lichter & McCloskey, 2004).</p>	<p>Family-related factors: Witnessing inter-parental violence (Vaz, 2012); Verbal aggression from the mother and father; and psychological violence among parents, siblings, circularity of violence (Oliveira et al., 2014)</p> <p>Models of relationships from families of origin in which aggression is seen as inherent to relationships (Aldrighi, 2004)</p>	<p>Family-related factors: Family attitudes and behaviors that are unequal and/or justify violence (i.e., authoritarianism, patriarchy, punishment, unidirectional respect and others in which masculine ideals and values are valued over feminine ones) (Rivera Sierra, 2012); inter-family (ENDESA, 2013)</p>
	<p>Low tendency to seek help (Soares et al., 2013; Minayo et al., 2011)</p>	<p>Low help-seeking proclivities: only 5% of girls aged 15-19 reported IPV to the police or an authority (compared to 30% of women aged 45-49 – no data reported on boys/men and help-seeking) (ENDESA, 2013)</p>
<p>For victimization of women: young age, low socioeconomic status (Lundgren and Amin, 2015); older age and having children (Instituto Nacional de la Juventud, 2013); Being a race other than white (Foshee et al., 2001)</p>	<p>Risk factors according to a study on sexual coercion: Female sex (girls are also more likely to experience a first experience of sexual coercion or abuse at a younger age compared to boys, and by older men); being a race other than white (Moraes et al., 2006)</p>	<p>Age: girls aged 15-19 years more likely to have suffered physical and psychological violence within the past 12 months (cumulatively, older women were more likely to have ever experienced violence since age 15) (ENDESA, 2013)</p>
<p>Risky sexual practices (Lundgren and Amin, 2015); among adolescent girls - sexual risk behaviors (e.g., first intercourse before age 15 years, pregnancy (Silverman, Raj et al., 2001)</p> <p>Dating violence was directly associated with risky sexual behaviors among sexually experienced adolescent girls, particularly non-white girls, in a US study (Alleyne-Green et al., 2016)</p> <p>For women’s victimization: forced, unwanted sexual initiation and risky sexual behaviors (Lundgren and Amin, 2015); other studies show similar results (Silverman & Raj et al., 2001; Bott et al., 2012; Boafó et al., 2014)</p>		

Table 10.
Protective Factors Identified in the Literature

Community Level		
International Literature	Brazil	Honduras
Equitable gender norms, according to Promundo studies and others	Gender equity (according to logistic regression modeling in a study on teen IPV) (Gómez et al., 2011); addressing gender norms, or femininities and masculinities (characteristics and expectations associated with “being a woman” and “being a man” at a societal level more generally (Minayo et al., 2011)	
Attachment to one’s school (Vagi et al., 2013), feeling a sense of attachment/commitment to school (Capaldi et al., 2012; Cleveland et al., 2003)		
Organized communities that support their youth (Champion et al., 2008); Community-based educational activities that increase women’s knowledge of legal and social rights (Morrison, 2004)	Community work that contributes to the development of adolescents’ “negotiation” skills in conflict situations, and partnerships between schools/teachers and health services (Soares et al, 2013); Health services along with schools, families and community and integrated education projects - tied to potential protective factors, or spaces in which to address the trivialization and naturalization of violence in dating relationships (Nascimento, 2009; Silva et al, 2013; Oliveira et al, 2014; Soares et al., 2013; Schleiniger, 2013); basic health care services as a strategic space in which to support adolescents (Soares et al., 2013)	
Policies: national plans on violence against women (Morrison, 2004; Lundgren and Amin, 2015)		Presence of NGOs that address women’s rights (Rivera Sierra, 2012)

Relationship Level

International Literature

Family support/connectedness to a caring adult (Capaldi et al., 2012; Cunningham, 2008; Lundgren and Amin, 2015; Cleveland et al., 2003); positive relationship with one's mother (Cleveland et al., 2003); positive parenting and parental monitoring (Tharp et al., 2013); good relationships with parents (Vagui et al., 2013)

Girls avoid conflict in their relationships when they assess as negative, conflict between their parents (Simon & Furman, 2010).

Adolescent girls with fathers who are present may be more confident and self-assured in their sexual relationships. Children and adolescents whose fathers are engaged in their lives are also more likely to have higher self-esteem, to have healthy, positive peer relationships, to be well-adjusted and to feel greater life satisfaction (Levtov et al., 2015; Allen & Daly, 2007; Carlson, 2006; Flouri & Buchanan, 2003). Fathers' involvement is associated with positive sexual behaviors, which are associated with decreased experiences of dating violence (Alleyne-Green et al., 2016)

Association with pro-social peers (Capaldi et al., 2012); Strong social networks (Borowsky et al., 1997; Browning, Leventhal, & Brooks-Gunn, 2005)

Brazil

Recognizing/addressing the normalization of, or "consent" to types of (under-recognized) violence in dating relationships (Minayo et al., 2011)

Honduras

Individual Level

International Literature

Skills in solving problems nonviolently (Foshee et al., 2004); high cognitive dissonance about using teen IPV (i.e., the protective factor is when adolescents who perpetrated dating violence *recognized* that what they were doing was wrong) (Schumacher and Smith Slep, 2004); high empathy (McCloskey & Lichter, 2003); emotional well-being (Borowsky et al., 1997), strong communication skills (Gardner & Boellaards, 2007); recognition of alternative ways to resolve conflicts other than using violence (not just rejecting violence) (Caridade et al., 2012)

Good academic performance (Borowsky et al., 1997; Vagui et al., 2013); better grade-point-average, and higher verbal IQ (Cleveland et al., 2003)

Brazil

Relationship skills including social skills, interpersonal and emotional skills, identity and resilience, and how to identify abusive behaviors (Murta et al, 2013a,b); use of dialogue to resolve conflicts (Soares et al, 2013).

Honduras

High educational attainment reported for women/girls as associated with experiencing lesser IPV (ENDESA, 2011).

Additional Discussion of Themes in the Literature

COMMUNITY LEVEL

Gender Norms

Research demonstrates the ways in which social norms related to gender shape behaviors around relationships and influence outcomes related to sexuality, violence, health, education, child marriage, and other factors influencing adolescent relationships (see Bicchieri et al., 2014; Mackie, 2015; Markus & Harper, 2014). Inequitable gender norms have a positive association with adolescent IPV risk (and vice-versa with equitable norms), rendering the understanding of norms an essential aspect of this research. By shaping gender roles and expectations around girls' and boys' identity and sexuality, gender norms can play a key role in supporting or countering adolescent IPV. For instance, research on adolescent IPV among Puerto Rican youth finds that youth justify violence by associating it with beliefs about gender roles and sexuality, and conform to gender norms such as those that privilege heterosexual male dominance (Asencio, 1999).

Even though adolescent IPV affects both sexes, there are marked gendered differences between young women's and young men's experiences and risks related to IPV:

Adolescent girls are more at risk of experiencing sexual violence than boys are (Halpern, 2001), and, in general, of becoming victims of dating aggression (Oleary et al., 2008), engaging in physical force in self-defense, and being seriously injured (Hickman et al., 2004; Davis, 2008; Silverman, Raj et al., 2001). They are also more likely to be killed by a partner than are males. According to Foshee and colleagues (2001), among females, having friends who are victims of dating violence, using alcohol, and being of a race other than white predicted dating violence perpetration. Female victimization of IPV was found in a major review of the literature to be associated

with low socioeconomic status, risky sexual practices, forced/unwanted first sex, young age, marital status, and depression (several authors in Lundgren & Amin, 2015).

In a U.K. study on adolescent IPV, in some cases, girls were unsure if their partner's behavior was caring concern or "coercive control." Many girls, however, feared their partner's reaction and therefore did not challenge the partner's behavior; boys did not experience this fear and ignored their partner's attempts at control or ended the relationship. Importantly, in the same study, control often resulted in isolation from peer networks (Barter et al., 2009), with girls reporting direct or overt forms of abuse more frequently than boys. The findings of this research suggest similar wide-reaching implications of controlling behaviors.

Adolescent boys are more likely to perpetrate IPV in association with the following factors: antisocial personality, bullying and homophobic teasing, low academic achievement, and the partner having concurrent relationships (Lundgren & Amin, 2015). Male perpetration has also been strongly predicted by holding attitudes that are accepting of dating violence (Foshee et al., 2001).²⁷ Even though IPV directed at females is more common,²⁸ it should be stressed that there is increasing recognition that understanding boys' and men's perpetration and their own experiences of violence are crucial for reducing IPV.

RELATIONSHIP LEVEL

In the existing literature about both Honduras and Brazil, there is an emphasis on the community/societal level of risk factors; less is known, however, about the individual and relationship factors that influence IPV. This research seeks to address this gap.

27. Factors found to present risk for both male perpetration and female victimization are: witnessing or being a victim of violence, violence within family, lack of connectedness with adults, divorced/separated parents or poor parenting (e.g., severe discipline, lack of supervision), belief that violence is justified/tolerable, low education, harmful alcohol and substance abuse, friends with delinquent behaviors/who approve of or experience IPV, relationships with power imbalances, and relationship conflict (several authors in Lundgren & Amin, 2015).

28. Silverman, Raj et al. (2001) cite two U.S. national studies that estimate females are three to six times more likely to suffer IPV than males.

Forced/unwanted sex as risk factors for adolescent IPV and sexual violence

The findings from this research are consistent with evidence from several large-scale reviews and studies that find forced or unwanted first sex to be risk factors for further adolescent IPV (in addition to constituting sexual violence). Lundgren & Amin's review of the literature (2015) finds that forced/unwanted sex, and risky sexual practices in general, are risk factors for female victimization of adolescent IPV, in particular.

According to a 12-country PAHO study in the LAC region, forced and unwanted sexual initiation occurs at early ages for many young women and girls in the region. Brazil is highlighted among countries in which, when given the option of reporting that their first sexual intercourse was unwanted without having to call it "forced", (in the 2008/2009 WHO Multi-country Study surveys), large numbers of women reported that their first intercourse was unwanted (Bott et al., 2012). It should be noted that qualitative research on Mexican young women suggests that women are reluctant to call their first sexual experience "forced" if it took place within a romantic relationship, even when it involved substantial physical or emotional coercion (Marston, 2005).

Studies from other countries show similar trends. Silverman, Raj, and colleagues (2001) find that sexual risk behaviors (e.g., first intercourse before age 15) are associated with physical and sexual dating violence against adolescent girls (after controlling for the effects of potentially confounding demographics and risk behaviors). In another study in Jamaica and Uganda, most girls reported their first sexual experiences to be unpleasant or even painful. They also reported wishing they had known what to expect and wishing they had waited until they were older (Waszak-Geary et al., 2008).

In a South Africa study, adolescent boys and girls, alike, from lower socioeconomic backgrounds, were more likely to be the victims of dating violence as compared to those from a higher socioeconomic background. There was a significant association between girls' self-efficacy for delayed sex and socioeconomic status, but this link decreased with age (Boafo et al., 2014). Finally, other studies show links between early sexual debut and having multiple partners. Having had multiple partners, in turn, was associated with pregnancy only for youth with early

sexual debut (Baumgartner et al., 2009).

Older partner

Throughout the sample, young women and girls – and often their family members – prefer for girls to be with older men for the same reasons cited in recent research on child marriage in the region (Taylor et al., 2015; Murphy-Graham & Leal, 2015): they perceive young men to be vagabonds who want nothing serious, while older men are perceived to have more to offer, especially in terms of financial stability and faithfulness. In a U.K. study, 75 percent of girls with a "much older" partner experienced physical violence, 80 percent experienced emotional violence, and another 75 percent experienced sexual violence (Barter et al., 2009). In a Brazilian study, girls were likewise more likely to suffer sexual violence from an older partner, while when boys suffered violence, it was from someone closer to their age (Moraes et al., 2006).

INDIVIDUAL LEVEL

Friends/peers

For both female victimization and male perpetration, the literature identifies risk factors of having friends with delinquent behaviors and who approve of and/or experience IPV (Lundgren & Amin, 2015).

Some findings on the influence of friends or peers have been ambiguous, i.e., they show negative or positive effects of adolescent IPV. In contrast to studies on dating aggression among the general youth population (Arriaga & Foshee, 2004; Oliveira et al., 2014), and to a study on aggression among street youth (Baron et al., 2007), an increased number of peers who abuse dating partners did not predict a greater frequency of IPV in a study of Brazilian street youth. The study cites the influence of broader aggressive norms in the group, such as using violence to resolve conflicts (Antonio et al., 2012).

Educational attainment

Available data suggest both young/adult women and men with higher education levels are less likely to experience IPV. For example, in Honduras, reporting of abuse decreased from 35 percent among women without education to 19 percent among women with university level education (ENDESA, 2013).

More research is needed to better understand prevention opportunities related to adolescents and girls in school, out of school, and at risk of leaving school. In some cases girls have already dropped out of school when they begin to cohabit, but in others cohabitation may cause them to drop out of school (Murphy-Graham and Leal, 2015).

Witnessing and experiencing childhood/intra-family violence

Ample evidence from the literature shows how witnessing or experiencing violence during childhood predicts adult use and victimization of IPV. For example, in a study on dating violence among adolescent college students in the US, childhood exposure to violence was a consistent predictor, for both males and females, of involvement in relationships with IPV (Gover, Kaukinen & Fox, 2008). In a U.K. study, girls with a history of family violence had an increased likelihood of having an older partner (Barter et al., 2009).

In another study, adolescents who were exposed to marital violence during childhood were more likely to justify the use of violence in dating relationships (Lichter & McCloskey, 2004). However, it is also noteworthy that traditional attitudes about male-female relationships and justifications of relationship violence were associated with higher levels of adolescent IPV perpetration regardless of marital violence exposure. The ways in which adolescents perceived intimate “dating” relationships was more important than whether they witnessed marital violence

in childhood (Lichter & McCloskey, 2004). With some exceptions (Barker et al., 2011, among others), this literature is underrepresented in LAC.

In reference to the role of fathers in particular, international research shows that adolescent girls with fathers who are present may be more confident and self-assured in their sexual relationships. Children and adolescents whose fathers are engaged in their lives are also more likely to have higher self-esteem, to have healthy, positive peer relationships, to be well-adjusted, and to feel greater life satisfaction (Levtov et al., 2015; Allen & Daly, 2007; Carlson, 2006; Flouri & Buchanan, 2003). Importantly for this study, fathers’ positive involvement is associated with girls’ healthy sexual behaviors, which in turn are associated with fewer experiences of dating violence (Alleyne-Green et al., 2016).

Overlapping forms of risk: Race/ethnicity

Studies involving adolescents in the U.S. of African American, Latino, and European descent have found racial and ethnic disparities to be risk factors for IPV (Cheng & Lo, 2016). Similar findings were echoed in a 2006 study in Brazil, which found that non-white adolescent girls are more likely to suffer sexual violence (Moraes et al., 2006), and women of African descent of diverse ages are more likely to suffer from adult IPV (Dossier Mulher, 2015). Analyses of racial and ethnic differences in adult and adolescent IPV are scarce in Latin America and requires further analysis.

Annex 2:

Methodology: Additional discussion

DEVELOPMENT OF RESEARCH INSTRUMENTS

The instrument went through several rounds of revision based on feedback from various members of the research team, as well as the inputs of IDB program officers. It was originally developed in English, and then in Spanish and Portuguese versions in consultation with staff familiar with local language use in these countries.

In order to refine the instrument, data collection began by convening focus groups of experts that work with youth locally in Honduras, and a mixed-sex group of adolescents in Brazil. These focus groups explored the kinds of intimate partner relationships, experiences with IPV, risk and protective factors, and key themes to include in the research.

The instrument was then piloted with five youth and modifications were made. It consisted of the following sections:

- Sociodemographic characteristics
- Types of relationships – descriptions, definitions, and involvement of the interviewee (from dating to marriage)
- Communication
- Controlling behaviors
- Technology
- Decision-making
- Violence: psychological, physical, sexual (experiencing, witnessing, and using)
- Reactions to violence
- Knowledge of/access to services, institutions, and laws

DATA ANALYSIS

After reading the interview transcripts, the research team developed a list of deductive and inductive codes (Miles, Huberman and Saldaña, 2014). The research teams were

in close communication during the development of this code list, and created a code book to ensure that codes were consistently applied to interviews from Honduras and Brazil.

After conducting this first stage coding, a secondary round of coding (Miles, Huberman, and Saldaña, 2014) was conducted to better organize the findings related to key risk and prevention factors. Using the ecological framework, and informed by the preliminary coding of the data, the researchers began to organize and “tag” excerpts of the data that were identified as risk factors at the individual, relationship, and community levels. In a few instances there were findings or subthemes in one context that were not found in another. However, there was a great deal of commonality in terms of the findings, and the secondary round of analysis allowed for probing more deeply into risk and protective factors.

ETHICS AND CONFIDENTIALITY

The subject and location of the fieldwork sites required the research teams to prioritize confidentiality and the security of researchers and interview participants alike. The local research teams and transcribers were trained to not use participants’ real names or identifying data. One participant preferred to not record the interview, and the research team attributed this to local insecurity in a Rio de Janeiro community; this interviewee was included in the sample and in the analysis.²⁹

As described in the methodology section, close attention was paid to foster trust and safety during fieldwork. For example, the interviewers privileged the time and place that adolescents preferred to be interviewed (always in their own communities); emphasized confidentiality, consent, and developing rapport before and throughout

29. The original paper sociodemographic portion is kept in locked cabinets at local partners’ offices, and copies in storage at Instituto Promundo’s office in Rio de Janeiro, and at ESA Consultores in Tegucigalpa. Questionnaires are kept in locked cabinets for a maximum of five years at Instituto Promundo, following institutional procedures for data handling and storage.

the interviews; and engaged in on-going communication with the research coordinators in order to improve approaches if unanticipated challenges arose. Interviewers also reiterated that participants could skip or refuse to answer any question about which they did not feel comfortable (especially before or after sensitive or difficult issues arose), or they could take a break.

Interviewers were Brazilian and Honduran, respectively, and in their 20s and 30s rather than much older than participants, which the team believes contributed in this case, toward the sense of talking to a well-qualified but slightly older “peer” rather than an “adult authority.” Importantly, they were not from the immediate communities/ neighborhoods in which participants lived.

Interviewers were trained to say that they could not report cases of violence (in order to protect confidentiality), but could suggest health centers or other services if interviewees wished to contact services on their own and they could provide a resource sheet. Interviewers were also instructed to report immediately to their field supervisors who in turn should report to the research coordinators if they encountered a situation that would require a response, as to not have to decide what to do on their own. The small size and qualitative interview experience of the team, their commitment to this fieldwork, and building interview skills through practice and pilots, were also important in terms of ethics and quality of the study results.

The researchers were trained to use unique codes in order to de-identify the sociodemographic portion, audio files, and transcriptions alike. Only the immediate research coordinators have access to both the transcribed qualitative data and the locked paper quantitative portions.

RESEARCH CHALLENGES AND LIMITATIONS

Recruitment of both adolescent girls and boys, but especially boys, was one of the main challenges to the research. The teams adjusted the sample to conduct additional interviews with boys given early fieldwork showing a trend that girls reported suffering from violence, yet boys did not often reveal that they had used violence.

Security also posed challenges, especially in both urban sites, introducing limitations on when fieldwork could be conducted and how to enter communities. Logistics were especially difficult in Brazil. For example, for reasons related to security (including drug faction domination and consequent fear of or unfamiliarity with entering certain parts of a community) and social divisions within favelas, conducting interviews in one given space was insufficient for reaching out to the broader community. Thus, the research team conducted interviews at different sites. In some communities it was difficult to find quiet, private spaces to conduct the interviews.

In terms of the interview process, even after reviewing and piloting, some terms in the instrument may have been difficult to understand and required further explanation from the interviewer. Interviewers were trained to provide common explanations of any terms as necessary and to never induce language or definitions.

The long instrument left some interviewees tired, leaving less time for probing. Along the same line, descriptions of informal relationships are not abundant since interviewees always were asked to focus on the important (formal or longer) and current relationships. There is therefore more data on these relationships and less on casual relationships such as “flings.” Moreover, it was difficult to obtain information on multiple partners when the respondent had had many relationships. Furthermore, in retrospect, including additional information on schooling and educational experiences (as opposed to just number of years completed) might have provided a useful additional lens through which to understand IPV.

Finally, while this is a large sample for a qualitative study, the researchers cannot make any definitive claims about patterns in the association of IPV with age, educational level, rural versus urban location, income, ethnicity, etc. Nevertheless, this qualitative research provides insights and themes that will inform future quantitative and qualitative work on adolescent relationships.

