

## ASSOCIATION BETWEEN INTRAFAMILY VIOLENCE AND BULLYING IN SCHOOL ADOLESCENTS ASSOCIAÇÃO ENTRE VIOLÊNCIA INTRAFAMILIAR E BULLYING EM ADOLESCENTES ESCOLARES ASOCIACIÓN ENTRE VIOLENCIA INTRAFAMILIAR Y BULLYING EN ADOLESCENTES ESCOLARES

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### ABSTRACT

**Objective:** to estimate prevalence of intra-family violence and its association to bullying among teenagers of a public school located in Salvador, Bahia, Brazil. **Materials and method:** cross section type investigation. Data collection was with 239 students using standard form. Data were processed in Stata 12 software. **Results:** there was an association between living intra-family violence (general and psychological) and high risk to direct bullying (prevalence ratio = 1.89 and confidence interval, 95 % = 1.11-3.21; prevalence ratio = 2.76 and confidence interval, 95 % = 1.57-4.85), relational (prevalence ratio = 2.59 and confidence interval, 95 % = 1.49-4.49; prevalence ratio = 2.89 and confidence interval, 95 % = 1.64-5.09) and victimization (prevalence ratio = 2.02 and confidence interval, 95 % = 1.19-3.43; prevalence ratio = 3.10 and confidence interval, 95 % = 1.71-5.64). **Conclusion:** the association between living intra-family violence and bullying shows the need of prevention strategies, mainly mixing health and education areas.

**Keywords:** Adolescent; Domestic Violence; Bullying; Education.

### RESUMO

**Objetivo:** estimar a prevalência de violência intrafamiliar e sua associação com o bullying em adolescentes de uma escola pública de Salvador, Bahia, Brasil. **Materiais e método:** estudo do tipo corte transversal. A coleta de dados, com 239 discentes, se deu por meio de formulário padronizado. Os dados foram processados no Programa Stata versão 12. **Resultados:** verificou-se associação entre a vivência de violência intrafamiliar (geral e psicológica) e o alto risco para o bullying direto (RP = 1,89 e IC95%: 1,11 - 3,21; RP = 2,76 e IC95%: 1,57 - 4,85), relacional (RP = 2,59 e IC95%: 1,49 - 4,49; RP = 2,89 e IC95%: 1,64 - 5,09) e vitimização (RP = 2,02 e IC95%: 1,19 - 3,43; RP = 3,10 e IC95%: 1,71 - 5,64). **Conclusão:** a associação entre vivenciar violência intrafamiliar e bullying sinaliza para a necessidade de estratégias de prevenção, sobretudo a partir da articulação entre os cenários da saúde e da educação.

**Palavras-chave:** Adolescente; Violência Doméstica; Bullying; Educação.

### RESUMEN

**Objetivo:** estimar la prevalencia de la violencia intrafamiliar y su asociación con el bullying en adolescentes de una escuela pública de Salvador, Bahía, Brasil. **Materiales y método:** estudio transversal. La recogida de datos se realizó con 239 estudiantes por medio de un formulario estándar. Los datos se procesaron en el Stata, versión 12. **Resultados:** se encontró asociación entre la experiencia de la violencia intrafamiliar (psicológica y general) y el alto riesgo de bullying directo (RP = 1.89 y IC95%: 1.11-3.21; RP = 2,76 y el IC 95%: 1.57-4.85), relacional (RP = 2.59 y IC95%: 1.49-4.49; RP = 2.89 y IC95%: 1,64-5.09) y victimización (RP = 2.02 y IC 95%: 1.19-3.43; RP = 3.10 y IC95%: 1,71-5.64). **Conclusión:** la asociación entre la violencia intrafamiliar y el bullying indica la necesidad de estrategias de prevención, especialmente de articulación entre los campos de salud y educación.

**Palabras clave:** Adolescente; Violencia Doméstica; Acoso Escolar; Educación.

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## INTRODUCTION

Domestic violence and bullying are a reality experienced by many adolescents and represent an important public health problem. Considering that its repercussions, generally mentioned in studies focusing on only one problem and they are serious, we report the damages from the association between these violence.

Regarding the violence in the family context, 6.5 million Brazilian children and adolescents are affected annually by domestic violence.<sup>1</sup> This context is based on the understanding that the family has a natural and fundamental nucleus of society to protect children and ensure their physical and emotional security as their greatest potential, as proclaimed by the *Estatuto da Criança e do Adolescente* (ECA).<sup>2</sup> In this sense, this legal provision gives the school the scenario for protection of children and adolescents, and teachers should be sensitive for the identification of violence, such as intrafamily violence and bullying.

Characterized as a systematic intimidation by physical or psychological violence, bullying is shown through physical and/or verbal aggression, which may be direct or indirect.<sup>3</sup> Direct bullying is among the main classifications, which includes physical acts and verbal aggression; the indirect is characterized by the exclusion of the victim from their relationship group and hindering to establish new friendships; and victimization is related to aggressive actions that participants have been targeting.<sup>4</sup> The World Health Survey conducted in schools in 16 developing countries found that the proportion of school-age children who reported bullying in 30 days before the interview ranged from 20 to 65%.<sup>5</sup>

Regardless the space where violence takes place, in the family and/or school, it can have serious implications for the development, health and learning capacity of those who are exposed. Although the production of knowledge is limited to a particular event, bullying or intrafamily violence and the problems associated with such experiences usually consist of headache, abdominal pain, insomnia, difficulties in establishing interpersonal relationships, aggression, anxiety, depression, thoughts and suicide, absenteeism, and low school achievement.<sup>5,6</sup>

International data associate the experience of intrafamily violence in childhood to future risk behaviors such as use of tobacco, alcohol and other drugs, as well as unprotected sexual experiences with high risk for sexually transmitted infections (STIs) and unwanted pregnancies.<sup>6</sup> The impact of violence on the country's economy are also important to highlight. It is estimated that the costs of violence against children and adolescents in the world can reach seven trillion dollars a year, a figure considered well above what is necessary to prevent most of these acts.<sup>7</sup>

Based on these repercussions of intrafamily and school violence on the life of adolescents, it is important to know the relationship between them to fill the gaps in knowledge about the association between these phenomena. State-of-the-art

survey carried out in the Regional Portal of the Virtual Health Library based on the association between the descriptors "domestic violence" and "bullying", evidenced only four publications that investigated this relationship, which studies that deepen this discussion. These data may be useful for thinking about coping strategies, especially in the school environment.

Thus, the visibility of these phenomena is urgent to offer elements that guide school spaces for the recognition and actions of violence prevention in schoolchildren. Given the magnitude of violence against adolescents and understanding the vulnerability of this group to violence in the family and school context, the question is: is there an association between intrafamily violence and adolescents' bullying? Thus, the study aims to verify the association between intrafamily violence and bullying by adolescents of a public school in Salvador, Bahia, Brazil.

## METHODOLOGY

This is a cross-sectional study, research modality known as instantaneous cut. It describes a situation or phenomenon that occurs in a given temporal cut, observing the exposure and the illness/grievance at the same historical moment. Given its effectiveness in establishing relationships among the studied variables, this method identifies the association between intrafamily and school violence, as the main objective of this research.

This research is linked to an "umbrella" project entitled "University and public school: looking for strategies to face the factors that interfere in the teaching/learning process", under the auspices of the *Fundação de Amparo à Pesquisa do Estado da Bahia* (FAPESB).

A total of 239 students from a public school located in a suburb of the city of Salvador, Bahia, Brazil, participated in the study. A stratified sample plan proportional to the number of students per class was performed, with a minimum sample size of 210 students to represent the institution, with a maximum sampling error of 2.35%. In each class, the minimum of students suggested by the sample plan was included in the study. The following inclusion criteria were used: being a student regularly enrolled in school; and be in the age group classified as adolescence according to the Ministry of Health, that is, from 10 to 19 years old. The adolescents who missed classes for two consecutive times on the corresponding collection days were excluded. The sample of 239 students was the result.

The public school chosen as the place of the study is a partner institution of EE-UFBA, where the *Ação Curricular em Comunidade e em Sociedade* (ACCS) has been developed called "An interdisciplinary and transdisciplinary approach to health problems related to violence". This curricular component has the objective of instrumentalize undergraduate students from different areas of knowledge, from the teaching-re-

search-extension integration to the recognition of situations of violence as a cause associated with problems/health problems. This linking favored the rapprochement with adolescents.

The data collection was held from a structured form, developed to meet the “umbrella” project, composed of six blocks, which include socio-demographic and economic variables, sexual and reproductive health, alcohol and drug use, bullying and history of intrafamily violence. Regarding the objectives of the study in question, the experience of intrafamily violence was adopted as an independent variable. This variable was categorized into general violence (having experienced any form of manifestation of violence), psychological violence (cursing, humiliations), physical violence (pinching, slapping, kicking, punching, stabbing, shooting, burning) and sexual violence (stressed or forced to have sex).

The experience of bullying was chosen as a dependent variable, categorized as direct aggression, relational aggression, and victimization. For this classification, the *Escala de Vitimização e Agressão entre Pares* (EVAP), an instrument developed in Brazil to investigate the aggression between peers in the school context, was used. EVAP contains 18 questions distributed in four dimensions. The dimension of direct aggression includes forms of physical aggression (pushing, kicking, punching), verbal aggression (provoking, threatening, cursing), and a form that shows the participant’s response in back-and-forth attacks (hit back). In the relational dimension, there are behaviors that impair the victim’s relationship with a group of equals, such as: exclude, nickname, depreciate and encourage fighting. Victimization includes the aggressive behaviors of which the participants were targeted.

The mentioned items were evaluated based on five points, measuring the frequency of the behaviors studied (never, rarely, sometimes, always and usually, scored from one to five, respectively) of the 18 items contained in the instrument. The sum of the scores was grouped with a cutoff of the 40<sup>th</sup> and 60<sup>th</sup> percentiles. These percentiles allowed categorizing the dimensions into three levels: low risk (dimension  $n \leq 40^{\text{th}}$  percentile value); mean risk (dimension  $n >$  than the 40<sup>th</sup> percentile and  $< 60^{\text{th}}$  percentile); and high risk (dimension  $n \geq$  than the 60<sup>th</sup> percentile value). This latter was chosen as a parameter for this study since we considered it more likely to experience violence.

The data were collected between October 2014 and January 2015. Because it was an extensive form, it was necessary to apply the interview as a data collection technique, occurring individually and in a private place, performed by the researcher and by the Nursing students linked to the Group of Studies “*Violência, Saúde e Qualidade de Vida*” properly trained.

The data were organized in the Microsoft Excel 2007 program and later transported to the Stata program version 12, software used for statistical analysis. The descriptive data were reported as frequencies and percentages, except for the age

variable, for which the central tendency measure was used. The magnitude of the association between the dependent and independent variables was expressed in the prevalence ratio (PR) and their respective 95% confidence intervals (95% CI).

The research was approved by the Research Ethics Committee of the *Escola de Enfermagem* of the *Universidade Federal da Bahia* (CEP/EEUFBA), under the consubstantiated opinion n° 384208. The ethical and legal principles in Resolution 466/2012 of the *Conselho Nacional de Saúde* (BR) were respected. All adolescents who participated in the study signed the Free and Informed Assent Term and their legal guardians signed the Term of Free and Informed Consent.

## RESULTS

The sample was characterized by individuals with a mean age of 14.1 years old (standard deviation 1.5); most were men (53.97%), self-declared blacks (76.57%) and attended between the sixth and ninth year of elementary school. Of them, 60.67% (145) reported a history of intrafamily violence.

From the type of manifestation of violence, it was observed that the total number of adolescents interviewed, 49.37% (118) experienced physical violence, 31.38% (75) psychological violence and almost 2% (4) sexual violence, and in this, the main victims were female. Concerning the high risk of experiencing school violence, the study identified that 45.61% (109) of the students presented a high risk for direct aggression, 43.51% (104) for relational violence and 55.23% (132) for victimization.

On bullying specifically the direct aggression type, bivariate analysis (Table 1) revealed a positive and statistically significant association between the experience of intrafamily violence (general violence) and the high risk of this kind of bullying (PR = 1.89 and 95% CI: 1.11-3.21). The prevalence of high risk for this condition in adolescents with a history of intrafamily violence was 51.72%. Experiencing intrafamily violence increases the chance of practicing this type of bullying by 89%.

In the type of manifestation of violence, the psychological form is also associated, with statistical significance, with a high risk for direct aggression (PR = 2.76 and 95% CI: 1.57-4.85). Adolescents with a history of psychological violence have 2.76 more chances to practice direct bullying when compared to those who do not have a history of this violence. It is noteworthy that 50.85% (60) of adolescents with a history of intrafamily violence of the physical type reported a high risk for direct aggression. Half of the students (2) with reports of sexual violence also presented high scores for aggression.

Regarding the aggression, the relational form showed a prevalence of 52.41% in the adolescents with reports of intrafamily violence (Table 1). Adolescents with a history of intrafamily violence have a chance of 2.59 times more to practice this disease.

Table 1 - Association between bullying (direct and relational) by adolescents and the manifestations of violence. Salvador, Bahia, 2015. (n= 239)

VARIABLES	N Total	High risk for direct aggression	Prevalence ratio (PR) CI (95%)	High risk for relational aggression	Prevalence ratio (PR) CI (95%)
<b>General violence</b>					
Yes	145	51.72	1.89 (1.11-3.21)	52.41	2.59 (1.49-4.49)
No	94	31.13	1	29.79	1
<b>Psychological violence</b>					
Yes	75	62.67	2.76 (1.57-4.85)	61.33	2.89 (1.64-5.09)
No	164	37.80	1	35.37	1
<b>Physical violence</b>					
Yes	118	50.85	1.52 (0.91-2.53)	49.15	1.57 (0.94-2.63)
No	121	40.50	1	38.02	1
<b>Sexual violence</b>					
Yes	4	50.00	1.19 (0.16-8.63)	75.00	3.98 (0.40-38.82)
No	235	45.53	1	42.98	1

Source: collection of survey data.

\* Prevalence ratio.

These variables were positively and statistically significant (PR = 2.59 and 95% CI: 1.49-4.49). Regarding the forms of manifestation of violence, there is a positive association between the history of physical violence and high risk for relational aggression (PR = 1.57 and 95% CI: 0.94-2.63). It is also worth noting that 75% (3) of the individuals reporting sexual violence had high scores for bullying of this type. Another positive and statistically significant association was found between the psychological expression of violence and the high risk for relational bullying (PR = 2.89 and 95% CI: 1.64-5.09). The chances of practicing relational bullying were almost three times higher in adolescents with a history of psychological violence compared to those who did not.

Regarding the victimization, the data revealed that suffering general intra-family violence (PR = 2.02 and 95% CI: 1.19-3.43) or experiencing psychological violence (PR = 3.10 and 95% CI: 1.71- 5.64) is a factor associated with a high risk of victimization (Table 2). The prevalence of victimization in adolescents with a history of general and psychological violence was 62.07% and 73.33%, respectively. Experiencing psychological violence increases the possibility of bullying by more than three times. The experience of physical violence (PR = 1.59 and 95% CI: 0.95-2.65) and sexual violence (PR = 2.46 and 95% CI: 0.25-24.05) was also positively associated with high risk for this problem. Most of the students with a history of physical (61.02%; 72) and sexual violence (75%; 3) had a high risk of victimization.

Table 2 - Association between bullying (victimization) by adolescents and manifestations of violence. Salvador, Bahia, 2015. (n= 239)

Variables	N Total	High risk for victimization	Prevalence Ratio (PR)	CI (95%)
<b>General violence</b>				
Yes	145	62.07	2.02	1.19-3.43
No	94	44.68	1	
<b>Psychological violence</b>				
Yes	75	73.33	3.10	1.71-5.64
No	164	46.95	1	
<b>Physical violence</b>				
Yes	118	61.02	1.59	0.95-2.65
No	121	49.59	1	
<b>Sexual violence</b>				
Yes	4	75.00	2.46	0.25-24.05
No	235	0.93	1	

Source: collection of survey data.

\* Prevalence ratio.

## DISCUSSION

This study found a high prevalence of intra-family violence in adolescents (60.67%). A similar percentage was evidenced in a research that in the Brazilian state of Pernambuco almost 60% of the victims of all reports of intra-family violence cases corresponded to people aged zero to 19 years old.<sup>8</sup> At the international level, a research also showed a lower percentage, reporting that 50% of adolescents between 15 and 19 have experienced some kind of family violence.<sup>9</sup>

In an epidemiological study conducted with 984 adolescents from Recife, Pernambuco, Brazil,<sup>1</sup> the physical manifestation of violence was more prevalent than the psychological one, a finding similar to this study. This situation was also verified in another national survey, whose results showed 24,654 visits in the *Sistema Único de Saúde* (SUS) due to cases of violence against adolescents, with physical violence in 59.6% of the cases.<sup>1</sup>

This way of expression of violence may have been more prevalent among adolescents since it is a practice commonly used as an educational method. A qualitative research reveals the use of physical violence as an attempt to keep children within desirable behavioral patterns.<sup>10</sup> A study carried out in Cuba corroborates the use of violence as an attempt to educate children, noting that it is not limited to physical form.<sup>11</sup> Another hypothesis related to the greater reference of this form of expression by the adolescents may be associated with physical aggression that is more easily identified as violence, especially since it leaves visible marks on the body. This hypothesis is corroborated by another international study.<sup>12</sup>

Unlike physical aggression, the psychological violence does not always leave apparent injuries, which means that the losses resulting from the experience of this type of violence are not observed instantaneously.<sup>13</sup> Thus, due to its silent nature, this aggravation is more difficult to detect. This may explain the lower reference and lower prevalence (31.38%) of this form of violence expression.

Although less frequently, the prevalence of psychological violence found in this study was greater than in other national surveys.<sup>8,13</sup> This type of violence can be expressed in the form of rejection, depreciation, discrimination, disrespect, excessive collection and humiliating punishments and it is any action that endangers the self-esteem, identity, or development of the child or adolescent.<sup>8</sup> The use of psychological violence is also frequently used as a form of intimidation for sexual violence.<sup>14</sup> In our study, this type of violence had a prevalence of approximately 2.0%, similar to a survey of 691 adolescents from public schools in Rio Grande do Sul, Brazil (2.1%).<sup>15</sup> In the sexual violence, the importance of considering that this expression is still quite veiled, as reported in research in Brazil and in other countries.<sup>16,17</sup>

The study identified the association between the experience of bullying and intra-family violence. When dealing specifi-

cally with the condition of bullying, the experience of violence increased the chance by up to 2.59 times, and this risk is even greater in case of psychological violence. A cross-sectional population-based survey of more than 100,000 students from public and private schools in Brazil identified a 2.54-fold higher risk of bullying with adolescents in a history of intra-family violence.<sup>18</sup>

Also, the prevalence of high-risk was higher than 40%, a higher percentage than in a survey conducted with 109,104 students from Brazilian schools, whose percentage of aggression among peers was 20.8%.<sup>19</sup> This prevalence was even higher among adolescents with a history of intra-family violence, equivalent to 62.67 and 75.00% in the psychological and sexual violence, respectively.

In the victimization, the prevalence of high risk for this condition (55.23%) was lower than in a study carried out with 465 students from Porto Alegre, Brazil (67%).<sup>20</sup> However, it was much higher than a national survey on school health, with a percentage of 7.2% of victimization among the adolescents interviewed.<sup>19</sup> It is noteworthy that, in the variable of violence, this prevalence was more significant, reaching 75% among adolescents with a history of sexual and 73.33%, psychological violence.

Even in the variable violence, the high risk of victimization increases by up to 3.10 times. The strength of association is greater between this and the experience of psychological violence, a value close to a Brazilian study (2.65 times).<sup>21</sup> Research conducted in all Brazilian capitals also points to the association between intra-family violence and victimization among pairs. The final model of the multivariate analysis identified a 3.37-fold higher chance of victimization in individuals reporting violence in the last month.<sup>22</sup> It must be considered that this victimization has caused a number of physical-psycho-social changes in this people. The main repercussions of the experience of bullying for adolescents are physical injuries, psychic illness, suicide, school indiscipline, and learning deficit.

Regardless of the roles, whether of victim, aggressor or victim/aggressor, situations of bullying compromises the quality of life of adolescents. In order to seek strategies to deal with this problem, there is already a movement at the national level, consolidated by Law 13.185, of November 6, 2015, instituting the *Programa de Combate à Intimidação Sistemática* (bullying), with the purpose of preventing and combating this kind of intimidation throughout society.<sup>3</sup>

In this sense, the articulation with the *Programa Saúde na Escola* (PSE) becomes essential, since it is proposed the promotion of health and the culture of peace through integration between health professionals and education.<sup>23</sup> Included in this Program, the nurse can act directly in school institutions for the diagnosis of bullying, intra-family violence and other social contexts of vulnerability, as well as in the identification and planning of specific interventions.<sup>24,25</sup> These should be aimed at groups exposed to violence and should be prioritized adolescents who experience both injuries.

Thus, by highlighting the interrelationship between the experience of intra-family violence and bullying, the study contributed to the production of knowledge about a topic that is not very discussed. Such findings may support actions aimed at raising awareness about the seriousness of the problem for health professionals, especially nurses, because of the opportunity for more frequent contact with adolescents. Thus, the insertion of the subject in the curricula of the undergraduate courses and in the in-service training proposals is urgent.

As a result of the study design, the research is limited since the associations found do not show a causal relationship. Although adolescents with a history of intra-family violence tend to reproduce the disease in other social spaces, like school, there is a need for research that contemplates this gap.

## CONCLUSION

The study identified an association with statistical significance between the experience of intra-family violence (general and psychological) and the high risk for direct, relational and victimization bullying. It was also identified a positive association between physical and sexual expressions with high risk for these diseases but without statistical significance.

The study offers subsidies for the sensitization of professionals regarding the association of the experience of intra-family violence and bullying by schoolchildren, as well as for the recognition of the adolescents who experience the disease, even isolated. In this process, health and education professionals stand out, especially when they are included in the SHP, a government strategy that seeks to promote actions for a culture of peace and not violence, based on the articulation between Family Health and schools.

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