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Article

Family Functionality and Dating Violence Among High School Students in Southern Peru

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Abstract: Adolescence is a crucial transition stage for young people. While many physical, psychological, and social developmental changes are taking place, this may also be the time of a teenager's first love relationship. At this stage of early romance, adolescents sometimes experience violent abusive relationships, and the choices around this reality could be linked to family upbringing and history. The objective of the study was to determine the relationship between such violent encounters in early teenage love relationships and family functionality using the Intrafamily Relationships Evaluation Test (FF-SIL). This study explored the experiences of secondary students at a school in southern Peru in 2022 during the COVID-19 pandemic. A quantitative method was used, entailing a descriptive, cross-sectional, correlational approach. The questionnaire was administered to 153 student respondents. The results show that 45.1% of students come from moderately functional families, followed by 29.4% from dysfunctional families. Likewise, 24% of adolescents report having experienced violence in their relationships, which is relatively equally distributed across all levels of family functionality. Although no significant relationship was found between family functionality and violence (p > 0.05), the present study highlights the existence of bidirectionality in violence between adolescent partners, with a slightly higher incidence in violence perpetrated by women. In terms of violence, the violence received (22%) exceeds the violence exerted (13%) during dating. In both categories, victims of physical violence prevail, and no significant gender differences are found. These results provide a piece of baseline information for preventing adolescent dating violence in education institutions, also a reference for health and other social policymakers.

Keywords: adolescent dating violence; domestic abuse; family dysfunction; Peru; teen dating violence; teenage infatuation; intimate partner violence; aggressive behaviors



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1. Introduction

Adolescence is an important developmental stage when significant physical and psychological changes are happening [1]. It is also a time to enjoy greater autonomy by young people; adolescents begin romantic relationships and have their first dates [2]. This usually means that adolescence is also a period when family flexibility and adaptability are tested [3], leading to potential conflicts. The complicated dilemma between the young

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person's independence and their attachment to their parents looms large among the main issues of adolescence, particularly in developing countries like Peru where family ties are important [4]. Additionally, because of these quandaries and internal conflicts, the teenager (often female) is more susceptible to becoming a victim of violence by their (first) romantic partner. Indeed, Taquette and Monteiro [5] report that the adolescent dating violence (ADV) is deep-seated in the patriarchal culture and frequently linked to family tensions and poverty. Other authors also recognize the role of history of violence amongst family members and friends in encouraging aggressive behavior amongst adolescents [6]. This is further supported by Fatusi and Hindin [7], who point out that in many societies in developing countries, male aggressiveness and female submissiveness, which frequently lead to violent relationships, are simply part of gender identity and culture. This has the effect that ADV may even reach a point of 'normalization' where it is considered as a sign of affection or possession. Adolescence is, therefore, a complex stage when young people are more likely to suffer from anxiety and depression [8]. Promoting more awareness and education has been suggested as a way of reducing conflicts and encouraging more healthy teen relationships in order to better understand this problematic phase [9].

Global figures reveal that at least 15 million adolescent (15–19 years old) females experience sexual violence [10]. In Peru, the 2015 statistics show that 34.6% of adolescents were victims of sexual violence at some point in their lives [11]. Notably, 70% of Peruvian teenagers (especially girls) have suffered psychological violence at home [12]. With respect to the region of Tacna (where this study was carried out) in southern Peru, the Instituto Nacional de Estadística e Informática (INEI) reports that 11.4% of women have suffered physical violence at the hands of their current partners, whilst 44.4% indicate having suffered psychological violence and 8% sexual violence [13].

Adolescent dating violence (ADV) is a public health issue, but it has not been a common research focus [14]. Yet, this development stage is an important opportunity not only to understand the roots and dynamics of ADV but also to take action. This is where prevention programs are essential [15], particularly so when the said victims of violence may also be enduring family conflicts and/be exposed to communal violence (from a group of so-called 'friends'). Any instances or a combination of these scenarios during adolescence can be a factor in intimate partner violence (IPV) during subsequent adulthood [2]. However, during late adolescence, there is a higher gradation of IPV than in young adulthood. It follows that this may be because of the time factor allowing deepening of trust, intimacy, and commitment, which normally accompany cohabitation and marriage [9].

From a systemic perspective and following Bronfenbrenner's ideas focused on his ecological systems theory, the family constitutes an open and self-regulating system, which adapts to the changing needs of its members according to their ages [16]. In other words, the functioning of a family cannot be defined as a "perfect state, but as a dynamic and momentarily balanced process". This echoes with Olson et al.'s theoretical perspective, where family functionality refers to the interconnectedness of emotional ties, the capacity for flexibility, and the level of communication within the family [17]. Furthermore, family functionality captures how individuals relate to conflictive situations and how they manage to adapt to them. This is important as it influences the preservation of health balance or the risk of suffering from diseases, substance abuse or exposure to situations of violence if the system fails [17,18].

Continuing with this line of theoretical appreciations, violence can be seen through the lens of ecological theory. Indeed, following a systems approach, if the system fails, that is, if the relationship between the parts fails, this will be manifested using aggressive Adolescents 2025, 5, 9 3 of 27

behaviors in the individual. These violent patterns lead to the search for physical, sexual, or psychological dominance in couples' relationships [19,20].

The family plays a fundamental role in the lives of its members, providing emotional support, socialization, and stability. However, this important role can also be affected, and it can exacerbate conflicts and crises amongst family members, especially adolescents who may be involved in relationships marked by violence.

1.1. Contextualizing Family Life and Adolescence Life in Latin American and Peruvian Societies

Over the past decades, social changes have transformed the family structure in Latin America, including Peru, moving away from the nuclear family model. This shift has been accompanied by changes in the birth rate as well as the pattern of parenthood and family composition. For instance, an increase in the percentage of two-parent households without children (from 4.5% to 8.5%) and single-parent households (from 8.8% to 11.8%) was noted in 18 Latin American countries between 2002 and 2014 [21]. Likewise, in Peru, the fraction of couples with children decreased from 41% to 39% and the fraction of single-parent families increased from 9% to 13% between 2005 and 2021 [22]. These changes have sparked a debate about their impact on child-rearing and the social aspects of bringing up a child in Latin American countries.

In general, in the Peruvian cultural context, heterosexual families, married or not, and single-parent families persist, along with conservative positions held by the Roman Catholic Church that defends the nuclear family as an ideal, arguing that the absence of a parent can negatively affect the development of children. However, some commentators have challenged this argument claiming that family functionality depends more on factors such as harmony, love, respect, unity and mutual help than on family structure [22].

One can argue that family complexity and heterogeneity have had repercussions on diverse parenting styles, which are influenced by multiple factors that impact the emotional, social and cognitive development of children. There is no single model that guarantees child well-being; adaptability and attention to individual needs are crucial [23]. According to Jimenéz et al. [24], in Latin America mothers more frequently apply discipline and physical punishment strategies, since they assume most of the parenting and care responsibilities [24].

The political and social panorama in Latin America is still unstable and largely unpredictable. Peru, like other Latin American countries, faces serious problems related to an increased rate of crime, especially in the large cities, extreme poverty, inequalities, and, lately, also the discontent and aggression manifested by young people who channel their energy into negative behavior. These problems are exacerbated by the increased number of criminal gangs often linked to the corrosive corruption embedded in the political and institutional Peruvian systems. This panorama limits the opportunities for Peruvian adolescents to develop a stable personal identity, despite family and some educational and social institutional efforts [25].

That said, a recent study about the perception of Peruvian adolescents reveals that the bond with their parents and family who provide security and well-being is central [4]. Moreover, Peruvian adolescents emphasize the value of socialization at school and seem to struggle to distance themselves from parental values in their search for autonomy. Regarding sexuality, they see it as being marked by fear and misinformation, associating partners and sexual relations with pregnancy, and demanding comprehensive sexual education. They report a high incidence of family violence. This corroborates with the UNICEF's report indicating that 75.4% of adults believe that adolescents are increasingly violent [26].

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1.2. Aim of This Study

The overall aim of this study is to explore the relationship between violent encounters in early teenage love relationships and family functionality by using the Intrafamily Relationships Evaluation Test (FF-SIL).

The study focuses on identifying the different types of violence present, both exerted and received. In this study, we use the terms "received" and "exerted" violence, but we are aware of the different ways to label these instances. Aware of the importance of the language used to label violence situations, we have adopted a type of terminology that seems to be more common in the articles we revised. The terms "received" and "exerted" are, we believe, more neutral in their connotations compared to "victims" and "perpetrators" which are more charged, thus making the former terms more suitable for an academic research paper. Furthermore, the validated instrument used to measure these variables employs the levels such as "received" and "exerted" within these relationships. Furthermore, it seeks to discern possible gender disparities in these dynamics, analyzing indicators of centrality and variability. At the same time, this study aims to gain a better understanding of the family environment of adolescents and its possible link with violence in early teenage dating relationships. It is worth mentioning that this study was carried out in southern Peru during the year 2022, analyzing a sample of high school students.

This paper is organized as follows: after this introduction, in Section 2, we explore the relevant literature of the two theoretical strands of this study, *Family Functionality* and *Adolescent Dating Violence*, to frame and contextualize our contribution to the debate. Next in Section 3, we assess the relationship between family functionality and violence, by deploying a quantitative methodology. In Section 4, we present the results, which are then discussed in Section 5. Finally, in Section 6, we advance some conclusions as well as limitations and avenues for new research.

2. Conceptual Background and Literature Review of Key Related Works

This section has a two-fold purpose. First, drawing from relevant studies, we aim to introduce a set of key concepts and to position our contribution in the field. We start by briefly sketching the two strands of the literature that guide our research; that is, works related to (i) family functionality and (ii) violence amongst adolescents. In particular, we discuss the instruments that have been deployed to measure family functionality and violence. Second, we provide a brief discussion summarizing the literature review and our justification as to why we selected the two instruments used in the present study.

2.1. Family Functionality and Family Dysfunction

Family functionality has been studied extensively and there are various studies on functionality related to topics such as quality of life in pregnant adolescents [27], adolescent school performance [28], alcohol consumption in adolescents [3], and even regarding the nutritional status of preschoolers [29]. Overall, functional families are those that have clear roles, open and direct communication, and well-regulated parenting outcomes. Other important characteristics include an organized structure, family cohesion, a nurturing environment, problem-solving skills, and the ability to deal with crises [30]. A further characteristic of family functionality is the way in which signs of affection are expressed within the family.

Relevant to the notion of family functionality is the work of Olson et al. [17] who developed the so-called Circumplex Model that distinguishes sixteen types of family systems based on two main dimensions: family cohesion and adaptation. According to the rigor of the criteria, amongst the 16 types of family systems, 4 are balanced or functional, 8 are moderately balanced or semi-functional, and 4 are the extreme types,

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which are unbalanced or dysfunctional. From this model, they further developed the FACES test (Families and Adaptability Cohesion Evaluation Scales), which evaluates the adaptability and cohesion in family interactions, allowing the assessment of the type of family functionality.

Trujillo-Guerrero et al. [3] indicate that, within the framework of family functioning, if there is a difference in perception between adolescents and parents, it is likely that the adolescent will not interpret the parents' advice and attitude as support or affection. In these instances, it follows that there might be greater vulnerability towards bad habits that can be detrimental to the young person's health and wellbeing.

In contrast, *dysfunctional families* correlate with a set of non-optimal, adverse collective experiences in kinship relationships during childhood. There is likely to be child neglect, a lack of support, acceptance, or problem-solving processes, and an absence of communication [31]. The argument is that these factors jeopardize the overall security and stability of the family [32]. According to Wang et al. [8], family dysfunction is linked to psycho-pathological issues such as anxiety and depression. This is accompanied by low self-esteem experienced by children and teenagers, negative interpersonal relationships, and general loneliness.

Some commentators have argued that *family dysfunction* is directly linked to parental domestic violence, parental separation, mental illness of household members, substance abuse by parents or a household member, and incarceration [33]. Several studies confirm the link between family dysfunctionality and a higher probability of anxiety in middle childhood [31] and adolescence [34]. Additionally, poor sleep patterns among teenagers also lead to a decrease in personal resilience [35]. According to a related study among students in secondary vocational schools, this situation often transpires in young people exhibiting problematic behavior [36].

It can be argued that *family dysfunction* correlates with higher levels of PTSD symptoms. Sayyah et al. [32] analyze the coexistence of three subtypes of adverse child experiences (ACEs) and their effects on mental health in young adults. Among these subtypes are child abuse (abuse and neglect), family dysfunction, and peer victimization (verbal, physical, and relational). The research also confirms that child abuse is associated with higher levels of depression, anxiety, and symptoms of PTSD, aggressive behavior, and drug use. Finally, a study carried out by Núñez-Ariza et al. [37] indicates that among female adolescents, there is a moderate 12.67 likelihood of a dysfunctional family background compared with the male sample average of 15.13.

2.2. Adolescent/Teen Dating Violence (ADV)

Overall, violence is understood as abusive behavior in which one person uses force to exert power over another, causing physical or emotional harm in various ways. Psychological violence, for example, includes actions aimed at disturbing someone's emotional stability with the intention of causing moral harm. This can manifest itself through degradation, which involves stripping someone of their dignity through insults, humiliation and verbal abuse, disinterest and negligence, which consist of ignoring the personal needs of the couple, intimidation, which is manifested through threats and pressure to instill fear without resorting to physical violence, and psychological destabilization, intended to confuse and make the partner feel insecure.

Indeed, in the research conducted by Exner-Cortens et al. [15], almost 28% of ADV victimization prevalence was for psychological aggression and slightly over 9% corresponded to perpetration prevalence for psychological aggression. It is noteworthy mentioning that psychological aggression was most pronounced for both victimization and perpetration prevalence, exceeding other forms of aggression, including physical and cyber. In addition,

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the study shows that 34.1% of male and female adolescents present mutual aggression; that is, the experience of both victimization and perpetration, where the gender differences are insignificant.

The risk age for the onset of such teen dating violence for girls is between 15 and 16 years old or younger; for boys, it is between 18 years old or younger. In the case of the risk of beginning sexual perpetration of ADV, it occurs between 14 and 18 years for boys and girls, but with a higher risk of acting out on the part of boys from 18 years of age [38].

ADV is a concerning issue due to its obvious negative impact on adolescents and the repercussions for adulthood, including physical, sexual, and psychological effects (to which, cyber violence has recently been added [39]. Previous studies suggest that there is an increased risk of ADV due to earlier childhood exposure to violence and related attitudes towards accepting violence [40]. Some have argued that having adverse childhood experiences (ACEs) generates a greater risk of ADV victimization and perpetration, as well as symptoms of anxiety and depression [14,41]. This is worrying due to high percentages of adolescents claiming childhood physical neglect (62%), suffering from physical abuse in childhood (35%), or being a victim of childhood sexual abuse (15%) [42] Indeed, Cho and Kim [43] argue that the probability of victimization in adolescent dating is greater with the presence of previous victimization in childhood. Adolescents who were exposed to parental violence during childhood have a greater risk of early transitions to adulthood. Moreover, adolescents who witness their mothers being victims of abuse tend to have low self-esteem and lack of power to resist sexual advances from their partners [44].

It is worth noting that teenager risk factors, such as bullying, delinquency, and low self-control, as well as protective factors (i.e., attachment to parents, collective efficacy, and connection to school), show a greater leaning towards adolescent depression and anxiety symptoms, than ACEs. With regards to mental health symptoms in adolescence, protective factors may even modify ACEs [45]. Exner-Cortens et al. [15] further report that those young people who are socially marginalized (poverty, xenophobia, transphobia, sexism, and racism) are more likely to have experienced ADV victimization. Indeed, according to Stover et al. [42], 85% of their study participants experienced at least one case of verbal violence, 33% suffered physical violence, and 41% sexual violence, with similar results obtained also for the perpetration of ADV.

Espino et al. [46] analyze poly-victimization and poly-aggression in Spanish students showing that 79% of adolescents with a partner bore the brunt of multiple types of violence. These statistics highlight cyber dating violence (49.6%) and intimate partner violence (47.8%) amongst the victims with similar results being applicable also to aggressors. Importantly, girls were more likely to be polyvictims as well as polyaggressors in dating violence, including cyber dating violence too.

Among the few studies focused on the Caribbean and Latin America, Gabster et al. [47] examine violence in adolescent dating in four urban districts of Panama. They find that a significant proportion of both female and male adolescents report more than one instance of emotional violence during dating, with smaller yet significant proportions of sexual and physical violence. The study also reports greater odds of physical dating violence amongst both girls and boys who had three or more romantic partners in a year.

Finally, Luft et al. [41] report that 21.8% of students in the Dominican Republic experienced at least one form of victimization due to physical abuse and 24.6% reported perpetrating one or more forms of physical abuse. The study also indicates that 24.6% of Dominican Republic students perpetrated physical ADV and 22.5% emotional ADV. Overall, the study finds a significant association between ACEs and physical and emotional ADV victimization as well as perpetration. It is worth stressing, however, that not every

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victim of child abuse becomes a perpetrator or a victim of ADV. Arguably, secure, and trusting family relationships are key to preventing these scenarios [42].

2.3. Summary of Literature Review

Based on the review of the literature, it is evident that the present research sits at the intersection of the field of family functionality and studies exploring violence amongst adolescents in their initial relationships. So far, the study has explored key works to give it the context, chiefly in the form of instruments that will allow us to carry out the empirical analysis to explore the relationship between family functionality and violence amongst teenagers. We do not propose a new approach exploring these themes; we simply study the relationship between them.

As far as family functionality is concerned, this study sought to evaluate family functioning from a relational dynamics' perspective. Therefore, we felt that the conceptual framework of the present study aligns with the seven key variables proposed by Perez et al. [48], that is *cohesion*, *harmony*, *communication*, *affectivity*, *roles*, *adaptability*, and *permeability*. This set of variables addresses aspects such as: family unity in different situations, emotional balance between individual and family interests, clarity in communication between family members, the ability to express positive emotions, fulfilment of family responsibilities, and adaptability to changes.

From various approaches to investigating family functioning, the Intrafamily Relationships Assessment Test (FF-SIL) was selected as the appropriate instrument to measure the relevant variables in this study. This instrument has been used extensively [49,50] and it is considered useful because it covers a wide range of aspects that impact family functionality, including the key variables in this study.

Regarding the second strand of our research, the literature review reveals that violence in adolescent romantic relationships is a serious problem that brings a magnitude of other social and psychological complexities. When compared to the equivalent issue of violence in adult couples, this topic is still relatively under-researched. This is even more so in Latin America, where the subject has barely been examined.

In an adult couple's relationship, an egalitarian power struggle is manifested between the members, reflecting the duality of denomination and subordination. The expression of violence in adolescent couples differs from that of adults because adolescents are in the process of defining their roles and identities. These concepts were initially outlined by Sepúlveda and Leal in 2005, as mentioned by Leal-Soto et al. [51] who subsequently provided the basis for the instrument called 'Adolescent Partner Violence Test'. This instrument was selected for the present study because it fits our objectives to assess the levels of violence amongst adolescents. The test consists of 40 items, each of which describes a specific violent behavior, distributed equally between behaviors exercised and received (20 of each type). The items are grouped according to their content into types of violence: psychological, social, physical, and sexual. As we adapted the instrument to our needs, the item related to economic violence was not included, given that most adolescents sampled for the purpose of our survey depended economically on third parties.

3. Materials and Methods

In order to assess the relationship between family functionality and violence, we deployed a quantitative methodology. This descriptive, cross-correlational approach helped to itemize and examine a relationship between both variables of interest. The available population consisted of 344 senior students aged 15 to 18 (162 fourth-year students and 182 fifth-year students) from a highly reputable mixed-gender secondary institution in Tacna, Peru (Table 1). The sample was made up of 153 students, with 43% from year 4 and

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56% from year 5. The calculations were based on a finite population formula and used stratified probability sampling. The inclusion criteria were as follows: (i) the sample was formed by students formally enrolled in the institution and who consented to participate in the study, and (ii) selected students had to be currently in a relationship or have had previous experience in romantic relationships at the time of application of the instrument. The latter was self-reported.

Table 1. Demographic characteristics of a sample of high school students in southern Peru, Tacna—2022.

Characteristics	n	%
Sex		
Masculine	60	39.2
Feminine	93	60.8
Age		
15–16 years	134	87.60
17–18 years	19	12.40
Class		
Year 4	70	46.00
Year 5	83	54.00
TOTAL	153	100

The invitation to participate was sent to individuals of both sexes regardless of their socioeconomic situation.

3.1. Research Protocol

To conduct the study in all its stages, we followed a research protocol supported by the Directorate of the Professional School of Nursing. Briefly, this protocol consisted of the following steps. Initially, a letter was sent to the high school principal requesting permission, which was verbally accepted and later confirmed in writing. The day and time for administering the questionnaire were coordinated with the classroom tutors. Students who met the study criteria were invited and were provided with a detailed explanation of the objectives, confidentiality, and anonymity. Protocol-related documents together with the full correspondence between the project team and with the school headmaster are in Spanish; this correspondence is available upon request from the corresponding author. Once the students voluntarily confirmed their participation, a series of interactive sessions were held. These sessions contributed to improving understanding and strengthening the relationship between the project team and the participants. During these sessions, a further explanation of the purpose and objectives of the research was provided, and students were encouraged to complete the questionnaire.

In this context, the ethical principles of autonomy, beneficence, non-maleficence, and justice [52] were prioritized. Furthermore, it was considered of utmost importance to respect the informed consent as an essential component of the ethical process of our research.

The actual survey was carried out in July 2022 during the COVID-19 pandemic period. All health and safety procedures established by regional health authorities were followed. Ethical considerations were kept in mind throughout the study. The students were approached in their study classrooms, the questionnaire was issued to each student, and, after full explanation by the researcher team, they proceeded to respond. In addition to emphasizing ethical research principles, it was made clear to the students that providing answers was voluntary and did not involve any reimbursement for participation.

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3.2. Description of the Instruments

Two instruments were selected to collect the study data.

The first one, as mentioned above, is called *Intrafamily Relationships Evaluation Test FF-SIL* [53] which measures the *Family Functionality* variable. The test is a self-report that quantitatively evaluates family functionality. The provision instrument was developed and validated by thirty experts [48]. The Spanish version was validated and published by Pérez Gonzales et al. [48]. In addition, it has been used in various investigations to date [54]. This version is available in Appendix A, which was applied in our study. To facilitate understanding, the English translation made by the authors is also presented, which is available in Appendix B.

The instrument consists of a series of 14 situations that may or may not occur in the family (see Appendices A and B). There are two situations for each of the seven dimensions to be measured: cohesion (items 1 and 8), harmony (items 2 and 13), roles (items 3 and 9), affectivity (items 4 and 14), communication (items 5 and 11), adaptability (items 6 and 10), and permeability (items 7 and 12). Pérez and his team [48] reflect on these seven variables as key dimensions and describe them as follows: cohesion is the physical and emotional union between family members to face different situations and make decisions related to daily activities; harmony involves finding a positive emotional balance between the individual interests and needs of family members and the family as a whole; communication refers to the ability of family members to clearly express their experiences and thoughts directly; permeability is described as the family's ability to exchange experiences with other families and institutions, both receiving and giving; affection indicates the ability of family members to experience and express positive feelings and emotions to other members; roles are the responsibilities and functions that each member of the family fulfils, which have been negotiated within the family nucleus; and adaptability refers to the family's ability to adjust its power structure, distribution of roles and rules to situations that require it.

The responses were assessed using the five-point Likert scale, with one corresponding to "never"; and five being "always". Thus, the final score ranges from 14 to 70 points, with higher scores pointing to a functional family and lower scores to a dysfunctional family, subject to how cohesion, communication, and harmony are presented, as well as how the members assume their clear and previously defined roles. Four groups related to the final score can be identified, as suggested by Ortega et al. [53]: 70 to 57—Functional Family; 56 to 43—Moderately Functional; 42 to 28—Dysfunctional Family; 27 to 14—Severely dysfunctional. In addition to providing the overall score, the instrument used allows each variable to be analyzed separately.

Some example questions testing different dimensions within the Intrafamily Relationships Evaluation Test FF-SIL are as follows:

- Cohesion: Are important decisions made in the family?
- Harmony: Does harmony predominate in my house?
- *Communication:* Does each person fulfil their responsibilities in my family?

The second instrument, *Test of violence in adolescent couples*, was developed and validated by Leal-Soto et al. [51], which measures the variable *Violence* when falling in love stage. The Spanish version of the instrument applied in this study is available in Appendix C. For comprehension purposes, it is also presented in the English version (translated by the authors) in Appendix D.

It evaluates four types of violence: *physical*, *psychological*, *sexual*, and *social*. After careful consideration of the context in which the evaluation is developed, as well as the pre-established characteristics and criteria of the target population, the decision was made not to include the category of social violence in the study. This choice is motivated by noting that in previous years there was a COVID-19 pandemic situation that implied important

social restrictions for most people. In this scenario, it is understandable that the effects of the COVID-19 pandemic have impacted social dynamics, which could distort the results related to social violence. Therefore, to ensure the accuracy and reliability of the collected data, it was decided to focus solely on the measurement of the three specific forms of violence mentioned.

As such, the final questionnaire consists of 30 instead of 40 items (See Appendices C and D). These 30 items are divided equally between those related to violence received and violence exerted (15 items each), to measure the three different forms of violence (psychological, physical, and sexual). To record the responses, a 5-point Likert-type scale was used, with 1 representing "never"; and 5 "always". To obtain a score, the responses of the Likert scale are dichotomized, generating a binary variable. The latter implies that the values of "never" (score 1) and "rarely" (score 2) are grouped together indicating the absence of violence, while the values of "sometimes" (score 3), "very often" (score 4) and "always" (score 5) are grouped together to indicate the presence of violence [51]. Likewise, the instrument allows us to establish the three types of violence and measure the violence exerted and violence received separately. Below we present some examples of the statements (items) that appear for each construct when using the instrument to evaluate violence received (A) and violence exerted (B) in adolescent couples:

- Physical violence: (A) Your partner has punched you or slapped you; (B) You have punched or slapped your partner (items 1, 4, 7, 10, 13, and 14);
- Psychological violence: (A) Your partner makes you feel that you are guilty of everything; B) You make your partner feel that they are guilty of everything (items 2, 5, 8, and 11);
- Sexual violence: (A) Your partner forces you to have sexual relations when you do not want it; B) You force your partner to have sexual relations when they do not want it (items 3, 6, 9, 12, and 15).

3.3. Reliability and Validity of Instruments

To examine reliability, a pilot test was applied to 20 fourth- and fifth-year students from a secondary school in the Tacna region. High reliability in form of *Cronbach's Alpha coefficients* of 0.935 for the first instrument (FF-SIL Intrafamily Relationships Assessment Test) and 0.905 for the second instrument (Partner Violence in Adolescents) was obtained.

To test validity, both instruments were subjected to expert judgment and Aiken's V coefficient was used to evaluate content validity. In the test of the first instrument (FF-SIL Intrafamily Relationships Assessment Test) the results obtained per item ranged between 0.90 and 1. The Aiken V coefficient was 0.97, which indicates that the collection instrument has high validity. For the second instrument (Partner Violence in Adolescents) the 30 items evaluated reached a value of 1, which suggests that the collection instrument has excellent validity.

After data collection, a descriptive analysis was carried out employing univariate tables for the *family functionality* variable, categorized by score levels. In addition, the *violence* variable was addressed, differentiating between violence received and exercised, and classified by the type of violence and sex.

For the inferential analysis, single and double entry contingency tables were generated, which allowed associations to be established between the two variables. Because both variables are categorical, it was decided to apply the Chi-square test to determine the relationship between them. Likewise, considering that the violence variable was evaluated using a Likert scale, average scores were calculated and differences in violence based on sex were examined. Since the data were not normally distributed, the Mann–Whitney U test was used to compare scores between groups.

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4. Results

In this section, we present the results of the survey. We start with Table 1, which depicts the main features of the sample of 153 adolescents participating in our study. At this stage it is necessary to clarify that we did not apply a stratified sampling strategy because the strata involving gender, age, or the year of study would be too small and there might not be too many differences between the strata. That said, the sample gender proportion roughly resembles that of the population gender proportion.

4.1. Family Functionality

The evaluation of *family functionality* is presented in Table 2, where 45.1% of the 153 students fall into the category of a *family with a moderate level of functionality*. This suggests that although there are various issues, there are still signs of protection in the family. A concerning result is the 5.2% of students belonging to *families with serious dysfunction*, indicating significant problems in family dynamics. It is worth noting that only 20.3% of students report to be part of a *functional family*. This highlights that only a minority of students enjoy a cohesive and adaptable family environment.

Table 2. Level of family functionality reported by students at a high school in southern Peru, Tacna—2022 (based on Intrafamily Relationships Evaluation Test (FF-SIL)).

FAMILY LEVEL OF FUNCTIONALITY	N	%
Severely dysfunctional family	8	5.2
Dysfunctional family	45	29.4
Moderately functional family	69	45.1
Functional family	31	20.3
Total	153	100.0

4.2. Absence and Presence of Teenage Dating Violence

To measure Teenage Dating Violence, we followed the dichotomization recommended by the instrument's developers. Hence, the values on the scale indicating "never" or "rarely" were considered indicative of the *absence of violence*, whereas the values corresponding to "sometimes", "very often" and "always" indicated the *presence of violence* [51]. This approach is based on the need to distinguish between sporadic episodes of violence and those that occur regularly. After the process of dichotomization, it was found that 24% (37 out of 153 adolescents) reported the presence of violence in their romantic relationships.

4.3. Types of Violence and Violence Received/Exerted

The presence of different types of violence (physical, psychological, and sexual) was evaluated separately, in the context of the presence of violence, and is depicted in Table 3. The latter shows the number of times in which an adolescent reported *one* or *two* or even *three* types of received or exerted violence.

Table 3. Types of violence present in adolescent relationships.

Type of Violence	Received Exerted			
	n	%	n	%
Physical	22	14.4	20	13.07
Psychological	20	13.07	12	7.8
Sexual	18	11.8	12	7.8

Regarding the types of violence received in relationships, 14.4% reported physical violence, followed by psychological violence (13.07%) and, lastly, sexual violence (11.8%).

Regarding the types of exerted violence, physical violence stands out with 13.07%, followed by psychological and sexual violence, both accounting for 7.8%.

It is worth noting that amongst those who indicated the presence of violence in their relationships (37 students), 33 (21.6%) of them reported having received violence, whilst 20 (13.07%) had exerted violence. Hence, some students have received and at the same time exercised violence.

It is worth highlighting when analyzing the above data that it is found that of the group of adolescents who received violence, 63.6% (21 adolescents) report having received more than one type of violence. Similarly, in a group that exercised violence, 70% (14 students) report having exercised two or more types of violence. These results broadly corroborate with the literature review's findings concerning the problems of poly-victimization and poly-aggression, thus, situations in which adolescents suffer and exert multiple types of violence (e.g., Espino et al. [46]).

4.4. Types of Violence According to Gender

The results showing types of violence received and exerted are broken down by gender in Table 4. In the context of violence received amongst girls, physical violence dominates with 9.2% (14 girls), followed by psychological and sexual violence, both with 7.2% (11 girls in each category). Regarding the violence received amongst boys, psychological violence is more pronounced with 5.9% (9 boys). In relation to violence perpetrated by adolescents, a similar trend is observed: the physical violence dominates amongst girls with 9.2% (14 girls) followed by sexual violence with 7.2% (11 girls), and psychological violence with 6.6% (10 girls). For boys, physical violence is the most exercised with 3.9% (6 boys), followed by psychological and sexual violence, respectively. It is evident that different forms of received and exerted violence dominate amongst girls and boys, with a clear dominance of physical violence amongst female participants. For male participants, the dominant type of violence changes from violence received to violence exerted.

Violence Received (33) Violence Exerted (20) **Boys** Girls Total **Boys** Girls **Total** % % % % % Type n n n n n n 9.2 3.9 **Physical** 8 5.3 14 22 14.4 6 14 9.2 20 13.1 9 5.9 7.2 20 2 1.3 12 7.8 **Psychological** 11 13.1 10 6.6 7 Sexual 4.6 11 7.2 18 11.8 1 0.7 11 7.2 12 7.8

Table 4. Types of violence present in adolescent relationships according to gender.

Table 5 presents the mean scores for the types of violence broken down by gender. A slightly higher score is assigned to girls compared to boys in both violence received and exercised for most types of violence, apart from sexual violence received. This pattern is especially evident regarding physical violence, where girls record higher scores for violence received (score 1.19) and exercised (score 1.18) compared to boys (1.17 and 1.11, respectively). A similar pattern is observed in psychological violence. However, a higher score is reported in sexual violence received by boys (score 1.18), whilst girls have a higher score for sexual violence exercised (score 1.13 compared to that of 1.07 by boys). Interestingly, the score for sexual violence received by boys is the highest score amongst the scores assigned by male participants to different types of violence (both received and exercised).

Table 5.	Average	scores o	f the	types	of	violence	by	gender	(based	on	the	Adolescent	Couples
Violence Te	est).												

Types of Violenc	e	Boys (n = 63)	Girls (n = 90)	Total (153)
Physical	Received	1.17	1.19	1.18
•	Exerted	1.11	1.18	1.15
Psychological	Received	1.15	1.16	1.16
, 0	Exerted	1.07	1.13	1.1
Sexual	Received	1.18	1.15	1.16
	Exerted	1.07	1.11	1.09

The study sample data include 63 men and 90 women who reported ratings based on a Likert scale. Since the data did not follow a normal distribution, the Mann–Whitney U statistical test was applied, which did not reveal significant gender differences between the different types of violence; that is, physical violence received (U = 2.925, p = 0.692), received psychological violence (U = 2.804, p = 0.891). received sexual violence (U = 2635, p = 0.33), physical violence exerted (U = 2865, p = 0.871), psychological violence exerted (U = 2.911, p = 0.667), and sexual violence perpetrated (U = 2.912, p = 0.65). These results suggest that there are no significant differences in the perception and experience of violence between genders in the types of violence evaluated.

4.5. Family Functionality and Dating Violence in Teenagers

The relationship between the family functionality and dating violence in teenagers is shown in Table 6. As shown earlier, the results indicate that 24.18% (37 out of 153) of adolescents acknowledge violence in their relationship. Intimate partner violence is present amongst 25.81% of adolescents in functional families, 24.64% in moderately functional families, 22.22% in dysfunctional families, and amongst 25% of adolescents in severely functional families. Thus, the level of family functionality does not seem to affect the violence reported, with the latter being relatively equally distributed across the different functionality types. Indeed, upon the application of the Chi-square test, no significant relationship was found between these two variables [p = 0.985 > 0.05].

Table 6. Family functionality and violence in teenage relationships.

	Vio	lence	No-Vi	iolence		nce and iolence
_	n	%	n	%	n	%
Severely dysfunctional family	2	25.00	6	75.00	8	(5.2%)
Dysfunctional family	10	22.22	35	77.78	45	(29.4%)
Moderately functional family	17	24.64	52	75.36	69	(45.1%)
Functional family	8	25.81	23	74.19	31	(20.3%)
Total	37	24.18	116	<i>75.80</i>	153	(100%)

 X^{2} (3, N = 153) = 0.15, p = 0.985. Where X^{2} (degrees of freedom, $N = sample \ size$) = chi-square statistic value.

It is important to mention that the present study also examined the relationship between *violence exerted* and *violence received*, on one side, *and family functionality*, on the other side. The Chi-square test showed no association with either of these two violence categories (X^2 (3, N = 153) = 0.51, p = 0.91 and X^2 (3, N = 153) = 1.85, p = 0.6, respectively).

5. Discussion of Results

The discussion follows the order of the presentation of our results in the previous section. Specifically, we attempt to link the following three questions to frame the discussion:

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(1) What do the findings mean for our understanding of the problem? (2) How do these findings compare to what other researchers have found? and (3) Do these results support, challenge, or extend the existing literature?

5.1. Family Functionality

The results of our study indicate that 45.1% of adolescents perceive their families as moderately functional. Comparable results are reported in Peruvian studies, such as Quispe et al. [55] as well as Alayo and Borrero [56], who find 44.1% and 56% of families to be moderately functional, respectively. Similar results are obtained in other contexts, with Murillo and Rodríguez-Orozco [57] reporting 60.3% and Romero and Giniebra [58] providing an account of 44.21%.

These results show that whilst family fulfils its basic functions of support, protection and care, some dimensions need to be strengthened [58,59]. These are permeability and adaptation. Although there is no serious dysfunction, it seems that the levels within these dimensions (18% and 15%, respectively) are not optimal for the well-being of adolescents. This, in turn, highlights the need to improve the processes of change that facilitate family adaptation and the strengthening of its members [58,60,61].

When presenting the results on functionality in adolescents' families, it was decided not to differentiate between sexes. This decision was based on the premise that family functionality is not determined by the adolescent's gender. Rather, the dynamics and functioning of a family depend on multiple factors, such as communication, cohesion, emotional support, and conflict resolution, among others. In this sense, gender is not a relevant determinant for assessing family functionality.

5.2. Absence, Presence and Types of Violence in Relationships Between Adolescents

According to our study, 24.2% of adolescents report violence in their romantic relationships, where the percentage varies from 7% to 14% depending on the type of violence. Among students who experience violence, some are both victims and aggressors, while others only play one of these roles. The highest percentage of 21.6% is linked to the VSG *received*, with physical violence received prevailing (14.4%) followed by psychological violence received (13.07%).

This is consistent with the results of Luft et al. [41] who reported greater victimization by physical violence (21.8%) compared to psychological violence (18.3%). However, it contrasts the findings of Gabster et al. [48], where emotional abuse predominated (67%), followed by physical violence (23%) and sexual violence (17%). Exner-Cortens also found a greater prevalence of psychological violence (27.8%) over physical violence (11.8%). For their part, Stover et al. [42] observed verbal violence in 85% and physical violence in 33% of received violence, while Espino et al. [46] reported cyberdating as the main type of violence (49.6%).

Regarding the violence exercised, 13.07% of physical violence and 7.8% of psychological and sexual violence were found. Luft et al. [41] also reported a higher level of physical violence (24.6%) compared to psychological violence (22.5%). This again contrasts with Exner-Cortens et al. [15], who found greater psychological violence (9.3%) and less physical violence (7.3%), even less than in the case of cyber violence. Stover et al. [42] and Garrido [62] highlight the prevalence of verbal violence in the context of violence exercised as much as in the context of violence received, while Espino et al. [46] report cyber violence as the main one (50.3%) in the context of violence exerted.

Existing findings on types of violence perpetrated and received seem to concur in that psychological and physical violence are the two most common types of violence among young couples [41,42,63]. Furthermore, controlling actions and jealousy are often justified

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under romanticism, and, in cases of domestic violence, these behaviors are present from the beginning of the relationship. Although cyber violence was not measured in this research, it is worth noting that its importance is increasing [47].

Violence in teenage dating relationships is a common and not new phenomenon. A 2011 longitudinal study conducted at American universities identified the trends and characteristics of this type of abuse. It established that 84% of victims also perpetrated violent acts, highlighting the mutual nature of violence in these relationships. These types of relationships tend to develop patterns of abuse over time, which in most cases are considered cyclical and are exacerbated even more when the victim takes the role of aggressor, thus, imitating the behaviors experienced in the relationship and justifying them by their nature [64,65].

5.3. Types of Violence According to Gender

In our study, no significant differences were found between sexes (p > 0.05) when analyzing violence, which suggests a bidirectional violence. Moreover, the study revealed that women exert more violence, which coincides with the results of Leal-Soto et al. [51]. Other studies such as Garrido et al. [62] and Juárez et al. [63] corroborate the bidirectionality of violence. The bidirectionality of violence represents a complex phenomenon and is influenced by various social, psychological, and cultural factors. Women often resort to physical violence as a defense against previous aggression from their partners, and those who have been exposed to high levels of violence or have normalized aggressive behaviors tend to repeat these patterns, adapting to past violent experiences within the relationship [65].

Indeed, Gómez and Rojas-Solís [66] as well as Rodríguez and Soriano [67] found that male adolescents report having suffered more dating violence. These changes in the diversification of roles may be due to the socio-cultural transformations to which adolescents are exposed, which seek to eliminate the erroneous idea of a submissive woman, thus increasing the probability of an increase in violence.

If the relationship fails, violent behaviors emerge for men and for women. Violent behaviors emerge with greater intentionality and frequency and seek to regain control or avoid suffering in the face of a breakup. These attitudes reflect the inability to resolve conflicts in a healthy way and the internalization of violence as an immediate solution to the relationship [65]

Nonetheless, it is important to note that while violence occurs in both directions, violence perpetrated by men usually has greater physical repercussions on women due to men's physical advantage. Whilst this aspect cannot be overlooked in the interpretation of our results, the consequences of physical injuries inflicted remain beyond the scope of this study.

5.4. Violence and Age

This research involved adolescents aged 15 to 18 years, with 20.3% of those aged 15 to 16 reporting violence in the relationship (VAD). This result is aligned with Shorey et al. [38], who point out that physical violence in VAD begins between the ages of 15 and 16 in women and before the age of 18 in men. This age is key, as it coincides with the first romantic relationships, while conflict resolution skills are still developing.

Recent studies in our context reveal that at early stages of adolescence, young people can show violent behavior without being aware of it, minimizing physical, psychological, and sexual aggression in their relationships. Minimal awareness of violence in the context of romance could be linked to the normalization of such behaviors. Adolescents, being in a process of constant emotional and cognitive development, may not have reached the

necessary maturity to discern between power and control dynamics, thus highlighting the need to identify warning signs and control falling in love in time to seek adequate help [68].

5.5. Family Functionality and Violence in Teenagers

Our study found that violence is not affected by family functionality and occurs in couple relationships at all levels of the latter, with percentages ranging from 22 to 25. Hence, no statistically significant relationship was found between family functionality and violence (p > 0.05).

Our evidence on the prevalence of violence in relationships aligns with the statistics reported by the WHO, which estimates a similar extent of violence with 24%. This reinforces the seriousness of this phenomenon as a public health and human rights problem that affects all regions of the world endemically ([69], page 4).

We also note that Gómez et al. [66] establish that family functionality, evaluated through the prism of cohesion and adaptability, presents very low correlations, thus, pointing to having a little influence on violent interactions. This supports our finding highlighting no statistically significant correlation between violence and the different levels of family functionality.

However, the study by Reyes and Oyola [59], which analyzed the relationship between family functionality and risk behaviors in students of health sciences, found a statistically significant positive correlation between these two variables. Indeed, family functioning problems can predict the psychological abuse exercised and suffered during courtship. In dysfunctional family contexts, adolescents may lack social skills that limit their effective communication and management of emotions, resorting to harmful actions within the interpersonal relationship such as manipulation, and bullying, among others [59].

Overall, our findings reveal that violence is present in families characterized by all types of functionalities, even in functional families. Although the literature generally considers functional families as a protective factor, our study demonstrates that violence is manifested regardless of the level of family functionality.

The presence of violence in a couple's relationship in adolescence leads to a greater risk of revictimization in adulthood, probably because at this stage the development of the identity of the romantic relationship is relevant. This can also be linked to future implications including multiple health consequences, such as mental and substance use problems [15]. These are commonly observed in adolescents exposed to witnessing violence against the mother, excessive use of alcohol or participation in couple fights [70]. Hence, it is important to acknowledge that whilst these events might affect family functionality, they have not been explicitly accounted for in our study when measuring the latter.

To summarize, the present examination finds no significant relationship between family functionality and family violence in adolescents, despite evidence suggesting an interrelation. This could be due to uncontrolled factors, such as the socioeconomic or cultural context of the families studied. Furthermore, violence can occur in different forms at different levels of functionality, which makes it difficult to detect and isolate its effect from other factors considered in this study.

6. Conclusions

Relationships have their origin in the deepest interpersonal interactions, seeking to satisfy emotional needs. They represent the first love experiences that coincide with the stage of adolescence and can establish patterns of interaction that will influence future emotional relationships. For this reason, it is important to study them, since a high incidence of aggression that has been observed in adolescent couples in this study, might have important future implications. Indeed, the antecedents represent a high risk of increasing

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domestic violence. The normalization of possessive and controlling behaviors is a barrier to identifying contexts of violence and is mistakenly considered a manifestation of traditional romanticism [66,71].

Results of our study suggest that there is no direct influence between family functioning and violence during the early stage of adolescent romance. It is observed that most adolescents involved in violent relationships perceive their families as moderately functional. Furthermore, it is crucial to recognize that although the family may be functioning adequately in terms of harmony, cohesion, communication, adaptation and permeability, other external factors could be contributing to this dynamic.

The present research also reveals that during courtship, the violence received exceeds the violence exerted. Furthermore, it is highlighted that physical violence is more prevalent among girl victims, whilst sexual violence received dominates amongst boys. However, the gender differences found are not statistically significant. These findings highlight the importance of addressing violence received in couple relationships during the dating stage with a special focus on prevention.

Overall, it is difficult to point out a single factor as the cause of violence. It is also undeniable that behavioral patterns are influenced by the family context, which is responsible for the formation of its members and the way they see and interpret the world. Consequently, a family life with low functionality or with constant problems and violence, can give rise to negative factors affecting the adolescents' relationships as a couple [66,72]. The complexity of this problem has been corroborated by a recent report by the WHO in which it was noted that the prevalence of partner violence amongst adolescent girls in Andean Latin America was 28%, that is higher than the global average of 24% ([69], page 4).

Based on these findings, we recommend that educational institutions actively liaise with parents, aiming to provide genuine parental support to help young people to move into adulthood and reduce conflict with parents. This could detect certain shortcomings that may affect family functioning. Furthermore, it is important to monitor students, with greater emphasis on those who have begun falling into the love stage. Here, the aim would be to guide them through the intervention and support of tutors. The latter can act as mediators for the resolution of adolescent couples' problems. Additionally, it should be mentioned that the Regional Health Directorate in Tacna, Peru, where the study has been conducted, provides resources to boost the efforts of health professionals such as nurses and psychologists in educational institutions. Embedding these resources by schools would help to mitigate risks of poor mental and emotional development among adolescents. We expect our results to form a baseline reference for schools and other educational institutions in Peru and beyond so that they can work on prevention. Additionally, there is a wider public interest in the results of the present study, which could act as a point of reference for health, youth, and social care policymakers. More specifically, this data may be used to guide the planning, programs, and activities of their respective ministries and regional and local council departments.

We can summarize the article's contribution as being three-fold. First, our research highlights the significance of violence during the first love experiences, when first experiences of the relationship as a couple begin, and explores how family functionality operates in the context of these experiences. Second, it characterizes violence in teenage dating early experiences according to type, gender, and age, which further underlines the need to promote healthier and safer relationships amongst adolescents. Third, the study highlights the need to explore other potentially more influential factors in addition to family functionality, suggesting a review of approaches and methods and pointing to the need for a broader and multifaceted perspective in this type of research. Thus, we believe that this paper will

contribute to the debate on this problematic situation by providing new relevant evidence and encouraging further investigation, potentially of a more qualitative nature.

6.1. Limitations

Among the limitations of the research, it is necessary to point out that the study took place during the COVID-19 pandemic. This was a time when confinement, lack of personal space and the reduction of activities (outside the home) were (inherently) risk factors that could jeopardize family and domestic dynamics. Yet, one can argue that these external elements also increased the likelihood of protective factors that could promote family cohesion, thus, working towards a single objective. All these elements involved could have influenced the results of the investigation on the presence of ADV. Also, the low ADV percentages could be because regular basic education became virtual during COVID-19, thus limiting adolescents' access to each other. Another limitation of this study is that the survey comprises adolescents between a short age range of 15 to 18 years, so these results must be interpreted cautiously.

A further limitation of the study is related to the participation and reporting bias in relation to intimate partner violence. Adolescents facing more serious situations may hesitate to disclose information and not respond truthfully, which could underestimate the prevalence of violence and affect the validity of our findings.

Another potential limitation of the study is that it does not account for possible relationships between study participants. Whilst we recognize that this could introduce bias in the interpretation of our results, we defend it by noting the sensitive nature of the participants' self-reported data, where requesting this precise information could potentially discourage students from participating in fear of their responses becoming identifiable. Moreover, this information was not essential for establishing the relationship between our key variables, namely the family functionality and ADV.

Finally, this study used a relatively small sample (n = 153) corresponding to a specific region of southern Peru with particular social and cultural characteristics. Therefore, the results reported here need to be considered in the light of these limitations. Another limitation of the study is the fact that it did not explore cases of reported or underreported violence experienced. Regarding the analysis of the phenomenon studied, it is based on the recognition that violence in adolescent relationships does not arise spontaneously, but rather has a multifactorial origin. This requires expanding studies to explore other factors that allow for cause-effect analysis, which could more accurately reflect the relationship between family functionality and violence.

As far as the statistical analysis is concerned, we are aware that the Chi-square test might have been replaced by more advanced econometric techniques, such as a regression analysis to explore the association studied here. However, given the relatively small sample and limited number of explanatory variables, the Chi-square test is sufficient to examine the association between family functionality and violence.

6.2. Future Research

For future research, it is suggested to consider a larger number of schools and diverse socioeconomic contexts to obtain more representative results.

From a methodological point of view, data collection could be diversified using qualitative methods, such as interviews or focus groups, to delve deeper into adolescents' experiences and perceptions of family functionality and violence in falling in love.

In addition, longitudinal studies could be carried out that allow adolescents' views to be followed over time and, crucially, to observe the evolution of family and relational dynamics, as well as their impact on intimate partner violence. It would also be valuable

to carry out explanatory studies that associate and predict the influence of one or more variables on the dependent variable. Additional variables that may be included could be peer influence, emotional education, and access to appropriate resources.

Another avenue for future research could be to conduct and assess a type of experimental research that implements comprehensive sexual education programs that include not only physical health, but also emotional health and healthy relationships. Evaluating such programs will help to explore ways to empower adolescents in their emotional bonds. In this way, future research could offer a broader and deeper understanding of the relationship between family functionality and intimate Partner Violence in Adolescents.

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Informed Consent Statement: Access to students was requested and granted. The research team coordinated with the classroom tutors to gain access to the students who met the inclusion criteria. The objective of the study, confidentiality, and anonymity were made known to all students, stressing the fact that participation was voluntary. All documents are accessible and have been granted permission by the school headmasters, and they are available from the corresponding author by request. Correspondence between the research team and school headmaster is in Spanish.

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Appendix A (Spanish)

Table A1. Intrafamily Relationships Evaluation Test FF-SIL.

A	FUNCIONAMIENTO FAMILIAR	CN	PV	AV	MV	CS
1	¿Su familia toma decisiones en forma conjunta en los aspectos importantes de la vida?					
2	¿Considera usted? que su familia vive en armonía?					
3	¿En su familia cada integrante cumple con sus obligaciones?					
4	¿En su familia demuestran con frecuencia las manifestaciones de cariño?					
5	¿En su familia puede usted expresar de forma clara lo que siente y piensa?					
6	¿En su familia aceptan sus defectos y los sobrellevan?					
7	¿En su familia consideran las experiencias de otras familias ante una situación difícil?					

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Table A1. Cont.

A	FUNCIONAMIENTO FAMILIAR	CN	PV	AV	MV	CS
8	¿Cuándo algún integrante de la familia tieneproblemas los demás lo ayudan a resolverlo?					
9	¿En su familia se distribuyen las obligaciones y/o tareas de forma equitativa?					
10	¿Las costumbres familiares se pueden cambiar en casos necesarios?					
11	¿En su familia usted puede conversar de diferentes temas sin temor?					
12	¿Ante los problemas su familia es capaz de buscar ayuda en otras personas?					
13	¿En su familia respetan sus decisiones e intereses?					
14	¿En su familia se demuestran el cariño que se tienen?					

CN: 1 p. (casi nunca) PV: 2 p. (pocas veces) AV: 3p. (a veces) MV: 4 p. (muchas veces) CS: 5 p. (casi siempre).

Instrumento de tipo autoinforme que evalúa cuantitativamente la funcionalidad familiar, en base a 7 dimensiones. Consta de 14 situaciones que pueden suceder en la familia, dos interrogantes por cada dimensión, los cuales son: cohesión (ítem 1 y 8), armonía (ítem 2 y 13), roles (ítem 3 y 9), afectividad (ítem 4 y 14), comunicación (ítem 5 y 11), adaptabilidad (ítem 6 y 10), permeabilidad (ítem 7 y 12)

NIVEL DE FUNCIONALIDAD FAMILIAR.

Familia severamente disfuncional	14–27 puntos
Familia disfuncional	28–42 puntos
Familia moderadamente funcional	43–56 puntos
Familia funcional	57–70 puntos

Appendix B (English, Translated by the Authors)

Table A2. Intrafamily Relationships Evaluation Test FF-SIL.

N°	FAMILY OPERATION	N	R	S	MT	A.
1	Does your family make decisions together in important aspects of life?					
2	Do you consider that your family lives in harmony?					
3	In your family, does each member fulfil their obligations?					
4	In your family, do you frequently show expressions of affection?					
5	In your family, can you clearly express what you feel and think?					
6	In your family, do they accept your defects and overcome them?					
7	In your family, do you consider the experiences of other families in a difficult situation?					
8	Do other family members help you solve problems?					
9	In your family, are obligations and/or tasks distributed equitably?					
10	Can family customs be changed if necessary?					
11	In your family, can you talk about different topics without fear?					

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Table A2. Cont.

N°	FAMILY OPERATION	N	R	S	MT	A.
12	When faced with problems, is your family capable of seeking help from other people?					
13	Do your decisions and interests get respected in your family?					
14	Does your family show the love they have for each other?					

N: 1 p. (never) R: 2 p. (rarely) S: 3p. (sometimes) M T: 4 p. (many times) A: 5 p. (always).

Self-report instrument that quantitatively evaluates family functionality, based on seven dimensions. It consists of 14 situations that can happen in the family with 2 questions for each dimension, which are cohesion (item 1 and 8), harmony (item 2 and 13), roles (item 3 and 9), affectivity (item 4 and 14), communication (item 5 and 11), adaptability (item 6 and 10), and permeability (item 7 and 12)

FAMILY LEVEL OF FUNCTIONALITY.

Severely dysfunctional family	14–27 points
Dysfunctional family	28–42 points
Moderately functional family	43–56 points
Functional family	57–70 points

Appendix C Spanish

Table A3. Test de Violencia en parejas de Adolescentes.

N°	AFIRMACIONES	N	CN	AV	CS	S
1	(A) Tu pareja te ha dado golpes de puño o cachetadas.					
1	(B) Tú le has dado golpes de puño o cachetadas a tu pareja					
2	(A) Tú pareja te amenaza con dejarte si no haces lo que él(ella) dice.					
2	(B) Tú amenazas a tu pareja con dejarlo(a) si no hace lo que tú dices.					
3	(A) Tú pareja te obliga a tener relaciones sexuales, cuando tú no lo deseas.					
3	(B) Tú obligas a tu pareja a tener relaciones sexuales, cuando él (ella) no desea.					
4	(A) Cuando tu pareja se enoja te da golpes de pies.					
4	(B) Cuando te enojas le das golpes de pies a tu pareja.					
5	(A) Tu pareja te hace sentir que eres culpable de todo.					
5	(B) Tú haces sentir a tu pareja que es culpable de todo.					
6	(A) Tú pareja se enoja si no le permites caricias					
6	(B) Tú te enojas si tu pareja no te permite caricias.					
7	(A) Tú pareja te ha golpeado con algún tipo de objeto.					
7	(B) Tú has golpeado a tu pareja con algún tipo de objeto.					
8	(A) Cuando tu pareja se descontrola te grita, te ofende, te ridiculiza.					
8	(B) Cuando te descontrolas le gritas, ofendes, o ridiculizas a tu pareja.					
9	(A) Te sientes obligado(a) a responder una demanda sexual de tu pareja.					
9	B) Obligas a tu pareja a responder a tus demandas sexuales.					

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Table A3. Cont.

N°	AFIRMACIONES	N	CN	AV	CS	S
10	(A) Tu pareja ha intentado agredirte con algún arma (cuchillo, tijera, cortaplumas, etc.)					
10	(B) Tú has intentado agredir a tu pareja con algún arma (cuchillo, tijera, cortaplumas, etc.).					
11	(A) Tú sientes miedo a las reacciones de tu pareja.					
11	(B) Tus reacciones le provocan miedo a tu pareja.					
12	(A) Tu pareja te toca partes íntimas sin tu consentimiento.					
12	(B) Tú le tocas partes íntimas a tu pareja sin su consentimiento.					
13	(A) Tu pareja te ha tirado el pelo o pellizcado cuando discuten.					
13	(B) Tú le has tirado el pelo o pellizcado a tu pareja cuando discuten.					
14	(A) Cuando se enoja, tu pareja tira y rompe objetos o da puñetazos a la pared u a otros elementos.					
14	(B) Cuando te enojas tiras y rompes objetos o das puñetazos a la pared u a otros elementos.					
15	(A) Tu pareja te compara sexualmente con parejas anteriores.					
15	(B) Tú comparas sexualmente a tu pareja con parejas anteriores.					

N: 1p. (nunca) CN: 2p. (casi nunca) AV: 3p. (a veces) CS: 4p. (casi siempre) S: 5 p. (siempre).

Consta de 30 ítems de los cuales 15 están en relación al rol de recibe violencia y 15 en el rol de ejercer violencia. Los ítems se distribuyen de la siguiente manera:

Violencia física	Violencia psicológica	Violencia sexual
1-4-7-10-13-14	2-5-8-11	3-6-9-12-15

La de escala es de tipo Likert en 5 expresiones (1 = nunca, 2 = casi nunca, 3 = a veces, 4 = casi siempre, 5 = siempre).

It consists of 30 items, of which 15 are related to the role of receiving violence and 15 in the role of exercising violence. The articles are distributed as follows:

Physical violence	Psychological violence	Sexual violence
1-4-7-10-13-14	2-5-8-11	3-6-9-12-15

The scale is Likert type in 5 expressions (1 = never, 2 = almost never, 3 = sometimes, 4 = almost always, 5 = always).

Appendix D English (Translated by the Authors)

Table A4. Test of violence in adolescent couples.

No.	CLAIMS	N	R	S	VO	Α
1	(A) Your partner has punched you or slapped you.					
1	(B) You have punched or slapped your partner					
2	(A) Your partner threatens to leave you if you do not do what he/she says.					
2	(B) You threaten your partner to leave him/her if he/she does not do what you say.					
3	(A) Your partner forces you to have sex when you do not want it.					
3	(B) You force your partner to have sexual relations when he (she) does not want to.					
4	(A) When your partner gets angry, he hits you with his feet.					
4	(B) When you get angry you kick your partner's feet.					

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Table A4. Cont.

No.	CLAIMS	N	R	S	vo	A
5	(A) Your partner makes you feel like you are guilty of everything.					
5	(B) You make your partner feel like he or she is guilty of everything.					
6	(A) Your partner gets angry if you do not allow him to caress you					
6	(B) You get angry if your partner does not allow you to touch him.					
7	(A) Your partner has hit you with some type of object.					
7	(B) You have hit your partner with some type of object.					
8	(A) When your partner gets out of control, he yells at you, offends you, ridicules you.					
8	(B) When you get out of control you yell, offend, or ridicule your partner.					
9	(A) You feel obligated to respond to a sexual demand from your partner.					
9	B) You force your partner to respond to your sexual demands.					
10	(A) Your partner has tried to attack you with a weapon (knife, scissors, penknife, etc.)					
10	(B) You have tried to attack your partner with a weapon (knife, scissors, penknife, etc.).					
11	(A) You are afraid of your partner's reactions.					
11	(B) Your reactions cause fear in your partner.					
12	(A) Your partner touches your private parts without your consent.					
12	(B) You touch your partner's private parts without his or her consent.					
13	(A) Your partner has pulled your hair or pinched you when they argue.					
13	(B) You have pulled your partner's hair or pinched them when they argue.					
14	(A) When angry, your partner throws and breaks objects or punches the wall or other elements.					
14	(B) When you get angry you throw and break objects or punch the wall or other elements.					
15	(A) Your partner compares you sexually to previous partners.					
15	(B) You sexually compare your partner to previous partners.					
	N. 1 n (never) R. 2n (rarely) S. 3n (sometimes) VO: 4n (Very often) A. E.	(always)			

N: 1 p. (never) R: 2p. (rarely) S: 3p. (sometimes) VO: 4p. (Very often) A: 5 p. (always).

It consists of 30 items, of which 15 are related to the role of receiving violence and 15 in the role of exercising violence. The items are distributed as follows:

- Physical violence 1–4–7–10–13–14;
- Psychological violence 2–5–8–11;
- Sexual violence 3–6–9–12–15.

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