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**Mental representations of violence in intimate relationships in  
students of Coimbra University: The importance of alcohol and  
drugs consumption**

**Representações mentais da violência entre íntimos em estudantes  
da Universidade de Coimbra: Estudo das variáveis consumo de  
álcool e outras drogas**

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**Abstract**

In this work we found that alcohol and drugs consumption in University population is significantly associated with greater violence between intimates. These intakes are not only preceded by similar behaviors in parents but also by personal experiences of physical or verbal abuse during childhood and adolescence. Finally, results reveal that psychological aggression is the most common type of abuse in this sample and men, in general, are those who have a higher urge for violence.

**Keywords:** violence among intimates, alcohol and drugs, perpetration and victimization.

**Resumo**

Neste trabalho, verificou-se que o consumo de álcool e drogas na população universitária está associado de forma significativa a uma maior justificção da violênci entre íntimos. Estes consumos são precedidos de comportamentos similares nos pais e também pela vivênci de situações de abuso físico ou verbal durante a infância e adolescência. Finalmente, os resultados revelam que a agressão psicológica é o tipo de abuso mais comum nesta amostra e que, no geral, são os homens que apresentam uma mais justificção da violênci.

**Palavras-Chave:** violênci entre íntimos; álcool e drogas; perpetração e vitimizção

### Introduction

Violence between intimates is an important social problem that does not distinguish social classes, religions or races. This violence is defined as any behavior of verbal/psychological abuse or physical force of any kind, carried out with the intent to manipulate, cause pain or hurt the other as part of a loving relationship between two people, regardless the nature of this relationship (Almeida, 2009; Duarte & Lima, 2006). In general, violence between intimates has been understood as the result of a set of contextual, individual and environmental characteristics (Reichenheim, Dias, & Moraes, 2006), such as the surrounding cultural standards, the role of gender in family relationships and the abuse of alcohol and illicit drugs (Reichenheim, Dias, & Moraes, 2006). Within these variables is common to consider alcohol consumption as one of the main responsible for this type of violence, regardless of the sex of the perpetrator

(Auerhahn & Parker, 1998; Blume & Zilberman, 2005; Borders, Barnwell, & Earleywine, 2007), making it one of the major public health concerns (Liu & Wuerker, 2005). The risk of this association between alcohol and violence not only occurs between harmful and regular consumers, but also between moderate or occasional consumers (Junior & Rabello, 2007). These assignments have also been extended to other drugs (Brookoff O'Brien, Cook, Thompson, & Williams, 1997).

The excessive and usual consumption of alcohol and other toxic substances is therefore assumed in terms of beliefs shared by western populations, as an explanation for the violence perpetrated by intimate partners in intimate relationships, although alcohol and drugs can not alone, linearly, determine violence (Almeida, 2009). In fact, they only facilitate this (or other) behavior, for which there must be a predisposition (Paixão, Alberto, & Neves, 2012). Therefore, it acts as a facilitator of

these behaviors, in a way that they become more socially accepted (Caetano, Schaffer, & Cunradi, 2001).

Alcohol consumptions, which seems to be starting earlier (Njaine & Minayo, 2004), are often motivated by socio-cultural reasons, as part of a imitation process of family, friends, or others that have some influence on the person (Lino, 2006). Even more, abusive consumption is usually linked to social backgrounds more favourable to this kind of practice (Parker & Auerhahn, 1998), which seems to happen in university culture (Martins, Coelho, & Ferreira, 2010), particularly in Coimbra university culture (Paixão *et al.*, 2012). In fact, university entrance is a vulnerable phase regarding these behaviors (Peuker, Fogaca, & Bizarro, 2006), and also regarding the acquisition and development of consumption habits (Ham & Hope, 2003; Park & Grant, 2005 ; Wagner & Andrade, 2008), often associated with risky sexual behavior, violence between intimate and car

accidents, among others (Carlini-Contrim, Gazal-Carvalho, & Gouveia, 2004; Pechansky, Szobot, & Scivoletto, 2004; Pillon, O'Brien, & Chavez, 2005). These intakes appear associated with abuse of other substances, such as tobacco (Paixão *et al.*, 2012; Almeida, Pasa, & Scheffer, 2009) and/or illicit substances such as cannabis (Grant *et al.*, 2006; Pechansky, Szobot, & Scivoletto., 2004; Paixão *et al.*, 2012; Pillon, O'Brien, & Chavez, 2005) and cocaine (Martin & Bryant, 2001), as precursors for a generalized addiction behavior (Grant *et al.*, 2006).

Moreover, violent behaviors are relatively common in dating relationships among youth, reaching a prevalence rate between 22% and 56% (Magdol *et al.*, 1997), including Portuguese college students (Duarte & Lima, 2006; Machado, Matos, & Moreira, 2003; Paixão *et al.*, 2012). These behaviors also appear to be more common in young people with poor relationships with their parents and with consumptions of alcohol, tobacco and

others drugs (Serge *et al.*, 1999). Also, in this case, the alcohol appears to be the most harmful substance, showing, for example, that problems related to this consumption are most likely to be associated with violent behaviors between intimate partners (Junior & Rabello, 2007; Zaleski, Pinsky, Orange, Ramisetty-Mikler, & Caetano, 2010). The same seems to happen with the justifications attributions for these behaviors, since consumers, more easily, tend to justify violent behavior with alcohol intoxication (Paixão *et al.*, 2012).

### **Objectives**

In this work we intend to know in a sample of college students:

- The importance of subject's life history about violence and alcohol/drugs consumption by caregivers considering: (1) the mental representations about violence between intimates; (2) the prevalence of perpetration and

victimization in different kinds of abuse; (3) and alcohol and drugs subject's consumption;

- The importance of alcohol and drugs consumption in the prevalence of perpetration and victimization of different kinds of abuse and in the mental representations of violence between intimate;

- The existence of gender differences in terms of prevalence of perpetration and victimization of different kinds of abuse, mental representations of violence, and alcohol and drugs consumption;

- Maintenance and resolution justifications about violence between intimates.

### **Methodology**

#### ***Sample***

The sample used in this study is a non-probabilistic convenience sample. It was collected at Coimbra University in 2012, among students of Psychology, Educational Sciences, Law, Economics, Medicine, Arts, Sciences and Technology. Includes a total of 589 subjects (195 males

and 394 females), with an average age of 21.21 (SD = 3.65).

### ***Instruments***

The protocol includes a sociodemographic questionnaire, a questionnaire about family life of the participants in childhood and adolescence, and the following five self-report scales:

#### **Conflict Tactics Scale Revised (CTS-2)**

The CTS-2 (Straus & Murray, 1970), intended to assess the way couples solve their conflicts, considering negotiation strategies (emotional or cognitive) and abuse. Includes 39 items grouped in pairs of questions related to the participant and his lifemate with a total of 78 questions focusing on the number of occurrences during the last year, experienced by the individual and the partner (Straus *et al.*, 1996). It involves eight response categories, the first six aimed to determine the prevalence and chronicity in the last year, and the others designed to determine

the overall prevalence. The results per item may vary between 0 and 6, with the higher scores showing greater levels of the victimization and perpetration. This version considers five factors (Negotiation, Psychological Aggression, Physical abuse without sequelae, sequelae with physical abuse and sexual coercion) and two scales (perpetration and victimization).

#### **Marital Violence Questionnaire - Stories (QRVC-HIS)**

The QRVC-HIS (Alarcão, Alberto Correia, & Camelo, 2007) consists of three stories of domestic violence. The stories are followed by ten statements, for which each respondent should indicate to what extent they agree with each statement. Each story identifies different representations about legitimacy or trivialization of marital violence. The first story describes a situation of violence in a middle class couple. The physical aggressor is a man with a "double face", meaning he shows a different behavior inside doors and outside doors. The story 2 depicts a couple of low

socioeconomic status (both with 60 years old). The woman is, in this case, the aggressor (characterized as hard worker with irritable and impatient temperament). The story 3 describes a blue-collar worker and a domestic woman 6 months pregnant (both with 30 years old). In this story the man is the aggressor, but only when drunk. The attacks appear in the story justified by the irascible nature of this man when drunk.

The QRVC-HIS was studied in different samples and showed good psychometric qualities (Camelo, 2009; Correia, 2008; Paixão *et al.*, 2012). In this study revealed a high Cronbach's alpha of .95 for the total score, .85 for story 1 and .90 for both story 2 and 3. The mean value of total responses is 44.41 (SD=12.50). Finally, it should be noted that all items have high correlations with the total score questionnaire, with the lowest correlation of  $r=.89$ .

Marital Violence Questionnaire - Causes, Maintenance and Resolution (QVC-CMR)

The QVC-CMR (Alarcão, Alberto, Camelo, & Correia, 2007) consists of three subscales of 14 items each of them focusing on the causes, maintenance and resolution attributions of conjugal violence. The statements are grouped under three conditions: (a) related to the offender, (b) associated with the victim, and (c) relating to the context (children, family and society).

Psychometric studies revealed good rates (Camelo, 2009; Correia, 2008; Paixão *et al.*, 2012). In this study QVC-CMR revealed a Cronbach's alpha of .86 for the "causes" factor ( $M = 34.70$ ,  $SD = 7.13$ ), .84 for "maintenance" factor ( $M = 40.59$ ,  $SD = 6.15$ ) and .72 for "resolution" factor ( $M = 44.35$ ,  $SD = 5.90$ ). The three factors significantly correlated with each other.

Alcohol Use Disorders Identification Test (AUDIT):

The AUDIT (Babor, Biddle, Saunders, & Monteiro, 2001) consists of ten items focused on alcohol consumption. It was developed by the World Health

Organization, aiming the development of a simple and reliable assessment tool of different types of alcohol consumption. Each answer has a score between 0 and 4, and the total between 0 and 40. Response quotation allows a distribution results in four groups: low risk - low consumption or withdrawal (scores 0-7); Medium risk - risk consumption (scores 8-15); High-risk or harmful use - abuse (scores between 16 and 19); Probable dependence - abusive consumption with, eventually, clinically significant (greater than 20 points).

In this study, AUDIT shows a Cronbach's alpha of .85.

The Drug Use Disorders Identification Test (DUDIT)

The DUDIT was developed as an instrument similar to the AUDIT, but focusing on the consumption of illicit drugs. It consists of 11 items assessing this consumption and its consequences in the last year. The assessment includes the following areas: (a) frequency of drug use,

(b) problems related with drug use, (c) dependence symptoms.

According to the authors, this instrument is suitable for assessing general and clinical populations (Berman, Bergman, Palmstierna, & Schlyter, 2003). The cutoff points (relating to drug problems) are 6 for males and 2 for females (Berman *et al.*, 2003).

In this study DUDIT showed a Cronbach's alpha of .87 for total score.

### *Statistical procedures*

Descriptive data (mean and standard-deviation) and parametric tests for means comparison (including Levene ANOVAs, t test and Cohen's d effect size) were performed. In order to measure the linear association between quantitative variables we used Pearson's correlation and linear regressions to predict the behavior of a quantitative dependent variable from one or more relevant variables.

The analysis was performed using SPSS (version 20) for Windows.

### Results

The existence of physical abuse with aggression between parents / caregivers is reported by 11.8% of subjects, who claims to have witnessed this type of abuse during childhood and adolescence. Verbal violence, under the same conditions, is witnessed by 36.8% and sexual assault by 2.1% of the subjects who claim to have seen it happen, though rarely.

Regarding alcohol consumption by the father, 50.9% of the sample claim this consumption, with 35.5% (n = 205) of these subjects reporting a very low level of consumption and 15.4 (n = 89) a frequent level. Regarding drug use, 4.1% of subjects reported this consumptions by the father, with 2.9% (n = 17) of subjects reporting a very low level of consumption while 1.2% (n = 7) report a frequent consumption level.

Consumption of alcohol and drugs by the mother are reported by 20.2% (n = 119)

and 2% (n = 12) of the subjects, respectively. Still, 17.3% of the sample (n = 102) describes infrequent alcohol consumptions and 2.9% (n = 17) frequent consumptions. Drugs consumption by the mother are uncommonly reported by 1.2% of the sample (n=7) and relatively frequently by 0.8% (n=5).

When asked about the importance of alcohol on physical and verbal violence behavior in intimate relationships, 28.7% of subjects answer affirmatively, with 20.9% (n=122) of the subjects stating that this can happen but only under certain conditions and 7.8% (n=46) of subjects state that the phenomenon is, under these conditions, always or almost always understandable. As for cocaine 25.5% of subjects assume that violence under the effect of this drug is understandable only in some situations (17.4%, n=101) or always or almost always (8%, n=47).

Considering solving conflicts strategies (CTS-2) it was found that 40.6% of participants reported at least one violent

behavior toward their partner in the last year (Table 1). From these data also stands out the fact that 38.7% of subjects report

having been the victim of at least one abusive act during the last year.

**Table 1**

*Values of total perpetration rate, total victimization and psychological aggression considering total perpetration and total victimization in CTS- 2 (N=591).*

Frequency of total perpetration in the past year			
	N	%	Cumulative %
One time	240	40.6	40.6
More than one time	11	1.9	42.5
Never	340	57.5	100
Frequency of total victimization in the last year			
One time	229	38.7	38.7
More than one time	11	1.9	40.6
Never	351	59.4	100
Frequency of psychological aggression considering last year perpetration			
One time	24	4.1	4.1
More than on time	237	40.1	44.2
Never	330	55.8	100
Frequency of psychological aggression considering last year victimization			
One time	30	5.1	5.1
More than one time	216	36.5	41.6
Never	345	58.4	100

In terms of perpetration and victimization, general, is negotiation (Table 2) the most used tactics by participants, in

**Table 2.**

*Mean and Standard Deviation for Perpetration and Victimization in the previous year, considering gender and the five scales of CTS - 2*

		Perpetration		Victimization	
		Man	Women	Man	Women
		M (DP)	M (DP)	M (DP)	M (DP)
<b>Negotiation</b>	Emotional	9.11 (6.78)	11.90 (6.18)	8.85 (6.54)	11.83 (6.05)
	Cognitive	7.14 (6.18)	9.47 (5.85)	6.98 (6.00)	9.20 (5.90)
	Total	16.24 (12.50)	21.50(11.51)	15.88 (12.24)	21.21 (11.32)
<b>Physical abuse without sequelae</b>	Slight	0.58 (2.25)	0.88 (2.51)	0.76 (2.91)	0.62 (2.05)
	Severe	0.34 (2.18)	0.20 (1.10)	0.37 (1.98)	0.23 (1.20)
	Total	0.94 (4.11)	1.01 (3.15)	1.15 (4.65)	0.82 (2.76)
<b>Physical abuse with sequelae</b>	Slight	0.15 (.98)	0.07 (0.61)	0.13 (.91)	0.06 (.60)
	Severe	0.11 (1.17)	0.09 (0.66)	0.10 (1.05)	0.06 (.59)
	Total	0.20 (1.61)	0.16 (0.96)	0.17 (1.33)	0.12 (.90)
<b>Psychological Aggression</b>	Slight	3.34 (4.92)	3.84 (4.87)	3.36 (4.89)	3.33 (4.59)
	Severe	0.68 (2.36)	0.46 (1.53)	0.63 (2.39)	0.46 (1.49)
	Total	3.81 (5.96)	4.25 (5.58)	3.74 (5.63)	3.70 (5.24)
<b>Sexual coercion</b>	Slight	1.15 (2.70)	0.42 (1.36)	0.93 (2.62)	0.66 (1.68)
	Severe	0.16 (1.53)	0.05 (0.48)	0.16 (1.31)	0.12 (.80)
	Total	1.16 (2.76)	0.48 (1.59)	1.11 (3.49)	0.78 (1.99)

Regarding perpetration, there are statistically significant differences, with small effect sizes, particularly in the negotiation where women scored higher than men ( $t(418) = -4.10, p < .05, d = 0.44$ ) and sexual coercion in which men scored higher than women ( $t(529) = 2.96, p < .01, d = 0.30$ ). Considering totals scores for abuse, assault and coercion, results show that men tend to score more often on perpetration and victimization. In other words men's perception about they own victimization is significantly associated with perceived behaviors of perpetration ( $r = .980, p < .001$ ).

It was also studied the relationship between the CTS-2 (perpetration and victimization) and alcohol and drugs consumptions (AUDIT and DUDIT) but statistically significant relations were not found.

In QRVC-HIS highest scores were observed in story 2 (elderly woman as aggressor), suggesting that men and women justify more easily this kind of aggression. Men have a higher violence justification rates for the three stories (Table 3).

**Table 3.**

*Gender differences in QRVC -HIS*

	Man		Woman		T	Sig.	d
	M	(DP)	M	(DP)			
Story 1 (10 items)	15.97	5.18	12.98	3.24	7.27	.000	0.69
Story 2 (10 items)	17.87	5.54	15.28	4.53	5.58	.000	0.51
Story 3 (10 items)	16.45	5.50	13.44	3.73	6.79	.000	0.64
Total (30 items)	50.24	14.69	41.61	10.20	7.16	.000	0.68

Gender comparison shows statistically significant differences with medium sizes effect.

Searching for an eventual relation between alcohol and drugs consumptions and violence legitimization we have correlated DUDIT and AUDIT with QRVC-HIS. Pearson's r between DUDIT and QRVC-HIS showed statistically significant relationships [story 1 (r = .09, p <.05); story 2 (r = .12, p <.01); story 3 (r = .15, p <.01); and total (r = .13, p <.01)] indicating that drug consumption is related with violence legitimization as portrayed in the stories. Likewise, Pearson's r

between AUDIT and QRVC-HIS, showed statistically significant relationships in all stories [story 1 (r = .19, p <.01); story 2 (r = .16, p <.01); story 3 (r = .27, p <.01); and total (r = .21, p <.01)] indicating that the higher the alcohol consumption, the greater the legitimacy of violence in this questionnaire. In the same direction goes the range of values obtained in QRVC-HIS and the consumption categories defined by AUDIT (Table 4).

**Table 4**

*Mean and standard-deviation of QRVC-HIS for the four AUDIT categories*

	Category I <sup>a</sup>	Category II <sup>b</sup>	Category III <sup>c</sup>	Category IV <sup>d</sup>
	<i>M (DP)</i>	<i>M (DP)</i>	<i>M (DP)</i>	<i>M (DP)</i>
QRVC-HIS_Story 1	13.62 (3.80)	14.36 (4.44)	14.77 (5.31)	21.00 (7.81)
QRVC-HIS_Story 2	15.76 (4.93)	16.94 (4.83)	17.15 (5.08)	20.90 (9.02)
QRVC-HIS_Story 3	13.93 (4.18)	15.17 (4.89)	15.15 (4.62)	22.30 (8.55)
QRVC-HIS_Total	43.21 (11.62)	46.43 (12.79)	47.08 (13.00)	65.33 (22.86)

<sup>a</sup>low consumption or withdrawal; <sup>b</sup>Medium risk consumption; <sup>c</sup>High-risk consumption; <sup>d</sup>Probable dependence

On QVC-CMR, the causes of violence most valued by the sample are

"the history of violence in perpetrator and victim family" and "alcohol or drugs

consumption by the offender". However, for men, the most pointed question were the "alcohol or drugs consumption by the offender" and, for women, "the history of violence in the family of origin of the perpetrator and victim". These differences, however, are not statistically significant.

Considering the maintenance reasons, the one that stands out is the "absence of any complaint by the victim or others", followed by "lack of confidence in justice efficiency". Men and women hierarchies these justifications in the same way, with averages between 3.44 (SD = 0.69) for men and 3.60 (SD = 0.60) for women (first category) and 3.15 (SD=0.83) and 3.38 (SD = 0.67) respectively for men and women (second category).

Despite the responses' homogeneity between those items, there are statistically significant differences in the items "lack of confidence in justice efficiency" ( $p < .05$ ), "social isolation of the victim and/or family" ( $p < .05$ ), "promises of change from the offender" ( $p < .01$ ) and

"tenderness of aggressors out of violence moments" ( $p < .01$ ). In all these cases women scored higher than men.

"Protect the victim and the children, if any" is the most indicated reason to solve the problem followed by "encourage reporting violent situations". The resolution factors with significantly different results between men and woman are: "withdraw the aggressor" ( $p < .05$ ), "encourage reporting violent situations" ( $p < .05$ ), "encourage couple's separation and divorce" ( $p < .05$ ), "protect the victim and children, if any" ( $p < .05$ ) and "treat the offending" ( $p < .05$ ). Women tend to score higher in all these factors.

Regarding alcohol consumptions, 417 (70.6%) participants fell into Category I, (low consumption or abstinence behavior). Category II (consumption risk), scored 137 subjects (23.2%). Category III (harmful use of alcohol) scored 13 subjects (2.2%). Finally, 10 (1.7%) participants fell into Category IV (probable alcohol dependence).

Comparing genders, men ( $M = 0.76$ ,  $SD = 0.61$ ) have a higher alcohol consumption than women ( $M = 0.47$ ,  $SD = 0.39$ ). These differences are statistically significant with a medium effect size  $t(574) = 5.99$ ,  $p < .05$  ( $d = 0.57$ ).

Regarding drug use, 415 (71.3%) participants answered that they do not use drugs and 167 (28.7%) claimed consuming, or having consumed, other drugs rather than alcohol (9 subjects have not responded). Regarding these consumptions, 29 men (7%) had values above the cutoff point defined for this sex ( $> 6$ ) and 65 women (16%) scored higher than the cutoff point of 2. Of these, yet, 19

(4.6%) had values greater than 6. Comparison between genders showed higher values of drug consumption by men ( $M = 2.74$ ,  $SD = 5.57$ ) than women ( $M = 1.00$ ,  $SD = 2.31$ ). The differences between genders are statistically significant, but with a small effect size  $t(578) = 4.17$   $p < .05$  ( $d = 0.41$ ). There is also a significant correlation between the AUDIT and DUDIT with  $r = .455$  ( $p < .01$ ), indicating that the amount of alcohol consumed is related with drugs consumption. The linear regression model also shows that alcohol consumption explains about 21% of drug consumption (Table 5)

**Table 5**

*Alcohol consumption (AUDIT) as a predictor of drugs consumption (DUDIT)*

	B	SE B	$\beta$
Constant	.462	.02	.
DUDIT	.064	.005	.455***
$R^2$	.207		
$R^2_{adj}$	.205		
F	24,323***		

\*\*\* $p < .001$

Regarding the importance of alcohol consumption by parents in current consumption of respondents, there are significant relationships, although with a very low variance explanation (2%). In this case the largest influence is assumed by the father with  $F(1, 563) = 10.28$ ,  $p < .05$  ( $\beta = 0.13$ ) and  $R^2_{adj.} = .02$ . Drug use by parents is not related to the respondent's current consumptions.

There is a significant relation between respondents perception of being victims during childhood and adolescence of "physical punishment for bad behavior at home" and "physical punishments for misbehavior in school," and AUDIT results. In this case, these perceptions explain 3.1% of variance results on AUDIT.

When related to DUDIT, they also present significant results concerning "physical punishment for bad behavior at home" [ $F(1, 580) = 4.79$ ,  $p < .05$  ( $\beta = 0.09$ ),  $R^2_{adj.} = .01$ ] and "physical punishment for bad behavior at school" [ $F(1, 564) = 8.76$ ,  $p < .05$  ( $\beta = 0.12$ ),  $R^2_{adj.} = .02$ ]. These variables on physical punishments are also meaningfully related to the CTS-2 results (victimization and commission), but variance explanation is also very low ( $R^2_{adj.} = .02$ ).

Participants perception about being victims during childhood and adolescence of "verbal violence with insults and humiliation from parents" are significantly related with what they reported in CTS2 scale of perpetration [ $F(1, 364) = 22.90$ ,  $p < .05$  ( $\beta = 0.24$ ),  $R^2_{adj.} = .06$ ].

## Discussion

In this study, an important part of the sample refers a family environment during childhood and adolescence, highlighted by different kinds of violence between parents, with values ranging between 12% (for physical abuse with aggression) and 37% (for verbal violence). From these results it stands out, for its significance, the value of 2.1% for sexual assaults between parents. However, these perceptions do not significantly correlate with the intimate relations of violence reported by subjects, or the alcohol and drugs consumption, or even with these subjects representations of violence between intimates. This lack of relationship may be related to the fact that these "histories of violence" does not have a linear implication, in terms of risk factor, and may even be the basis of rejection attitudes towards violence (Almeida, 2009).

Alcohol consumptions by fathers are referred by 50.9% of the sample, with 15.4% referring frequent consumptions. Regarding the mother, subjects report 20.2% of alcohol consumptions, with 2.9% referring frequent consumptions. According to the World Health Organization, Portugal is the 11<sup>th</sup> world country with alcohol's highest consumptions rates, with approximate 13 liters of consumptions of alcohol / year per capita (World Health Statistics, 2014), and an estimated of 17% of excessive drinkers and chronic alcoholic patients (Mercês de Mello, Barrias, & Breda, 2001), which is consistent with the observed rates in our study. Nevertheless alcohol consumption in subjects' families is significantly related to subjects' alcohol consumption, which may be associated with cultural factor, wherein the individual acquires and assimilates aspects inherent to the

primarily transmitted culture within family (Almeida, 2009).

Drug use by the father is reported by 4.1% of the subjects, with 1.2% reporting frequent consumption. Drug use by the mother, is reported by 2%, and frequent consumption by 0.8% of the sample. In Portugal, the III National Consumer Survey of Psychoactive Substances (Balsa, Vital, & Urban, 2013) showed prevalence rates in illicit substances consumptions with annual fluctuations between 7% and 12%, which is relatively higher than referred by these students. These consumptions, however, unlike the observed with alcohol, are not related with subjects' consumption.

These results should be framed considering alcohol consumption observed in this sample, as in other studies (Martins, Coelho, & Ferreira, 2010; Paixão, 2012). In this case, male participants show superior results comparing to females. The same happens with drug use. The quantities of these consumptions in some

of these subjects are very high, with 23 subjects reporting an adverse alcohol consumptions (2.2%) or even addiction (1.7%). Illegal drugs have been experimented by 167 subjects (28.7%), of which 48 (12% approximately) with consumptions higher than the defined cutoff point for men consumption, and 96 subjects higher than the defined cutoff point for women consumption. These data emphasize the importance of "university culture" in substance abuse.

Another significant finding is observed in the relationship between alcohol consumption and other drugs use. In this case, alcohol consumption tends to be significantly associated with other drugs use, as observed by Bryant (2001), Grant *et al.* (2006), Pechansky, Szobot and Scivoletto (2004), Pillon O'Brien and Chavez (2005), among others.

The participants perception of have been victims during childhood and adolescence of "physical punishment for bad behavior at home" and "physical punishment for bad

behavior at school" joins also, significantly, to "current consumption of alcohol and drugs" and "perpetration and victimization behaviors" variables, although the explanation for the variance is very low in any of these relationships. Interestingly, however, it was not observed significant relationships between what the subjects reported as perpetration behaviors or victimization (CTS-2) and the current alcohol and drug consumptions. Therefore, although several studies show strong relationships between these consumptions and violent behaviours (Matos, Negreiros, Simões, & Gaspar, 2009; Rabello & Júnior, 2007; Zaleski, Pinsky, Laranjeira, Ramisetty-Mikler, & Caetano, 2010), our results do not corroborate this evidence, which may be related to minor consumption and minor physical violence rates observed here.

As in Connolly and Josephson (2007) study, in which a great part of the participants are involved in some kind of abusive relationship, in our study

approximately 44% of participants also reported the existence of, at least, one violence occurrence between themselves and the partner in the last year. Psychological violence are the most commonly reported, as observed in other studies (Duarte & Lima, 2006; Paixão *et al.*, 2012; Paiva & Figueiredo, 2001). However, the magnitude of these rates reveals the possibility that many of these individuals consider these behaviors as not abusive, even socially accepted, so they become easier and less guilty when talking about them (Paiva & Figueiredo, 2001).

Although there's no statistically significant differences, men believes, on average, that are more victimized in all types of abuse and aggression (measured by the CTS-2), as previously observed by Paiva and Figueiredo (2001). Moreover, and still related to perpetration, significant differences were found in sexual coercion factor, with men scoring more than women, as previously observed in other studies (Paiva & Figueiredo, 2001;

Rennison & Welchans, 2000; Straus *et al.*, 2003). This result may be related to sexual stereotypes, particularly with the idea of male assertiveness and initiative in sexual relationships (Paiva & Figueiredo, 2001). For other types of abuse, there may be a circularity concerning perpetration among men and women, resulting from the victim's response to the inflicted abuse. In our study, as in Paiva and Figueiredo (2001) study, this is also verified, since abused subjects show a higher probability of being themselves also perpetrators.

In the QRVC-HIS analysis, it was found that the greatest violence justification happens in story 2 (elderly woman as aggressor), as observed in other studies (Paiva, 2010; Paixão *et al.*, 2012). These results can be related to a lower physical violence perception when the aggressor is a woman (Carlson & Worden, 2005) and the fact that the couple has older age and lower socioeconomic status. Moreover, despite the offender being a woman, men

are those who more justify violence in this story.

Story 3 (worker under the influence of alcohol) also shows high levels of justification. In this case, the most important is the observed relationship between alcohol consumption and the level of aggression explanation in this story: that is, the higher consumption, the higher tends to be the legitimization of alcohol-related violence. This data is complemented with the idea that illicit drug use is also a violence “legitimator”, supporting the already observed in other studies (Adeodato, Carvalho, Siqueira, & Souza, 2005; Paixão *et al.*, 2012; Rabello & Junior, 2007). This observation is also reinforced by the idea assumed by most participants that "alcohol and drugs consumption by the offender" is one of the main causes for violence between intimates.

Regarding these issues, results are close to those obtained by Camelo (2009), Aguilár (2010) and Paiva (2010), pointing to the

relation between exposure to violence during childhood and perpetration/victimization of violence in adulthood (Hotaling & Sugarman, 1986; Matos, 2003; Rapoza & Baker, 2008). This fact is curious since it is in direct contradiction with the lack of relationship between what is said by the subjects about aggressive behaviors of parents in their childhood and adolescence and the perpetration and victimization behaviors now reported by them in CTS-2. In this case, it is as if the rational constructed by these subjects did not have a real relationship with the "perceived events" on their own life.

Regarding the violence maintenance factors, the idea of victims not reporting acts of violence, defines as the most important attribution for the maintenance and "circularity" of these phenomena, followed by "lack of confidence in justice efficiency". In the latter case, the possible "frequent disclosure in the media of retaliation

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suffered by women who reported violence and the delay of justice to act and protect victims" (Paiva, 2010, p.32), may underlie this feeling of justice ineffectiveness.

As for the resolution factors, the idea of "encourage reporting violent situations" stands out, complementary to the maintenance factor of "absence of any complaint by the victim or other".

### Conclusions

Violence between intimate is an important social problem, present in all cultures and social status. It emerges as an attempt to control and manipulate the other, not only through physical acts, but also with other forms of domain that ensures a sense of power by the aggressor (Almeida, 2009).

In this context, alcohol and drugs consumption often arises as a justification for these behaviors. Moreover, there is a relationship between alcohol and other drugs consumption, with the first

justifying 20% of the latter. This consumption, on the other hand, is widespread among these students, even showing worrying rates in terms of public health.

Reported abuses among parents/caregivers in participant's childhood and adolescence do not seem influence subject's current behaviors. However parents/caregivers consumption of alcohol influence this consumptions behavior by subjects.

Considering perpetration and victimization prevalence of different types of abuse, results showed that psychological aggression is the most prevalent type of abuse in the sample (for perpetration and victimization). Concerning gender, males scored higher in sexual compulsion and women in negotiation. The results also show the circular effect of aggressive behavior, where abused subjects tend to assume a more aggressive behavior. Participants show greater legitimization of violence when it is perpetrated by the woman and also when the couple is older.

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However, men have, in general, greater justification for aggressive behavior.

The consumption of alcohol and drugs by participants tend to be associated with greater violence legitimization, especially when the situation involves a drunken abuser, as shown in Story 3 of the QRVC 3-HIS.

Results are consistent with other studies about "family perpetrator and victim violence history" and "alcohol or drugs consumption by the offender" as risk factors of violence among intimates. Concerning the maintenance of violence, participants assign responsibility in first hand to the victim, focusing on the importance of the complaint.

The experience perception of have been a victim during their childhood and adolescence, of "physical punishment for bad behavior at home" and "physical punishments for misbehavior in school" relates to current alcohol and drugs consumption and perpetration and victimization behaviours. However, no

significant relations were observed between what subjects reported as behaviors of perpetration or victimization in the CTS-2 and the current alcohol and drugs consumptions measured by the AUDIT and DUDIT.

Finally, we must highlight the relationship between "verbal violence with insults and humiliation from parents" and perpetration (CTS-2), and the relationship between the "verbal violence with insults and humiliation by teachers or other educators" and drugs consumption (DUDIT).

#### **Limitations of the study:**

The following limitations should be highlighted in this study:

- The sample imbalance between men and women;
- The desirability bias introduced by the use of self-response scales;
- The CTS-2 assessment by only one dyad member and the difficulty shown by some subjects in understanding the functioning of this scale.

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