

Factors associated with adolescents' perception of four types of domestic violence in Honduras/Central America during the COVID-19 pandemic.

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Abstract

Introduction: The confinement measures applied during the pandemic brought as a consequence an increase in domestic violence, this problem has not been investigated from the perspective of adolescents in Central America.

Objective: To determine the factors associated with adolescents' perception of four types of domestic violence in Honduras during the COVID-19 pandemic.

Methodology: Cross-sectional analytical study, secondary database, inquired about the perception of four types of domestic violence during the highest peak of the first wave of the pandemic. A multivariate analysis including socio-familial variables was performed, and descriptive and analytical results were obtained.

Results: Of the 3272 young people surveyed, verbal violence was associated with a basic educational level ($p < 0.001$), alcohol consumption ($p < 0.001$) and that the father ($p = 0.040$), mother ($p < 0.001$) or siblings ($p < 0.001$) had suffered violence at home. For psychological violence, the father ($p = 0.031$), the mother ($p < 0.001$) or the siblings ($p < 0.001$) had suffered domestic violence. For physical violence, basic education level ($p = 0.002$), the father ($p = 0.005$), the mother ($p < 0.001$) or the siblings ($p < 0.001$) had suffered violence at home. Sexual violence was associated with drug use in the last six months ($p < 0.001$).

Discussion: Multiple associations were found with four types of violence perceived by adolescents, which should serve to generate psychological support programs for this group, which has problems due to the stage of life they are in.

Conclusion: Honduran adolescents were exposed to four types of violence in the first wave of the COVID-19 pandemic. Among the associated factors were educational level, alcohol and other drug consumption, and a history of violence in the first degree of consanguinity.

INTRODUCTION

The global prevalence of violence against children is estimated to be 64% in Asia, 56% in North America, 50% in Africa, 34% in Latin America and 12% in Europe; that is, more than 1.4 billion of the nearly 2 billion children experienced physical, emotional and/or sexual violence in the past year (1). Recalling that child maltreatment is defined as any form of abuse or neglect affecting a child under 18 years of age, including any physical, emotional, sexual, neglect, negligence or commercial exploitation that is detrimental to the health, development or dignity of the child or endangers the child's survival. It is for all this that world statistics mention that 1 in 5 women and 1 in 13 men report having suffered sexual abuse during their childhood (2).

UNESCO in 2018 analyzed data from the World School Health Survey, where it was established that bullying affected young people from all social classes, from all regions and from different income levels. In Latin America, 70% of children are directly or indirectly affected by bullying at school (3). Thus, the social distancing and school closures that occurred in the aftermath of the COVID-19 pandemic increased mental health problems among children and adolescents (4). The World Health Organization (WHO) in turn reported that one in three children in Europe experience some form of violence each year (physical, sexual, emotional, or psychological violence), so that approximately 55 million children are abused in these first world countries (5). And if we look at our realities, in the year 2022 the Basic Education Centers in Honduras reported verbal abuse (34%) and physical abuse (25%); as well as victimization by sexual harassment was identified in 14% of the cases (6). In this context, the objective was to determine the factors associated with adolescents' perception of four types of domestic violence in Honduras during the pandemic.

METHODOLOGY

An analytical, cross-sectional and retrospective research was generated. It was based on the information collected during the pandemic stage, for which a survey was conducted between July-August 2020. The information was collected through the Google Forms platform, which was sent to adolescents aged 12–17 years residing in 16 departments. This was done in first level health care centers, as well as, in hospitals nationwide, following the methodology proposed by the UIC (7), in this research there were 65 eighth year physicians, each one conducted an average of 58 surveys, reaching to collect throughout the country 3272 surveys.

Ethics were always respected, the initial study had the approval of a local ethics committee, under registration 10-2020 and approved at the meeting on March 20, 2020. An anonymous survey was used, prior to filling it out, participants were informed of the objective of the study and that they were free not to answer the questions they did not feel comfortable with.

For a respondent to participate in the research, he/she had to answer the main question about the perception of violence and agree to participate in the study. Less than 2% of the records were excluded, because almost all respondents gave informed consent and met the other inclusion criteria. However, to be sure that the statistical associations were feasible according to the number of respondents, the calculation of statistical power was generated, where the great majority of the cross tabs reached a power of 80% or more; obtaining the confidence of having an adequate number of adolescents for the statistical cross tabs that were considered.

The dependent variables of the study were each of the four perceptions of intra-household violence at the time of the survey. This was obtained from the question: Has anyone in your family (living with you) suffered violence in the last 6 months? If the answer was positive, we inquired about the type of violence involved, the possible options being verbal, psychological, physical or sexual. Each of these was crossed with the following variables: sex (male or female), educational level (pre-basic/basic or intermediate

level), place of residence (urban or rural), whether alcohol or drugs were consumed in the last six months (yes or no), as well as the relative who was perceived to be violent (three categories: father, mother or siblings).

After the previous steps, we began with the cleaning and coding of the database. It is here where we verified compliance with the selection criteria, where 2 records were eliminated for not having completed the survey. The data were then analyzed with Stata V16.0 software (license acquired by the group's statistician). For the statistical management of the data, a first figure was generated because of crossing each of the four types of violence versus the sixteen departments where the evaluations were conducted. Four tables were constructed, where the dependent variable was the perception of each of the four types of violence evaluated, versus the independent variables. Frequencies and percentages, crude prevalence ratios (RPc), adjusted prevalence ratios (RPa), 95% confidence intervals (95%CI) and p-values were obtained with generalized linear models (Poisson family, log link function, models for robust variances and adjusted for department of residence). For a variable to pass from the bivariate to the multivariate model it had to have a p-value < 0.05; this same cut-off point was considered to determine statistical significance.

RESULTS

Of the 3272 young people surveyed, verbal violence was the most perceived, followed by psychological, physical and sexual violence. Figure 1

According to the factors associated with the perception of verbal violence among young people, it was found that educational level ($p < 0.001$), having consumed alcohol in the last six months ($p < 0.001$), having suffered violence in the home by the father ($p = 0.040$), mother ($p < 0.001$) or siblings ($p < 0.001$), adjusted for the place where they live and whether they consumed drugs in the last six months influenced the perception of verbal violence among young people. Table 1

Table 1

Factors associated with the perception of verbal violence in the family of adolescents in Honduras during the first wave of the pandemic, n = 3272.

Variable	Verbal violence		Bivariate analysis	Multivariate analysis
	No n (%)	Yes n (%)	RPc (95%CI) p-value	RPc (95%CI) p-value
Gender				
Male	1188 (91,0)	118 (9,0)	Category to compare	Did not enter the model
Female	1792 (91,4)	168 (8,6)	0,95 (0,77 - 1,16) 0,614	Did not enter the model
Educational level				
Pre or basic	1275 (90,1)	140 (9,9)	Category to compare	Category to compare
Medium level	1565 (93,1)	116 (6,9)	0,69 (0,60 - 0,82) < 0,001	0,67 (0,55 - 0,81) < 0,001
Where it resides				
Urban	1656 (92,7)	131 (7,3)	Category to compare	Category to compare
Rural	1286 (89,2)	156 (10,8)	1,48 (1,02-2,13) 0,036	1,01 (0,72 - 1,42) 0954
Drinks alcohol*				
No	2313 (93,0)	173 (7,0)	Category to compare	Category to compare
Yes	667 (85,4)	114 (14,6)	2,10 (1,40 - 3,14) < 0,001	1,65 (1,31 - 2,08) < 0,001
Take drugs*				
No	2757 (92,3)	230 (7,7)	Category to compare	Category to compare
Yes	228 (80,0)	57 (20,0)	2,60 (1,72 - 3,93) < 0,001	1,00 (0,63 - 1,59) 0,992
Father victimized				
No	2963 (92,1)	254 (7,9)	Category to compare	Category to compare
Yes	15 (31,3)	33 (68,7)	8,71 (6,97 - 10,88) < 0,001	2,14 (1,03-4,42) 0,040
Mother victimized				

Variable	Verbal violence		Bivariate analysis	Multivariate analysis
	No n (%)	Yes n (%)	RPc (95%CI) p-value	RPc (95%CI) p-value
Gender				
No	2923 (94,8)	159 (5,2)	Category to compare	Category to compare
Yes	55 (30,1)	128 (69,9)	13,56 (10,25 - 17,92) < 0,001	6,98 (4,70 - 10,34) < 0,001
Siblings victims of violence				
No	2922 (94,3)	177 (5,7)	Category to compare	Category to compare
Yes	56 (33,7)	110 (66,3)	11,60 (8,99 - 14,98) < 0,001	4,97 (3,48 - 7,11) < 0,001

*Respondent used in the last six months of the pandemic. Siblings = Siblings. PR (prevalence ratios), 95% CI95% (95% confidence intervals) and p-values were obtained with generalized linear models (Poisson family, log link function, models for robust variances and adjusted for department of residence).

According to the factors associated with the perception of psychological violence among young people, it was found that it was influenced by whether the father ($p = 0.031$), mother ($p < 0.001$) or siblings ($p < 0.001$) had suffered violence at home, adjusted for the consumption of alcohol or drugs in the last six months. Table 2

Table 2

Factors associated with the perception of psychological violence in the families of adolescents in Honduras during the first wave of the pandemic, n = 3272.

Variable	Psychological violence		Bivariate analysis	Multivariate analysis
	No n (%)	yes n (%)	RPc (95%CI) p-value	RPc (95%CI) p-value
Gender				
Male	1238 (94,8)	68 (5,2)	Category to compare	Did not enter the model
Female	1857 (94,7)	103 (5,3)	1,01 (0,74 - 1,37) 0,953	Did not enter the model
Educational level				
Pre or basic	1351 (95,5)	64 (4,5)	Category to compare	Did not enter the model
Medium level	1586 (94,4)	95 (5,6)	1,25 (0,88 - 1,77) 0,212	Did not enter the model
Where it resides				
Urban	1698 (95,0)	89 (5,0)	Category to compare	Did not enter the model
Rural	1359 (94,2)	83 (5,8)	1,16 (0,81 - 1,65) 0,427	Did not enter the model
Drinks alcohol*				
No	2387 (96,0)	99 (4,0)	Category to compare	Category to compare
Yes	708 (90,6)	73 (9,4)	2,35 (1,76 - 3,12) < 0,001	1,57 (0,99 - 2,49) 0,056
Take drugs*				
No	2854 (95,6)	133 (4,4)	Category to compare	Category to compare
Yes	246 (86,3)	39 (13,7)	3,07 (2,31 - 4,08) < 0,001	1,29 (0,82 - 2,04) 0,272
Father victimized				
No	3051 (94,8)	166 (5,2)	Category to compare	Category to compare
Yes	42 (87,5)	6 (12,5)	2,42 (1,14 - 5,16) 0,022	0,61 (0,38 - 0,96) 0,031

Variable	Psychological violence		Bivariate analysis	Multivariate analysis
	No n (%)	yes n (%)	RPc (95%CI) p-value	RPc (95%CI) p-value
Gender				
Mother victimized				
No	2982 (96,8)	100 (3,2)	Category to compare	Category to compare
Yes	111 (60,7)	72 (39,3)	12,13 (9,04–16,26) < 0,001	6,54 (4,17 - 10,27) < 0,001
Siblings victims of violence				
No	2993 (96,6)	106 (3,4)	Category to compare	Category to compare
Yes	100 (60,2)	66 (39,8)	11,62 (8,61 - 15,70) < 0,001	5,40 (3,19 - 9,14) < 0,001

*Respondent used in the last six months of the pandemic. Siblings = Siblings. PR (prevalence ratios), 95% CI95% (95% confidence intervals) and p-values were obtained with generalized linear models (Poisson family, log link function, models for robust variances and adjusted for department of residence).

According to the factors associated with the perception of physical violence among young people, it was found that the basic level of education ($p = 0.002$), whether the father ($p = 0.005$), mother ($p < 0.001$) or siblings ($p < 0.001$) had suffered violence in the home, adjusted for the place of residence and whether alcohol or drugs had been consumed in the last six months. Table 3

Table 3

Factors associated with the perception of physical violence in the family of adolescents in Honduras during the first wave of the pandemic, n = 3272.

Variable	Physical violence		Bivariate analysis	Multivariate analysis
	No n (%)	Yes n (%)	RPc (95%CI) p-value	RPc (95%CI) p-value
Gender				
Male	1228 (94,0)	78 (6,0)	Category to compare	Did not enter the model
Female	1869 (95,4)	91 (4,6)	0,78 (0,59 - 1,03) 0,080	Did not enter the model
Educational level				
Pre or basic	1331 (94,1)	84 (5,9)	Category to compare	Category to compare
Medium level	1615 (96,1)	66 (3,9)	0,66 (0,51 - 0,86) 0,002	0,63 (0,48 - 0,84) 0,002
Where it resides				
Urban	1717 (96,1)	70 (3,9)	Category to compare	Category to compare
Rural	1343 (93,1)	99 (6,9)	1,75 (1,00-3,07) 0,049	1,37 (0,82 - 2,32) 0,233
Drinks alcohol*				
No	2390 (96,1)	96 (3,9)	Category to compare	Category to compare
Yes	708 (90,7)	73 (9,3)	2,42 (1,51 - 3,88) < 0,001	1,51 (0,88 - 2,56) 0,133
Take drugs*				
No	2860 (95,7)	127 (4,3)	Category to compare	Category to compare
Yes	243 (85,3)	42 (14,7)	3,47 (1,81 - 6,65) < 0,001	1,61 (0,83 - 3,13) 0,160
Father victimized				
No	3069 (95,4)	148 (4,6)	Category to compare	Category to compare
Yes	27 (56,2)	21 (43,8)	9,51 (6,93 - 13,04) < 0,001	2,82 (1,37 - 5,77) 0,005
Mother victimized				

Variable	Physical violence		Bivariate analysis	Multivariate analysis
	No n (%)	Yes n (%)	RPc (95%CI) p-value	RPc (95%CI) p-value
Gender				
No	2978 (96,6)	104 (3,4)	Category to compare	Category to compare
Yes	118 (64,5)	65 (35,5)	10,53 (6,73 - 16,47) < 0,001	5,03 (3,11 - 8,15) < 0,001
Siblings victims of violence				
No	2982 (96,2)	117 (3,8)	Category to compare	Category to compare
Yes	114 (68,7)	52 (31,3)	8,30 (5,54 - 12,42) < 0,001	3,47 (2,10 - 5,74) < 0,001

*Respondent used in the last six months of the pandemic. Siblings = Siblings. PR (prevalence ratios), 95% CI95% (95% confidence intervals) and p-values were obtained with generalized linear models (Poisson family, log link function, models for robust variances and adjusted for department of residence).

According to the factors associated with the perception of sexual violence among young people, it was found to be influenced by whether they had used drugs in the last six months ($p < 0.001$), adjusted for whether the mother or siblings had been raped and whether they had consumed alcohol in the last six months. Table 4

Table 4

Factors associated with the perception of sexual violence in the family of adolescents in Honduras during the first wave of the pandemic, n = 3272.

Variable	Sexual violence		Bivariate analysis	Multivariate analysis
	No n (%)	Yes n (%)	RPc (95%CI) p-value	RPc (95%CI) p-value
Gender				
Male	1295 (99,2)	11 (0,8)	Category to compare	Did not enter the model
Female	1951 (99,5)	9 (0,5)	0,55 (0,25 - 1,20) 0,132	Did not enter the model
Educational level				
Pre or basic	1404 (99,2)	11 (0,8)	Category to compare	Did not enter the model
Medium level	1672 (99,5)	9 (0,5)	0,69 (0,34 - 1,39) 0,298	Did not enter the model
Where it resides				
Urban	1778 (99,5)	9 (0,5)	Category to compare	Did not enter the model
Rural	1431 (99,2)	11 (0,8)	1,51 (0,66 - 3,45) 0,324	Did not enter the model
Drinks alcohol*				
No	2475 (99,6)	11 (0,4)	Category to compare	Category to compare
Yes	772 (98,9)	9 (1,1)	2,60 (1,13 - 5,97) 0,024	0,87 (0,38 - 2,00) 0,739
Take drugs*				
No	2975 (99,6)	12 (0,4)	Category to compare	Category to compare
Yes	277 (97,2)	8 (2,8)	6,98 (3,08 - 15,83) < 0,001	5,65 (2,35 - 13,59) < 0,001
Father victimized				
No	3198 (99,4)	19 (0,6)	Category to compare	Did not enter the model
Yes	47 (97,9)	1 (1,1)	3,53 (0,37 - 33,80) 0,274	Did not enter the model
Mother victimized				

Variable	Sexual violence		Bivariate analysis	Multivariate analysis
	No n (%)	Yes n (%)	RPc (95%CI) p-value	RPc (95%CI) p-value
Gender				
No	3067 (99,5)	15 (0,5)	Category to compare	Category to compare
Yes	178 (97,3)	5 (2,7)	5,61 (1,97 - 15,97) 0,001	3,00 (0,91 - 9,81) 0,071
Siblings victims of violence				
No	3084 (99,5)	15 (0,5)	Category to compare	Category to compare
Yes	161 (97,0)	5 (3,0)	6,22 (1,70 - 22,81) 0,006	3,16 (0,76 - 13,02) 0,111

*Respondent used in the last six months of the pandemic. Siblings = Siblings. PR (prevalence ratios), 95% CI95% (95% confidence intervals) and p-values were obtained with generalized linear models (Poisson family, log link function, models for robust variances and adjusted for department of residence).

DISCUSSION

The objective of this study was to determine the factors associated with adolescent perceptions of four types of domestic violence in Honduras during the COVID-19 pandemic. Considering that the pandemic contributed to a wide range of negative consequences for the mental health of children and adolescents, a critical need was established to explore this issue in an environment previously reported as problematic (4).

Social distancing, sheltering at home, restricted travel, and the closing of community foundations may have increased the risk of family violence. So, places like France and Brazil reported an increase in reported cases of domestic violence; in the United States, agencies across the country also reported an increase. Demonstrating that children were at greater risk of abuse or neglect when living in a home where domestic violence occurs repeatedly (8).

Violence, (particularly sexual violence and bullying), can sometimes come in the context of severe parental upbringing, socioeconomic and other serious problems, which together constitute mental health risks. Where some of the main determinants of mental health in adolescents are the quality of their home life and peer relationships (9).

Honduras could not be the exception, according to the Observatory of Violence, coordinated by the UNAH and the General Directorate of Forensic Medicine (DGMF), 3821 children were evaluated for different

types of injuries. Sexual crimes were the most common aggressions, followed by interpersonal physical injuries. Cases of minors abused by their father, mother or caregiver totaled 462, in addition, 118 girls were assaulted by their intimate partner in 2021 (10). This is very important, since adolescents in Honduras represent 22.7% of the total population and have a fertility rate of 102 for every 100,000 live births. Twenty-two percent of adolescents in this age range have ever been pregnant, either because they are mothers (17%) or because they were pregnant for the first time (4%) (11). Future studies should include these variables.

A study in six European cities, which analyzed more than 1500 adolescents, reported that 321 of them had suffered physical or sexual violence before the age of 15 years, 155 adolescents claim to have witnessed abuse and/or violence (12). Our results report that verbal violence predominated in our adolescents, contrary to what is shown in the European study. Children exposed to intimate partner violence (IPV) are at increased risk of being abused and neglected, being more likely to develop adverse health, behavioral, psychological, and social disorders later in life. Identifying IPV, therefore, may be one of the most effective means of preventing child abuse and identifying caregivers and children who may need treatment and/or therapy (13). In a context quite like ours, the Women's Emergency Centers, of the Ministry of Women and Vulnerable Populations, in Peru (2019) attended 55565 cases of violence (to girls, boys and adolescents), with 45.38% being psychological violence; 29.93% physical violence; 22.25% sexual violence; and 0.66% economic violence (14).

In the face of all this, Honduran adolescents share similar situations that make them vulnerable to violence, according to the National Demographic and Health Survey/Multiple Indicator Cluster Survey (ENDESA/MICS2019), 63% of children aged 1 to 14 years are raised under violent methods of discipline, either physical or psychological (15).

We also found in this study that educational level was associated with verbal and physical violence; those with a lower educational level had a higher perception of violence. This has been reported in other research, where those who had a lower educational level suffered more situations of violence, in addition, the level of parental education was significantly correlated with exposure to family violence, so that parents who reported higher levels of education had lower levels of family violence (16). Huecker reported that among the risk factors for domestic and family violence: individual, relationship, community, and social problems, show an inverse relationship between education and domestic violence. Lower educational levels correlate with a higher probability of domestic violence (17).

Adolescents studied who had consumed alcohol in the past six months had twice the perception of verbal violence in their household. Globally, the prevalence of binge drinking episodes among adolescents aged 15–19 years was 13.6% in 2016; the highest risk was among males (18). The COVID-19 pandemic similarly affected alcohol and illicit drug use among male and female adolescents. For both genders, of those who used illicit drugs, more than 40% reported an increase in use after the pandemic (19). Beserra et al. in their research on school violence suffered and practiced and its association with the use of alcohol and other drugs among adolescents aged 12 to 18 years, observed a significant association

between violence suffered and the age group of 12 to 14 years; male sex and the degree of schooling in elementary school were also associated (20). Alcohol consumption at this stage of life can disrupt healthy growth, increasing the risk of related disorders in the future; knowing that in 2016 approximately 38% of the population aged 15 to 19 years had consumed alcohol in the previous year and 19% claimed episodic heavy drinking (21).

The Latin American and Caribbean study, which included 26 countries and analyzed 55248 adolescents aged 13–15 years, estimated that for Honduras 16% had alcohol use: one of the lowest percentages in the region (22). In Taiwan, a total of 681970 adults from the National Health Insurance Research Database from 2002–2013 were analyzed, finding that substance use disorders were significantly associated with higher odds of child abuse perpetration, especially physical abuse (23). Our data show low alcohol consumption in adolescents, but a high level of intrafamily violence, in addition, national data show female predominance.

Drug use in the last 6 months in the Honduran adolescents analyzed showed seven times the perception of sexual violence in the home. Martínez-Mota et al, in a meta-analysis with 10843 adolescents of both sexes, found that three types of early life adversity were associated with cannabis abuse/dependence: physical abuse, sexual abuse and presence of violence. Sexual and physical abuse were critical factors affecting vulnerability to cannabis use in adolescence (24). Also, Scheidell et al. in the United States of America associated exposure to any type of abuse or neglect and specific types of domestic dysfunction (parental incarceration, excessive alcohol consumption, exposure to violence) with cannabis and cocaine use in adolescents (25). By 2019 Beharie et al. established that witnessing violence had stronger effects on adolescent substance use (26). Humphreys et al. report that during the COVID-19 pandemic, substance use may have increased violent behavior within the family (27).

In South America, a study of Brazilian adolescents reported that domestic violence against adolescents is related to family interactions, the use of psychoactive substances and violence in the school environment (28). Another research in Brazil conducted in 871 students attending public schools, reported that 15.3% had already consumed some type of drug, 13.2% claimed to have already consumed marijuana, 3.3% cocaine and 0.1% crack; 65.3% claimed to have drunk alcohol abusively in a short space of time (67.4% boys and 63.3% girls) (29). In Colombia in 2015, a sample of 500 adolescents from 20 public educational institutions was studied, finding verbal violence (66.5%) followed by physical (32.0%) and exclusion (30.6%); an association was also found between being a victim and presenting some disability, verbal aggression at home and drug use (30). Fernandes et al. in India reported that adverse childhood experiences (ACE), such as abuse and domestic violence, are strongly associated with substance abuse, most commonly tobacco, in male adolescents and young adults (31).

In our study, the fact that the father, mother or siblings of the adolescents had suffered one or more episodes of violence was more frequent among those who suffered verbal, psychological and physical violence, but not sexual violence. Hildebrand et al, in their study conducted in one of the municipalities of São Paulo over two years, found that 63% of the children or adolescents (assisted in specialized services)

suffered more than one form of violence, with psychological violence being the most frequent, followed by neglect or abandonment, sexual violence and physical violence. The main aggressors were both parents (50.9%) or only one of them (30%) (32). According to Fegert et al, the increased risk of child maltreatment and dysfunction in the home did not diminish immediately after the pandemic, as several triggers will last for some time, such as economic pressure and parental mental health problems. Thus, the sequelae of the pandemic-associated increase in child and adolescent maltreatment may last a lifetime (33).

Fernandez Gonzalez et al, in a study on the impact of domestic violence (DV) on women and their children, found that about 80–90% of the children had witnessed abuse suffered by the mother in the home, 55.9% of the children in the emergency shelter and 62.2% of those in the medium-long stay shelter had been direct victims of abuse. The type of abuse suffered by the children was predominantly psychological, followed by physical abuse or both (34). This study did not find a difference between sexes with respect to the perception of intrafamily violence among adolescents; this finding is similar to that reported by Ruiz Hernández et. al. in their study conducted in a Cuban municipality among adolescents, in which they did not find a difference in the perception of violence according to sex (35).

We did not investigate the relationship between dating violence in adolescents, however, according to a study involving 6 countries and with a sample of 1008 high school students aged 13 to 16 years, reported that the overall prevalence of dating violence (DV) victimization was significantly higher among girls, equal to the prevalence of exposure to psychological violence involving control and/or fear, among those who reported that their parents had unpaid work, had lower average social support from a close friend, higher acceptability of violence, and lower problem-solving skills. Girls who had experienced childhood abuse were 69% more likely to have experienced dating violence than girls without childhood abuse (36). Adolescents exposed to family violence show a greater vulnerability to decreased physical, mental and social well-being, although many show positive well-being and development despite experiencing this adversity (37, 38), so we must continue this line of research in the country, to deepen the subject, address it from its roots, try to find more factors that are associated, conduct much larger samples and establish measures to protect adolescents.

LIMITATIONS

Among our limitations in the study are not being able to extrapolate the data to the totality of adolescents in the surveyed departments, because the main objective was not to be able to infer the data, but to find associations with the four main variables. Also, we do not have data from the second most populated department in the country, Cortes, and we do not have data from the department of Gracias a Dios, due to difficult geographic access. In addition, being a secondary data study, we did not have all the variables we would have liked to have, so both limitations show us the need for further research, so that programs can be generated to support this adolescent population, which is in the process of inserting itself into society, and that traumatic events such as these could mark their psychosocial development in the future.

CONCLUSIONS

Based on the findings, we conclude that Honduran adolescents with a lower level of education had a higher perception of violence; having consumed alcohol or drugs in the last six months was twice and seven times more likely to perceive verbal and sexual violence, respectively. In addition, having suffered one or more episodes of violence by their father, mother or siblings was more frequent among those who experienced verbal, psychological and physical violence, but not sexual violence.

Declarations

AUTHOR CONTRIBUTIONS CONCEPTUALIZATION: EET, CASM, LIZ, JA. And KCHC

Data curation: CM, JA, EET, LIZ, and HNCR.

Formal analysis: CM and JA.

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Figures

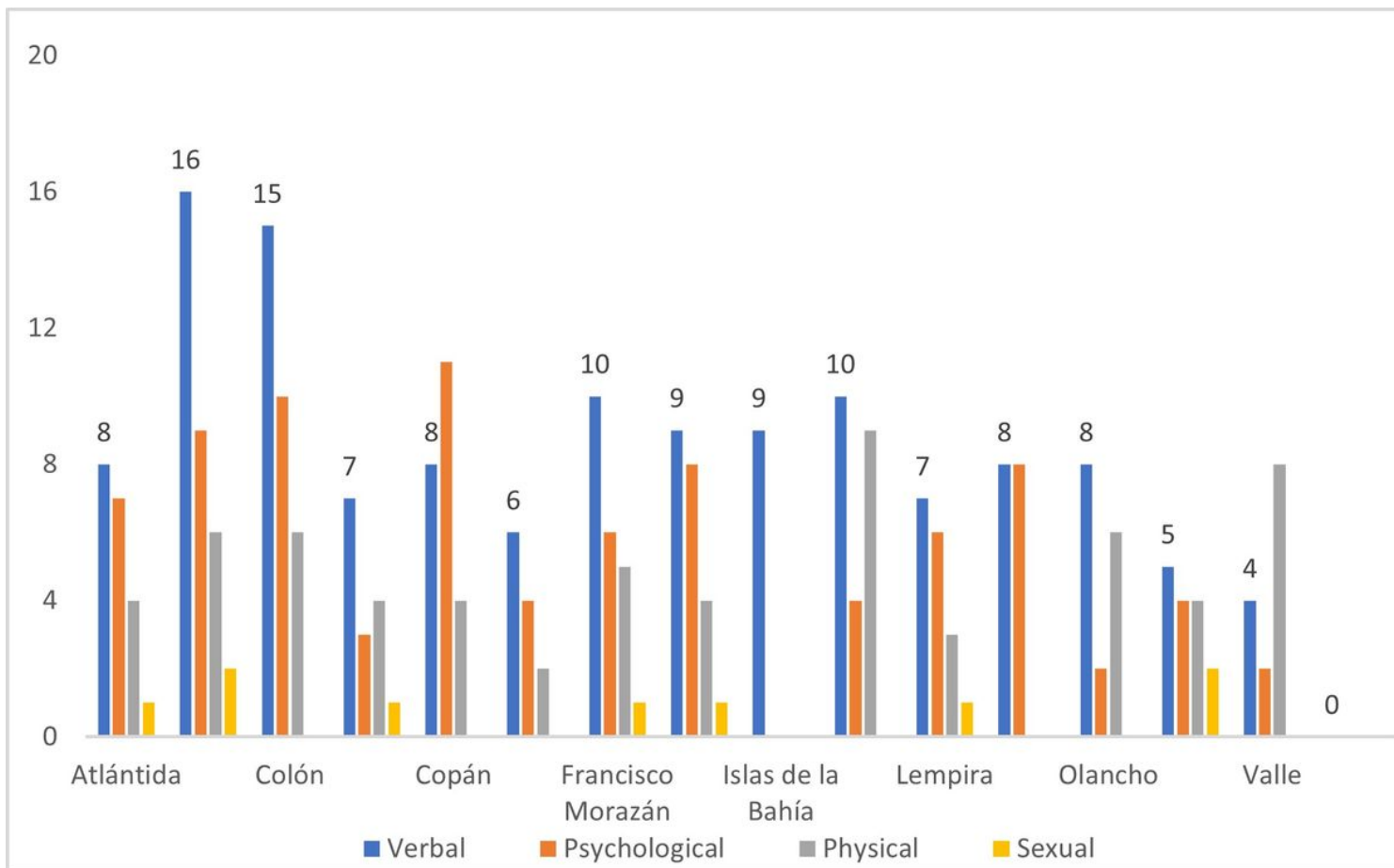


Figure 1

Percentage of perception of the four types of violence that adolescents had according to the department of Honduras.