



Recibido: 12/09/2022

Aceptado: 1/12/2022

The effect of social capital in the intimate partner violence in adolescents from an intersectionality perspective

El efecto del capital social en la violencia en la pareja adolescente desde una perspectiva de interseccionalidad

Daniel G. Abiétar^{1,2}, Francesca Sánchez-Martínez^{1,2,3}, Olga Juárez¹, Sara Trujillo-Alemán⁴, Lluís Forcadell-Díez^{1,2}, Carmen Vives-Cases^{5,6}, Belén Sanz-Barbero^{5,7}, Vanesa Pérez-Martínez⁶, María José López^{1,2,3,5}, Maria del Carmen Davó-Blanes⁵ y Glòria Pérez^{1,2,3,5}

¹Agència de Salut Pública de Barcelona, ²Universitat Pompeu Fabra, ³Institut d'Investigació Biomèdica de Sant Pau (IIB Sant Pau), ⁴Servicio Canario de la Salud (Pl. Dr. Juan Bosch Millares, 1 35071 Las Palmas de Gran Canaria, Spain), ⁵CIBER de Epidemiología y Salud Pública, CIBERESP, ⁶Universidad de Alicante, ⁷Instituto de Salud Carlos III.

@ gperez@aspb.cat

Resumen: Antecedentes: La violencia de pareja (VP) es un fenómeno social complejo ampliamente estudiado. Sin embargo, pocos de estos estudios consideran el capital social y la interseccionalidad. Nuestro objetivo fue describir el efecto del capital social en la victimización por VP entre estudiantes de secundaria, considerando tres factores de interseccionalidad (sexo asignado al nacer, orientación sexual y origen migratorio) en dos ciudades de España en 2019-2020. Métodos: Se analizó una muestra transversal de 640 adolescentes con pareja, de 13 a 16 años, de un programa de promoción de relaciones equitativas en Alicante y Terrassa. La variable resultado fue haber sufrido violencia en la pareja (control, miedo, física o sexual) en algún momento de la vida. Se utilizaron variables individuales y relacionales para calcular la razón de prevalencia ajustada (RPa) a partir de modelos multivariable construidos mediante regresión robusta de Poisson, y estratificados por sexo, orientación sexual y origen migratorio. Resultados: La mayor prevalencia de VP (56,25%) se encontró en adolescentes lesbianas, gays o bisexuales (LGB) sin actividad social. La orientación LGB se asoció significativamente con la victimización por VP en los adolescentes con origen en países de bajos ingresos (PBI) (aPR: 1,93) y en las chicas (aPR: 1,53). Por último, la procedencia de un PBI fue un determinante significativo de la VP en los chicos (aPR: 1,76) y en los estudiantes, independientemente de la orientación sexual. Una mayor actividad social mostró un efecto protector para los estudiantes de origen en países de altos ingresos (PAI) y de orientación sexual LGB, independientemente del sexo y la orientación sexual. Conclusiones: La actividad social se asocia de forma desigual con una menor victimización por violencia de la pareja en algún momento de la vida adolescente. La fuerte asociación del origen migratorio y la orientación sexual con la VPI refuerza el enfoque de su prevención en los adolescentes desde una perspectiva de interseccionalidad.

Palabras Clave: *violencia en pareja, salud adolescente, interseccionalidad, desigualdades en salud, salud pública, capital social, programa educativo.*

Abstract: Background: Intimate partner violence (IPV) is a complex social phenomenon widely studied. However, few of these studies consider social capital and intersectionality. Our aim was to describe the effect of social capital in IPV victimisation among secondary students, considering three factors of intersectionality (sex assigned at birth, sexual orientation and migration background) in two cities of Spain in 2019-2020. Methods: We analysed a cross-sectional sample of 640 ever-partnered adolescents aged 13–16 years who had taken part in a programme for positive relationship. The main outcome was lifetime IPV (control, fear, physical or sexual violence). Individual and relational variables (bonding social capital) were used to calculate adjusted prevalence ratios (aPR) from multivariate Robust Poisson regression models stratified by sex assigned at birth, sexual orientation and migration background (factors of intersectionality). Results: The highest IPV prevalence (56.25%) was found in lesbian, gay or bisexual (LGB) adolescents without social activity. LGB orientation was significantly associated with IPV victimisation in adolescents with low-income country (LIC) backgrounds (aPR: 1.93) and in girls (1.53). Finally, a LIC background was a significant determinant of IPV in boys (aPR: 1.76) and in students independently of sexual orientation. Higher social activity showed a protective effect for students with HIC backgrounds and LGB-sexual orientations. A possible protective effect of social support in HIC backgrounds and regardless of sex and sexual orientation must be considered. Conclusions: Social activity is unequally associated with less lifetime IPV. The strong association of migration background and sexual orientation with IPV reinforces the approach to its prevention in adolescents from an intersectionality perspective.

Keywords: *intimate partner violence, adolescent health, intersectionality, health inequalities, public health, bonding social capital, education programme.*

1. INTRODUCTION

Violence is a complex social phenomenon that has been studied from multiple perspectives and disciplines, and interest is currently increasing in the topic. Differences in the distribution of IPV and its impact on health have largely been reported, also in adolescence, determined by both race and sexual orientation (Broaddus, 2020; Roberts et al., 2018; Subirana-Malaret et al., 2019). In addition, because of the link between violence and health, public health is a historically important discipline in intimate partner violence (IPV) studies and efforts for its reduction (Mitton, 2019). In this sense, the main aim of public health actions is to deal with the fundamental causes of health problems; therefore, the roots of IPV must be assessed to contain it and promote healthy and equity relations from childhood and adolescence (Forcadell-Díez, 2023).

Because of the mutually constitutive relationship between power and violence, and their relations with social dynamics, it is essential to embrace intersectional theory in IPV analysis (Collins, 2017a). Intersectionality is a theoretical framework which proposes that multiple social categories (e.g., race, ethnicity, gender, sexual orientation, socioeconomic status) intersect at the micro level of individual experience to reflect multiple interlocking systems of privilege and oppression at the macro, social-structural level (e.g., racism, sexism, heterosexism). Public health's commitment to social justice makes a natural fit with intersectionality's focus on multiple historically oppressed populations (Bowleg, 2012). When studying IPV, social identities and social inequalities based on ethnicity, sexual orientation, sex/gender (and one could add a host of other identities such as class, disability status, etc.) must be considered interdependent and mutually constitutive (Beal Frances, 1970; Collins, 1990, 1995, 1998a, 2017b; Crenshaw, 1989, 1990; Davis, 2011; Green, 1997; Hooks, 1981). In this sense, research on adolescent intimate partner violence in Spain is usually focused on gender as a "privileged" explanatory axis of power. Nevertheless, international studies point out gender relations themselves are modified by its intersection with other systems of power and oppression (Sokoloff & Dupont, 2005). Moreover, black feminist thought have also claimed that "the sexual politics that constrains Black womanhood constitutes an effective system of domination because it intrudes on people's daily live at the point of consciousness" (Collins, 2009). For example, the European Union holds potential for enhancing inclusiveness in its growing policies towards domestic violence (Lombardo & Rolandsen Agustín, 2016). For example, the European Union holds potential for enhancing inclusiveness in

its growing policies towards domestic violence (Lombardo & Rolandsen Agustín, 2016).

Intimate partner violence research should address a better understanding of different power relationships and inequalities, in order to point out sources of power that interact producing this system of domination at a macro-social level. And that means promoting social actions in all levels within individuals are situated, as black feminist claimed, including the microsystem (psychological factors), the exosystem (close relationships as family, friends, and peers), the mesosystem (community contexts that have an effect on the individual), and the macrosystem (general factors including the culture and community where people live) (Subirana-Malaret et al., 2019). Although identifying patterns of victimisation remains important, focusing on them instead of assessing how collective attitudes influence the distribution of IPV can function as a control mechanism (Collins, 1998b). In the case of IPV, some of the fundamental issues to consider in the western world are the binary sex-gender system (Rubin, 1984), the duo formed by monogamy and romantic love (Lelaurain et al., 2018), and normalisation of violence (even in non-heterosexual relationships) (Pornari et al., 2013).

Up to now, studies have reported disparity in IPV prevalence rates, probably due to the different definition of IPV are considered (Breiding et al., 2015). In Spain, around 30% of adolescents, boys and girls, have been involved in IPV (Fernández-González et al., 2014; Muñoz-Rivas, 2007). In Barcelona, our context of study, the prevalence of IPV has been reported to be 18.4% and 12.3% in adolescent girls and boys, respectively (ASPB, 2016). In other context (USA) and according to Youth Risk Behaviour Survey, female students, LGB students, and students not sure of their sexual identity consistently had the highest IPV prevalence (regardless type of violence) (Basile, 2020). Higher IPV is also experienced by gender sex discrimination (Erickson-Schroth et al., 2020), low income (Broaddus, 2020) and low neighbourhood socioeconomic level (ASPB, 2016).

Also, some studies have reported increased levels of support from friends has been associated with significantly less IPV perpetration and victimisation in adolescents. However, when gendered models were explored, the protective role of social support was only observed for female youth (Banyard & Cross, 2008; Richards & Branch, 2012). Related to school environment, previous study in our context suggests that building a supportive climate at schools and building/using the support of peers and teachers are important in IPV prevention (Jankowiak et al., 2020). Nevertheless, only some studies have attempted to explain differences in

social capital's role by considering this diversity, concretely in adolescents and family (McNulty & Bellair, 2003). In this sense, research tools like social capital, defined as "the aggregate of the actual or potential resources which are linked to possession of a durable network of more or less institutionalized relationships of mutual recognition" (Bourdieu, 1986), must be useful to identify social support (Islam et al., 2006). The work of this author is based on the fundamental conceptualization of society as a system of systems or system of fields. This author approaches social reality as a historical construction based on individual daily experience (Bourdieu, 2000), in which romantic relationships are also located. Bourdieu, like other authors, recognizes the existence of inherited objective structures (as power relations, norms, social institutions...) based on daily dynamics of accumulation and exploitation of both material resources and power, that orient people's lives (Bourdieu, 2010). In this sense, intimate partner violence could be considered as an instrument that serves the aforementioned objective structures through individual action. As Bourdieu claimed that individuals take part in society through the double movement of the "exteriorization of interiority and interiorizations of exteriority" (Bourdieu, 2003), we could consider gender and race hierarchies and romantic beliefs are, among other social structures, part of this exteriority.

To our knowledge, IPV in adolescents in Spain or countries with similar social imaginaries about relationships has not been studied from a social capital viewpoint and considering an intersectional perspective. This is despite the close relationships between social capital and several health outcomes (Eriksson et al., 2010), and factors of intersectionality with IPV (Cramer & Plummer, 2009). The aim of this study was to describe the effect of social capital in IPV victimisation among secondary students, considering three factors of intersectionality (sex assigned at birth, sexual orientation and migration background) in two cities of Spain in 2019-2020.

2. METHODS

2.1. Setting and study design

This cross-sectional study was conducted within the framework of a secondary education intervention to promote positive relationships among schooled adolescents (Vives-Cases et al., 2019), as part of the pre-intervention interview of a quasi-experimental pre-post study. The project was conducted in the cities of Terrassa and Alicante in Spain between 2019-2020.

2.2. Study population and sample size calculation

Eight compulsory schools participated (6 public, 2 charter) by convenience sampling, four from each city, with 35 classes from 2nd year (13-14 years old) and 34 classes from 3rd year (14-15 years old) of compulsory secondary education. Recruitment was carried out with the help of school principals and teachers.

The sample size estimated that 558 participants were necessary accepting an alpha risk of 0.05 and a beta risk of <0.02 in a bilateral contrast for the outcome variable (GRANMO, 2012).

2.3. Data collection

Online surveys were personally and confidentially self-completed in the schools, between 2019-2020. The interviewers were present in the classroom from the beginning to the end of the survey (approximately 1 hour), facilitating access to the survey and solving questions. The survey was in Spanish and in Catalan. The teachers were asked to remain outside the classroom. The methodological details of the survey were based on a previously published study (Vives-Cases et al., 2019). A total of 1,561 students from the included schools were invited to participate in the survey and 1,538 accepted and gave the informed consent (98.5%). Considering missing values due to absences and incomplete surveys, the total sample consisted of 1,421 secondary students (91% of those invited). Of those students, this study included 640 ever-partnered students, 359 from Alicante and 281 from Terrassa cities (our final sample, Figure 1).

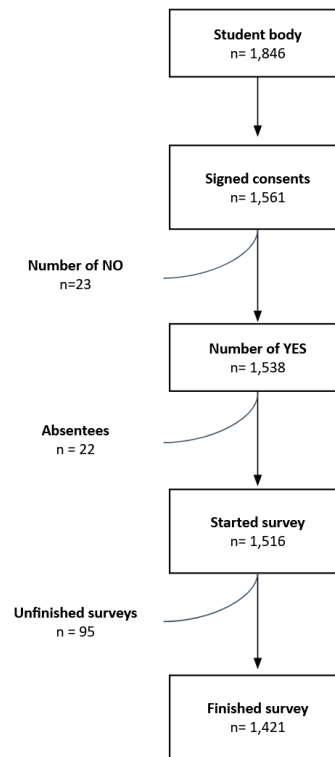


Figure 1. Participants flow chart.

The mean age was 13.8 years (95% confidence interval 13.78-13.9). Migration background varied significantly between cities, although in both cities, most migration was from low-income countries (18.51% in Terrassa and 26.54% in Alicante), mainly from South America, Morocco and Eastern European countries. LGB population was higher in Terrassa than in Alicante (23.84 vs. 15.32). All sample characteristics explored are shown in Table 1 (all tables in point 5).

2.4. Outcome variable

IPV measure was validated in our context in Light4Violence project (Vives-Cases et al., 2019). It was assessed through the following four items asked in ever-partnered students: i) have you ever perceived control of daily activities? (i.e who you could talk to, how you could dress, check your phone or social media, etc.) ii) have you ever been threatened or felt fear because of your partner’s behaviour? (i.e. they have threatened to hurt you or people, animals or objects you appreciate, they have threatened to make intimate information public, etc.) iii) have you ever experienced physical abuse? (i.e. beat, punch or slap, get caught very strongly, etc.) iv) have you ever experienced sexual violence by your partner? (i.e. insist on having sex when you don't want to, sending or forcing you to send intimate photographs you didn't want, etc.). Each item had the following response

categories: ‘never’, ‘sometimes’, ‘many times’. If the person had ever experienced (‘sometimes’ or ‘many times’) any of these types of violence (control, fear, physical or sexual violence), we considered that she/he had experienced IPV (‘yes’ or ‘no’).

2.5. Main explanatory variables

Social capital was examined using the classification of Islam (Islam et al., 2006) This study focuses on the social activity and social support variables shown in Figure 2 and validated in Lights4Violence project (Vives-Cases et al., 2019). No information was available in the survey about bridging and linking social capital, as the project was focused on relations between homogeneous groups (friends, family and school), known as bonding social capital. Variables were recategorised to preserve statistical power during the analysis.

BONDING SOCIAL CAPITAL (informal networks)	Social support (Perceived quality of interpersonal relationships)	Relationship with partners (5 categories: ‘very good’, ‘quite good’, ‘average’, ‘quite bad’ or ‘very bad’)
		Relationship with classmates (5 categories: ‘very good’, ‘quite good’, ‘average’, ‘quite bad’ or ‘very bad’)
		Relationship with teachers (5 categories: ‘very good’, ‘quite good’, ‘average’, ‘quite bad’ or ‘very bad’)
	Social activity	Number of days hanging out with friends per week (from 0 -considered without social activity- to 7)
	Social support	Number of best friends, male and/or female (‘none’, ‘1’, ‘2’, ‘3 or more’)

Figure 2. Classification of social capital variables (social support and activity) used in this study using the Islam (2006) framework.

2.6. Explanatory variables for stratifying. Factors of intersectionality

According to our plan of analysis, we use intersectionality factors as stratification variables, as these are axes of power that could determine IPV victimisation, based on previous studies:

- a) Sexual orientation was identified by adapting the Kinsey scale (Sell, 1997) as in Sewyc et al. (Saewyc et al., 2004), and validated in Lights4Violence project for our context (Vives-Cases et al., 2019). It

was asked as ‘which of the following sentences you feel most identified with?’ and the possible answers were ‘I only feel attracted to people of the same sex’, ‘normally I feel attracted to people of the same sex, but sometimes I feel attracted to people of the opposite sex’, ‘I feel attracted to people of the same sex and of the opposite sex’, ‘normally I feel attracted to people of the opposite sex, but sometimes I feel attracted to people of the same sex’, ‘I only feel attracted to people of the opposite sex’, ‘I’m not sure’ and ‘I don’t feel attracted to anyone’. We conflated all answers in two categories: heterosexual orientation (‘I feel only attracted to people of the opposite sex’) and LGB-sexual orientation (the remainder).

- b) Students’ migration background was built as a proxy of cultural background from parents’ place of birth, and independently of where they were themselves born. Responses were coded into two categories (‘both guardians were born in Spain, or one guardian was born in a high-income country and the other in Spain’ and ‘at least one guardian was born in a low-income country’), according to the World Bank Classification (Bank, 2019). High-income countries (HIC) were those with a gross national income per capita of \$12,056 or more. The remaining situations were conflated into the low-income countries (LIC) category.
- c) Sex was identified by the question “Which is your sex assigned at birth?”.

2.7. Ethical considerations

The students from the 8 centres included in the project agreed to participate, through prior informed consent from them and from their legal guardians. The project was approved by two ethics committees, CEIm-Parc de Salut Mar (2019-8914-I) and CEIC Alicante’s University (UA-2018-02-28).

2.8. Statistical analysis

First, a descriptive analysis was carried out to describe the distribution of the dependent variable and the explanatory variables in the sample stratifying by the intersectionality variables. Then, bivariate and multivariate Robust Poisson regression models with robust variance were built to calculate crude and adjusted prevalence ratios (cPR and aPR), with their 95% confidence interval (CI). Interactions between the main explanatory variables (social capital and intersectionality variables) were also tested before modelling. The multivariate analysis consisted of building hierarchical models with individual variables first (Models 1–3) and adding social capital

variables to model 3, based on the variables that were significant ($p < 0.05$) in the bivariate analysis and in the examination made with regression models (goodness-of-fit of the models, p value of the models and significance). All models were adjusted by “city”. The goodness-of-fit of the models was assessed using the Akaike information criterion. All analyses were stratified by intersectionality variables (sex assigned at birth, migration background and sexual orientation). Coding and statistical analysis were performed with STATA 15.2.

Only multivariate analysis stratified by sexual orientation and migration background are shown (Tables 4 and 5), as they both contained most of the statistically relevant results. In addition, only models with all statistically significant variables and with better goodness-of-fit are shown (generally models 3 and 6). Multivariate analysis by sex is not shown in the tables. Model 3 data was chosen for results when its goodness-of-fit was better than that of the saturated models.

None of the interactions explored between factors of intersectionality and between social capital variables were significant. There were no significant associations between social support variables and IPV in the various models.

3. RESULTS

The prevalence of IPV victimisation was 23.4%. No differences were found in prevalence when stratified by sex. The prevalence was highest in students with LGB-sexual orientation and LIC migration background (52.9%) and in those with no social interaction (56.2%), compared with 28.1% students with a LIC migration background but heterosexual orientation and 14.29% in students with heterosexual orientation and no social activity, being statistically significant (Table 2).

The prevalence of IPV was 36% in boys with a LIC migration background and was 19.4% in those with a HIC migration background, with statistically significant differences.

The prevalence of IPV in girls with LGB-sexual orientation was like boys with LIC background despite the hierarchy of the sexes, and also was significantly higher than in heterosexual girls (36.7% vs 20.8%), showing inequality within the same sex (Table 2).

Considering factors of intersectionality, models stratified by sexual orientation (Table 3) show that, among students with a heterosexual orientation, the aPR for IPV was highest for those with a LIC migration background (model 6, aPR 1.55, 95% CI 1.07–2.23). Among LGB adolescents, the aPR for IPV was higher in those with a LIC migration background

(model 6, aPR 1.81, 95% CI 1.19–2.76). From the social capital viewpoint, the aPR was significantly lower in LBG students who hung out with friends at least 1 day per week than in those without social activity.

Models stratified by migration background (Table 4) showed that the aPR for IPV was the highest for LGB student with a LIC migration background (model 6, aPR 1.93, 95% CI 1.23–3.03). For those with a HIC background, LGB-sexual orientation only remained statistically significant in model 2. In terms of social capital, the aPR for IPV was lower for participants with a HIC migration background and who hung out with friends 6 or 7 days per week (model 6, aPR 0.46, 95% CI 0.22–0.96).

The highest probability of having experienced IPV was found in students who have ever had sexual intercourse: the aPR was up to 3.1 times higher in those with a HIC migration background and was up to 2.5 times higher in those with a heterosexual orientation (models 6, table 4 and 3 respectively). The aPR for those who have ever had sexual intercourse was also significantly higher in boys and girls independently of their sexual orientation (table not shown) but not in those with a LIC migration background (table 4).

Finally, models stratified by sex (table 5) showed that the aPR for IPV was highest in boys with a LIC migration background (model 6, aPR 1.76, 95% CI 1.18–2.61), and in LGB girls (model 8, aPR 1.53, 95% CI 1.02–2.3). In terms of social capital in girls, the aPR for IPV was lower in girls with a fair, quite bad or very bad relationship with partners (model 6, aPR 1.56, 95% CI 1.02–2.4) and teachers (cPR 1.63, 95% CI 1.1–2.4); and in boys with a fair, quite bad or very bad relationship with classmates (cPR 1.88, 95% CI 1.18–3), but none of them remain in the final saturated model.

4. DISCUSSION

On the one hand, our study reports a possible effect of social capital in having experienced IPV among secondary students must be considered. Specifically, good social support by teachers regardless of sexual orientation, in girls and in students with HIC background could associate less IPV victimisation. In boys, social support by classmates could be important in the same way. Moreover, social activity showed a protective effect in adolescents with HIC backgrounds and in LGB-sexual orientation. On the other hand, the second main idea is the highest prevalence of IPV occurs when intersectionality factors were considered simultaneously. LGB-sexual orientation was significantly associated with IPV in adolescents with HIC migration backgrounds. Higher IPV was also associated stronger with LGB orientation than heterosexual one in girls. Finally, A LIC background was also

a significant determinant of IPV in boys, independently of sexual orientation, but was higher in LGB-sexual orientation.

The prevalence found was higher than those found for a similar sample from secondary schools in Barcelona in 2016 (18.4%)(ASPB, 2016), maybe related to our sampling, as schools volunteered, and their motivation could be related to a higher IPV and greater awareness of the phenomenon. Similarly, our study asks more broadly about emotional violence (control and/or fear), which makes it more sensitive to this form of abuse. In any case, in Spain the greatest prevalence has been observed in women with bisexual attraction (17.5%) and in men with homosexual attraction (14.2%) (Sanz-Barbero et al., 2021). In our study, the higher IPV prevalence in LGB girls and girls with a LIC background was closer to that of boys with a LIC background and LGB boys, respectively.

In terms of the factors associated with IPV, sexual intercourse has been already associated with higher IPV in adolescents by race and sex, closely related to romantic beliefs (Kaestle & Halpern, 2005). Despite these solid results, it is important to qualitatively consider particular socialisation processes and mechanisms, because sexual intercourse has diverse meanings for adolescents in distinct cultural settings (Pinquart, 2010).

The fundamental causes of IPV go beyond the heteronormative framework and include already proven factors of intersectionality synergies (Roberts et al., 2018). In this regard, considering race and sexual orientation, non-normative people, such as black lesbian women (Bowleg et al., 2003), are frequently reported to experience multiple minority stress risk factors (Edwards et al., 2015), indicating that people with non-normative observable behaviours, bodies or appearance experience particular discrimination that is embodied (Meyer, 2003; Michael Bailey, 2020). In this sense, some previous studies in Europe, Canada and the USA have linked these high levels of multiple minority stressors with IPV in youth communities (Edwards et al., 2015; Rollè et al., 2018). Regarding other possible explanations for race inequalities, and getting back to Patricia Hill Collins' contributions, she stated in this regard that “dominant constructions of Black male and Black female sexuality often limit the ability to form nonsexualized, loving friendships” (Collins, 2009). This limitation could be also useful to understand intimate partner violence in gay men adolescents, as dominant construction of gay sexuality depicts relationships between gay men as primarily sex-mediated.

Although no significant interactions were found between factors of intersectionality, we observe that, in the presence of powerful social

determinants such as racism and heterosexism, the remaining variability in IPV could swamp their interactions (Bowleg, 2008).

As previously stated, romantic beliefs have been extensively demonstrated as an important cause of IPV, specifically in heterosexual romance (Kaestle & Halpern, 2005; Papp et al., 2017). In this regard, research in homosexual men has highlighted not only socioeconomic stressors, but also challenges of adherence to agreements—and specifically sexual agreements— (Houston & McKirnan, 2007) may push one or both partners towards violence (Pruitt et al., 2015). In both lesbian women and gay men, following power imbalance, the main correlations with IPV are dependency, jealousy and possessiveness (C. McClennen et al., 2002), all of them linked to mutual agreements (implicit or explicit). Given the hostility of their environments, non-normative people subjected to this minority stress could be looking for a safety network in their partners, in need of greater security or stability through affective-sexual exclusivity, especially in monogamous couples with strong romantic beliefs. Although some mechanisms could be shared with heterosexual relationships, there is a need to investigate these issues in adolescents, considering the influence of migration backgrounds and sexual orientation in traditional gender roles and romantic beliefs (Backus & Mahalik, 2011; Sprecher & Metts, 2016).

In our study, having higher social activity showed a protective effect in persons with a HIC background and LGB-sexual orientation. For all presumable causes mentioned above, social activity could be an informative variable. Our explanation is that this effect could be related to critical awareness of romantic beliefs and less adherence to exclusivity agreements and dependency, and/or could also be explained by better communication and social skills (Roberts et al., 2018). Even for persons with HIC migration backgrounds, for whom social settings could be less stressful, this relationship may also be explained by easier access to public services as assets that prevent IPV (Burke et al., 2006).

Some studies have examined the protective effect against IPV of social support conferred by adolescents' assets (Pérez-Marco et al., 2020). Although no association was found in our study, this may be linked to our approach to social support from satisfaction with relationships, rather than classical social support entities such as confidence or reciprocity, among other factors (Islam et al., 2006).

This study has several limitations. Our sample was not representative as it was designed for pre-survey in quasi-experimental pre-post study. However, the sample allowed us to achieve our objective, which was to study factors associated with IPV for a scholar programme setting, as

schooling is mandatory for those ages in Spain. In addition, the non-significant values for social support could probably be explained by the limited sample size. On the other hand, our results revealed significant associations that could help programmes for positive relationships and the design of policies for IPV prevention.

This study did not analyse other factors of intersectionality that have been proven to be important for IPV, such as socioeconomic position (Reichel, 2017). The survey enquired about partners' educational level as a proxy, but participants had difficulties in responding, especially about maternal level of education, and the variable was not used to avoid differential misclassification.

Certain strengths must be also considered. Studies that analyse IPV and social capital from an intersectional perspective, such as this work, are crucial, as most studies only analyse the associations of race, gender-race or sex-age with IPV. This study analysed diversity within and between groups, and factors of intersectionality were not organised hierarchically. Power relations and their social inequalities were included as interdependent and mutually constitutive (Bowleg, 2012), as in the case of IPV (Sokoloff & Dupont, 2005). To our knowledge, this is the first study to report that sexual intercourse is associated with IPV independently of sexual orientation (Kaestle & Halpern, 2005). Moreover, the use of migration background provides an approach to racialisation processes in adolescents, and we consider sexual orientation as a gender proxy from a non-binary framework (besides sex assigned at birth).

In conclusion, the results of our study reaffirm not only the importance of migration background and sexual orientation, but also the different effects of social capital as determinants in the unequal distribution of IPV in adolescents schooled. Social activity and social support's probable association with IPV also reinforces a community-based approach towards IPV. All settings involving adolescents' socialisation need to promote positive and healthy relationships (Bowleg, 2012), as communities' conditions related to violence varies (WHO, 1996). A public health approach to IPV from the conceptual framework of intersectionality and considering social capital is needed in school programmes for positive relationships, as well as in policy design (Subirana-Malaret et al., 2019).

5. TABLES

Table 1. General characteristics in adolescent of 2^o and 3^o ESO in educative centers of Terrassa and Alicante (2020) who have ever been in a relationship (N=640)

	Total (N=640)		Terrassa (n=281)		Alicante (n=359)		p value
	n	%	n	%	n	%	
Have you ever had sexual intercourse?							
No	471	73.59	226	80.43	245	68.25	<0.001*
Yes	169	26.41	55	19.57	114	31.75	
IPV victimisation (control, threat, sexual or physical)							
Never	490	76.56	211	75.09	279	77.72	0.738
Sometimes	122	19.06	57	20.28	65	18.11	
A lot of times	28	4.37	13	4.63	15	4.18	
Age (years)							
13 years	228	35.63	137	48.75	91	25.35	<0.001*
14 years	305	47.66	129	45.91	176	49.03	
15 or more	107	16.72	15	5.34	92	25.63	
Sexual orientation							
Heterosexual orientation	496	77.5	203	72.24	293	81.62	0.017*
LGB-sexual orientation	122	19.06	67	23.84	55	15.32	
Without sexual desire	22	3.44	11	3.91	11	3.06	
Migration background							
Spanish	452	70.63	223	79.36	229	63.79	<0.001*
High income countries	40	6.25	6	2.14	34	9.47	
Low income countries	148	23.13	52	18.51	96	26.74	
Number of female friends							
None	16	2.5	8	2.85	8	2.23	0.819
One	28	4.38	14	4.98	14	3.90	
Two	74	11.56	34	12.1	40	11.14	
Three or more	522	81.56	225	80.07	297	82.73	
Number of male friends							
None	16	2.66	7	2.49	10	2.79	0.906
One	48	7.5	19	6.76	29	8.08	
Two	65	10.16	30	10.68	35	9.75	
Three or more	510	79.69	225	80.07	285	79.39	
Relationship with teachers							
Very good	166	18.13	51	18.15	65	18.11	0.957
Quite good	323	50.47	141	50.18	182	50.7	
Fair, quite bad or very bad	201	31.4	89	31.67	112	31.2	
Relationship with classmates							
Very good	306	47.81	128	45.55	178	49.58	0.561
Quite good	267	41.72	121	43.06	146	40.67	
Fair, quite bad or very bad	67	10.47	32	11.39	35	9.75	
Relationship with partners							
Very good	305	47.66	134	47.69	171	47.63	0.069
Quite good	226	35.31	109	38.79	117	32.59	
Fair, quite bad or very bad	109	19.82	38	13.52	71	19.78	
Number of days hanging out (per week)							
0	37	5.78	16	5.69	21	5.85	0.979
1-2	202	31.56	91	32.38	111	30.92	
3-5	306	47.81	132	46.98	174	48.47	
6-7	95	14.84	42	14.95	53	14.76	

* p value statistically significant. J12 test by defect. If ^, exact fisher test

Table 2. Relative frequencies of adolescent intimate partner violence victimization, depending on different variables by sexual orientation, migration background and sex in scholars from secondary schools in Terrassa and Alicante cities, who have ever been in a relationship

	IPV (%)	Heterosexual orientation (n=496)		LGB-sexual orientation (n=144)		Spanish or high income countries (n=492)		Low income countries (n=148)		Men (n=312)		Women (n=328)	
		n	%	n	%	n	%	n	%	n	%	n	%
Age (years)													
13 years (n=228)	21.49	34	19.65	15	27.27	34	18.78	15	31.91	19	16.81	19	26.09
14 years (n=305)	22.62	49	20.16	20	32.26*	52	20.97	17	29.82	40	26.67	40	18.71
15 or more (n=107)	29.91	18	22.5	14	51.85*	14	12.48	18	40.91*	14	29.57	14	31.03
Have you ever had sexual intercourse?													
No (471)	17.41	56	14.97	26	26.8*	49	13.5	33	30.56*	39	17.03	43	17.77
Yes (n=169)	40.24*	45	36.89	23	48.94	51	39.53	17	42.5	34	40.96	34	39.53
Sexual orientation													
Heterosexual orientation (n=496)	20.36					69	18.06	32	28.07*	53	21.46	48	19.28
LGB-sexual orientation (n=122)	34.03*					31	28.18	18	52.94*	20	30.77	29	36.71
Migration background													
Spanish or high income countries (n=492)	20.33	69	18.06	31	28.18*					46	19.41	54	21.18
Low income countries (n=148)	33.78	32	28.07	18	52.94*					27	36*	23	31.51
Assigned sex at birth													
Men (n=328)	23.4	53	21.46	20	30.77	46	19.41	27	36*				
Women (n=312)	23.48	48	19.28	29	36.71	54	21.18	23	31.51				
Number of female bestfriends													
None, one or two (n=118)	23.73	16	18.39	12	38.71*	20	22.47	8	27.59	12	24.49	16	23.19
Three or more (n=522)	23.27	85	20.78	37	32.74*	80	19.85	42	35.29*	61	23.19	61	23.55
Number of male bestfriends													
None, one or two (n=130)	26.15	19	22.09	15	34.09	23	23.23	11	35.48	15	25	18	27.14
Three or more (n=510)	22.75	82	20	34*	77	19.59	39	33.33*	58	23.02	58	22.48	
Relationship with teachers													
Very good or good (n=439)	20.27	51	17.89	28	28.57*	56	16.72	33	31.73*	43	20.77	46	19.83
Regular, bad or very bad (n=201)	30.35*	40	25.81	21	45.65*	44	28.03	17	38.64	30	28.57	31	32.29
Relationship with classmates													
Very good or good (n=573)	22.34	92	20.18	36	30.77*	84	19	44	33.33*	59	21.3	69	23.31
Regular, bad or very bad (n=67)	32.84	9	22.5	13	48.15*	16	31.37	6	37.5	14	40	8	25
Relationship with partners													
Very good or good (n=531)	21.47	83	19.39	31	20.1*	77	18.6	37	31.62*	61	22.76	53	20.15
Regular, bad or very bad (n=109)	33.03*	18	26.47	18	43.9	23	29.49	13	41.94	12	27.27	24	36.92*
Number of days hanging out (per week)													
0 days (n=37)	32.43	3	14.29	9	56.25*	7	28	5	41.67	6	33.3	6	31.58
1-2 days (n=202)	22.28	31	21.23	14	25	29	18.24	16	37.21*	25	21.05	20	23.36
3-5 days (n=306)	23.86	53	21.03	20	37.04*	51	21.34	22	32.84	37	23.08	36	24.67
6-7 days (n=95)	21.05	14	18.18	6	33.33^	13	18.84	7	26.92	9	25.58	11	17.31

*p value statistically significant. Chi square by defect. If ^, exact fisher test.

Table 3. Relative and absolute frequencies of adolescent IPV victimisation depending on different variables and by sexual orientation in scholars from secondary schools in Terrassa and Alicante cities who have ever been in a relationship. Crude and adjusted prevalence ratios (cPR and aPR).

	Heterosexual orientation (n= 496)				LGB-sexual orientation (n= 122)			
	aPR (95% CI)		aPR (95% CI)		aPR (95% CI)		aPR (95% CI)	
	% (n)	cPR (95% CI)	Model 3	Model 6	% (n)	cPR (95% CI)	Model 3	Model 6
Age (Years)								
13 years (n=228)	19.65	1	1	1	27.27	1	1	1
14 years (n= 305)	20.16	1.03 (0.69-1.52)	0.89 (0.6-1.32)	0.88 (0.59-1.31)	32.26	1.18 (0.67-2.08)	0.86 (0.48-1.51)	0.82 (0.46-1.44)
15, 16 or 17 (n= 107)	22.5	1.14 (0.69-1.9)	0.77 (0.45-1.33)	0.86 (0.5-1.49)	51.85	1.9 (1.08-3.35)*	1.06 (0.56-1.98)	1.01 (0.54-1.89)
Migration background								
Spanish or high income countries (n=492)	18.06	1	1	1	28.18	1	1	1
Low income countries (n= 148)	28.07	1.55 (1.08-2.24)*	1.55 (1.08-2.23)*	1.55 (1.07-2.23)*	52.94	1.88 (1.21-2.9)*	1.97 (1.27-3.07)*	1.81 (1.19-2.76)*
Assigned sex at birth								
Men (n= 328)	21.46	1	1	1	30.77	1	1	1
Women (n= 312)	19.28	0.9 (0.63-1.27)	0.95 (0.67-1.34)	0.94 (0.67-1.33)	36.71	1.19 (0.75-1.9)	1.06 (0.64-1.75)	1.24 (0.77-2.01)
Have you ever had sexual intercourse?								
No (471)	14.97	1	1	1	26.8	1	1	1
Yes (n= 169)	36.89	2.46 (1.76-3.44)*	2.6 (1.83-3.68)*	2.52 (1.76-3.6)*	48.94	1.83 (1.17-2.84)*	1.82 (1.12-2.96)*	1.83 (1.1-3.1)*
Relationship with teachers								
Very good or good (n=439)	17.89	1	1	1	28.57	1	1	1
Regular, bad or very bad (n= 201)	25.81	1.44 (1.02-2.05)*	1.29 (0.89-1.86)	1.29 (0.89-1.86)	45.65	1.6 (1.02-2.5)*	1.45 (0.91-2.3)	1.45 (0.91-2.3)
Relationship with classmates								
Very good or good (n= 573)	20.18	1	1	1	30.77	1	1	1
Regular, bad or very bad (n= 67)	22.5	1.12 (0.61-2.04)	1	1	48.15	1.6 (0.97-2.52)	1.4 (0.79-2.47)	1.4 (0.79-2.47)
Relationship with partners								
Very good or good (n= 531)	19.39	1	1	1	20.1	1	1	1
Regular, bad or very bad (n= 109)	26.47	1.36 (0.88-2.12)	1.23 (0.78-1.92)	1.23 (0.78-1.92)	43.9	1.46 (0.92-2.3)	1.46 (0.92-2.3)	1.46 (0.92-2.3)
Number of days hanging out (per week)								
0 days (n= 37)	14.29	1	1	1	56.25	1	1	1
1-2 days (n= 202)	21.23	1.49 (0.5-4.44)	1.51 (0.49-4.59)	1.51 (0.49-4.59)	25	0.44 (0.28-0.83)*	0.38 (0.2-0.72)*	0.38 (0.2-0.72)*
3-5 days (n= 306)	21.03	1.47 (0.5-4.31)	1.33 (0.44-3.98)	1.33 (0.44-3.98)	37.04	0.66 (0.38-1.15)	0.52 (0.3-0.92)*	0.52 (0.3-0.92)*
6-7 days (n= 95)	18.18	1.27 (0.4-4.02)	0.96 (0.3-3.05)	0.96 (0.3-3.05)	33.33	0.59 (0.27-1.3)	0.52 (0.24-1.15)	0.52 (0.24-1.15)
p value for the model		<0.0001		<0.0001			0.044	0.0002
AIC test value		511.72		517.92			207.58	210.9

* means statistically significant values. Model 1: city, age and migration background. Model 2: city, age, migration background and sex. Model 3: city, age, migration background, sex and sexual intercourse. Model 4: model 3 + days out during the week. Model 5 in NON-LGB-sexual orientation: Model 3 + social support (relationship with teachers and with partners). Model 5 in LGB-sexual orientation: Model 3 + social support (relationship with teachers and with classmates). Model 6: all variables of each model. For heterosexual orientations' model: city, age, migration background, sex, sexual intercourse, social activity, social support (relationship with teachers and relationship with partners). For LGB-sexual orientations' model: city, age, migration background, sex, sexual intercourse, social activity, social support (relationship with teachers and relationship with classmates).

Table 4. Relative and absolute frequencies of adolescent IPV victimisation depending on different variables and by migration background in scholars from secondary schools in Terrassa and Alicante cities, who have ever been in a relationship. Crude and adjusted prevalence ratios (cPR and aPR).

	Spanish or high income countries (n=492)						Low income countries (n=148)					
	IPV (%)	cPR (95% CI)	Model 2		Model 6		% (n)	cPR (95% CI)	Model 3		Model 6	
			aPR (95% CI)						aPR (95% CI)			
Age (years)												
13 years (n =228)	18.78	1	1	1	1	31.91	1	1	1	1	1	1
14 years (n= 305)	20.97	1.12 (0.76-1.65)	1.11 (0.75-1.64)	0.91 (0.62-1.33)	29.82	0.94 (0.52-1.67)	0.71 (0.39-1.3)	0.68 (0.36-1.28)	1	1	1	1
15, 16 or 17 (n= 107)	12.48	1.18 (0.68-2.06)	1.14 (0.64-2.02)	0.71 (0.39-1.27)	40.91	1.28 (0.74-2.22)	0.96 (0.54-1.71)	0.99 (0.57-1.75)	1	1	1	1
Sexual orientation												
Heterosexual orientation (n= 496)	18.06	1	1	1	1	28.07	1	1	1	1	1	1
LGB-sexual orientation (n= 144)	28.18	1.56 (1.08-2.25)*	1.5 (1.04-2.18)*	1.24 (0.86-1.78)	50	1.89 (1.22-2.91)*	2.01 (1.3-3.12)*	1.93 (1.23-3.03)*	1	1	1	1
Assigned sex												
Men (n= 328)	19.41	1	1	1	1	36	1	1	1	1	1	1
Women (n= 312)	21.18	1.09 (0.77-1.55)	1.07 (0.76-1.53)	1.08 (0.76-1.52)	31.51	0.88 (0.55-1.38)	0.81 (0.51-1.28)	0.81 (0.51-1.28)	1	1	1	1
Have you ever had sexual intercourse?												
No (471)	13.5	1	1	1	1	30.56	1	1	1	1	1	1
Yes (n= 169)	39.53	2.93 (2.09-4.1)*	3.11 (2.17-4.48)*	3.11 (2.17-4.48)*	42.5	1.39 (0.88-2.2)	1.42 (0.88-2.28)	1.38 (0.84-2.27)	1	1	1	1
Relationship with teachers												
Very good or good (n=439)	16.72	1	1	1	1	31.73	1	1	1	1	1	1
Regular, bad or very bad (n= 201)	28.03	1.68 (1.19-2.37)*	1.42 (0.99-2.02)	1.42 (0.99-2.02)	38.64	1.22 (0.76-1.95)	1.17 (0.75-1.83)	1.17 (0.75-1.83)	1	1	1	1
Relationship with partners												
Very good or good (n= 531)	18.6	1	1	1	1	31.62	1	1	1	1	1	1
Regular, bad or very bad (n= 109)	29.49	1.59 (1.06-2.36)	1.27 (0.86-1.87)	1.27 (0.86-1.87)	41.94	1.32 (0.81-2.17)	1.11 (0.66-1.86)	1.11 (0.66-1.86)	1	1	1	1
Number of days hanging out (per week)												
0 days (n= 37)	28	1	1	1	1	41.67	1	1	1	1	1	1
1-2 days (n= 202)	18.24	0.65 (32-1.33)	0.61 (0.31-1.21)	0.61 (0.31-1.21)	37.21	0.89 (0.41-1.94)	1.1 (0.52-2.33)	1.1 (0.52-2.33)	1	1	1	1
3-5 days (n= 306)	21.34	0.76 (0.39-1.5)	0.62 (0.33-1.2)	0.62 (0.33-1.2)	32.84	0.79 (0.37-1.68)	0.91 (0.46-1.79)	0.91 (0.46-1.79)	1	1	1	1
6-7 days (n= 95)	18.84	0.67 (0.3-1.49)	0.46 (0.22-0.96)*	0.46 (0.22-0.96)*	26.92	0.65 (0.26-1.63)	0.79 (0.34-1.83)	0.79 (0.34-1.83)	1	1	1	1
p value for the model			0.1682	<0.0001			0.0527	0.1731				
AIC test value			524.41	501.69			215.15	224.11				

* means statistically significant values. Model 1: city, age and sexual orientation. Model 2: city, age, sexual orientation and sex. Model 3: city, age, sexual orientation, sex and sexual intercourse. Model 4: model 3 + days out during the weekend. Model 5: Model 3 + social support (relationship with teachers and with partners). Model 6: all variables

Table 5. Relative and absolute frequencies of adolescent intimate partner violence victimisation depending on different variables and by sex in scholars from 2^o and 3^o ESO of educative centers in Terrassa and Alicante who have ever been in a relationship. Crude and adjusted prevalence ratios (CPR and aPR).

	Men (n = 312)						Women (n = 328)					
	% (n)	CPR (95% CI)	Model 3	Model 5	Model 6	% (n)	CPR (95% CI)	Model 3	Model 4	Model 6	Model 8	
aPR (95% CI)												
Age (years)												
13 years (n = 228)	16.81 (19)	1	1	1	1	0	1	1	1	1	1	
14 years (n = 305)	26.67 (40)	1.59 (0.97-2.59)	1.25 (0.76-2.03)	1.2 (0.73-1.97)	1.18 (0.72-1.94)	18.71 (40)	0.72 (0.46-1.13)	0.62 (0.39-0.98)*	0.63 (0.39-1.02)	0.59 (0.37-0.94)*	0.62 (0.38-0.99)*	
15, 16 or 17 (n = 107)	29.57 (14)	1.7 (0.93-3.11)	1.04 (0.53-2.04)	1.034 (0.82-2.02)	1.04 (0.54-2.02)	31.03 (14)	1.19 (0.73-1.95)	0.69 (0.4-1.17)	0.71 (0.41-1.21)	0.67 (0.39-1.15)	0.74 (0.43-1.29)	
Sexual orientation												
Heterosexual orientation (n = 496)	21.46 (53)	1	1	1	1	19.28 (48)	1	1	1	1	1	
LGB-sexual orientation (n = 144)	28.85 (15)	1.34 (0.82-2.19)	1.43 (0.9-2.28)	1.34 (0.82-2.18)	1.28 (0.79-2.07)	40 (28)	2.08 (1.41-3.05)*	1.65 (1.13-2.42)*	1.59 (1.07-2.36)*	1.53 (1.04-2.26)*	1.53 (1.02-2.3)*	
Migration background												
Spanish or high income countries (n = 492)	19.41 (46)	1	1	1	1	21.18 (54)	1	1	1	1	1	
Low income countries (n = 148)	36 (27)	1.43 (0.93-2.22)	1.8 (1.2-2.68)*	1.79 (1.21-2.67)*	1.76 (1.18-2.61)*	31.51 (23)	1.9 (1.3-2.8)*	1.52 (1.00-2.28)*	1.52 (1.01-2.3)*	1.48 (0.98-2.23)	1.48 (0.97-2.24)	
Have you ever had sexual intercourse?												
No (n = 169)	17.03 (39)	1	1	1	1	17.77 (43)	1	1	1	1	1	
Yes (n = 143)	40.96 (34)	2.4 (1.64-3.54)*	2.25 (1.51-3.35)*	2.2 (1.48-3.27)*	2.28 (1.5-3.46)*	39.53 (34)	2.22 (1.53-3.24)*	2.42 (1.61-3.63)*	2.54 (1.68-3.85)*	2.31 (1.53-3.49)*	2.22 (1.44-3.43)*	
Relationship with teachers												
Very Good or good (n = 439)	20.77 (43)	1	1	1	1	19.83 (46)	1	1	1	1	1	
Regular, bad or very bad (n = 201)	28.57 (30)	1.38 (0.92-2.06)	1	1	1	32.29 (31)	1.63 (1.1-2.4)*	1	1	1	1.36 (0.92-2.02)	
Relationship with classmates												
Very good or good (n = 573)	21.3 (59)	1	1	1	1	23.31 (69)	1	1	1	1	1	
Regular, bad or very bad (n = 67)	40 (14)	1.88 (1.18-3)*	1.53 (0.94-2.48)	1	1.49 (0.9-2.46)	25 (8)	1.07 (0.57-2.02)	1	1	1	1	
Relationship with partners												
Very Good or Good (n = 531)	22.76 (61)	1	1	1	1	20.15 (53)	1	1	1	1	1	
Regular, bad or very bad (n = 109)	27.27 (12)	1.2 (0.7-2.04)	1	1	1	36.92 (24)	1.83 (1.23-2.73)*	1	1	1	1.56 (1.02-2.4)*	
Number of days hanging out (per week)												
0 days (n = 37)	33.33 (6)	1	1	1	1	31.58 (6)	1	1	1	1	1	
1-2 days (n = 202)	21.05 (25)	0.63 (0.29-1.35)	0.67 (0.3-1.5)	0.67 (0.3-1.5)	0.67 (0.3-1.5)	23.36 (20)	0.74 (0.35-1.56)	0.75 (0.38-1.51)	0.75 (0.38-1.51)	0.79 (0.41-1.55)		
3-5 days (n = 306)	23.08 (37)	0.69 (0.34-1.41)	0.66 (0.3-1.44)	0.66 (0.3-1.44)	0.66 (0.27-1.59)	24.67 (36)	0.78 (0.38-1.6)	0.78 (0.4-1.5)	0.78 (0.4-1.5)	0.83 (0.44-1.55)		
6-7 days (n = 95)	25.58 (9)	0.77 (0.33-1.76)	0.66 (0.27-1.59)	0.66 (0.27-1.59)	0.66 (0.27-1.59)	17.31 (11)	0.55 (0.22-1.34)	0.51 (0.22-1.15)	0.51 (0.22-1.15)	0.56 (0.25-1.24)		
p value for the model			<0.0001	<0.0001	<0.0001			<0.0001	<0.0001	<0.0001	<0.0001	
AIC test value			368	369.58	373.41			368	372.04	367.36	273.33	

* means statistically significant values. Model 1: city, age and sexual orientation. Modelo 2: city, age, sexual orientation and migration background. Model 3: city, age, sexual orientation, migration background and sexual intercourse. Model 4: model 3 + days out during the weekend. Model 5 in MEN: Model 3 + relationship with classmates. Model 5 in WOMEN: Model 3 + relationship with teachers. Model 6 in MEN: all variables. Model 6 in WOMEN: M3 + social support (relationship with partners). Model 7 in WOMEN: M3 + relationship with partners. Model 8 in WOMEN: all variables.

6. REFERENCES

- Backus, Faedra. R., & Mahalik, James R. 2011. *The Masculinity of Mr. Right: Feminist Identity and Heterosexual Women's Ideal Romantic Partners: Psychology of Women Quarterly*.
<https://doi.org/10.1177/0361684310392357>
- Bank, W. 2019. *Country and lending groups*. World Bank.
- Banyard, Victoria L. & Cross, Charlotte. 2008. Consequences of Teen Dating Violence: Understanding Intervening Variables in Ecological Context. *Violence Against Women*, 14(9), 998-1013.
<https://doi.org/10.1177/1077801208322058>
- Basile, Kathleen C. 2020. Interpersonal Violence Victimization Among High School Students—Youth Risk Behavior Survey, United States, 2019. *MMWR Supplements*, 69. <https://doi.org/10.15585/mmwr.su6901a4>
- Beal, Frances. 1970. *Double Jeopardy: To Be Black and Female*. Detroit, MI: Radical Education Project.
- Bourdieu, Pierre. 1986. *The forms of capital*. En J. G. Richardson, *Handbook of Theory and Research for the Sociology of Education*. Greenwood New York, NY.
- Bourdieu, Pierre. 2000. *Cosas dichas*. Gedisa.
- Bourdieu, Pierre. 2003. *Un arte medio. Ensayo sobre los usos sociales de la fotografía*. Gustavo Gili.
- Bourdieu, Pierre. 2010. *El sentido social del gusto: Elementos para una sociología de la cultura*. Siglo XXI.
- Bowleg, Lisa 2008. When Black + Lesbian + Woman ≠ Black Lesbian Woman: The Methodological Challenges of Qualitative and Quantitative Intersectionality Research. *Sex Roles*, 59(5), 312-325.
<https://doi.org/10.1007/s11199-008-9400-z>
- Bowleg, Lisa 2012. The Problem with the Phrase Women and Minorities: Intersectionality—an Important Theoretical Framework for Public Health. *American Journal of Public Health*, 102(7), 1267-1273.
<https://doi.org/10.2105/AJPH.2012.300750>
- Bowleg, Lisa; MA, Jennifer Huang; Brooks, Kelly; Black, Amy & PhD, Gary Burkholder. 2003. Triple Jeopardy and Beyond: Multiple Minority Stress and Resilience Among Black Lesbians. *Journal of Lesbian Studies*, 7(4), 87-108. https://doi.org/10.1300/J155v07n04_06
- Breiding, Matthew J.; Basile, Kathleen C.; Smith, Sharon G.; Black, Michele C. & Mahendra, Reshma. 2015. *Intimate partner surveillance: Uniform definitions and recommended data elements*. National Center for Injury Prevention and Control. CDC.
- Broadus, Melissa. 2020. The Intersectionality of Race, Gender, Poverty, and Intimate Partner Violence Notes. *Indiana Health Law Review*, 17(2), 207-228.
- Burke, Jessica G.; O'Campo, Patricia & Peak, Geri L. 2006. Neighborhood Influences and Intimate Partner Violence: Does Geographic Setting Matter? *Journal of Urban Health*, 83(2), 182-194.
<https://doi.org/10.1007/s11524-006-9031-z>
- C. McClennen, Joan; DSW, Anne B. Summer & BSW, Charles Vaughan. 2002.

- Gay Men's Domestic Violence. *Journal of Gay & Lesbian Social Services*, 14(1), 23-49. https://doi.org/10.1300/J041v14n01_02
- Collins, Patricia Hill. 1990. *Black feminist thought: Knowledge, consciousness, and the politics of empowerment*. New York: Routledge.
- Collins, Patricia Hill. 1995. Symposium: On West and Fenstermaker's "doing difference". *Gender & Society*, 9(4), 491-494.
- Collins, Patricia Hill. 1998a. It's All In the Family: Intersections of Gender, Race, and Nation. *Hypatia*, 13(3), 62-82. <https://doi.org/10.1111/j.1527-2001.1998.tb01370.x>
- Collins, Patricia Hill. 1998b. The tie that binds: Race, gender and US violence. *Ethnic and Racial Studies*, 21(5), 917-938.
- Collins, Patricia Hill. 2009. *Black feminist thought: Knowledge, consciousness, and the politics of empowerment*. New York: Routledge Classics.
- Collins, Patricia Hill. 2017a. On violence, intersectionality and transversal politics. *Ethnic and Racial Studies*, 40(9), 1460-1473. <https://doi.org/10.1080/01419870.2017.1317827>
- Collins, Patricia Hill. 2017b. On violence, intersectionality and transversal politics. *Ethnic and Racial Studies*, 40(9), 1460-1473. <https://doi.org/10.1080/01419870.2017.1317827>
- Cramer, Elizabeth. P. & Plummer, Sara-Beth. 2009. People of Color with Disabilities: Intersectionality as a Framework for Analyzing Intimate Partner Violence in Social, Historical, and Political Contexts. *Journal of Aggression, Maltreatment & Trauma*, 18(2), 162-181. <https://doi.org/10.1080/10926770802675635>
- Crenshaw, Kimberlé. 1989. *Demarginalizing the intersection of race and sex: A black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics*. u. Chi. Legal f., 139.
- Crenshaw, Kimberlé. 1990. Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color. *Stanford Law Review*, 43(6), 1241-1300.
- Davis, Angela Yvonne. 2011. *Women, race, & class*. Vintage.
- Edwards, Katie M.; Sylaska, Kateryna M. & Neal, Angela M. 2015. Intimate partner violence among sexual minority populations: A critical review of the literature and agenda for future research. *Psychology of Violence*, 5(2), 112-121. <https://doi.org/10.1037/a0038656>
- Erickson-Schroth, Laura; Wu, Stepanhie X. & Glaeser, Eizabeth. 2020. Sexual and Gender-Based Violence in Lesbian, Gay, Bisexual, Transgender, and Queer Communities. *Sexual and Gender-Based Violence*. Springer.
- Eriksson, Malin; Dahlgren, Lars; Janlert, Urban; Weinehall, Lars & Emmelin, Maria. 2010. Social capital, gender and educational level impact on self-rated health. *The Open Public Health Journal*, 3(1).
- Fernández-González, Liria; O'Leary, K. Daniel & Muñoz-Rivas, Marina Julia. 2014. Age-Related Changes in Dating Aggression in Spanish High School Students. *Journal of Interpersonal Violence*, 29(6), 1132-1152. <https://doi.org/10.1177/0886260513506057>
- Forcadell-Díez, Lluís; Juárez Martínez, Olga; Abiétar, Daniel G.; López, María

- José; Sánchez-Martínez, Francesca; Perez, Glòria. Healthy and Equitable Interpersonal Relationships, Health Inequalities and Socio-Educational Interventions: A Conceptual Framework for Action. *J Sch Health*. 2023 Mar 14. doi: 10.1111/josh.13318. Epub ahead of print. PMID: 36917972.
- Greene, Beverly. 1997. *Ethnic and cultural diversity among lesbians and gay men* (pp. xv, 328). Sage Publications, Inc.
- Hooks, Bell. 1981. *Ain't I a woman: Black women and feminism* (Vol. 3). South End Press Boston.
- Houston, Eric & McKirnan, David J. 2007. Intimate Partner Abuse among Gay and Bisexual Men: Risk Correlates and Health Outcomes. *Journal of Urban Health*, 84(5), 681-690. <https://doi.org/10.1007/s11524-007-9188-0>
- Islam, M. Kamrul; Merlo, Juan; Kawachi, Ichiro; Lindström, M. & Gerdtham, Ulf-G. 2006. Social capital and health: Does egalitarianism matter? A literature review. *International Journal for Equity in Health*, 5(1), 3. <https://doi.org/10.1186/1475-9276-5-3>
- Jankowiak, Barbara; Jaskulska, Sylwia; Sanz-Barbero, Belén; Ayala, Alba; Pyżalski, Jacek; Bowes, Nicola; De Claire, Karen; Neves, Sofia; Topa, Joana; Rodríguez-Blázquez, Carmen; Davó-Blanes, María Carmen; Rosati, Nicoletta; Cinque, María; Mocanu, Veronica; Ioan, Beatrice; Chmura-Rutkowska, Iwona; Waszyńska, Katarzyna & Vives-Cases, Carmen. 2020. The Role of School Social Support and School Social Climate in Dating Violence Victimization Prevention among Adolescents in Europe. *International Journal of Environmental Research and Public Health*, 17(23), E8935. <https://doi.org/10.3390/ijerph17238935>
- Kaestle, Christine E. & Halpern, Carolyn T. 2005. Sexual intercourse precedes partner violence in adolescent romantic relationships. *Journal of Adolescent Health*, 36(5), 386-392. <https://doi.org/10.1016/j.jadohealth.2004.02.030>
- La salut de les persones adolescents a Barcelona. Enquesta FRESC 2016. (s. f.). ASPB - Agència de Salut Pública de Barcelona. Recuperado 15 de noviembre de 2019, de <https://www.aspb.cat/noticies/la-salut-i-els-seus-determinants-en-lalumnat-adolescent/>
- Lelaurain, Solveig; Fonte, David; Giger, Jean-Christopher; Guignard, Séverin & Lo Monaco, Gregory. 2018. Legitimizing Intimate Partner Violence: The Role of Romantic Love and the Mediating Effect of Patriarchal Ideologies. *Journal of Interpersonal Violence*, 0886260518818427. <https://doi.org/10.1177/0886260518818427>
- Lombardo, Emanuela, & Rolandsen Agustín, Lise. 2016. Intersectionality in European Union policymaking: The case of gender-based violence. *Politics*, 36(4), 364-373. <https://doi.org/10.1177/0263395716635184>
- McNulty, Thomas L. & Bellair, Paul E. 2003. Explaining racial and ethnic differences in adolescent violence: Structural disadvantage, family well-being, and social capital. *Justice Quarterly*, 20(1), 1-31. <https://doi.org/10.1080/07418820300095441>
- Meyer, Ilan H. 2003. Prejudice, Social Stress, and Mental Health in Lesbian, Gay, and Bisexual Populations: Conceptual Issues and Research Evidence. *Psychological bulletin*, 129(5), 674-697. [35](https://doi.org/10.1037/0033-</p></div><div data-bbox=)

2909.129.5.674

- Michael Bailey, J. 2020. The Minority Stress Model Deserves Reconsideration, Not Just Extension. *Archives of Sexual Behavior*, 49(7), 2265-2268. <https://doi.org/10.1007/s10508-019-01606-9>
- Mitton, Kieran. 2019. Public health and violence. *Critical Public Health*, 29(2), 135-137. <https://doi.org/10.1080/09581596.2019.1564223>
- Papp, Leanna J.; Liss, Miriam; Erchull, Mindy J.; Godfrey, Hester & Waaland-Kreutzer, Lauren. 2017. The dark side of heterosexual romance: Endorsement of romantic beliefs relates to intimate partner violence. *Sex roles*, 76(1-2), 99-109.
- Pérez-Marco, Alfredo; Soares, Panmela; Davó-Blanes, María Carmen & Vives-Cases, Carmen. 2020. Identifying Types of Dating Violence and Protective Factors among Adolescents in Spain: A Qualitative Analysis of Lights4Violence Materials. *International Journal of Environmental Research and Public Health*, 17(7), 2443. <https://doi.org/10.3390/ijerph17072443>
- Muñoz-Rivas, Marina J.; Graña Gómez, José Luis; O'Leary, K. D. & González Lozano, Pilar. 2007. Physical and psychological aggression in dating relationships in Spanish university students. *Psicothema*, 19(Número 1), 102-107. Recuperado a partir de <https://reunido.uniovi.es/index.php/PST/article/view/8603>
- Pinquart, Martin. 2010. Ambivalence in Adolescents' Decisions about Having Their First Sexual Intercourse. *The Journal of Sex Research*, 47(5), 440-450. <https://doi.org/10.1080/00224490903161639>
- Pornari, Chrisa D.; Dixon, Louise & Humphreys, Glyn W. 2013. Systematically identifying implicit theories in male and female intimate partner violence perpetrators. *Aggression and Violent Behavior*, 18(5), 496-505. <https://doi.org/10.1016/j.avb.2013.07.005>
- Pruitt, Kaitlyn L.; White, Darcy; Mitchell, Jason W. & Stephenson, Rob. 2015. Sexual agreements and intimate-partner violence among male couples. *International Journal of Sexual Health*, 27(4), 429-441. <https://doi.org/10.1080/19317611.2015.1037037>
- Reichel, David. 2017. Determinants of Intimate Partner Violence in Europe: The Role of Socioeconomic Status, Inequality, and Partner Behavior. *Journal of Interpersonal Violence*, 32(12), 1853-1873. <https://doi.org/10.1177/0886260517698951>
- Richards, Tara N. & Branch, Kathryn A. 2012. The Relationship Between Social Support and Adolescent Dating Violence: A Comparison Across Genders. *Journal of Interpersonal Violence*, 27(8), 1540-1561. <https://doi.org/10.1177/0886260511425796>
- Roberts, Lynn; Tamene, Mahader & Orta, Olivia R. 2018. The Intersectionality of Racial and Gender Discrimination among Teens Exposed to Dating Violence. *Ethnicity & Disease*, 28(Suppl 1), 253-260. <https://doi.org/10.18865/ed.28.S1.253>
- Rollè, Luca; Giardina, Giulia; Caldarera, Angela M; Gerino, Eva & Brustia, Piera. 2018. When Intimate Partner Violence Meets Same Sex Couples: A Review of Same Sex Intimate Partner Violence. *Frontiers in Psychology*, 9.

- <https://doi.org/10.3389/fpsyg.2018.01506>
- Rubin, Gayle. 1984. Thinking sex: Notes for a radical theory of the politics of sexuality. *Social perspectives in Lesbian and Gay Studies; A reader*, 100-133.
- Saewyc, Elizabeth M., Bauer, Greta R.; Skay, Carol L.; Bearinger, Linda H.; Resnick, Michael D.; Reis, Elizabeth & Murphy, Aileen. 2004. Measuring sexual orientation in adolescent health surveys: Evaluation of eight school-based surveys. *The Journal of Adolescent Health: Official Publication of the Society for Adolescent Medicine*, 35(4), 345.e1-15. <https://doi.org/10.1016/j.jadohealth.2004.06.002>
- Sample size and power calculator (Version 7.12). 2012. [GRANMO]. Institut Municipal d'Investigació Mèdica.
- Sanz-Barbero, Belén; Saurina, Carme; Serra, Laura; Vicens, Gemma R.; Casanovas, Laura Vall-Llosera; Otero-García, Laura; López, María José; Perez, Glòria & Vives-Cases, Carmen. 2021. *Prevalence and associated factors with sexual violence victimisation youth before, during and after the COVID-19 lockdown: A cross-sectional study in Spain*. *BMJ Open*, 11(11), e055227. <https://doi.org/10.1136/bmjopen-2021-055227>
- Sell, Randall L. 1997. Defining and Measuring Sexual Orientation: A Review. *Archives of Sexual Behavior*, 26(6), 643-658. <https://doi.org/10.1023/A:1024528427013>
- Sokoloff, Nathalie J. & Dupont, Ida. 2005. Domestic Violence at the Intersections of Race, Class, and Gender: Challenges and Contributions to Understanding Violence Against Marginalized Women in Diverse Communities. *Violence Against Women*, 11(1), 38-64. <https://doi.org/10.1177/1077801204271476>
- Sprecher, Susan & Metts, Sandra. 2016. Development of the 'Romantic Beliefs Scale' and Examination of the Effects of Gender and Gender-Role Orientation: *Journal of Social and Personal Relationships*. <https://doi.org/10.1177/0265407589064001>
- Subirana-Malaret, Montserrat; Gahagan, Jacqueline; Parker, Robin & Parker, Robin. 2019. Intersectionality and sex and gender-based analyses as promising approaches in addressing intimate partner violence treatment programs among LGBT couples: A scoping review. *Cogent Social Sciences*, 5(1), 1644982. <https://doi.org/10.1080/23311886.2019.1644982>
- Health. Violence: A Public Health Priority. Geneva. World Health Organization. Violence. 1996.
- Vives-Cases, Carmen; Davo-Blanes, María del Carmen; Ferrer-Cascales, Rosario; Sanz-Barbero, Belén; Albaladejo-Blázquez, Nuria; Sánchez-San Segundo, Miriam; Lillo-Crespo, Manuel; Bowes, Nicola, Neves, Sofia; Mocanu, Veronica; Carausu, Elizabeth M.; Pyżalski, Jacek; Forjaz, Maria João; Chmura-Rutkowska, Iwona; Vieira, Cristina Pereira & Corradi, Chiara. 2019. Lights4Violence: A quasi-experimental educational intervention in six European countries to promote positive relationships among adolescents. *BMC Public Health*, 19(1), 389. <https://doi.org/10.1186/s12889-019-6726-0>

7. ACKNOWLEDGMENTS

The authors would like to thank the schools of the cities of Alicante and Terrassa for their participation. Also, the Community Health Service of the Barcelona Public Health Agency for their collaboration in the fieldwork.

8. CONFLICT OF INTEREST

No conflicts has been reported, using ICMJE disclosure of interest (Updated February 2021).

<http://www.icmje.org/disclosure-of-interest/>

9. FUNDING STATEMENT

This study was funded by the multi-centre project "Promotion of protective assets against gender violence in adolescence and pre-adolescence" (Grant reference PI18/00590 and PI18/00544) of the Carlos III Institute of Health, as an intermediary body of the European Regional Development Fund (ERDF) and the European Social Fund (ESF). The project was also supported by the Centro de Investigación Biomédica en Red de Epidemiología Salud Pública (CIBERESP) through the subprogramme on Prevention of Gender Violence of the Programme on Social Determinants of Health (no grant award number specified). The funding sources had no involvement in the study desing; collection, analysis and interpretation of data; in the writing of the report; or in the decision to submit the article for publication.