

Visibility of intimate partner violence among youths and adolescents: an integrative review

Visibilidade da violência entre parceiros íntimos adolescentes e jovens: uma revisão integrativa

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ABSTRACT

Objective: To identify the visibility of intimate partner violence among youths and adolescents reported in health care and education. **Method:** Integrative review using the platforms Virtual Health Library, Scopus, and PubMed/MEDLINE in November 2019 and updated in June 2021. The data were subjected to thematic content analysis. **Result:** 18 articles were selected, resulting in the following three empirical categories: the expression of intimate partner violence among youths and adolescents according to sex; negative impacts and potential protection factors for intimate partner violence among youths and adolescents; the importance of network interventions to confront intimate partner violence among youths and adolescents. **Conclusion:** Youths and adolescents can be the victims or perpetrators of violence. In both situations, gender is determinant and the repercussions of violence can be perpetuated in adult life. The characteristics of this phenomenon should be further investigated to create interventions in health care and education.

Descriptors: Intimate Partner Violence; Adolescent; Gender and Health.

RESUMO

Objetivo: identificar a visibilidade da violência entre parceiros íntimos adolescentes e jovens reportados nas áreas de saúde e educação. **Método:** Revisão integrativa, realizada nas plataformas Biblioteca Virtual em Saúde, *Scopus* e *PubMed/MEDLINE* em novembro de 2019 e atualizada em junho de 2021. Os dados foram submetidos à análise de conteúdo temática. **Resultados:** foram selecionados 18 artigos e emergiram três categorias empíricas - a expressão da violência entre parceiros íntimos adolescentes e jovens de acordo com o sexo; impactos negativos e potenciais de proteção à violência entre parceiros íntimos adolescentes e jovens; a importância de intervenções em rede para o enfrentamento da violência entre parceiros íntimos adolescentes e jovens. **Conclusão:** adolescentes e jovens podem ser vítimas ou autores da violência, em ambas situações há determinação de gênero e as repercussões da violência podem perpetuar-se para a vida adulta. Conhecer as características desse fenômeno possibilita construir intervenções nos serviços de saúde e educação.

Descritores: Violência por Parceiro Íntimo; Adolescente; Gênero e Saúde.

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INTRODUCTION

In contemporary society, violence is manifested in many ways⁽¹⁾, including intimate partner violence (IPV), a common phenomenon found in all socioeconomic, religious, and cultural groups⁽²⁾. The term IPV defines any behavior by an intimate partner that causes physical, sexual, or psychological harm, as in the case of physical aggression, sexual coercion, controlling behavior, or psychological abuse⁽³⁾.

Among youths and adolescents, IPV has become a serious and relevant problem, as identified in international and national research⁽⁴⁻⁵⁾. A study conducted in Brazil showed that 86.9% of the 3,200 youths interviewed had suffered verbal, sexual, or physical violence or were threatened with violence in an intimate relationship⁽⁶⁾. In a Canadian study⁽⁷⁾ with more than 21 thousand youths, one in three youths in an intimate relationship in the year prior to the survey suffered violence, with emphasis on psychological violence for 27.8% of respondents, cyberviolence, reported by 17.5%, and physical violence reported by 11.8% of the sample.

Thus, IPV in adolescents and youths requires greater attention from the scientific community given its singular and collective repercussions, damaged affective-sexual perceptions of adolescents and youths, and possible perpetuation in adult relationships⁽⁴⁾.

To confront IPV in youth and adolescence, the historical and social construct must be considered since violence is inserted and often tolerated in the macrostructure of society⁽⁵⁻⁶⁾. Moreover, networks can be used to create interventions for preventing and coping with adolescent and juvenile IPV, especially in the case of the *Sistema Único de Saúde* (Unified Health System) (SUS) in partnership with schools⁽⁸⁾. According to the literature, the education sector is a privileged locus for health care interventions since it can reach a growing number of individuals, as demonstrated in a study with 102,000 students from public and private schools in the 26 Brazilian capital cities⁽⁹⁾.

An intersectoral approach would enable the detection of limits regarding the network for youths and adolescents in health care, such as generational gaps between youths and adolescents and health care workers, the low frequency and inclusion of youths and adolescents in health care services, and the lack of public policies for this population⁽¹⁰⁾.

The aim of this study was to identify the visibility of intimate partner violence among youths and adolescents reported in health care and education. The findings can support new scientific knowledge on the visibility of IPV in adolescents and youths and help create coping strategies through networks, especially between the health care and education sector.

MATERIALS AND METHOD

This is an integrative literature review. The study was conducted according to the following stages: formulating the research question based on problem identification; determining the data search and compiling method; collecting data; verifying and analyzing data; and, interpreting and presenting the results. This research method was chosen because it can reliably provide broad information on the studied phenomenon and identify possible gaps in knowledge⁽¹¹⁾.

The research question was formulated using the mnemonic PICO: population, interest, context. In this study, the P stands for adolescents and youths, the I corresponds to IPV visibility, and the Co corresponds to health care and education. The formulated research question was “What is the visibility of IPV in youths and adolescents reported in health care and education?” Health care and education were considered the areas in which youths and adolescents produce and reproduce their lives. Furthermore, these areas are ideal for any interventions and activities directed at youths and adolescents considering the plurality and intersectionality of health promotion in both areas.

The chosen search platforms were Virtual Health Library (VHL), SCOPUS, and Medical Literature Analysis and Retrieval System Online (MEDLINE), consulted through Pubmed. These platforms were selected because they cover the phenomenon of youth and adolescent IPV.

The search was conducted using controlled and uncontrolled descriptors combined with synonyms by means of Boolean operators. The search strategy was based on the specificity of each database, as shown in Figure 1:

The search was carried out on each platform considering the start date of publications. In MEDLINE, the first article found was from 1977, in BVS, 1980, and in SCOPUS, 1992. Data were selected in November 2019 and updated in June 2021.

All the selected articles were original and from primary research in Portuguese, English, and Spanish; moreover, they answered the research question, included the full text online, and they were conducted with participants between 10 and 24 years old, according to the criterion by which adolescents are between 10 and 19 years old and youths are between 15 and 24 years old⁽¹²⁾. In this study, it was not necessary to define exclusion criteria.

The titles, abstracts, and articles were selected by two independent reviewers. Any doubts that arose during this process were resolved by consensus. Data were extracted using an adapted version of the instrument validated by Ursi⁽¹³⁾ in WebQDA software⁽¹⁴⁾. The files of the selected studies in Portable Document Format were entered in full into the internal source system. The studies were characterized using descriptive codes for year of publication, author, journal,

Figure 1. Search strategies. Curitiba, Paraná, 2021.

Search platform	Search strategy
BVS	<i>(adolescent) OR (teenager) OR (youth) OR (teen) AND (intimate partner violence) OR (dating violence) OR (intimate partner abuse) AND (delivery of health care) OR (delivery of health care integrated) OR (health care systems) OR (secondary school)</i>
	Search limiters: not used
Scopus	<i>TITLE-ABS-KEY ("Adolescent" OR "Teenager" OR "Youth" OR "Teen") AND ("Intimate Partner Violence" OR "Dating Violence" OR "Intimate Partner Abuse") AND ("Delivery of Health Care" OR "Delivery of Health Care Integrated" OR "Health Care Systems" OR "Secondary School")</i>
	Search limiters: not used
MEDLINE (Pubmed)	<i>("Adolescent" [MeSH Terms] OR "Teenager" OR "Youth" OR "Teen") AND ("Intimate Partner Violence" [MeSH Terms] OR "Dating violence" OR "Intimate Partner Abuse") AND ("Delivery of Health Care" [MeSH Terms] OR "Delivery of Health Care Integrated" OR "Health Care Systems" OR "Secondary School")</i>
	Search limiters: not used

country, area of knowledge, language, type of study, objective or research question, participants, data treatment, results, interventions performed, analysis, and implications for the study area.

In the next step, the data were coded using a tree data structure to enable thematic content analysis⁽¹⁵⁾, resulting in the following three empirical categories: the expression of intimate partner violence among youths and adolescents in health care and education; negative impacts and potential protection factors for intimate partner violence among youths and adolescents; and the importance of network interventions to confront intimate partner violence among youths and adolescents.

RESULTS

In all, 6,071 articles were found. In BVS, the search resulted in 2,208 articles, in MEDLINE, 2,348 articles, and in SCOPUS, 1,515 articles. After the removal of duplicates, 4,936 articles remained. After reading the titles, 364 articles were selected. After reading the abstracts, 42 articles were separated for reading in full, resulting in a final sample of

18 articles. The search description is presented in Preferred Reporting Items for Systematic Review and Meta-Analysis⁽¹⁶⁾ (PRISMA) (Figure 2). Figure 3 contains descriptions of the publications selected in this study and their temporal distribution.

In this review, the highest number of articles were from the United States of America, totaling 10^(17,19-20,23-24,26-28,30-31). The most common language of the articles was English^(17,19-34), followed by Spanish⁽¹⁸⁾, and Portuguese⁽²²⁾. In relation to the methodological design, all the articles were quantitative studies, with 15 random samples^(17,19,21,23-27,28,30-32) and three convenience samples^(18,22,29).

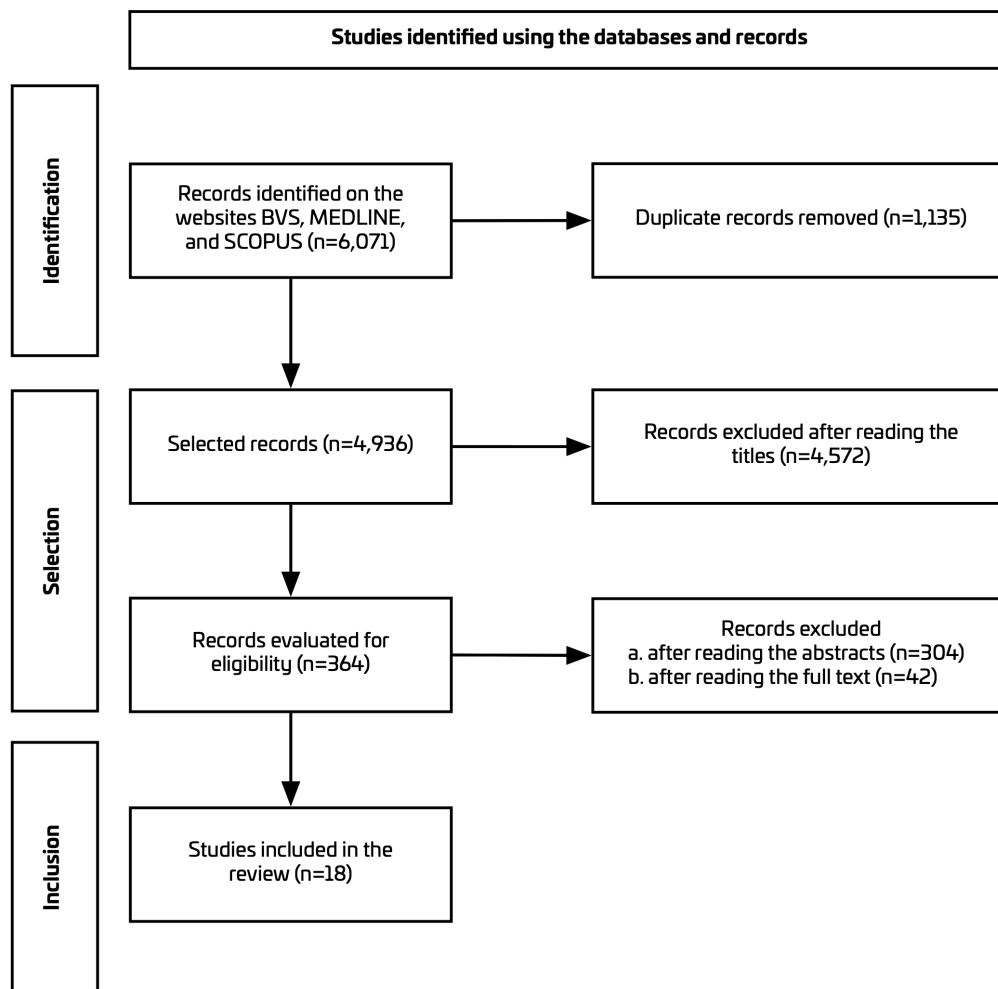
The total number of youths and adolescents in the investigated populations was 83,411, of which 50.54% were female and 49.46% were male. The prevailing intimate relationships among the youths and adolescents who participated in the studies were heterosexual and the average age group of the studied population was 16.28 years. The ethnicities of the adolescents and young people participating in these studies are varied and include Hispanic, Caucasian, Asian, Afro-descendant, and Indigenous. One of the studies was conducted specifically with children of Latino immigrants⁽²⁴⁾.

The study scenarios were public and private schools, low-income neighborhoods, violence prevention centers, and school health centers. The most widely adopted data collection instruments were scales and questionnaires. Notably, four studies^(20,22,29,31) were conducted using the conflict in teen dating relationship inventory (CADRI) scale. The statistical data analyses were performed using the Statistical Package for the Social Sciences (SPSS) and Stata Statistical Software. The limitations mentioned in the analyzed articles were the adopted scales, the number of respondents, the number of variables, and the possibility of bias, even when using software, which provides methodological rigor to the analyzed studies.

The expression of intimate partner violence among youths and adolescents in health care and education

With regard to the expression of IPV among adolescents and youths, the results of the studies indicate that this phenomenon has heterogeneous characteristics and visibility^(19,23-24). The most common form of violence in this review is physical, reported in all the analyzed studies⁽¹⁷⁻³⁴⁾. The second most reported form was sexual violence^(18-19,21-24,26,28-30), followed by psychological violence^(18,22-24,26,28-30,32-33), and verbal violence^(18,20,22,24,29).

The most widely reported forms of physical violence were grabbing, kicking, pushing, throwing objects, and slapping. Interestingly, in five studies^(18,22,24,26,29,32), female adolescents and young women were the main aggressors and the males were the most common victims of this type of violence.



Source: PRISMA report, 2021.

Figure 2. PRISMA flowchart: stages of article selection.

Figure 3. Articles selected for the literature review. Curitiba, Paraná, 2021.

Article title	Authors	Country of origin	Journal	Year
The structure of male adolescent peer networks and risk for intimate partner violence perpetration: Findings from a national sample ⁽¹⁷⁾	Erin A. Casey and Blair Beadnell	United States of America	Journal of Youth and Adolescence	2009
Jealousy and Violence in Dating Relationships: Gender-Related Differences among a Spanish Sample ⁽¹⁸⁾	Julia Sebastián, Alba Verdugo, and Beatriz Ortiz	Spain	Spanish Journal of Psychology	2014
Prevalence and Health Impact of Intimate Partner Violence and Non-partner Sexual Violence Among Female Adolescents Aged 15–19 Years in Vulnerable Urban Environments: A Multi-Country Study ⁽¹⁹⁾	Michele R. Descker, Oladosu Ojengbede, Laura Covarrubias, Ersheng Gao, Yan Cheng, Sinead Delany-Moretlwe, and Heena Brahmabhatt	Nigeria, India, China, United States of America, South Africa	Journal of Adolescent Health	2014
IPV Among Adolescent Reproductive Health Patients: The Role of Relationship Communication ⁽²⁰⁾	Adam Messinger and collaborators	United States of America	Journal of Interpersonal Violence	2015

Figure 3. Continuation.

Article title	Authors	Country of origin	Journal	Year
Prevalence and risk factors for intimate partner violence among Grade 8 learners in urban South Africa: baseline analysis from the Skhokho Supporting Success cluster randomized controlled trial ⁽²¹⁾	Simukai Shamu and collaborators	South Africa	Int Health	2015
Intimate partner violence in adolescence: an analysis of gender and generation ⁽²²⁾	Bianca de Cássia Alvarez Brancaglioni and Rosa Maria Godoy Serpa da Fonseca	Brazil	Revista Brasileira de Enfermagem	2016
In Search of Teen Dating Violence Typologies ⁽²³⁾	Dennis E. Reidy, Barbara Ball, Debra Houry, Kristin M. Holland, Linda A. Valle, Megan C. Kearns, Khiya J. Marshall, and Barri Rosenbluth	United States of America	Journal of Adolescent Health	2016
Patterns of Dating Violence Victimization and Perpetration among Latino Youth Moderators ⁽²⁴⁾	H. Luz Mc Naughton Reyes and collaborators	United States of America	Journal of Interpersonal Violence	2016
Intimate partner violence in early adolescence: The role of gender, socioeconomic factors and the school ⁽²⁵⁾	Mason-Jones and collaborators	United Kingdom, South Africa, Belgium, Netherlands, Kenya	Africa Medical Journal	2016
Lifetime Prevalence Rates and Overlap of Physical, Psychological, and Sexual Dating Abuse Perpetration and Victimization in a National Sample of Youth ⁽²⁶⁾	Michele L. Ybarra and collaborators	United States of America	Archives of Sexual Behavior	2016
Patterns of Change in Adolescent Dating Victimization and Aggression During Middle School ⁽²⁷⁾	Elizabeth A. Gony and collaborators	United States of America	Journal of Youth and Adolescence	2017
Teen Dating Violence: Predicting Physical and Sexual Violence and Mental Health Symptoms Among Heterosexual Adolescent Males ⁽²⁸⁾	Peter Fawson and collaborators	United States of America	Violence and Victims	2017
Australian adolescents' experiences of aggression and abuse by intimate partners ⁽²⁹⁾	Elizabeth S. Daff, Troy McEwan, Luebbers Stefan	Australia	Journal of Interpersonal Violence	2018
Sex and age effects in past year experiences of violence amongst adolescents in five countries ⁽³⁰⁾	Lindsay Stark and collaborators	United States of America	PLoS ONE	2019
Directionality of Dating Violence Among High School Youth: Rates and Correlates by Gender and Sexual Orientation ⁽³¹⁾	Alyssa L. Norris and Gabriela López	United States of America	Journal of Interpersonal Violence	2020
Emerging partner violence among young adolescents in a low-income country: Perpetration, victimization, and adversity ⁽³²⁾	Rachel Kidman and Hans-Peter Kohler	Malawi	PLoS ONE	2020

Figure 3. Continuation.

Article title	Authors	Country of origin	Journal	Year
Risk Behaviors Associated with Dating and Relationship Violence among 11–16-Year-Old in Wales: Results from the 2019 Student Health and Wellbeing Survey ⁽³³⁾	Danielle Couturiaux and collaborators	Wales	International Journal of Environmental Research and Public Health	2021
Dating Violence Victimization among Adolescents in Europe: Baseline Results from the Lights Violence Project ⁽³⁴⁾	Carmen Vives-Cases and collaborators	Spain, Italy, Romania, Portugal, Poland, and United Kingdom	International Journal of Environmental Research and Public Health	2021

In one study⁽³³⁾, women were less likely to report physical violence than men.

The most common manifestations of sexual violence reported in the sampled articles include kissing, touching, or forcing sex or a sexual act against the partner's will. The perpetrators were mostly male and the victims female^(18,22,24,26,29,31-32).

Regarding psychological violence, the characteristic behaviors described included not allowing the partner(s) to meet other people or talk to someone of the opposite sex; monitoring their routine; instigating jealousy; offending and ridiculing the partner; voicing harmful opinions in front of other people; and threatening to end the relationship or be unfaithful^(18,26). According to three of the studies that addressed the victims of psychological violence^(18,21-22), adolescent males and young men were the most commonly affected, while in two studies, the most common victims were female^(22,26). According to three articles^(18,22,26), female adolescents and young women are the main perpetrators of this form of violence, while in one study⁽²⁴⁾, males were the perpetrators and in two studies⁽³²⁻³³⁾, this violence was perpetrated by adolescents and young people of both sexes in the same proportion.

Verbal violence is classified in some studies^(18,22,29) as a subtype of psychological violence. According to this classification, women were reported as the main aggressors and men as the victims. These studies evaluated the occurrence of this form of IPV by age group and showed that violence increases proportionally to the ages of youths.

Some of the studies analyzed correlated the existence of certain situations with the occurrence of adolescent and juvenile IPV and highlighted delinquency⁽¹⁷⁾, sexual abuse in childhood^(17,19,21), alcohol abuse^(17-19,21,25,31), witnessing IPV among their parents^(20,34), peer rejection⁽¹⁷⁾, and belonging to a group of friends that considers violent behavior normal⁽¹⁷⁾.

Negative impacts and potential protection factors for intimate partner violence among youths and adolescents

According to studies of this review, IPV has a negative effect on the lives of adolescents and young people and may affect their mental health^(26,28) and trigger depression^(17,28). Another repercussion of IPV among youths and adolescents highlighted in the studies is risky sexual behavior, chiefly expressed by not using condoms, which exposes youths and adolescents to sexually transmitted infections (STIs)^(19,25) and unplanned pregnancies⁽²⁵⁾.

Two studies^(17,24) mentioned potential measures adopted to protect youths and adolescents from IPV such as family cohesion, parental supervision, awareness of this type of violence, and ability to resolve conflicts and participate in self-control strategies.

With regard to seeking help after suffering IPV, one of the studies⁽³²⁾ stressed that a quarter of the 2,089 adolescents and young people surveyed reported having sought some form of help after the violent experience. The women most commonly sought help typically after suffering emotional, sexual, and physical violence. The form of help most frequently sought by youths and adolescents was the support of friends and family, while help from health care centers or other formal support was little reported.

Notably, none of the analyzed studies exclusively addressed the expression of IPV among youths and adolescents in health care services.

The importance of network interventions to confront intimate partner violence among youths and adolescents.

In the final recommendations and implications, all the studies mentioned the lack of scientific research on IPV among youths and adolescents, especially regarding the construction of network intervention proposals on the phenomenon. Moreover, they stressed the need for further studies on the mechanism that develops and perpetuates this

violence and, consequently, implement appropriate measures to prevent IPV among youths and adolescents and in their relationships in adult life. Other relevant conclusions in the analyzed studies included bidirectional IPV, which is when aggressors commit more than one type of violence and become both the perpetrator and victim of violence in the relationship^(19-20,23-24,28-29,31,33). In this regard, the influence of gender issues on determining IPV among youths and adolescents, translated into the asymmetry of power between men and women in intimate relationships, was addressed in only three studies^(21-22,31).

Regarding interventions for coping with IPV among youths and adolescents, initiatives such as school discussions led by influential young people in their peer networks on respectful approaches in intimate relationships were identified⁽¹⁷⁾. Moreover, efforts have been made to include conflict resolution in relationships in the school curricula⁽²⁰⁾, implement community interventions⁽¹⁶⁾, and increase discussions on gender issues as determinants of IPV^(22,31).

Among the studies analyzed, school was indicated as an ideal environment for interventions that prevent IPV among youths and adolescents. According to the studies^(21,23), these interventions must be evidence based to be more effective and recognize that adolescents can play multiple roles in a relationship^(26,32,34). The recommendation is that these interventions be multidisciplinary, meet physical and psychosocial needs, consider the contexts of greatest social vulnerability^(19,27), as well as encompass the consequences of IPV, including emergency contraception and post-exposure HIV prophylaxis⁽¹⁹⁾.

DISCUSSION

Through the integrative review, it was possible to identify the visibility of violence among adolescent intimate partners in health care and education.

The category “the expression of intimate partner violence among youths and adolescents in health care and education” reveals that girls reported being the main aggressors of physical, psychological, and verbal violence. However, the indices for both sexes are close regarding psychological and verbal violence. These findings are similar to those described in the literature⁽²²⁻³⁵⁾. One study questions whether girls are, in fact, the most common aggressors or whether they most frequently report the aggressions perpetrated possibly because they have more knowledge of IPV than boys⁽²⁾. Such observations can be justified as consequences of social male supremacy, which views violence committed by men as natural. Thus, expressions of violence are, to some extent, expected of males. Similarly, women are also forged in this social construct that views male violence as natural.

According to a study published in 2016⁽²³⁾, it is necessary to reflect on whether boys omit the practice and perpetuation of violent attitudes because they do not consider them as such. This argument is supported by the reportedly higher levels of acceptance of violence among boys. To delegitimize behavior considered typically male or female, these socially constructed behaviors should be questioned and criticized, thus making the invisible, visible⁽¹⁾.

According to the studies selected for this review, sexual violence is mostly perpetrated by males against females, which confirms the determination of violence by gender and objectifies the female body as the property of males, who are considered as the subject of the relationship^(1,22,36-37). The only study that opposes this finding⁽²⁴⁾ identified higher rates of sexual victimization among boys and stressed the need for further research to confirm or refute this finding.

According to the results, psychological violence is practiced predominantly by girls; however, these results are very close to those obtained among the male population. This predominance of females can be explained by the fact that girls have more freedom to express feelings of sadness and disappointment than boys. Similarly, verbal violence is more commonly perpetrated by girls as a possible way of expressing feelings⁽²²⁾, an attempt to avoid being subdued by their partner, or as a defense strategy to avoid being a victim of violence⁽¹⁾.

The results demonstrate the need to intensify discussions on gender issues within the scope of building intimate relationships between youths and adolescents. This need is reiterated when considering that the affective and sexual relationships of this population are beginning at increasingly earlier stages in life. According to a study⁽³⁵⁾ conducted in 2016, adolescents begin their sexual activity between the ages of 13 and 17. In this regard, this phenomenon cannot be merely considered their first sexual relationship, but rather a passage surrounded by gender relations culturally rooted in society⁽³⁶⁾.

Heterosexuality, which is the hegemonic and socially accepted model, was predominant among the youths and adolescents surveyed in the articles reviewed in this study. Gender issues are reflected in the results of the studies analyzed through the sexual exacerbation imposed on boys, for example, which can expose them to risky behavior, such as having multiple partners and unprotected sex⁽¹⁾.

According to the results of this study, IPV among youths and adolescents has its own characteristics expressed, above all, by bidirectional violence, that is, when youths and adolescents are both the victims and perpetrators of violence in the same relationship. This characteristic differs from IPV among adults, which is usually unidirectional⁽³⁷⁾. This phenomenon can also be explained by the fact that the relationships between youths and adolescents do not contain

the same asymmetries as adult marital relations, expressed, above all, by financial issues and taking care of the home and children, for example⁽²²⁾.

Despite the bidirectional characteristic, the most severe forms of IPV among youths and adolescents, such as sexual, are directed against girls. In this case, as in IPV among adults, it is characterized as gender violence marked by the control of men over women. Gender-related violence, such as marital assault, mutilation, sexual, physical, and psychological abuse, homicide, and a range of physical and psychosomatic symptoms, affect women's lives and integrity⁽³⁸⁾.

In relation to the category "Negative impacts and potential protection factors for intimate partner violence among youths and adolescents", the identified characteristics can be grouped as potential protection and aggravating factors associated with IPV, that is, issues that determine different ways of living, getting sick and dying, when considering the health-disease process and the way in which the experience of social categories of gender, generation, and ethnicity are intertwined with this process⁽³⁹⁾.

In this study, potential protection was identified as family cohesion, culture, knowledge about the subject, conflict resolution skills, and self-control. A study conducted with 416 young US students corroborates this statement by demonstrating that an online intervention for IPV awareness helped develop personal empowerment skills to curb the acceptance of violence in relationships between youths and adolescents⁽⁴⁰⁾.

In contrast, the potential aggravating factors identified were delinquency, having suffered sexual abuse in childhood, exposure to violence in childhood, alcohol abuse, depression, witnessing IPV among parents, peer rejection, having groups of friends who accept violence, and socioeconomic vulnerability. Some of these aggravating factors such as alcohol abuse, low academic performance, and depressive symptoms were also identified by a study⁽⁴¹⁾ on the experience of IPV, conducted with more than 25,000 youths between 13 to 18 years old.

As also demonstrated in this review, a Philippine study⁽⁴²⁾ indicated that youths who manage to get out of violent relationships reported it was an individual act and when they sought support, they turned to friends motivated by trust⁽⁴⁰⁾.

According to the results of this study, IPV among youths and adolescents is perceived in the investigated scenarios, especially in education. Despite the magnitude of violence in society and its disturbing consequences, the issue is still treated incipiently in health care and is often considered exclusive to public safety and justice, which justifies the need for more interventions and acknowledgment of the problem as pertinent to health care⁽³⁸⁾.

The protective potential of health services regarding dating violence among youths and adolescents should be highlighted, with emphasis on nursing, as addressed in the

evidence-based guideline of the Society for Adolescent Health and Medicine, in the USA⁽⁴³⁾. The practices described in this guideline include facilitating the use of health services, improving the scope of preventive education and counseling on sexual and reproductive health, and encouraging family participation in the health care of youths and adolescents, which promotes effective communication.

Regarding the category "importance of network interventions for coping with IPV among youths and adolescents", the analyzed studies stressed the need for networks to broaden interventions that help cope with IPV in health care and education. According to the results, however, health care networks are not well structured for coping with IPV among youths and adolescents. It is noteworthy that health workers are often the first to have contact with people in situations of violence⁽¹⁰⁾.

According to the articles of the sample, activities to help cope with IPV are centralized, especially in schools. Networking for people in situations of violence is characterized by integrated institutions at intra and intersectoral levels, thus ensuring comprehensive care, citizenship, and equity. Schools, the community, and health workers must work together to provide support, acknowledge the problem, and refer individuals correctly, thus ensuring the development and effectiveness of violence prevention strategies⁽³⁹⁾. In this regard, schools must be integrated into health care networks since they are one of the key intersectoral areas for the prevention of IPV among youths and adolescents and the first environment in which this population builds social relationships and initiates sex education and gender relations⁽⁴⁴⁾.

A study conducted in two Brazilian capital cities provides insight into this issue by discussing the relevance of joint actions between education, third-sector organizations, and health services to screen and address IPV among youths and adolescents, based on the prominent role of this population and the recognition of their health needs⁽⁵⁾.

The findings of this review revealed a scientific gap in the production of studies in Brazil and health care on the subject. The lack of national scientific knowledge may be linked to the low visibility of this phenomenon in Brazil and the absence of measures to combat and prevent IPV in the studied population, which was corroborated in a scoping review undertaken in 2019⁽⁹⁾.

Limitations

This study had some limitations, such as the use of only three databases and the absence of grey literature among the surveyed sources, which is justified by the research period of this study.

FINAL CONSIDERATIONS

This review answered the research question and identified the visibility of IPV among youths and adolescents reported in health care and education, thus mapping its different forms of manifestation and gaps in the scientific literature.

The studies conducted on IPV among youths and adolescents address the phenomenon to differentiate it from IPV among adults and identify its bidirectional characteristic, in which the youth or adolescent sometimes acts as the perpetrator and sometimes as the victim. However, despite this finding, it is important to clarify the weight of gender issues in determining the violence suffered, as girls usually experience the more serious forms of violence, such as sexual and physical.

The data reveal the need for early and networked interventions to address the problem of IPV among youths and adolescents, especially intersectorally between health care and education. In addition, they reveal the need for interventions that consider gender issues as determinants of IPV and ensure violence is not viewed as natural.

As implications for nursing, the reflections provided by this study can support the recognition of IPV among youths and adolescents as a form of violence sustained by gender stereotypes and the idea that violence is natural from the first affective and sexual relationships, thus leading to the perpetuation of this phenomenon in adult relationships. Furthermore, the findings of this study reveal the need to include this problem as a focal point in health care initiatives for youths and adolescents, based on care practices that mitigate the negative impacts of IPV on their life projects

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