Does violence in the emotional relationships make STD/AIDS prevention more difficult?

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Abstract

Objectives: to identify violent situations in the daily life of adolescents and young people of low-income communities; to establish a relation between the use of drugs and STD/AIDS risk behavior; and to verify if violence in the emotional relationships between adolescents and young people make the STD/AIDS prevention more difficult.

Method: epidemiological study with adolescents and young people of two neighborhoods in the city of Rio de Janeiro, based on the results obtained from a structured questionnaire that dealt with subjects’ profile, information about the family, use of drugs, daily violent situations, sexual experience, among others. For the present article, only the variables that dealt with aggressiveness, use of drugs, sexual risk behavior and violence in the emotional relationships were analyzed. The association between the variable “I used a condom the last time I had sex” and the questions that indicated violent or non-violent attitudes in emotional relationships received special attention.

Results: a total of 1,041 young people aged 14-22 years old took part in the study, 53.6% of them were female. A statistically significant relation was observed between not using condoms (p < 0.05) and the categorical variables revealing aggressiveness in emotional relations.

Conclusion: the study showed that there is an important association between violence in the emotional relationships and the inconsistent use of condoms in the group studied. Therefore, preventive measures should be taken regarding youth behavior that involves the risk of STD/AIDS infection, associated with campaigns against violence.


Introduction

The increase in the incidence of AIDS over the last decade has given rise to a number of different studies with the objective of improving understanding and of preventing infections by the HIV virus. In Brazil, during the nineties, 43% of reported AIDS cases were within the 20 to 34 year-old age range, demonstrating that the epidemiological profile of AIDS has been getting younger.¹ As the latent phase of the disease is prolonged, up to 11 years, it can be inferred that a large proportion of these patients were contaminated during adolescence.

The social violence to which young people are exposed today has spilled over from the fields of justice, police and sociology and has become a public health problem.² During the ultimate four years, the city of Rio de Janeiro has seen a progressive increase in adolescent mortality rates due to external causes, primarily firearms homicides. Firearms mortality rates among male adolescents within the age
range from 10 to 19 years, were significantly greater in areas of elevated population densities. These facts make possible the statement that the increased violence in large urban centers leads to greater vulnerability for this age group.

Adolescents living in conditions of poverty are constantly challenged to find means of surviving the multiple threats they face day after day. It should be pointed out that some of these difficulties are related to living with domestic violence and its consequences, such as a lack of understanding and harmony within intimate relationships. From this perspective, violent relations may lead to a lack of dialogue and the submission of sexual partners to violent acts or to dispensing with condoms as protection against sexually transmitted diseases (STD), putting at risk the health of adolescents.

Certain studies reveal an association between violence and AIDS. Exposure to violence in the community influences the manner in which family and interpersonal relationships are established. Being exposed to violence within a social context appears to have a relationship with victimization and perpetration in other contexts, such as family and interpersonal ones. In an intimate relationship with traces of violence, the relationship tends to be unequal, generally with insufficient dialogue for understanding. It is postulated that this behavior increases the risk of STD/AIDS, because it makes negotiation over the use of protection during sexual relations unviable. Research carried out in the city of Baltimore, United States (USA), with young African-Americans, revealed a connection between behavior that increases the risks of AIDS and violent relationships. Victimization and perpetration, both emotional and physical, were associated with the number of partners and of STDs during the previous six months.

The objective of this study was to identify the occurrence of violent situations in the day-to-day lives of adolescents and young adults from low income communities, research the relationship between the use of drugs and behavior leading to an increased risk of STD/AIDS and to find out if violence in intimate relationships makes the prevention of STD/AIDS more difficult.

Methodology

The study, performed in 1998 in the city of Rio de Janeiro, consisted of an epidemiological inquiry applied to a sample of 1,041 young people from 14 to 22 years old, from state schools and low-income communities in the districts Vila Isabel and Acari. These two areas were selected as being locations in which the Center for the Study of Adolescent Health (NESA - Núcleo de Estudo da Saúde do Adolescente) of the Universidade do Estado do Rio de Janeiro (UERJ) is active. A sample of convenience was chosen, as the idea of the study was not to obtain a profile of the adolescents and young adults of the district, but to better understand the target public in order to perfect the intervention in the areas referred to. For these reasons sample size was not calculated. Similarly no pains were taken to ensure that the sample was representative of the area’s diverse groups because the results would not be generalized and applied to the population of the communities studied and discussion would be restricted to the experiences of the participants.

The research team was made up of two professors from the Medical Science Faculty, one social worker and four scholarship graduate students. The research instrument was developed by professors from the University of Maryland, in the USA, and originally used with high risk communities from the city of Baltimore. The questionnaire was based on the ecological system theory developed by Bronfenbrenner which proposes the association of results for the behavior patterns of youth with individual vulnerability and environmental risks. Validity and reliability tests were performed upon the original version of the instrument in the USA and were not repeated after translation. The research team discussed the individual items on the questionnaire with two adolescents from the communities mentioned above, after which some questions were eliminated and others completely rephrased in language suggested by them. The pilot study was performed with 20 adolescents. The research project and the instrument employed were assessed and approved by the ethics committee of the Hospital Universitário Pedro Ernesto (HUPE) at UERJ.

In order to reach the target public of the research, 14 to 22 year old adolescents, the evening session at the schools in the Vila Isabel district was chosen. The project began with a meeting of the research team with the school directors in order to explain the study objectives and the instrument to be employed. During the process of completing the questionnaires, the team relied upon the collaboration of school directors and teachers. Although none of the students refused their participation, the availability of particular grades depended upon their teachers’ agreement.

In Acari, because of access difficulties and problems with infrastructure in the evening, the team opted to complete the questionnaire during daylight hours. As only one of the schools in the area agreed to take part in the study, the decision was taken to invite young people from within the community, some of whom had already left school. Therefore there were two samples of convenience, for which the selection of participants followed different methodologies.

The remit of the questionnaire included personal and family information, asked about violent situations within the community and intimate relationships. Further to this, among other themes, it dealt with sexual experience and drug use. In total there were 130 questions divided into six sections. This article studies the sections containing questions about the relationship between partners and varied in subject from negotiation to the use of violence to solve problems. The questions relating to negotiation could be exemplified by the following: “I respected his/her opinion”. On the
subject of violence in the intimate relationship there were questions ranging from verbal aggression, for example: “I offended or cursed him/her”; to physical aggression: “I twisted his/her arm or pulled his/her hair”. With reference to sexual aggression, an example would be: “I used physical force to oblige oral or anal sex”. In relation to sexuality, inquiries were about sexual practices, the use of condoms, number of partners, prostitution, homosexuality etc. In particular, the questionnaires of adolescents and young adults who claimed to be sexually active were studied, associating the variable “I used a rubber the last time I had sex” with responses which indicated different degrees of negotiation and violence within intimate relationships.

Before the questionnaire was distributed, the team emphasized the fact that the responses were confidential and that there was no possibility of the participants being identified. Next, their written consent was requested. Both the adolescents and the young adults from the schools and from the communities applied themselves well to the questionnaire. The resulting information was analyzed with the SPSS software program.

Because of the differences in sample selection, the descriptive study was analyzed independently for the two districts, however, due to the great similarity between the results returned, the comparative analyses were studied together.

Results

In Vila Isabel 575 questionnaires were filled out by young people predominantly within the 17 to 18 year old age group (42.6%) and in Acari, 466, predominantly within the 16 to 17 year-old range. In both groups there was a discrete predominance of the female sex, 53.6% of the total number involved in the research. Although the participants were from underprivileged socio-economic groups, it was observed that less than half of them (43.7% in Vila Isabel and 44.3% in Acari) declared that they lived on a morro or in a favela (slum, shanty-town). The great majority of the participants said that they felt themselves to be important to their friends and family. However, only 22.1% and 17.3%, from Vila Isabel and Acari respectively, replied that they were necessary to their communities.

Violence between the inhabitants of the communities and between family members was investigated by means of the questions on physical aggression. A high percentage of adolescents said they had been present during fights within couples, as much within the community as between family members and friends (Table 1). Table 2 shows, in both districts, a large percentage of young people who had suffered severe beatings from their parents or relatives, and also who had participated in fights. They also gave positive replies in reference to violence by police. Many said they had seen someone being attacked with a knife or revolver, while around half of them had had someone connected to them wounded by gunshot. It was noted that a small, but relevant, percentage responded that they carried a firearm for protection at least once.

The drugs that the adolescents reported using were: tobacco, alcohol, marijuana, cocaine, cobbler’s glue and medications. Of the total number of adolescents, 50.4% revealed that they had used at least one of these drugs. Eleven point nine percent had used tobacco and 48.4% alcohol. Two point six percent revealed that they had sold drugs. Among drug users of whatever type, there was a statistically significant relationship, for both sexes, with the variable “I have had more than one person at the same time” (p < 0.05).

In the question referring to sexuality, 62.6% of the youth from Vila Isabel and 46.5% of those for Acari claimed to have begun their sexual lives and 2.5% of the participants referred to having been obliged to have sexual relations against their will. The study of both districts revealed that there were cases of victimization and perpetration of rape (Table 3). Taking into account the similarities between certain sexuality variables across both districts, these were presented together. Of the sexually active participants, 45.2% said that they had used a condom during their last sexual relation and 5.2% had had some type of STD.

Table 1 - Percentage of adolescents who were present during fights within couples according to neighborhood

<table>
<thead>
<tr>
<th>Questions</th>
<th>Vila Isabel n=575</th>
<th>Acari n=466</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I saw couples fighting with physical aggression...”</td>
<td></td>
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</tr>
<tr>
<td>In the neighborhood</td>
<td>437 (76.0)</td>
<td>388 (83.6)</td>
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<tr>
<td>Among relatives</td>
<td>287 (49.9)</td>
<td>219 (47.2)</td>
</tr>
<tr>
<td>Among friends</td>
<td>265 (46.1)</td>
<td>211 (45.5)</td>
</tr>
</tbody>
</table>

Table 2 - Percentage of affirmative answers to the questions about physical aggression

<table>
<thead>
<tr>
<th>Questions</th>
<th>Vila Isabel n=575</th>
<th>Acari n=466</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Have you been severely beaten by your parents or relatives?”</td>
<td>169 (29.4)</td>
<td>120 (25.9)</td>
</tr>
<tr>
<td>“Have you taken part in fights?”</td>
<td>206 (35.8)</td>
<td>161 (34.7)</td>
</tr>
<tr>
<td>“Have you been threatened by police?”</td>
<td>65 (11.3)</td>
<td>55 (11.9)</td>
</tr>
<tr>
<td>“Have you been abused by police?”</td>
<td>43 (7.5)</td>
<td>37 (8.0)</td>
</tr>
<tr>
<td>“Have you seen anyone being hurt with a knife or firearm?”</td>
<td>256 (44.5)</td>
<td>203 (43.8)</td>
</tr>
<tr>
<td>“Have any of your relatives been hurt with a firearm?”</td>
<td>300 (52.2)</td>
<td>238 (51.3)</td>
</tr>
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Among participants of the female sex, there was a statistically significant relationship between not using a condom (p < 0.05) and certain categorical variables which indicate verbal, physical or sexual violence within the intimate relationship (Table 4).

It should be pointed out that, dividing the sexually active adolescents into two groups, - those who responded in the negative to the group of categorical variables indicating violence within the intimate relationship, and those who responded in the affirmative, there was no statistically significant relationship in association with the variable “I used a rubber the last time I had sex”.

**Discussion**

The violence which is observed within interpersonal relationships in less privileged social strata is often related to poverty.7,8 In this study this relationship was found to the extent that all of the adolescents investigated belonged a social class with little buying power and that the majority of them had witnessed physical aggression between partners and almost half of them had witnessed someone being assaulted with a knife or a revolver. Poverty itself is associated with greater levels of HIV contamination. Studies have shown that the spread of AIDS is increasing through the poorest municipalities in the country and in the state of Rio de Janeiro, in particular, the incidence of perinatal AIDS has a significant correlation with rates of concentration of poverty.9

Nevertheless, the economic difficulties that the majority of Brazilian adolescents suffer do not explain the high levels of violence. There are poorer societies which do not have the same problems. In a population, poverty per se does not generate violence, but the non-existence of cultural values which orient relations between individuals does.
According to Velho & Alvito, the transformations which have occurred in contemporary society, particularly in economic terms, and the increases in city populations have profoundly affected ethical and moral value systems, reinforcing individualism, and reducing the reciprocity of relationships. Individualism reinforces impersonality, both in interpersonal relationships and in relationships between social classes. In this study, given the local conditions of the districts, structural violence was observed. Which is to say a lack of social conditions and structure for public service. This social injustice is part of what generates the violence because it is detrimental to the citizenship rights of the populations who live there.

During adolescence individuals are less stable and more vulnerable to external influences, and this is an opportune point at which to incorporate values, both appropriate and inappropriate ones. A study developed in Seattle, USA, indicated that experience of oppressive and uneasy situations at the ages of 10, 14 and 16 were predictive of violence at ages above 18. In Brazil, research into adolescents still at school indicated a statistically significant relationship between severe physical punishment within the family and aggression during adolescence. The family, therefore, performs a relevant role in the origin of violent behavior by this age group.

Being a member of a family in which there is violent behavior, growing-up with violent children at school and being exposed to crime and drug dealing within the community, can all increase the risk of involvement with violence in later life. Notwithstanding, despite facing this situation in their daily lives, the adolescents said that they felt themselves important to their families and friends. This is an important fact which indicates the necessity of including families in juvenile development support programs. Studies with American adolescents emphasize the connection with community, family and friends as predictive factors of healthy youth development.

The elevated rate of drug consumption, primarily alcohol, attracted attention in this study. Alcohol use is related to an early entry into sexual activity and also to unprotected sex and delinquent behavior. A study performed in the city of São Paulo with 689 high school students demonstrated an association between the use of alcohol and marijuana and high risk sexual behavior. Similarly, a review article on the theme revealed a strong relationship between drug use during adolescence and high STD risk behavior. In common with the descriptions in the literature, this study found that among those that consumed drugs, a significant number also admitted having relations with multiple partners, which demonstrates the increased vulnerability of this population to STD/AIDS.

Although the majority of the adolescents said they had conversed with someone about AIDS, less than half claimed to have used a condom the last time that they had sex. The use of condoms among adolescents in Brazil is inconsistent. According to research performed with students in the city of São Paulo, 34% of sexually active adolescents said that they did not use a condom the last time they had sex. A study of students attending a school in Manhasset, Long Island, USA, showed that despite almost all of the adolescents involved knowing of the protective effects of condoms, 25.6% did not practice safe sex or had an incorrect understanding of how to protect against STD. There was a minority which did not believe what the government published about AIDS.

Often adherence to methods of AIDS prevention proceeds from perception of the threat to health and vulnerability to the disease. It also depends upon the existence of cases among family members or friends and on the elimination of obstacles to action. An example is the opinion that many people have that condoms reduce pleasure and the reluctance to be considered promiscuous if they carry condoms. Clearing up such issues with young people may be an effective way of ensuring that they begin to protect themselves effectively.

Another fact worthy of consideration is that adolescents discuss sex more with their friends than with adults, parents or guardians. In our society there remain many prejudices about sex before marriage and this can be an obstacle to information access, education and preparation for the exercise of sexuality in the most pleasurable and responsible manner possible. A large part of the problem originates with the manner in which social institutions - the family, schools, religious organizations, the health sector, etc. - deal with this issue.

Among the adolescents studied behavior was observed which puts at risk sexual health, such as a low level of adherence to the use of condoms and the occurrence of sexual relations in exchange for something, such as money, clothes, food or drugs. Sexual violence can be traced through positive answers to questions about forced sexual relations, threat of rape and actual rape. These rates, although low, cannot be ignored. Being young and belonging to low socio-economic classes was associated with violence between partners in a study of 6,184 couples. A study undertaken in Lima, Peru, into sexual experiences and psychosocial questions with sexually active adolescents, indicated that cultural norms restricted the use of condoms for casual sex, which possibly places many young people at risk from unwanted pregnancy and/or STD. It further revealed that sexual conduct can be particularly risky when in the context of sexual coercion and when sex is associated with the consumption of drugs or alcohol.

Although this study has raised problems and pointed to probable ways of solving them, it is worth mentioning certain limitations, among which are: the fact that no test of reliability and validity was made of the research instrument after translation and adaptation; the use of a sample of convenience. Thus, the results found cannot be generalized, and the questions raised deserve further study.
The study points to a relationship between violence in intimate relationships and difficulties preventing STD/AIDS. The fact that this makes negotiation over the use of condoms may be among the causes of this association. In order that measures to prevent high risk sexual behavior among young people be effective, it is suggested that campaigns against domestic violence and violence within intimate relationships be instigated.

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References


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