

Intimate partner violence among women deprived of liberty, university students, and the general population: Prevalence and sociodemographic predictors

Carollina Souza Guilhermino¹, Juliana Laiz de Paula Silva², Milena Bittencourt Roque²,
Ariele de Freitas Macedo², Tiago Geraldo de Azevedo², Celso Francisco Tondin², Marco
Antônio Silva Alvarenga²

¹ Federal University of Minas Gerais, Department of Psychology, Belo Horizonte, Minas Gerais, Brazil

² Federal University of São João del-Rei, Department of Psychology, São João del-Rei, Minas Gerais, Brazil


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Author Note

Carollina S. Guilhermino  <https://orcid.org/0000-0003-3434-9449>

Juliana Laiz de P. Silva  <https://orcid.org/0000-0002-2922-3158>

Milena B. Roque  <https://orcid.org/0009-0000-6913-3002>

Ariele de F. Macedo  <https://orcid.org/0000-0002-8327-8715>

Tiago G. de Azevedo  <https://orcid.org/0000-0002-0392-3463>

Celso F. Tondin  <https://orcid.org/0000-0001-7640-5838>

Marco Antônio S. Alvarenga  <https://orcid.org/0000-0002-1168-5733>

Correspondence concerning this article should be addressed to Carollina Souza Guilhermino, email: carolguilhermino@gmail.com. Department of Psychology, Federal University of Minas Gerais, Avenida Antônio Carlos, 6.627, Pampulha Campus, Belo Horizonte, Minas Gerais, ZIP CODE: 31270-901, Brazil. Email: carolguilhermino@gmail.com

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Abstract

Intimate partner violence (IPV) constitutes a violation of human rights and a serious public health problem. In Brazil, studies comparing IPV across different groups of women, particularly those who are incarcerated, remain scarce. This study aimed to estimate the prevalence of IPV victimization and perpetration and to identify associated risk factors among three population segments: incarcerated women, university students, and women from the general population. A cross-sectional design was applied to a non-probabilistic sample of 800 participants from various Brazilian states, aged from 18 to 74 ($M = 30.45$; $SD = 10.73$). Descriptive analyses, multiple linear regressions, and ANOVA analyses revealed significant differences in IPV prevalence across groups. High rates of psychological, physical, and sexual violence were reported both for victimization (31.0% to 73.4%) and perpetration (12.3% to 74.8%). Additionally, 72.1% of participants reported experiencing bidirectional violence. Incarcerated women were the most vulnerable group. Predictors included group membership, household income, educational level, substance use, and parenthood; however, these varied according to the type of violence, highlighting the multifactorial and complex nature of IPV. The results underscore the need for targeted public policies that address the specific characteristics of each population group.

Keywords: marital conflict, incarcerated women, gender-based violence, domestic violence, violence against women

VIOÊNCIA POR PARCEIRO ÍNTIMO EM MULHERES PRIVADAS DE LIBerdade, ESTUDANTES UNIVERSITÁRIAS E POPULAÇÃO EM GERAL: PREVALÊNCIA E PREDITORES SOCIODEMOGRÁFICOS

Resumo

A violência por parceiro íntimo (VPI) constitui uma violação dos direitos humanos e um grave problema de saúde pública. Contudo, são escassos estudos que comparam a manifestação da VPI entre diferentes grupos de mulheres, em especial aquelas em privação de liberdade. Diante disso, o presente estudo teve como objetivo estimar a prevalência de vitimização e perpetração de VPI e identificar seus fatores de risco em três segmentos populacionais: mulheres privadas de liberdade, universitárias e da população geral. Trata-se de um estudo transversal, com amostragem não probabilística, composta por 800 participantes de diferentes estados brasileiros, com idades entre 18 e 74 anos ($M = 30,45$; $DP = 10,73$). Foram realizadas análises descritivas, regressões lineares múltiplas e ANOVA, que revelaram diferenças significativas na prevalência da VPI entre os grupos investigados. Os dados evidenciaram prevalências elevadas de violência psicológica, física e sexual, tanto na condição de vitimização (31,0% a 73,4%) quanto na de perpetração (12,3% a 74,8%). Além disso, 72,1% das respondentes indicaram a ocorrência de violência bidirecional. O grupo de mulheres privadas de liberdade apresentou a maior vulnerabilidade à VPI. Os preditores encontrados foram grupo, renda familiar, escolaridade, uso de substâncias e parentalidade. No entanto, eles variaram conforme o tipo de violência analisado, evidenciando a complexidade e a natureza multifatorial do fenômeno. Os achados ressaltam a necessidade de políticas públicas direcionadas, que considerem as especificidades de cada grupo populacional.

Palavras-chave: conflito conjugal, mulheres privadas de liberdade, violência de gênero, violência doméstica, violência contra a mulher

VIOLENCIA DE PAREJA EN MUJERES PRIVADAS DE LIBERTAD, ESTUDIANTES UNIVERSITARIAS Y POBLACIÓN GENERAL: PREVALENCIA Y PREDICTORES SOCIODEMOGRÁFICOS

Resumen

La violencia por parte de la pareja íntima (VPI) constituye una violación de los derechos humanos y un grave problema de salud pública. No obstante, son escasos los estudios que comparan la manifestación de la VPI entre diferentes grupos de mujeres, especialmente aquellas privadas de libertad. El presente estudio tuvo como objetivo estimar la prevalencia de victimización y perpetración de la VPI, y identificar sus factores de riesgo en tres segmentos poblacionales: mujeres privadas de libertad, estudiantes universitarias y de la población general. Se trata de un estudio transversal, con un muestreo no probabilístico, compuesto por 804 participantes de distintos estados brasileños, con edades entre 18 y 74 años ($M = 30,45$; $DE =$

10,73). Se realizaron análisis descriptivos, regresiones lineales múltiples y ANOVA, que revelaron diferencias significativas en la prevalencia de la VPI entre los grupos investigados. Los datos indicaron altas tasas de violencia psicológica, física y sexual, tanto en condición de victimización (31,0% a 73,4%) como de perpetración (12,3% a 74,8%). Además, el 72,1% de las participantes reportaron situaciones de violencia bidireccional. Las mujeres privadas de libertad presentaron la mayor vulnerabilidad frente a la VPI. Los principales predictores identificados fueron grupo de pertenencia, ingreso familiar, nivel educativo, consumo de sustancias y parentalidad. Estos factores variaron según el tipo de violencia analizado, lo que evidencia la complejidad y la naturaleza multifactorial del fenómeno. Los hallazgos destacan la necesidad de políticas públicas específicas que consideren las particularidades de cada grupo poblacional.

Palabras clave: conflicto conyugal, mujeres privadas de libertad, violencia de género, violencia doméstica, violencia contra la mujer

Intimate Partner Violence (IPV) is defined as individual behavior that causes physical, psychological, or sexual harm, involving acts of physical aggression, psychological abuse, sexual coercion, and controlling behaviors (World Health Organization [WHO], 2019). This definition includes violence perpetrated by both current and former spouses or partners (Oram et al., 2022). IPV is commonly conceptualized through two core dimensions: perpetration, which involves engaging in violent acts toward a partner, and victimization, which refers to experiencing such behaviors (White et al., 2023). In several countries, IPV is considered a public health problem and a violation of human rights due to its magnitude and negative individual and social consequences (White et al., 2023; WHO, 2021). In addition, prior exposure to IPV is the strongest predictor of intimate partner homicide (Fraga Rizo et al., 2019).

Global estimates indicate that one in three women experience physical and/or sexual violence by an intimate partner or former partner during their lifetime, and approximately 38% to 40% of femicides are committed by a male intimate partner (WHO, 2021). Brazil presents similar figures: national data show that 33.4% of women have been victimized by physical or sexual violence perpetrated by current or former intimate partners (*Fórum Brasileiro de Segurança Pública* [FBSP], 2023). Additionally, 53.6% of femicides were committed by current partners and 19.4% by former partners, with 7 in 10 cases occurring within the victim's residence (FBSP, 2023).

Although IPV disproportionately affects women as victims, research over the past two decades has shown that women may also assume the role of perpetrator, and mutual violence is a significant phenomenon, reported in 45% to 72% of cases (Plouffe et al., 2020). Women may perpetrate IPV for various reasons, including self-defense or involvement in highly conflictual and aggressive relationships (Robertson & Murachver, 2007). A national Brazilian survey indicated that 15% of men who experienced violence reported being assaulted by a current or former intimate partner (Waiselfisz, 2015). Globally, only 6.3% of male homicides are attributed to intimate partners (Stöckl et al., 2013), indicating that while men can be victims of IPV, its lethality and chronicity are substantially higher among women.

IPV is also a substantial concern among college populations. A study that included 1,619 Brazilian college students reported an overall IPV prevalence of 30.5%, with rates of psychological violence at 28.2%, physical violence at 7.6%, and sexual violence at 2.7%. Women were significantly more likely than men to be victims of sexual IPV (Valério, 2018). In Portugal, 53% of female university students reported experiencing IPV (Neves et al., 2020), while in the United States, 43% of female and 28% of male college students disclosed experiences of IPV, including physical and sexual violence, controlling behaviors, verbal abuse, and excessive digital communication (Tsui & Santamaria, 2015). These findings demonstrate that, although low educational attainment is considered a risk factor for IPV (Ince-Yenilmez, 2020; Mascarenhas et al., 2020), such violence is also prevalent among individuals with higher education and disproportionately affects women (Valério, 2018).

Estimates are even more alarming among women deprived of liberty. The lifetime prevalence of IPV victimization is significantly higher in this group compared with non-incarcerated

women (Jones et al., 2018). Studies in the United States indicate that 70% to 90% of incarcerated women report being victims of IPV (Fraga Rizo et al., 2019), often in relationships marked by cyclical patterns of bidirectional violence (Karlsson et al., 2021). Contributing factors include histories of childhood abuse, unstable relationships, substance use, and recurrent trauma, which together shape complex patterns of relational violence. Although men can also be victims of IPV, as indicated by McKay et al. (2018), who found that 29% of incarcerated men reported victimization by an intimate partner, evidence shows that incarcerated women experience greater frequency, severity, and accumulation of violent episodes throughout their lives. In Brazil, which holds the third-largest female prison population in the world (approximately 42,694 women; World Prison Brief, 2022), there remains a lack of national studies on the topic, underscoring the need for research that explores the complexities of IPV in this population.

IPV is associated with a wide spectrum of adverse outcomes affecting both the physical and mental health of victims in the short and long term (Curia et al., 2020). These include physical injuries (Liu et al., 2020), increased risk of sexually transmitted infections, health complications related to chronic stress and fear (Stubbs & Szoeki, 2022), and disturbances in eating behaviors (Bretaña et al., 2025). Furthermore, IPV is linked to a higher risk of developing mental health disorders (Amell et al., 2022) and increased substance use and abuse (Reyes et al., 2020). A recent systematic review and meta-analysis identified depression, post-traumatic stress disorder (PTSD), psychological distress, and suicidality as the most prevalent mental health consequences of IPV (White et al., 2023). Importantly, these adverse effects may persist even after violent episodes have ceased (WHO, 2019).

Risk factors for IPV involve complex, interrelated developmental, contextual, and relational characteristics (Capaldi et al., 2012). Developmental factors include exposure to violence during childhood or in prior relationships, as well as pre-existing mental health conditions (WHO, 2019). Gender and age also play a role, with younger women at greater risk of experiencing IPV (WHO, 2019). Contextual factors include gender inequality, cultural norms that condone violence, and relationship instability, such as separation or divorce. Relational dynamics, particularly controlling behaviors by a partner, are also strongly linked to IPV (Centers for Disease Control and Prevention [CDC], 2023).

Despite global and national efforts to understand IPV, the literature remains limited in providing comparative analyses across diverse female populations. Most studies focus on either the general population or isolated vulnerable groups, overlooking how IPV may manifest differently across social and institutional contexts. In Brazil, a country marked by stark structural inequalities, there is a pressing need for research examining IPV in varied life circumstances, including among incarcerated women, university students, and women from the general population. Comparative studies are essential to identifying the contextual nuances and risk factors that shape IPV dynamics in each group. Such knowledge is critical not only for advancing academic understanding but also for informing public policies and targeted interventions that address the diverse realities of women's lives.

Therefore, this study aims to estimate the prevalence of intimate partner violence, considering both victimization and perpetration, among women from three distinct groups: those deprived of liberty (PDL), college populations (CP), and women from the general population (GP). By exploring the sociodemographic characteristics and contextual differences of these groups, the study seeks to identify significant predictors of IPV and assess its bidirectionality. The goal is to provide a more comprehensive understanding of this complex phenomenon as it manifests across different social strata. It is hypothesized that women deprived of liberty will report higher rates of both IPV victimization and perpetration compared with college students and women from the general population, due to the cumulative effects of social vulnerability and prior exposure to violence. Additionally, it is expected that the predictors and patterns of IPV will differ across groups, reflecting their distinct life contexts.

Method

Participants

This study included women aged 18 or older who had been in at least one intimate relationship lasting six months or more during their lifetime. Participants who responded unintentionally, did not meet the eligibility criteria, or failed to complete at least 90% of the main scale were excluded. Although this was not a randomized study, the minimum sample size was estimated using G*Power 3.1 for iOS (Faul et al., 2009). The calculation was based on an F test for independent samples, with an effect size of 0.25, a significance level of $\alpha = .05$, and a statistical power $(1 - \beta) = .95$, with beta representing the type II error, yielding a true power greater than 0.95. The minimum required sample size was 252 participants. The final sample comprised 800 participants from different Brazilian states, ranging in age from 18 to 74 ($M = 30.45$, $SD = 10.731$) (see Table 1).

Table 1
Descriptive Analysis of the Total Sample and Distinctive Groups

	TOT		PDL		CP		GP	
	n	%	n	%	n	%	n	%
Sample	800	100	47	5.9	480	60	273	34.1
Age								
18 to 24	316	39.5	3	6.4	275	57.3	38	13.9
25 to 34	237	29.6	35	74.5	111	23.1	91	33.3
35 to 44	150	19.5	9	19.1	55	11.5	86	31.5
45 to 54	73	9.5	0	0	32	6.7	41	15
Above 55	24	3.1	0	0	7	1.5	17	6.2
Gender Identity								
Cisgender Woman	774	96.3	38	80.9	469	97.7	263	96.3
Transgender Man	8	1	5	10.6	2	0.4	1	0.4
Transvestite	1	0.1	0	0	1	0.2	0	0
Non-binary	21	2.5	4	8.5	8	1.7	9	3.3
Self-declared Race								
White	428	53.5	17	36.2	260	54.2	151	55.3
Native-Brazilian	8	1.0	1	2.1	3	0.6	4	1.5
Pardo-Brazilian	266	33.3	22	46.8	152	31.7	92	33.7
African-Brazilian	85	10.6	7	14.9	59	12.3	19	7
Asian-Brazilian	13	1.6	0	0	6	1.3	7	2.6
Current Marital Status								
Single	293	36.7	16	34	196	40.9	81	29.7
In a Relationship	220	27.5	14	29.8	160	33.4	46	16.8
Married	159	19.9	5	10.6	79	16.5	75	27.5
Common-law Marriage	73	9.1	10	21.3	20	4.2	43	15.8
Divorced/Separated	51	6.4	1	2.1	22	4.6	28	10.3
Widowed	3	0.4	1	2.1	2	0.4	0	0
Region								
South	97	12.1	0	0	49	10.2	48	17.6
Southeast	477	59.6	47	100	278	57.9	152	55.7
Midwest	60	7.5	0	0	37	7.7	23	8.4
Northeast	125	15.6	0	0	88	18.3	37	13.6
North	41	5.1	0	0	28	5.8	13	4.8
Family Income (in minimum wages)								
Less than 1 salary	66	8.3	22	46.8	22	4.6	22	8.1
1 to 2	221	27.6	17	36.2	148	30.8	56	20.5
Above 2 to 4	216	27	5	10.6	139	29	72	26.4
Above 4 to 6	132	16.5	3	6.4	83	17.3	46	16.8
Above 6 to 9	92	11.5	0	0	45	9.4	47	17.2
Above 9 to 15	42	5.3	0	0	23	4.8	19	7
Above 15	31	3.9	0	0	20	4.2	11	4

Table 1
Descriptive Analysis of the Total Sample and Distinctive Groups

	TOT		PDL		CP		GP	
	n	%	n	%	n	%	n	%
Education								
Illiterate/Incomplete Elementary	4	0.5	2	4.3	0	0	2	0.7
Complete Elementary/Incomplete Middle School	13	1.6	5	10.6	0	0	8	2.9
Complete Middle School/Incomplete High School	29	3.6	17	36.2	0	0	11	4
Complete High School/Undergraduate Studies	462	57.8	16	34	371	77.3	76	27.8
Bachelor's degree	282	35.3	6	12.8	105	21.9	171	62.6
Graduate Studies	10	1.3	1	2.1	4	0.8	5	1.8
Parenthood (presence of children)								
Yes	358	45.8	47	100	175	36.5	136	49.8
No	442	55.3	0	0	305	63.5	137	50.2
Substance use								
Yes	415	51.7	28	60.9	268	55.8	118	43.2
No	387	48.2	18	39.1	212	44.2	155	56.8

Note: This table presents descriptive analyses of sociodemographic data. #N: sample; %: percentage; TOT: total; PDL: population deprived of liberty; CP: college population, GP: general population.

Study design

This survey was a cross-sectional, relational study based on a non-probabilistic sample (Bairagi & Munot, 2019; Neuman, 2014). Sociodemographic and behavioral characteristics were analyzed using descriptive and inferential statistics, including prevalence analysis, as well as comparative and relational methods.

Instruments

A sociodemographic questionnaire was developed to gather data on age, gender, self-declared race/ethnicity, marital status, educational level, family income, current state of residence, sample group identification, parenthood, and substance use.

Revised Conflict Tactics Scales (CTS2). (Straus et al. (1996), adapted for the Brazilian context by Moraes & Reichenheim (2002)). The CTS2 is a 78-item instrument designed to measure the perpetration and victimization of violence by intimate partners in past or current marital, cohabiting, or dating relationships. It consists of five subscales; however, only three were used in the present study: physical violence ($\alpha = 0.86$), psychological aggression ($\alpha = 0.82$), and sexual coercion ($\alpha = 0.65$). Items are rated on an 8-point Likert scale ranging from 0 ("never happened") to 7 ("happened more than 20 times").

Procedures

This research was approved by the Ethics Committee for Research Involving Human Subjects (approval number 6.585.111 and Certificate of Presentation for Ethical Appreciation [CAAE] number 61382322.9.0000.5151). The study was conducted both online (college and general population) and face-to-face (all three sample groups). The research team disseminated information about the study via social networks and e-mail, targeting universities and a local correctional institution. The aims of the study were explained, and a link was provided to the consent form, sociodemographic questionnaire, and CTS2 (Google Forms™). Data collection was conducted between October 2022 and May 2023.

Data analysis

The collected data were subjected to descriptive and inferential analyses. When applicable, a significance level of $p < .05$ and a 95% confidence interval were adopted (Field, 2024; Wei et al., 2019). Descriptive statistics were first performed for all variables to characterize the sample and examine levels of IPV perpetration and victimization. To assess IPV bidirectionality, binary variables were created: “0” indicated the absence of violence and “1” indicated its presence. Respondents were then classified into three categories: (i) no involvement in IPV (0 for both perpetration and victimization), (ii) unidirectional involvement (0 for perpetration and 1 for victimization or vice versa), and (iii) bidirectional involvement (1 for both perpetration and victimization). The proportion of participants in each category (no violence, unidirectional, and bidirectional) was subsequently calculated.

Linear regression analyses were conducted to investigate sociodemographic predictors of both IPV perpetration and victimization, overall and by subtype (psychological, physical, and sexual). Independent variables included family income, education, drug use, race/ethnicity, marital status, parenthood, and group membership (PDL, CP, or GP). The assumptions for linear regression were satisfied for almost all variables. The mean Cook’s Distance was below 1, indicating the absence of outliers. The Durbin-Watson (DW) statistic ranged from 1.5 to 2.5, $p < .05$, suggesting independence of observations. Tolerance values were above 0.80 for all independent variables, indicating no multicollinearity. However, age and questionnaire response mode (face-to-face or online) showed multicollinearity (tolerance values below 0.80), thus violating one of the necessary assumptions for their inclusion in the linear regression model. Therefore, a one-way analysis of variance (ANOVA one-way) was performed.

Linear regression was employed as the statistical analysis technique due to its suitability for the study’s objectives, even with a sample comprising population strata of unequal sizes. This method is based on assumptions that do not require equality in group sizes (Field, 2024). As long as these assumptions are met, the presence of unequal groups does not compromise the validity of coefficient estimates, nor does it introduce systematic bias into the results. To enhance the robustness of the findings, particularly considering the non-random nature of the sample,

regression coefficients and confidence intervals were estimated using the bootstrap resampling method with 1,000 iterations (Field, 2024).

Results

The descriptive analysis indicated that the most prevalent type of IPV perpetration was psychological (74.8%), followed by physical (35.6%) and sexual (12.3%). Regarding victimization, the most prevalent type was psychological (73.4%), followed by physical (36.1%) and sexual (31.0%) (see Table 2).

Table 2
Prevalence of IPV Perpetration and Victimization

	Perpetration			Victimization		
	Sex	Phy	Psy	Sex	Phy	Psy
PDL	23.4	66	76.6	34	55.3	80.9
CP	11.5	29.4	71.7	30.6	30.2	69.8
GP	11.7	41.4	79.9	31.1	43.1	78.4
Total	12.3	35.6	74.8	31	36.1	73.4

Note: Sex = sexual violence, Phy = physical violence, Psy= psychological violence, PDL: population deprived of liberty; CP: college population, GP: general population. Values are presented as percentages (%).

When examining the three groups in relation to IPV perpetration, the general population had the highest rate of psychological violence, whereas the population deprived of liberty had the highest rates of sexual and physical violence. This latter group also reported the highest rates of all types of victimization. University students had the lowest rates of all types of IPV (see Table 2).

Regarding the directionality of violence, 16.6% (n = 133) of the sample had no experience of any type of violence. Among those who had experienced violence, 72.1% (n = 577) reported bidirectional involvement (both perpetration and victimization).

A multiple linear regression analysis was conducted to examine the predictive effects of family income, education, drug use, race/ethnicity, marital status, parenthood, and group membership (PDL, CP, or GP). Of these variables, only race/ethnicity and marital status were not statistically significant predictors. All significant predictors and their respective coefficients are presented in Table 3.

Table 3
Analysis of predictors using linear regression

	r	r ²	E	p	EE
Psychological Victimization	0.273	0.075			
Population: college – general			-8.481	<.001	-0.305
Parenthood: one – none			8.094	0.002	0.243
Drug use: no – yes			-6.342	0.007	-0.198
Physical Victimization	0.336	0.113			
Population: college – deprived of liberty			-22.97	<0.001	-0.919
Population: general – deprived of liberty			-19.57	<0.001	-0.79
Parenthood: one – none			6.79	<0.01	0.25
Drug use: no – yes			-4.84	0.008	-0.19
Family income			-1.59	0.028	-0.083
Psychological Perpetration	0.3	0.09			
Population: college – deprived of liberty			-17.94	<0.001	-0.74
Population: general – deprived of liberty			-12.16	0.003	-0.52
Population: college – general			-5.41	0.006	-0.21
Drug use: no – yes			-7.11	<.001	-0.24
Parenthood: one – none			-6.10	0.002	0.23
Physical Perpetration	0.424	0.18			
Population: college – deprived of liberty			-31.74	<0.001	-1.47
Population: general – deprived of liberty			-28.74	<0.001	-1.34
Drug use: no – yes			-4.123	0.006	-0.18
Education			-2.643	0.027	-0.08
Sexual Perpetration	0.228	0.052			
Population: college – deprived of liberty			-4.826	<0.001	-0.753
Population: general – deprived of liberty			-5.082	<0.001	-0.793

Note: r = Pearson correlation; r² = percentage of variance explained by the model; p = statistical significance; E = estimates; EE = standardized estimates.

According to the ANOVA results, participants aged 18 to 24 reported the lowest levels of physical and psychological IPV, while those aged 55 and older reported the highest levels. Specifically, significant differences ($p < .05$) were observed across these age groups for physical perpetration [$F(4, 255) = 8.10$], physical victimization [$F(4, 126) = 2.72$], psychological perpetration [$F(4, 132) = 7.40$], and psychological victimization [$F(4, 127) = 9.11$].

Furthermore, differences emerged based on the format of survey administration. Participants who completed the survey face-to-face reported significantly higher levels of both physical perpetration [$F(1, 128) = 9.89, p = .002$], and physical victimization, [$F(1, 134) = 5.53, p = .02$], compared with those who completed the questionnaire online.

Discussion

This study aimed to estimate the levels of IPV perpetration and victimization and to identify their predictors across three distinct population groups. Linear regression analyses were conducted to investigate sociodemographic predictor variables for both overall IPV perpetration and victimization and its subtypes (psychological, physical, and sexual). Predictor variables included family income, education, substance use, race/ethnicity, marital status, parenthood, and group membership.

Prevalence and directionality of intimate partner violence

The results revealed high rates of victimization (ranging from 31.0% to 73.4%) and perpetration (12.3% to 74.8%). Consistent with prior literature, our results indicated similar prevalence rates for IPV perpetration and victimization, except for sexual violence, which was predominantly unidirectional (Colosse et al., 2015; Lövestad & Krantz, 2012). Furthermore, 11.3% of participants reported experiencing unidirectional violence, while a substantial majority (72.1%) reported bidirectional violence. These findings highlight the complexity of intimate relationships and the potential for cycles of violence to escalate conflicts over time. Mutual conflict, emotional dynamics, and relationship stressors may all contribute to the emergence and persistence of bidirectional IPV (Machado et al., 2024). However, it is critical to emphasize that the bidirectionality of IPV does not negate the significant differences between men and women in terms of the severity, frequency, and consequences of the violence. Women are more likely to sustain injuries during conflict episodes, and men tend to commit more severe acts of physical violence (Thureau et al., 2015; Plouffe et al., 2020), including serious injury, sexual assault, and homicide (Clemens et al., 2023).

Psychological violence emerged as the most frequently perpetrated and experienced form of IPV, followed by physical and sexual violence. These findings are consistent with previous studies conducted in both national and international contexts (Capaldi et al., 2012; Colosse et al., 2025; White et al., 2023). The prevalence rates of psychological violence found in this study are lower than those reported in Colosse et al. (2015), but higher than those reported in other Brazilian studies, such as Lamoglia and Minayo (2009), Miranda et al. (2010), and Vieira et al. (2011). Psychological violence encompasses control, insults, verbal abuse, offenses, threats, manipulation, and intimidation (Clemens et al., 2023). Often, it occurs subtly and becomes normalized, without the individual realizing they are perpetrating or experiencing it. Therefore, psychological violence is particularly challenging to address (Colosse et al., 2015). Furthermore, official reporting of psychological violence tends to be lower than for physical violence (Mascarenhas et al., 2020), suggesting that the cycle of violence is not interrupted early and may become increasingly recurrent and severe over time.

Differences between population groups

College students reported the lowest rates of both IPV victimization and perpetration. Higher levels of education were also predictive of lower levels of physical violence perpetration. Formal education expands cognitive and informational resources and promotes the development of socioemotional skills and nonviolent conflict resolution strategies, which may help reduce IPV perpetration (Minayo, 2013). Lower IPV rates among students may also reflect greater access to information, facilitating the recognition of violent behaviors and the adoption of more effective coping strategies (Minayo, 2013). In Brazilian universities, movements promoting awareness and prevention of violence, such as student-led anti-harassment campaigns and feminist initiatives, have played a vital role in supporting victims and empowering women (Pereira et al., 2022). Nevertheless, higher education does not make women immune to IPV.

Women deprived of liberty exhibited the highest rates of victimization across all types of IPV and were the most involved in the perpetration of physical and sexual violence. The literature shows that incarcerated women often report histories of physical and/or sexual abuse, exposure to traumatic events, and are more likely to experience mental health problems such as depression, anxiety, substance dependence, and PTSD symptoms (Day et al., 2014; Jungersen et al., 2019). One study found that these women often hold beliefs associated with IPV victimization, including negative perceptions of women and the view that male violence is justified and must be tolerated (Robertson & Murachver, 2007). Many engage in mutually abusive relationships, often under coercion or threats from partners to participate in criminal activity, perpetuating a cycle of abuse, coercion, and imprisonment (Zust, 2009). Although IPV is not, in most cases, the direct cause of women's incarceration, it emerges as a significant underlying factor in their life trajectories. Within the prison system, preexisting vulnerabilities are exacerbated: the lack of social support, pervasive stigma, institutional revictimization, and state negligence in addressing multiple forms of violence experienced by these women result in additional layers of social exclusion (Zamouri, 2023; Dourado & Noronha, 2015).

Beyond individual and relational characteristics, it is essential to acknowledge that IPV is embedded within a broader structural context in which gender inequality plays a central role. This inequality is sustained by patriarchal norms that legitimize discriminatory attitudes toward women and reinforce rigid gender roles. Such norms not only shape the perpetrators' behavior but also manifest in institutional shortcomings and in the state's failure to provide effective protection for victims. Transnational studies have shown that the incidence of IPV, and its most extreme manifestation, femicide, is significantly higher in contexts marked by gender disparities and traditional beliefs about women's roles (Zapata-Calvente et al., 2019). The cultural acceptance of violence, evidenced by high approval rates of IPV in Latin American countries (Bucheli & Rossi, 2019), further contributes to its perpetuation. From this perspective, gender must be understood as a relational and intersectional category, whose influence on the experience of violence varies according to its interaction with other social dimensions such as age, class, ethnicity, and cultural background. Consequently, women's experiences of violence is not

homogeneous but are socially structured by the multiple and unequal positions they occupy within society (Mshweshwe, 2020).

Analysis of sociodemographic predictors

Family income was identified as a predictor of physical violence victimization. According to resource theory, men with fewer financial resources may resort to physical force to control their partners' behavior, whereas those with higher income and status may employ alternative forms of control (Meyer et al., 2024). Economic deprivation is associated with increased stress, feelings of inadequacy, and power imbalances in relationships, all of which can escalate conflict and increase the risk of IPV (Capaldi et al., 2012). Moreover, financial dependence can trap women in abusive relationships, heightening their vulnerability to repeated victimization (Heron et al., 2022). Conversely, higher income levels may reduce domestic tensions and improve relationship dynamics (Abramsky et al., 2019). These findings underscore the intersection between economic conditions and gendered power dynamics in shaping IPV patterns.

Substance use was a significant predictor of both psychological and physical IPV perpetration and victimization. This is consistent with the literature, which identifies substance use as both a risk factor and a consequence of IPV (Devries et al., 2014). Substance use can impair judgment and reduce behavioral inhibition, increasing the likelihood of violent behavior during conflict (Mateo-Fernandez et al., 2025). Additionally, drug-using women are often perceived as violating traditional gender roles, which some men use to justify violence against them (Radcliffe et al., 2021). Victims may also resort to substance use as a coping strategy, seeking temporary relief from trauma symptoms (Gezinski et al., 2021). These findings highlight the importance of public policies aimed at reducing consumption, especially alcohol, a widely accessible legal substance in Brazil strongly associated with IPV (Capaldi et al., 2012; Cezário et al., 2016; Zalski et al., 2010); supportive policies that offer less harmful coping strategies for victims are also essential.

The results revealed parenthood as a variable associated with higher levels of psychological violence perpetration and physical and psychological violence victimization. This indicates that having children in a relationship can be a predictor of IPV occurrence (d'Oliveira et al., 2009). While the presence of children is not a direct cause of violence, it can influence relationship dynamics in different ways. Factors such as the demands of childcare, conflicting expectations in child-rearing, social isolation, financial strain, and economic dependence can intensify pre-existing conflicts or create new tensions, as well as make it more difficult to end the relationship (d'Oliveira et al., 2009).

Regarding the results related to age, psychological violence perpetration and victimization were less frequent among younger women aged 18 and 24. However, most studies indicate that IPV peaks during adolescence and young adulthood, declining thereafter, mainly due to the decline in physical violence (Capaldi et al., 2012). Investigations suggest that young women are more vulnerable to violence due to limited financial autonomy, lack of support, and the challenges

of forging their own identity (Pinto et al., 2021). Two hypotheses may explain the discrepancy between our findings and the broader literature: (1) younger women today may be more informed and engaged in preventing abuse, thereby avoiding violent relationships; or (2) younger women may be more affected by other forms of IPV, such as online or digital abuse (Machado et al., 2023), which were not assessed in this study.

Participants aged over 55 showed higher levels of sexual, psychological, and physical victimization. These findings suggest that many older women remain in abusive relationships, highlighting the need for further investigation into cultural factors and beliefs that sustain these dynamics. Decisions to stay in violent relationships may be influenced by traditional gender roles, societal expectations, familial pressure, fear of loneliness, partner dependency, and stigma associated with separation or divorce (Warmling et al., 2021; Pathak et al., 2019). Initiatives tailored to the specific needs of this demographic are essential to foster empowerment and create pathways for breaking the cycle of violence.

A significant difference was found in physical violence rates, both perpetration and victimization, according to the survey format. Participants who completed the study face-to-face reported significantly higher levels of both perpetration and victimization than those who responded online. This finding may reflect not only methodological differences in data collection but also differences in composition of the subsamples. Notably, women deprived of liberty, a group with high exposure to violence, only participated in the face-to-face format due to their limited access to digital technologies, which likely contributed to the elevated rates observed in this group.

The analysis of predictors revealed that group membership was significantly associated with levels of both perpetration and victimization across all forms of IPV. However, these differences may be partially attributable to interactions between group membership and underlying sociodemographic disparities. For example, incarcerated women showed higher prevalence of low educational attainment, limited income, and parenthood, factors that are independently linked to increased risk of violence. These findings suggest possible cumulative or interactive effects between social determinants and group status, indicating that the association between group membership and IPV may, in part, reflect a concentration of social vulnerabilities. Furthermore, variables such as age and the mode of questionnaire administration had significant effects on reported violence levels. However, due to multicollinearity, these variables were excluded from the predictive models, limiting the ability to fully control for them as potential confounding factors. This limitation should be considered when interpreting the findings.

Study limitations and directions for future research

Despite its robust findings, this study has limitations. The cross-sectional design limits the ability to establish causal relationships between the variables analyzed. Although the sample was diverse, its size warrants caution when generalizing the results. Data comparisons were made across three distinct groups composed exclusively of women. Additionally, participants who were

not currently in a relationship were asked to recall a past relationship lasting at least 6 months, which may have been influenced by subsequent learning, expectations, or beliefs (Smity et al., 2020). These participants were not compared with those who were in a current relationship. Therefore, responses may be subject to memory bias, as the study relied solely on self-reported data. Given the sensitivity of the topic, some participants may have omitted instances of violence or victimization. To help mitigate this bias, participant anonymity was assured.

Future research should include more participants from diverse regions of Brazil, particularly incarcerated women, to enhance the generalizability of findings. Including male participants would further enrich the analysis. It is also important to investigate other population groups underrepresented in the literature, such as rural populations, whose experiences with IPV may present unique patterns and contextual factors. Future studies could adopt complex systems approaches to identify high-risk variables within emerging models.

Despite its limitations, this study advances the field by comparing patterns of IPV perpetration and victimization across distinct female populations, including incarcerated women, a group often overlooked in the literature. By integrating multiple social contexts within a single analysis, this study contributes to a more comprehensive and contextualized understanding of IPV dynamics, offering valuable insights to guide future research and the development of more effective prevention and intervention strategies.

Final Considerations

Comparing IPV victimization and perpetration across different female samples is critical for understanding the factors associated with this type of violence. The findings revealed significant differences between groups, with markedly higher rates of IPV involvement among incarcerated women. These results underscore the importance of considering specific contextual and historical factors to better understand intimate partner violence.

The analysis of sociodemographic characteristics indicated that factors such as education, age, substance use, and parenthood influence the occurrence of IPV in different ways. These findings are essential for developing more context-sensitive prevention strategies tailored to the realities of diverse profiles of women. Understanding the relationship between sociodemographic variables and IPV is essential for informing public policies and designing prevention programs and social awareness campaigns to address a problem with profoundly negative outcomes in both the short and long term.

Furthermore, the results revealed bidirectional violence across all three groups analyzed, with variations in victimization and perpetration prevalence. This finding highlights the complexity of the phenomenon and the need for analytical approaches that go beyond unilateral explanations or perspectives focused exclusively on one side of the violent relationship. In this sense, the study contributes to a more systemic understanding of IPV.

This investigation represents a novel contribution to the Brazilian context by presenting, for the first time, comparative data from three distinct groups of women, including incarcerated

women, a population largely underrepresented in the scientific literature. Any inquiry into this phenomenon is inherently limited by its complexity, and simplistic or unidimensional perspectives risk obscuring the multifactorial and systemic nature of IPV, thereby hindering theoretical and practical advances. We expect this work to encourage new reflections and inspire future research to adopt more inclusive and integrative approaches, capable of capturing the nuances of violence in its multiple forms and contexts.

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Contribution of each author to the work:

Carollina Souza Guilhermino: Supervision, Conceptualization, Data Curation, Data Analysis, Formal Analysis, Methodology, Writing – Original Draft Preparation, Writing – Review and Editing

Juliana Laiz de Paula Silva: Conceptualization, Data Curation, Writing – Original Draft Preparation, Writing – Review and Editing

Milena Bittencourt Roque: Conceptualization, Writing – Original Draft Preparation, Writing – Review and Editing

Ariele de Freitas Macedo: Conceptualization, Writing – Original Draft Preparation, Writing – Review and Editing

Tiago Geraldo de Azevedo: Conceptualization, Formal Analysis, Data Curation, Data Analysis, Methodology, Writing – Original Draft Preparation, Writing – Review and Editing

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