THE ROLE OF ADOLESCENT RISK FACTORS IN THE DEVELOPMENT OF A MODEL OF FEMALE PERPETRATION OF TEEN DATING VIOLENCE

by

DIONE TRENSE MOULTRIE KING

(Under the Direction of Brian Bride)

ABSTRACT

Teen dating violence is a growing issue impacting the adolescent experience. Adolescent females are increasingly at risk to perpetrate dating violence. This research examines adolescent risk factors that include substance use, mental health and delinquent behaviors using the National Longitudinal Study for Adolescent Health to develop a model of adolescent female perpetration of dating violence. Research findings demonstrate the need for future research including additional longitudinal studies given the limited relationship between the study variables.

INDEX WORDS: Dating violence, Adolescent, Substance use, Delinquency, Mental health
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by

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A Dissertation Submitted to the Graduate Faculty of The University of Georgia in Partial Fulfillment of the Requirements for the Degree

DOCTOR OF PHILOSOPHY

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DEDICATION

This dissertation is dedicated to my grandfather, Ransom Smith Jr. and the memory of my grandparents: Laura Mae Oden, Walter and Cecil Moultrie and Gwendolyn Smith. It is my hope that I honor your memory through the legacy I leave for my family.
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I would like to thank Schnavia Hatcher. Thank you for keeping me focused on the finish line. Thank you for the endless support, encouragement and advice. I appreciate our chats and the knowledge you so effortlessly poured into me. I am tremendously grateful of your encouragement towards the pursuit of this doctoral degree. I will always remember our first lunch meeting in downtown Athens. I am elated to have you as my mentor. Thank you.

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CHAPTER 1

Introduction

Adolescents are growing up in an increasingly violent society where they are bombarded with aggressive images of violence. This exposure to and acceptability of violence can be observed in homes, schools and communities. Consequently, the outward manifestation of violence in teen dating relationships has become an issue of concern and is considered a public health problem (Halpern, Oslak, Young, Martin & Kupper, 2001; Malik, Sorenson, & Aneshensel, 1997; Wekerle & Wolfe, 1999). The rate at which adolescent dating violence occurs is alarming. According to the Centers for Disease Control’s (2012) Youth Risk Behavior Surveillance System, the prevalence of dating violence ranged from 6.5% to 16.1% among selected states (Eaton, 2012). The high prevalence of partner violence among young adults, particularly adolescents, is a vital issue for study (Halpern et al., 2001).

Research has been done to support the elevated risk for future engagement in partner violence for adolescents who are exposed to intimate partner violence. In the domestic violence and teen dating violence literature, the emphasis is placed primarily on male aggression of violence and female victimization. Despite this, research supports the role of female perpetration of dating violence (Foshee 1996; O’Keefe, 1997; O’Leary, Smith, Slep, Avery-Leaf, & Cascardi, 2008). Wolfe, Scott, Wekerle and Pittman (2001) report adolescent female perpetration of violence is equally or more violent than adolescent male violence perpetration.
In addition to engaging in adverse dating behaviors, adolescent girls continue to infiltrate the criminal justice system due to their involvement in delinquent activities. The statistics for girls within the criminal justice system is concerning. In 2009, juvenile females accounted for 18% of Violent Crime Index arrests, 38% of Property Crime Index arrests and 45% of larceny-theft arrests (Puzzanchera & Adams, 2011). In 2008, an estimated 2.11 million juveniles were arrested. Of those, 30% or 629,800 were girls (Puzzanchera, 2009). According to Sickmund, Sladky, & Kang (2008), almost 14,000 females were detained and sentenced to juvenile offender facilities in 2006. The behaviors exhibited by detained girls may be due to a compendium of challenges.

Furthermore, adolescent girls who perpetrate dating violence may also be involved in other delinquent activities. According to Foshee, Bauman and Linder (1999), the risk factors associated with aggressive conflict response styles and dating violence acceptability for girls include witnessing a parent hit another parent, and being hit by their mother or another adult. Many adolescent girls in juvenile detention facilities have observed these and other risk factors in their homes and communities.

Several additional risk factors for female perpetration have been identified in the literature. Many of these markers are representative of delinquency. According to Seleman and Praeger (2006), the risk factors that increase victimization or perpetration are: alcohol, tobacco or cocaine use; unhealthy weight control activities; first sexual intercourse before the age of fifteen; multiple sex partners; pregnancy; serious consideration or attempted suicide; a need for power and control; demonstration of threats, verbal abuse and aggression; violence in the home; and weapon ownership.

Additional factors that have been reported to be associated with female violence
perpetration include being a victim of dating violence, alcohol and/or drug use, and being African American (O’Keefe, 1997).

**Purpose of Study**

The purpose of this study is to explore the risk factors associated with the perpetration of dating violence among adolescent females. Secondary data using the National Longitudinal Study of Adolescent Health was used. Secondary data analysis is the analysis of existing datasets that present additional interpretations, conclusions or knowledge from that previously presented in data analysis (Grinnell, 2001; Rubin & Babbie, 2008). This form of data analysis is useful in settings where research funding may be limited or time-constraints affect the feasibility of research. Additionally, when research may be costly or time consuming, secondary data analysis is an appropriate fit (Rubin & Babbie, 2008; Rubin & Babbie, 2010). Currently, research that examines health risk behaviors, delinquency, and teen dating violence has not been cohesively addressed in the literature. This study examined adolescent female dating violence perpetration using the National Longitudinal Study of Adolescent Health (Add Health), a nationally representative longitudinal database. In particular, this study explored delinquency, race, substance use, exposure to violence, propensity to engage in risk and mental health as predictors of future perpetration of dating violence by female adolescents. While studies using Add Health datasets have previously explored dating violence with a focus on prevalence (Halpern, Spriggs, Martin, & Kupper, 2009; Halpern, Young, Waller, Martin & Kupper, 2004), mental health (Fang, Massetti, Ouyang, Grosse & Mercy, 2010; Lehrer, Buka, Gortmarker & Shrier, 2006), child abuse (Gomez, 2011), alcohol use (Wiersma, Cleveland, Herrera, & Fischer, 2010). Kaestle and Halpern (2005)
examined sexual activity in their study. Several studies examined bi-directional violence (Renner & Whitney, 2010; Whitaker, Haileyesus, Swahn & Saltzman, 2007). There has been no study to examine adolescent female dating violence perpetration or the variables in this research utilizing the National Longitudinal Study of Adolescent Health. Due to its absence from the discussion this research has the potential to advance the dating violence perpetration literature because of its assessment of female perpetration of violence and related adolescent risk factors.

**Research questions**

The research questions for this study seek to identify an appropriate adolescent female violence perpetration model based on at-risk behaviors. As such, the study was guided by the following questions: 1) Do race and prior risk behaviors during adolescence predict adolescent female perpetration of violence? 2) Do race and current risk behaviors predict adolescent female perpetration of violence? 3) Do race, prior and current adolescent risk behaviors and prior and current mental health predict female perpetration of dating violence?

**Conceptual Framework**

This research was guided by two theories, social learning theory and social disorganization theory. Each theory has the potential to support and explain dating violence perpetration by female adolescents as hypothesized in this study. Social learning theory focuses on behavioral changes that occur as a result of an observation and reinforcement process. Social disorganization theory is a criminology-based theory that can be used to explore female perpetration of adolescent violence.
Social learning theory has been at the forefront of theories that explain adolescent and adult relational violence perpetration (Moeller, 2001; White & Kowalski, 1998). Social learning theory posits that the learning of violent behaviors occurs in homes, schools and communities through observation and vicarious reinforcement or punishment. Social learning theory weaves behaviors and cognitions for the most impact in maximizing individual change while focusing on observed behaviors and reinforcement of those behaviors to subsequently shape the actions of adolescents. This type of cognitive-behavioral transformation can occur in adolescent or adult populations. According to social learning theory, behaviors are more likely to occur if the observer sees others being rewarded for similar performances. From this perspective, children learn through direct conditioning and by imitating behaviors observed or rewarded in others (Bandura, 1977). Social learning theory is used to explain outward manifestations of violence which may be a result of experiences within the home environment. When violence is positively reinforced it contributes to an acceptance of violence as a means to solve conflicts.

Social disorganization theory can be used to provide an alternate viewpoint from a criminological standpoint. The social disorganization perspective asserts that human behavior is determined by the social conditions that affect the social and physical environments in which an individual resides (Shaw & McKay, 1942). Social disorganization theory seeks to explain high rates of crime and delinquency in disadvantaged communities where lower income and ethnic minority groups are often housed. This theory, however, does not propose that social class and community racial composition are direct causes of crime and delinquency. These variables instead are
often used to measure social disorganization as indirect issues due to the challenges that exist in directly measuring the components of social disorganization. The crime and deviance in a perceived community are the direct result of the level of disorganization that community experiences.

In social disorganization theory, a social system consists of society, community or subsystems in the community. Social control is an essential feature of social disorganization theory. Communities that demonstrate high levels of social control are socially organized, possessing an internal consensus of norms and values as well as a strong cohesion among members who interact in orderly way. When social disorganization is present, a disruption in social cohesion or integration exists. As limited solidarity, cohesion and integration are present within a group, community or society, the higher the rates of crime and deviance (Sampson, 1997; Sampson, Raudenbush & Earls, 1997). The individual characteristics that are present in neighborhoods with high delinquency rates include drug addiction, alcoholism, mental illness and high rates of adult crime (Kubrin, Stucky, & Krohn, 2009). Although social disorganization fails to explain why all individuals in neighborhoods with low social cohesion do not engage in criminal or violent activity, it is still an appropriate theory given its understanding of the larger societal influences that impact and shape adolescent girl behaviors.

**Overview of Methodology**

Data was obtained through the public and restricted use files from the National Longitudinal Study of Adolescent Health (*Add Health*). Systematic sampling methods and implicit stratification for representative sampling were incorporated into the data
collection process. A school-based, clustered sampling design was used to screen for respondents and to provide easy access to the majority of respondents. Systematic sampling methods were used to select the initial eighty high schools that were representative of the United States in the first wave of data collection. The participating high schools identified feeder middle or junior high schools. The initial in-school self-administered questionnaire was completed between September 1994 and April 1995. The data collected explores the “social, economic, psychological and physical well-being with contextual data on the family, neighborhood, community, school, friendships, peer grounds and romantic relationships” (http://www.cpc.unc.edu/projects/addhealth). This data was available at a reduced cost, as a result of a university partnership with the Inter-consortium for Political and Social Research (ICPSR). The data analyses conducted included descriptive and inferential statistics. All data was analyzed using the Statistical Package for the Social Sciences (SPSS) version 18.

Definition of Key Terms

The operationalization of all key study variables is included in Table 1. The key study variables in this study were derived from previous related research studies. The adolescent at-risk behaviors examined were substance use as evidenced by alcohol use, delinquency, mental health symptomology of sadness, helplessness and feelings of depression. Community risk factors included mistreatment by adults and neighborhood variables such as exposure to violence. The first two research questions examined similar research variables. The first research question examined prior adolescent behaviors for their ability to predict perpetration. The second research question examined current behaviors, reported to occur between the ages of 18 and 20. The full model, as
established in question three, examined factors from adolescence such as alcohol use, motivations to engage in risky behavior, neighborhood risk, exposure to violence and perceived mistreatment by adults. These variables were tested for their potential to predict adolescent female perpetration of violence in dating relationships. These factors have been identified and established in various studies that explore male perpetration of violence in dating relationships. This model seeks to close the knowledge gap as it relates to female perpetration of violence through the examination of similar risk factors.

**Key Study Variables**

*Adolescent/teen:* Adolescents were defined as youths between the ages of eleven and twenty years of age who were born in 1981, 1982 or 1983.

*Race:* Race was defined dichotomously as White or Minority (non-white).

*Dating violence:* Dating violence was defined as the threatened or physical use of violence among two people in an exclusive or partnered relationship.

*Early onset alcohol use:* Alcohol use was defined by the use of beer, wine or liquor prior to age eighteen when your parents or other adults in your life are not present.

*Adolescent binge drinking:* Alcohol use was defined by four or more drinks on a single occasion.

*Delinquency:* Delinquency was defined as criminal and delinquent acts the adolescent may have engaged in. Those acts could be criminal and non-criminal acts. In particular, burglary, threatening others, selling drugs, and fighting were the behaviors comprising delinquency.
Mental Health: Mental health was defined through the examination of thoughts and feelings reported by the survey respondents.

Exposure to Violence: Exposure to violence was defined by violence the respondent experienced or witnessed.

Risk Propensity: Risk propensity was defined by the likelihood to engage in high risk or low risk behaviors.
Table 1: Key Study Variables

<table>
<thead>
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<th>Variable</th>
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<tr>
<td>Adolescent (Wave 1, Wave 3)</td>
<td>Adolescence will be measured by one question.</td>
</tr>
<tr>
<td>Female (Wave 1, Wave 3)</td>
<td>Gender will be measured by one question. All males were removed from analysis.</td>
</tr>
<tr>
<td>Race</td>
<td>Defined by one question that measured race dichotomously as White or Minority.</td>
</tr>
<tr>
<td>Dating violence perpetration (Wave 3)</td>
<td>Dating violence perpetration will be measured by two questions that examined threats of violence and physical perpetration.</td>
</tr>
<tr>
<td>Early onset alcohol use (Wave 1)</td>
<td>Early onset alcohol use was measured with one question that asks about drinking alcohol when adults are absent.</td>
</tr>
<tr>
<td>Current alcohol use (Wave 3)</td>
<td>Current alcohol use will be measured by one question that examines binge drinking as defined by four or more drinks on a single occasion.</td>
</tr>
<tr>
<td>Delinquency (Wave 1)</td>
<td>Delinquency will be measured through a summated score of four questions that assess fighting, selling drugs, threatening others and fighting.</td>
</tr>
<tr>
<td>Delinquency (Wave 3)</td>
<td>Delinquency will be measured through a summated score of four questions that assess fighting, selling drugs, threatening others and fighting.</td>
</tr>
<tr>
<td>Mental health (Wave 1)</td>
<td>Mental health will be measured by nine items that have been summated.</td>
</tr>
<tr>
<td>Mental health (Wave 3)</td>
<td>Mental health will be measured by nine items that have been summated.</td>
</tr>
<tr>
<td>Exposure to Violence (Wave 1)</td>
<td>Exposure to violence will be measured by three questions assessing partner violence, community violence and adult physical violence.</td>
</tr>
<tr>
<td>Risk Propensity</td>
<td>Risk propensity will be measured by six questions that have been summated.</td>
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Summary

The influx of adolescents engaging in dating violence is becoming a major public health issue as the trend gains more acceptability and notoriety. There are many factors that influence teen dating violence however the literature is inadequate as it relates to female perpetration of teen dating violence. The research on dating violence has focused largely on female victimization of dating violence by males, largely ignoring the existence of perpetration by females. There is limited research that addresses the ways in which girls inflict violence and engage in dating violence outside of self-defense or retaliation explanations. Some of the risk factors provided by researchers that attempt to account for violence perpetration by adolescent girls include environmental and community factors as contributors to the behaviors exhibited by female youth. It is important to examine teen dating violence in combination with the risky behaviors exhibited by adolescents. This research assesses the risk factors and correlates provided in existing literature to explain female perpetration of dating violence through the establishment of an appropriate model based on previously researched variables using a nationally representative longitudinal study.
CHAPTER 2

LITERATURE REVIEW

Introduction

Domestic violence is an issue that affects families and communities worldwide. Despite its far reaching impact, it has only been studied for the past thirty years (Sims, Dodd, & Tejeda, 2008). Domestic violence or intimate partner violence (IPV) can be defined as “threatened, attempted, or completed physical or sexual violence or emotional abuse by a current or former intimate partner” (CDC, 2008). Acts of intimate partner violence can be committed by a dating partner, spouse, ex-spouse, current or former boyfriend or girlfriend (CDC, 2008). According to the National Center for Injury Prevention and Control (2003), intimate partner violence results in an estimated 1,200 deaths and 2 million injuries among women and nearly 600,000 injuries among men.

When examining teen relationships, romance and violence are gaining acceptance as a version of love and war among teenage dating couples (James, West, Deters, & Armijo, 2000). According to Mulford and Giordano (2008), abuse is a component of dating relationships for 1 in 10 youth. Teen dating violence unlike adult domestic violence is difficult to define because of the ways in which adolescents enter into romantic relationships. The Centers for Disease Control (2012) define dating violence as “…a type of intimate partner violence. It occurs between two people in a close relationship. The nature of dating violence can be physical, emotional or sexual” (pg. 113). The adolescent dating violence literature frequently references three subtypes of violence: physical, psychological and sexual abuse. Physical violence has been reported
to include scratching, slapping, pushing, slamming or holding someone against a wall, biting, choking, burning, beating someone up, and assault with a weapon (Foshee, Bauman, Linder, Rice & Wilcher, 2007). Psychological or emotional abuse can include insults, criticizing, humiliation in front of friends, threatening behaviors, or berating a partner (Draucker & Martsolf, 2010; Smith & Donnelly, 2001). Sexual abuse includes rape, sexual coercion and attempted rape (Rickert, Wiemann, Vaughan, & White, 2004).

The existence of physical and psychological abuse in teenage dating relationships has been established through research studies (Arriaga & Foshee, 2004; Mulford & Giordano, 2008; Swahn, Simon, Arias & Bossarte, 2008). This review will provide a synopsis of theories that guide this research as well as the more prevalent and reoccurring themes in relation to physical and psychological adolescent perpetration of dating violence. Some of the risk factors identified in the literature for teen dating violence include gender, race, substance use, mental health, risk propensity, exposure to violence and neighborhood.

Review of the Literature

Theoretical Perspectives

The principles of social learning theory provide several relevant opportunities for children to model the observed behaviors of violence and aggression. Although adult domestic violence commonly references males as the primary aggressor, females can also learn the use of violence through parental and community demonstrations of violence perpetration. O'Keefe (1996) indicates that children who are witnesses to family violence learn to use aggression through the imitation of parental behaviors. This exposure to violence teaches children that controlling others through coercion and violence is normal and acceptable, and using such strategies will help people reach their
goals (Ireland & Smith, 2009; Kernsmith, 2006). When parental figures use discipline to gain submission, physical violence to achieve control is reinforced. According to Straus and Mathur (1996), witnessing or experiencing violence is often not sufficient to learn, but when the incident is experienced by someone a child loves or admires the risk for engaging in intimate violence is greater. In adolescent relationships, teenagers can learn violent norms based on their observational experiences of inappropriate adult relationships. As a result, this intergenerational family functioning becomes commonplace in social learning theory (Chibucos & Leite, 2005).

This theory is an appropriate mechanism for explaining behavioral changes. Because this theory is cognitively based, change occurs based on the learned behaviors and attitudes of others that are gained through interactions. These interactions can happen with family members, friends, coworkers or others who support or oppose the observed behaviors. According to Ferguson (2010), “The greater frequency with which a particular behavior is viewed, particularly when viewed during interactions with close associates, the more likely the behavior is to be modeled” (p.23). When social learning theory is examined in relation to female dating violence perpetration, it asserts that learned experiences influence violent outcomes. Social learning theory does a satisfactory job of explaining the issue of perpetration of female dating violence. It demonstrates the transparency and influence of domestic violence beyond those directly involved. Despite the numerous advantages of social learning theory to explain female violence perpetration limitations do exist. This theory may ignore additional components that are essential to violence perpetration if used in isolation to explain this salient issue.
as it fails to examine the differences in witnessing violence or experiencing violence and the potential influence this may have on violence perpetration in later life. As a result of this, social learning theory has yielded theories such as the intergenerational transmission of violence and the social cognitive model of violence. These theoretical successors provide additional explanations for understanding female violence perpetration. It is important to note that several variables in this study may be the result of learned behaviors and actions.

Social disorganization theory is based in criminology and asserts that human behavior is determined by the social conditions that affect the social and physical environments in which an individual resides (Shaw & McKay, 1942). This theory examines the social control present in a community for its ability to influence social norms and values. There are individual characteristics that exist in neighborhoods with high delinquency and low social control. Some of those characteristics include drug addiction, alcoholism, mental illness and high rates of adult crime (Kubrin et al., 2009). This theory is appropriate to understanding the societal influences that may impact or shape adolescent delinquent behaviors.

The emergence of adolescent girls engaging in aggressive and violent dating behaviors calls for exploration and understanding to provide effective interventions and programming modifications. The numbers of adolescent girls in the juvenile justice system at-risk for dating violence perpetration present a basis for the need to address their problematic behaviors. The application of social learning theory and social disorganization theory will provide a framework to evaluate the factors that impact and guide delinquent behaviors.
**Background**

Historically, domestic violence has focused on the acts of violence committed against women and children by their partners. The issue of domestic violence has traditionally been viewed from a gendered perspective with males being considered the aggressor or batterer (Kernsmith, 2006). According to Walker (2009), “battering of women, wives, or other intimate relationships is still considered a learned behavior that is used mostly by men to obtain and maintain power and control over a woman” (p. 5). Although, the abusive partner is predominately male domestic violence can occur from female batterers as well as be present in gay and lesbian relationships (Freedner, Freed, Yang & Austin, 2002).

Violent behavior, including physical, sexual, and emotional abuse occur frequently within U.S. families (Osofsky, 1999). An estimated 10 to 17 million children living in the United States are exposed to intimate partner violence each year (Walker, 2009). Domestic violence disrupts family functioning affecting the quality of the home environment (Huth-Bocks, Levondosky, & Semel, 2001). The toll of domestic violence can affect the well-being of adults and children who witness the incidents of abuse, whether physical, emotional, or sexual in nature. Because of the violent and often prolonged nature of battering, children who are exposed to their mothers’ battering are subject to stressors that produce long lasting effects (Maker, Kemmelmeier, & Peterson, 1998).

Teen dating violence is a relatively new research issue that continues to gain momentum. Although its origins are based in the domestic violence sphere, its assessment of victims and perpetrators is more inclusive. Barner and Carney (2011)
historically examine the role of gender in intimate partner violence interventions and criminal proceedings. Unlike traditional domestic violence literature, teen dating violence approaches violence from a gender neutral perspective. Reed, Raj, Miller and Silverman (2010) discuss how teen dating violence in its gender neutral approach has in some ways influenced domestic violence literature to critically review the presence of violence from males and females. Research continues to demonstrate the notion of male and female youth presenting as aggressors of violence (Wolfe et al., 2001). Many teen dating violence curriculums have adopted gender neutral language. Teen dating violence interventions are also focused on prevention efforts unlike domestic violence which is focused on effective interventions.

**Gender**

To understand the influence of female perpetration of dating violence the impact of gender should be considered. Ronfeldt, Kimberling and Arias (1998), report that men are more likely to resort to the use of physical abuse if they have been exposed to their father physically abusing their mother. While some literature posits that males continue to abuse more, it can be said that females are also aggressive in dating violence. Hoffman, Kiecolt and Edwards (2005) provide a picture of mutually violent households with increased probability to perpetrate dating violence. Their findings indicate that men and women experience and perpetrate violence differently. However, the findings are unique in that women significantly perpetrated more violence in dating relationships than men, yet men were much more likely to engage in dating violence perpetration if they had prior experience with severe types of violence in the home (i.e., child maltreatment, sibling violence, and witness to parental violence). Jackson (1999) in her synthesis of
the dating violence literature recommends a more careful analysis of the issue of gender and violence by examining relationships with an emphasis on how women’s use of violence is different from men’s in terms of purpose, nature, context, and effect. Boys and girls may be treated differently within their learning environments; thus, creating an appropriate response to violence in the home would vary for boys and girls. A study conducted among community college students found that men and women perpetrate violence differently (Sims et al., 2008). The study findings were unique in that women significantly perpetrated more violence in dating relationships than men, yet men were much more likely to engage in dating violence perpetration if they had prior experience with severe types of violence in the home (i.e., child maltreatment, sibling violence, and witness to parental violence). Sims et al. (2008) were able to identify differences by gender. They found that with men, social learning within the context of the home contributed to later perpetration of dating violence. For women, however, there was an unknown factor that contributed to the high rates of dating violence perpetration.

According to Hoffman et al. (2005), gender socialization teaches boys that it is wrong to hit a girl and in their study boys were able to restrain from engaging in violence more so than girls.

While dating violence is traditionally viewed from a gendered perspective with males being the aggressor or batterer, the literature has acknowledged female perpetration of violence (Foshee, 1996; O’Keefe, 1997; O’Leary et al., 2008). Several researchers have reported higher female perpetration of dating violence than male perpetration (Coker et al., 2000; Champion, Foley, Sigmon-Smith, Sutfin & DuRant, 2008; Foshee, 1996; O’Leary, Slep, Avery-Leaf, & Cascardi, 2008; Swahn et al., 2008). Research
findings from some of these studies have been highlighted for review. Coker et al. (2000) examined severe dating violence using the South Carolina Youth Risk Behavior Survey. The female perpetration rates were reported at 8.9% in contrast to male perpetration rates of 6.1%. Champion et al. (2008) reported higher female dating perpetration rates of 8.8% compared to 4.0% of male reported dating violence perpetration. Champion et al. (2008) surveyed North Carolina adolescents using a survey adapted from the Communities that Care Youth Survey and the Center for Disease Control and Prevention Youth Risk Behavior Surveillance. Girls were significantly more likely (27.8%) to report physical dating violence perpetration than boys (15%). Swahn et al. (2008) utilized the Youth Violence Survey to examine dating violence victimization and perpetration. They found girls more likely to report dating violence physical perpetration and psychological aggression perpetration than boys. These research studies have contributed to continued examinations of female perpetration of dating violence despite the trend to emphasize female victimization and male perpetration.

The contributing issues to female dating violence remain to be clearly identified. Researchers have supported that female initiation of violence may be related to more proximal variables, such as self-defense (Breslin, Riggs, O’Leary, & Aria, 1990; Magdol et al., 1997; Makepeace, 1986; O’Keefe, 1997; Stets & Henderson, 1991; Swan, Gambone, Caldwell, Sullivan & Snow, 2008), as opposed to child abuse or inter-parental violence (Lewis & Fremouw, 2001) and poor communication (Fredland et al., 2005).

Race
Several researchers have established that domestic violence occurs more frequently within certain racial groups. Dating violence has been found to be highest among blacks (Foshee et al., 1996; Kreiter et al, 1999; O’Keefe, 1997). Malik et al. (1997) reported African American respondents reported higher levels of dating violence (perpetration and victimization) in his study from an urban high school sample. O’Keefe’s (1997) study of Los Angeles high school students examined race, gender and socioeconomic status as the independent variable and inflicted dating violence as the dependent variable. The means for African Americans were higher than other groups (African American females = 4.8, African American males = 3.1, White females = 1.6, White males = 1.2, Latinas = 2.8, Latinos = 2.2, Asian American females = 2.7, Asian American males = 1.0).

**Victimization.** In Howard and Wang (2003), being Black or Hispanic was associated with dating violence victimization. Another study utilizing a national, cross-sectional design found dating violence victimization twice as high for black students, both males and females, compared to white students (Eaton, Davis, Barrios, Brener & Noonan, 2007). Approximately 7.5% white female report victimization to 13.9% Black females. When examining male victimization blacks (13.5%) reported more victimization than their white (6.5%) counterparts.

**Perpetration.** When examining perpetration, race is also identified as a risk factor. Being a minority was associated with dating violence perpetration (Champion et al., 2008; Foshee et al. 2008). African American adolescents were found to have a higher prevalence of dating violence when compared to white adolescents (O’Keefe, 1997; O’Keefe, Brockepp & Chew, 1986). Black girls were the group most likely to initiate
dating violence using an adolescent sample in North Carolina (Foshee, Reyes & Ennett, 2010). Additional research supports higher levels of minority violence perpetration (Edwards, Green & Perkins, 2006; Rothman et al., 2011; Windle & Mrug, 2009). In Rothman et al. (2011), violence perpetration was reported by females (21.2%) and Black non-Hispanic youth (18.3%) in contrast to males (7.4%), White, non-Hispanic (9.2%), Hispanic (14.3%) and Other/multi-race (10.7%). Edwards et al. (2006) conducted their research using an African American sample of students to assess dating violence psychological aggression among middle school, high school, and college. The prevalence rates for this form of perpetration were higher among girls than boys on all levels. For example, middle school girls (66.7%) reported more perpetration than middle school boys (63.6%). On the high school level, girls (86.7%) continued to perpetrate more psychological aggression than boys (64.3%). The prevalence rates continued to increase among college students (girls-90.1%, boys-78.4%). These studies demonstrate the need for additional research that examines race in relation to adolescent dating violence.

**Risky Behaviors**

The presence of adolescent at-risk behaviors has been identified throughout the literature as risk factors for teen dating violence perpetration. The at-risk behaviors that have been assessed include: risky sexual behaviors such as early sexual intercourse, number of sexual partners and condom nonuse; substance use which includes binge drinking, early alcohol and drug use, depression, poor self-esteem and mental health symptomatology such as sadness or helplessness.
According to Schnurr and Lohmann (2008), “females who exhibit higher levels of externalizing behavior problems during early adolescence were also marginally more likely to perpetrate dating violence in late adolescence” (p.274). Among adolescent samples, risky sexual behaviors such as age at initial sex encounter (Alleyne, Coleman-Cowger, Crown, Gibbons & Vines, 2011; Lormand, 2009); condom use (Alleyne et al., 2011; Howard & Wang, 2003b), and multiple sex partners (Alleyne et al., 2011; Howard & Wang, 2003) have been identified. The impact of substance use has been very well-researched among adolescent samples for its association with female dating violence perpetration. The literature is varied in its assessment of early alcohol use versus current alcohol use. Several researchers have examined the use of alcohol in adolescent dating violence samples (Ackard, Neumark-Sztainer & Hannan, 2003; Foshee, Linder, MacDougall & Bangdiwala, 2001; Lormand, 2009; O’Donnell et al. 2006; Swahn, Bossarte & Sullivent, 2008), binge drinking behaviors (Howard & Wang, 2003), drinking and driving (Champion et al., 2008), and drug use (Ackard et al., 2003; Howard & Wang, 2003; Lormand, 2009; O’Keefe, 2005). Renner and Whitney (2012) examined early alcohol use and female perpetration using the National Longitudinal Study of Adolescent Health. They found alcohol use was not a statistically significant risk factor for female intimate partner violence perpetration. Additionally, Foshee et al. (2001) also found early alcohol use to be predictive of female dating violence perpetration. After analyzing several models, alcohol use remained significant in the final model along with race and friends that are victims. Marijuana use and peer aggression were also been reviewed as risk factors (Foshee et al., 2010). Foshee et al. (2010) found marijuana to be
a significant predictor ($p<.05$) of adolescent female perpetration of dating violence and peer aggression (Foshee et al., 2010).

Additional behaviors that have been noted for their association with female perpetration of dating violence are depression (Ackard et al., 2003; Foshee et al., 2010); mental health symptomology (Howard & Wang, 2003; Renner & Whitney, 2012); suicidal thoughts (Ackard et al., 2003) and poor self-esteem (Ackard et al., 2003; Renner & Whitney, 2012). Ackard et al. (2003) examined the behavioral and mental health associations among a high school sample of adolescents in regards to physical and sexual violence. Suicidal thoughts were reported by males experiencing physical victimization (54.1%), sexual victimization (59.6%) and both forms of victimization combined (47.2%). Suicidal thoughts as reported by female adolescents experiencing physical victimization were slightly higher percentages (57.0%) and lower percentages for sexual victimization (37.0%). The number of female adolescents with combined sexual and physical victimization reports was also lower than their male counterparts (34.1%). For adolescents with higher scores on the depression measure and lower score on the self-esteem measure, dating violence was found to be significantly associated (Ackard et al., 2003).

**Risk Propensity**

In examining teen dating violence, it is important to review the issue of propensity to engage in risk. According to Sitkin and Weingart (1995), risk propensity has been defined as “an individual’s current tendency to take or avoid risks” (p. 1575). It can be said that some adolescents are motivated to engage in high risk behaviors. The literature is insufficient
as it relates to risk propensity and dating violence, for adults and adolescents. This section will examine health risk behaviors and the influence of risk propensity.

Adolescents engage in health risk behaviors as a means to cope with personal and social stressors (Cooper, Wood, Orcott & Albino, 2003, Wills et al., 2001). Brady and Donenberg (2006) examined sensation seeking and escaping behaviors among a psychiatric adolescent sample to link violence exposure and health risk behaviors. In their study, sensation seeking behaviors related to substance use and sexual risk taking for male and female respondents, violence exposure was primarily associated with male adolescents. Other researchers have identified links between sensation seeking and substance use (Unger et al., 2003, Wagner, 2001). The research however supports sensation seeking behaviors are more prevalent with men that women (Brady & Donenberg, 2006; Scourfield, Stevens & Merikangas, 1996).

**Exposure to Violence**

According to Walker (2009), an estimated 10 to 17 million children in the United States are exposed to intimate partner violence every year. Furthermore, Osofsky (1999) reports that violent behavior, including physical, sexual, and emotional abuse, occurs frequently within U.S. families. Several research studies have explored the impact of exposure to intimate partner violence among adolescents. This exposure to intimate partner violence within the home can manifest itself through adolescent development and peer relationships.

Exposure to violence can have significant effects on children during their development and as they form their own intimate relationships in childhood and adulthood (Osofsky, 1999). Investigators have found that witnessing inter-parental
violence adversely impacts children’s adjustment (O’Keefe 1996). Children may learn violent behaviors that are later used in their own adolescent relationships as an appropriate problem solving method (Kubeka, 2008). There is a surplus of literature detailing the effects of domestic violence on its child victims. The impact of domestic violence can be detrimental to the children exposed to such abuse. Research suggests that exposure to domestic violence appears to produce the most trauma for children (Groves & Zuckerman, 1997). Witnessing increasingly severe forms of parental aggression has been associated with sustaining increasingly severe forms of courtship aggression (Gwartney-Gibbs, Stockard, & Bohmer, 1987) and negative outcomes in adulthood (Ireland & Smith, 2009; Ronfeldt et al., 1998). The literature on family violence identifies adverse effects on children’s physical, cognitive, emotional, and social development (Osofsky, 1999), putting the child victims at an increased risk for either direct abuse or witnessing violence (Edleson, 1999).

Environments associated with violence can also lead to posttraumatic stress symptoms, including altered psychological, biological, neurological, and cognitive functioning which can become pathways towards developmental difficulties which can include compromised academic functioning, substance abuse, dating violence and personality disorders (Margolin, 2005). Studies have shown that many children exposed to acts of violence between their parents or parental figures are more likely to exhibit maladaptive behaviors (Anderson & Danis, 2006; Edleson, 1999; Lewis-O’Connor, Sharps, Humphreys, Gary, & Campbell, 2006; Maker et al., 1998; Osofsky, 1999).

Several studies have identified the impact of family violence on teen dating violence perpetration. According to O’Keefe (2005) in her review of existing teen dating
violence literature, perpetration risk factors include exposure to violence in the family of origin and community. Wolf and Foshee (2003) suggest that “adolescents exposed to family violence learn styles of anger expression that put them at risk of being perpetrators of dating violence” (p.315). According to Foshee, Ennett, Bauman, Benefield and Suchindran (2005), family violence exposure predicted dating violence for black teens. In Ireland and Smith’s (2009) longitudinal study of youth, a significant relationship was established between exposure to parental violence and adolescent conduct problems. The relationship between exposure to parental violence was significantly related to early adulthood violent crime, intimate partner violence and violent adult interactions (Ireland & Smith 2009).

**Neighborhood**

It is important to consider the environmental factors that influence and shape adolescent behaviors. Neighborhood violence and safety issues have been reported to influence violence behaviors in adolescents. Wright, Fagan and Crittenden (2011) found that neighborhood factors had a direct effect on youth outcomes. The neighborhood disadvantage increased the number of violent acts youth reported. While poverty is often-times concentrated in areas where delinquency is present this is not always the case. Research studies have reported that adolescents may become desensitized to violence and other risk factors in their community due to the frequency of which they occur (Wright et al., 2011). In Rothman et al.’s (2011) examination of neighborhood characteristics and violence perpetration, three factors were associated using the Boston Youth Survey data: lower collective efficacy (AOR=1.95, 95% CI=1.09-3.52), lower social control (AOR=1.92, 95% CI= 1.07-3.43) and neighborhood disorder (AOR=1.19, 95% CI= 1.05-
Neighborhood safety is a factor which is based on the individual perception of what is actually safe. There are varying factors for dating violence victimization and perpetration.

**Victimization.**

The link between dating violence victimization and neighborhood has been studied. East, Chien, Adams, Hokoda, and Maier, (2010) explored the relationship between sibling victimization, parental control and neighborhood influence. They found that dating victimization in high crime neighborhoods was reduced when high-levels of monitoring by mothers existed. When asked about their experiences with dating victimization, 29.5% of older siblings reported experiencing victimization compared to 11.5% of young siblings reporting this experience. The sibling dating victimization experiences were also reported to be correlated (East et al., 2010). Neighborhood collective efficacy was also been identified as a predictor of dating violence victimization for males (Jain, Buka, Subramanian & Molnar, 2010). Despite these two studies much work remains in the examination of neighborhood factors and dating violence.

**Perpetration.**

Dating violence perpetration has been examined in several research studies. The demographic sample typically represents male and female youth. Exposure to neighborhood violence was reported as a dating violence perpetration risk factor among a low-income predominately African American community in Mississippi (Ward, McMahon & Ingram, 2006). In their sample, 69% of adolescents reported perpetrating dating violence. An adolescent male sample was used to examine teen dating violence perpetration finding that boys who perpetrated dating violence were also involved in
neighborhood violence (Reed, Silverman, Raj, Decker & Miller, 2011). Although, Reed et al., (2011) did not examine adolescent females this study should be considered for its potential applicability to the proposed research study. Rothman et al. (2011) examined neighborhood characteristics and violence perpetration in a sample of Boston adolescents. Their findings identified lower levels of collective efficacy and social control, and higher levels of neighborhood disorder as associated with adolescent physical dating violence perpetration. The limited research in this area demonstrates the need for continued research exploring dating violence perpetration and neighborhood factors.

Summary

The limitations that exist in the literature are based on the continued perspective that emphasizes male battering behaviors and the anti-social and aggressive tendencies of men. Much of the current literature minimizes the impact of female aggressors acknowledging differences in socialization or attitudes regarding the rationale for violence. Additionally, when researching vulnerable populations it can be difficult to obtain reporting sources other than parents, which poses a threat to the information researchers receive. Adolescents may not be forthcoming with information or they may underreport or exaggerate violence claims for a variety of reason. In conclusion, adolescent female perpetration of dating violence is an important issue for researchers to examine and target prevention, policy and programming efforts.
Chapter 3

METHODOLOGY

Introduction

This chapter will provide an explanation of the data collection and data analysis methods for this research study. The study purpose and research questions will be discussed along with a detailed description of the data collection procedures and the research variables. The limited knowledge that exists in relation to female perpetration of dating violence and the emphasis on male-inflicted abuse has established the need for additional research. This research study aimed to establish a model for female perpetration of teen dating violence based on existing adolescent factors previously established in the literature.

Purpose of the Study and Research Questions

The purpose of this research study is two-fold: 1) to provide a greater knowledge base in understanding perpetration of dating violence by adolescent females and 2) to test a model of associated risk factors of female perpetration of teen dating violence. The research questions for this study sought to establish an appropriate model of female dating violence perpetration based on adolescent risk markers. This research examined the following questions:
1) Do race and prior risk behaviors during adolescence predict female perpetration of violence?

The study determines if race, adolescent delinquency, and early onset substance use predicted female perpetration of violence.

Figure 1: Research Question 1-Proposed Model
2) Do race and current risk behaviors predict female perpetration of violence?

The study examines whether race, current substance use, and current involvement in criminal activity predicted female perpetration of violence.

Figure 2: Research Question 2- Proposed Model
3) Do race, adolescent risk behaviors and mental health risk factors lead to female perpetration of dating violence?

The study examined whether race, exposure to violence, adolescent alcohol use, propensity to engage in risk behaviors, mental health and delinquency predict female perpetration of dating violence.

Figure 3: Research Question 3- Proposed Model
All factors included for research analysis were identified and established based on various research studies that explored adolescent perpetration of violence in dating relationships. This model seeks to close the knowledge gap as it relates to female perpetration of violence through the examination of similar risk factors.

Upon receiving the data, there were some revisions that were made to enhance the research study. Some of the original variables that were previously proposed were removed from the research questions. The decision to remove variables was based on the notion, that the increased number of variables could adversely impact data analysis. In deciding which variables to remove, the Add Health questionnaire was reviewed to determine the variables which were not a good fit for the research questions.

**Research Design**

**Sampling Frame**

This research consisted of the secondary analysis of a longitudinal research study. The use of a longitudinal study allowed for questions of change to be answered due to multiple points of data collection (Grinnell, 2001; Ruane, 2005; Vartanian, 2011). The National Longitudinal Study of Adolescent Health (*Add Health*) was used to answer all hypothesized research questions. *Add Health* is a nationally representative sample of adolescents residing in the United States who were in grades seven through twelve in 1994-1995. This study consisted of eighty high schools and fifty-two middle schools that were selected with unequal probability of selection for the baseline (wave one) data. This research design incorporated systematic sampling methods and implicit stratification to ensure a representative sample of United States schools with respect to country region, urbanicity, school size, school type and ethnicity (Harris et al. 2009). The data collected...
from the in-home interviews of wave one and wave three collection phases was used. Wave one included an in-home sample of 6,504 adolescents. Of those 3,356 (51.6%) were females.

Wave three was conducted in 2001 and 2002 with the original in-home interview respondents from wave one and their partners. Approximately 15,170 young adult in-home interviews were completed during this period (see Harris et al., 2009). These interviews were conducted when participants were between the ages of 18 and 26 years of age. Twenty-four respondents were between the ages of 27-28 at the interview and were omitted from the data. The questionnaire from this wave was designed to obtain relationship histories. Additional questions were added to provide details regarding the young adult life.

Despite the collection of four waves of data by survey administrators, waves two and four were omitted from data analysis. Wave two was omitted because the dependent variables were not asked during data collection. Wave four was omitted because the respondent ages would have exceeded the adolescent age range. The respondents in wave three that are twenty-one years and older were also excluded from data analyses due to the focus on adolescent perpetration of violence.

**Study Sample**

The sample for this study was derived from the Add Health data sample. The full sample was stratified by selecting female respondents first. The sample was further reduced through the use of birth years to ensure the appropriate adolescent age was selected. This selection resulted in approximately 1,831 respondents. Initially demographic data was examined for all respondents. Once the data was examined, it was
determined that the dependent variable had not been asked of all respondents. As a result of this, no random sampling was employed to further stratify the sample.
Figure 4: Sampling Criteria

Full Add Health Sample (Female)  
N = 10,480

Did not meet inclusion criteria  
N = 8,649

Meet Inclusion Criteria:
female, born 1980-1983,  
N = 1831

Data on violence perpetration not collected  
N = 1624

Data collected on Violence Perpetration  
N = 207

Listwise deletion applied  
N = 102

Final Sample After listwise deletion  
N = 105
Sampling methods

The Add Health longitudinal study is considered a multi-stage, cluster sampling design because of the stratified random sampling that occurred in the initial wave. According to Steinberg, (2004), the use of cluster sample helps reduce human biases and enhances the likelihood of accurate representation through probability. The in-home sample of respondents was drawn from a core sample from each community. The subsequent respondents for the remaining three waves typically represent individuals from the first wave of data collection. All respondents in the initial wave were in grades seven through twelve. The respondents in wave three were between the ages of 18 and 26.

Data collection

The first wave of data was collected by the National Opinion Research Center (NORC) of the University of Chicago. The third wave of data was completed by Research Triangle Institute (RTI) in North Carolina. All waves of data are stored with the Inter-consortium for Political and Social Research (ICPSR). The interviews were completed face-to-face in the homes of respondents. All interviews were conducted via laptop computer, with no paper questionnaires provided. The majority of the questionnaire was read to the participant by the interviewer. For sensitive questions, the interviewee was provided the computer to answer the questions. The topics covered in the first wave included but were not limited to: family composition and dynamics, substance use, criminal activities, sexual partnerships and the formation of romantic relationships. There were no questions regarding dating violence victimization or perpetration in this wave. The third wave of data collection took place in 2001 and
2002. The original in-home interview respondents were located for this interview along with their romantic partners. This wave included topics that were relevant to young adults. This wave also included information regarding victimization and perpetration of partner violence, criminal justice involvement and parental support relationships. Additionally, 1,057 partners were also interviewed during this wave to provide an additional perspective on victimization and perpetration in romantic relationships.

The sample for this study was 105 participants. This sample subset is representative of adolescent females born between 1981 and 1983. This sample was obtained as a result of specific study criteria. It should also be noted that the violence perpetration questions were not asked of all respondents which contributed to a reduction in the sample size.

**Obtaining data**

The National Longitudinal Study of Adolescent Health data is housed with ICPSR. The public and restricted use files are accessible through a member partnership agreement with the University of Georgia (UGA) for a nominal fee. The official partnership representative for the university worked in conjunction with the researcher to obtain all related research materials.

**Ethical considerations**

As a result of this study using pre-collected data, the ethical considerations are significantly reduced. All participant information was de-identified prior to being provided to the researcher. This study was approved by the University of Georgia Institutional Review Board (IRB). Data collection was completed by the University of Chicago and Research Triangle Institute. As a result of this, ethical procedures and considerations were factored into their data collection plans. Issues such as harm to
participants, confidentiality and anonymity were also considered in their data collection. Additionally, identifiable participant information was not available to the researcher. The survey responses were linked through a unique identifier. Furthermore, the researcher was expected to safeguard the data through a locked safe and laptop computer cable lock.

**Study Variables and Measures**

The study variables in the *Add Health* questionnaire were developed from previous studies and modified by the *Add Health* team. Although survey instruments, questionnaires and scales are referenced in Add Health literature, the scales are not used in their original context. The scales used in this research study were field tested by the *Add Health* research team. The following variables were used for this current research study: race, alcohol use, delinquency, mental health, propensity to engage in risk, exposure to violence, community violence, adult physical violence, and violence perpetration. The full list of questionnaire variables and relevant questions are available for review (Appendix A).

There was one question in the data that examined race. The response categories for the question were White, Black or African American, American Indian or Native American, Asian or Pacific Islander, or Other. Due to the low responses in the minority categories, the responses were collapsed into a dichotomous variable of White and Minority.

Alcohol use was examined in both waves. Wave one examined early onset adolescent use (early onset) while wave three examined current alcohol use between the ages of 18 and 20. The early onset question focused on the use of alcohol when adults were not present. The wave one variable was coded as a dichotomous variable. Binge
drinking was used to establish current alcohol use in wave three. Binge drinking was established as four or more drinks of alcohol on one occasion. Each alcohol use variable was examined individually.

The questions related to delinquency were presented in wave one and wave three. For this research, criminal justice involvement and criminal justice activities synonymously represented delinquency. Four questions were selected from each wave to provide a summated score of delinquency. The research questions examined physical fights, selling drugs, threatening others and burglary. The responses to these questions were based on their reported involvement within the past twelve months. Respondents were considered to have engaged in delinquent behavior if they reported at least one of these behaviors.

There were nine questions that were used to assess mental health symptoms in both waves. These questions explored the frequency of depressive symptoms which included feelings of sadness, depression and self-esteem. The questions in each wave were summated ($\alpha=.82$) to provide an overall measure of mental health.

Exposure to violence was measured by three questions. The questions used in this research examined parental violence, community violence and adult physical mistreatment. All questions were used as individual variables in the data analysis.

The propensity to engage in risk behaviors was examined through six questions in wave three. The risk propensity questions provided the respondent with two statements, one with a low-risk while the other was a high risk statement. These questions explored experience-seeking and dis-inhibition behaviors. The respondent was expected to select the statement that best described what they liked or how they felt. These questions were
summated as a means to appropriately identify the risk propensity of adolescents engaging in risky behaviors. The alpha for the summated scale was reported at $\alpha=0.66$.

There are two violence perpetration questions that were used as dependent variables in this research study. One question is focused on threats of violence while the other question examines physical violence. These questions were coded as dichotomous variables.

All questions were selected due to their ability to provide insight into the variables that exist in the proposed model of female violence perpetration. The use of waves one and three provide a longitudinal approach to the research variables due to their ability to examine prior and current issues that may influence adolescent female perpetration of dating violence. Additionally, examining early use and current use may help identify the appropriate placement of services for at-risk adolescents.

**Data Analysis**

This data was analyzed through descriptive and inferential statistics using the Statistical Package for the Social Sciences (SPSS) version 18. Upon receiving the dataset there were variables that were omitted from analysis or variables that were summated and recoded to allow for better statistical tests. Although the dataset was reported to have a larger sample size, the violence perpetration questions were not asked of all respondents which significantly reduced the research sample. Of the recoded variables, some were summated and in others the response sets were dichotomized to support statistical analysis methods. Upon completion of the recoding process, the descriptive data was cross-referenced with the variable descriptive data prior to the recoding process. The data analysis method selected was a logistic regression. The
logistic regression was selected as a more appropriate test given the categorical responses of the dependent variable. The completed analysis was to first fit a logistic regression model using a maximum of ten variables, due to the limited sample size (N=105). For each research question, two dependent variables (threats and physical violence) were analyzed. The logistic regression analysis for the first two hypothesized question examined three independent variables. The final hypothesized question examined ten independent variables for their ability to predict threats of dating violence and actual physical violence. The primary focus of data analysis was the inferential statistics to determine the fit of a model that would predict female violence perpetration from a nationally representative sample.

**Research question 1**

1) Do race, adolescent delinquency, and early onset substance use predict female perpetration of violence?

**Research question 2**

2) Do race, current substance use, and current involvement in criminal activity predict female perpetration of violence?

**Research question 3**

3) Do race, exposure to violence, adolescent alcohol use, propensity to engage in risk behaviors, mental health and delinquency predict female perpetration of dating violence?
Summary

This chapter summarizes the data collection and data analysis procedures that were completed during this research study. All secondary data received from the National Longitudinal Study of Adolescent Health was analyzed with SPSS to establish a model for adolescent perpetration of female dating violence based on adolescent risk factors. Each research question provided the opportunity to strengthen the existing field of research as it related to adolescent female perpetration of dating violence. The use of individual variables as well as the examination of past and current risk behaviors allowed for a more detailed examination of potential risk factors and correlates. The results of this study can be used to enhance teen dating violence literature as it relates to prevention, policy and intervention. This is a prime area that is ripe for continued growth.
Chapter 4

FINDINGS

Introduction

The purpose of this chapter is to report the statistical analyses of the research questions discussed in chapter three. This chapter will present a description of the study participants prior to reporting research findings. Additionally, the results of the univariate, bivariate and multivariate analyses for each research question will be outlined.

Descriptive Analyses

The research sample for this study consisted of female adolescents (N=105) born between 1981 and 1983. All participants ranged in age from eleven to twenty during the data collection phases used. Demographic data analyses revealed the racial characteristics of respondents as 58.1% White, 29.5% African American, 5.7% American Indian, 6.7% Asian, and 6.7% Other (Wave 1). Respondents of Hispanic origin were 12.4%. The grade levels ranged from 7th to 9th grade during the baseline data collection. Table 2 displays the demographics for the baseline wave of data collection.
Table 2: Demographic data

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<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N=105</td>
<td></td>
</tr>
<tr>
<td>Birth year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1981</td>
<td>55</td>
<td>52.4%</td>
</tr>
<tr>
<td>1982</td>
<td>44</td>
<td>41.9%</td>
</tr>
<tr>
<td>1983</td>
<td>6</td>
<td>5.7%</td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>61</td>
<td>58.1%</td>
</tr>
<tr>
<td>African/Black</td>
<td>31</td>
<td>29.5%</td>
</tr>
<tr>
<td>American/Indian</td>
<td>6</td>
<td>5.7%</td>
</tr>
<tr>
<td>Asian</td>
<td>7</td>
<td>6.7%</td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
<td>6.7%</td>
</tr>
<tr>
<td>Hispanic origin</td>
<td>13</td>
<td>12.4%</td>
</tr>
<tr>
<td>U.S.Born</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>83</td>
<td>92.2%</td>
</tr>
<tr>
<td>No</td>
<td>7</td>
<td>7.8%</td>
</tr>
<tr>
<td>Grade</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7th</td>
<td>62</td>
<td>61.4%</td>
</tr>
<tr>
<td>8th</td>
<td>38</td>
<td>37.6%</td>
</tr>
<tr>
<td>9th</td>
<td>1</td>
<td>1%</td>
</tr>
</tbody>
</table>

*R*N=90
*†*N=101
Variables

The study variable frequencies were individually reviewed for wave one and wave three analyses. The statistical frequencies are reported in the following paragraphs for an in-depth examination of the demographic sample.

Alcohol Use

Alcohol use was examined through early use in the baseline and current use in wave three. In wave one, over half of the respondents (55.2%) reported drinking when they were not with their parents or other adults. Wave three examined the use of alcohol within the past thirty days. The respondents who reported drinking four or more drinks of alcohol was minimal (Table 3).

Table 3: Adolescent Binge Drinking (Wave 3)

<table>
<thead>
<tr>
<th>Four or more drinks (single occasion)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>59.7% (37)</td>
</tr>
<tr>
<td>1</td>
<td>11.3% (7)</td>
</tr>
<tr>
<td>2</td>
<td>8.1% (5)</td>
</tr>
<tr>
<td>3</td>
<td>8.1% (5)</td>
</tr>
<tr>
<td>4</td>
<td>6.5% (4)</td>
</tr>
<tr>
<td>6</td>
<td>3.2% (2)</td>
</tr>
<tr>
<td>7</td>
<td>1.6% (1)</td>
</tr>
<tr>
<td>10</td>
<td>1.6% (1)</td>
</tr>
</tbody>
</table>
Delinquency

Delinquency was assessed in wave one and wave three through the examination of behaviors, actions and arrests in the twelve months prior to the completion of the survey. The same four questions were used to assess delinquency from each wave. The questions selected were dichotomously categorized and summated for analysis. In wave one, 23.8% reported engaging in delinquent acts. Approximately 21% of those respondents participated in a delinquent act once or twice. In wave three, 9.5% reported participation in a delinquent act with only 7.6% participating in the act once or twice.

The percent of adolescents engaging in delinquent is varied from wave one to wave three (chi square = 6.72, df=1, p=0.0095). Fewer adolescents report delinquent activity in wave three. For example, a higher number of adolescent report never fighting with their friends (95.2%) in wave three compared to never fighting with friends (77.1%) in wave one. Table 4 summarizes the delinquency responses from both waves of data collection.

Table 4: Delinquency

<table>
<thead>
<tr>
<th>Activity</th>
<th>Wave 1</th>
<th>Wave 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Go into a house or building to steal something?</td>
<td>97.1% (102)</td>
<td>100% (105)</td>
</tr>
<tr>
<td></td>
<td>1% (1)</td>
<td>1% (1)</td>
</tr>
<tr>
<td></td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Use or threaten to use a weapon to get something from someone?</td>
<td>98.1% (103)</td>
<td>97.1% (102)</td>
</tr>
<tr>
<td></td>
<td>1% (1)</td>
<td>2.9% (3)</td>
</tr>
<tr>
<td></td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Sell marijuana or other drugs?</td>
<td>98.1% (103)</td>
<td>95.2% (100)</td>
</tr>
<tr>
<td></td>
<td>1% (1)</td>
<td>1.9% (2)</td>
</tr>
<tr>
<td></td>
<td>--</td>
<td>1.9% (2)</td>
</tr>
<tr>
<td>Take part in a fight where a group of your friends was against another group?</td>
<td>77.1% (81)</td>
<td>95.2% (100)</td>
</tr>
<tr>
<td></td>
<td>20% (21)</td>
<td>4.8% (5)</td>
</tr>
<tr>
<td></td>
<td>--</td>
<td>--</td>
</tr>
</tbody>
</table>

1 Wave 1 variable, 3 Wave 3 variable
Mental Health

Mental health was examined through nine questions in wave one and nine questions in wave three. These questions explored the frequency of depressive symptoms including self-esteem, depression, and feelings of sadness as they occurred in the week prior to survey completion. The selected questions were summated to support data analysis. A dependent sample t-test was run on the sample to assess potential differences. There were no differences found between wave one and wave three, t(103) = -1.210, p = .229 (Table 5).

Table 5: Paired Sample Statistics

<table>
<thead>
<tr>
<th>Paired Sample Statistics</th>
<th>Mean (SE)</th>
<th>SD</th>
<th>t</th>
<th>df</th>
<th>Sig. (2-tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health (Wave 1)</td>
<td>7.721 (.2809)</td>
<td>2.864</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health (Wave 3)</td>
<td>8.289 (.3426)</td>
<td>3.49</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pair (MH W1-MH W3)</td>
<td>-.567 (.4689)</td>
<td>4.782</td>
<td>-1.210</td>
<td>103</td>
<td>.229</td>
</tr>
</tbody>
</table>

Despite the similarities between both waves of data, there were some mental health symptoms that appeared to differ. For example in wave one, over half the respondents (61%) reported ‘never’ being ‘bothered by things that don’t usually bother them’ but in wave three, less than half (49.5%) reported similar feelings. When respondents were asked if they ‘felt they were just as good as other people’, 17.1% reported ‘never’ in wave one and 6.7% reported ‘never’ in wave three. The remaining responses for that variable continued to differ in the other response categories as well. More respondents
reported never feeling in depressed in wave three (72.1%) than in wave one (55.2%).

The full list of mental variables is listed in Table 6.

Table 6: Mental Health

<table>
<thead>
<tr>
<th></th>
<th>Never/Rarely</th>
<th>Sometimes</th>
<th>A lot of the time</th>
<th>Most of the time/All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>You were bothered by things that usually don’t bother you.</td>
<td>61% (64)¹</td>
<td>35.2% (37)¹</td>
<td>1.9% (2)¹</td>
<td>1.9% (2)¹</td>
</tr>
<tr>
<td></td>
<td>49.5% (52)³</td>
<td>37.1% (39)³</td>
<td>9.5% (10)³</td>
<td>3.8% (4)³</td>
</tr>
<tr>
<td>You felt that you could not shake off the blues, even with help from your family and your friends.</td>
<td>72.4% (76)¹</td>
<td>22.4% (24)¹</td>
<td>4.8% (5)¹</td>
<td>--¹</td>
</tr>
<tr>
<td></td>
<td>72.1% (75)³</td>
<td>20.2% (21)³</td>
<td>3.8% (4)³</td>
<td>3.8% (4)³</td>
</tr>
<tr>
<td>You felt that you were just as good as other people. (RC)</td>
<td>17.1% (18)¹</td>
<td>25.7% (27)¹</td>
<td>31.4% (33)¹</td>
<td>25.7% (27)¹</td>
</tr>
<tr>
<td></td>
<td>6.7% (7)³</td>
<td>17.1% (18)³</td>
<td>22.9% (24)³</td>
<td>53.3% (56)³</td>
</tr>
<tr>
<td>You had trouble keeping your mind on what you were doing.</td>
<td>44.8% (47)¹</td>
<td>41.9% (44)¹</td>
<td>7.6% (8)¹</td>
<td>5.7% (6)¹</td>
</tr>
<tr>
<td></td>
<td>54.3% (57)³</td>
<td>33.3% (35)³</td>
<td>7.6% (8)³</td>
<td>4.5% (5)³</td>
</tr>
<tr>
<td>You felt depressed?</td>
<td>55.2% (58)¹</td>
<td>34.3% (36)¹</td>
<td>7.6% (8)¹</td>
<td>2.9% (3)¹</td>
</tr>
<tr>
<td></td>
<td>72.1% (75)³</td>
<td>22.1% (23)³</td>
<td>2.9% (3)³</td>
<td>2.9 % (3)³</td>
</tr>
<tr>
<td>You felt that you were too tired to do things.</td>
<td>40% (42)¹</td>
<td>42.9% (45)¹</td>
<td>15.2% (16)¹</td>
<td>1.9% (2)¹</td>
</tr>
<tr>
<td></td>
<td>40% (42)³</td>
<td>37.1% (39)³</td>
<td>16.2% (17)³</td>
<td>6.7% (7)³</td>
</tr>
<tr>
<td>People were unfriendly to you/People disliked you.</td>
<td>61% (64)¹</td>
<td>36.2% (38)¹</td>
<td>2.9% (3)¹</td>
<td>--¹</td>
</tr>
<tr>
<td></td>
<td>79% (83)³</td>
<td>18.15 (19)³</td>
<td>1.9% (2)³</td>
<td>1% (1)³</td>
</tr>
</tbody>
</table>
You enjoyed life. (RC)  5.7% (6)  19% (20)  25.7% (27)  49.5% (52)
            3.8% (4)  19% (20)  25.7% (27)  51.4% (54)
You felt sad.  50.5% (53)  43.8% (46)  4.8% (5)  1% (1)
                      79% (83)  18.1% (19)  1.9% (2)  1% (1)

(RC)=reverse coded, ¹ Wave 1 variable, ³ Wave 3 variable

**Exposure to Violence**

Three questions were used to measure exposure to violence. One question represented community violence, another question represented parental violence and the final question assessed adult physical violence. Community violence (Table 7) was measured by asking respondents if they saw anyone shoot or stab anyone in the past 12 months, 84.8% had not witnessed this. Less than 15% (12.4%) reported witnessing this type of violence once, while 2.9% witnessed this on more than one occasion.

Table 7: Exposure to Violence (Community Violence)

<table>
<thead>
<tr>
<th>Percentage (Frequencies)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
</tr>
<tr>
<td>Once</td>
</tr>
<tr>
<td>More than Once</td>
</tr>
</tbody>
</table>

Parental violence (Table 8) was examined by asking parents how much they fight or argue with their current spouse. The rates varied with 57.5% reporting ‘a little’, 23.3% reporting ‘some’, 16.4% reporting ‘not at all’ and 2.7% reporting ‘a lot’.
Table 8: Exposure to Violence (Parental Violence)

<table>
<thead>
<tr>
<th>Percentage (Frequencies)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A lot</td>
<td>2.7% (2)</td>
</tr>
<tr>
<td>Some</td>
<td>23.3% (17)</td>
</tr>
<tr>
<td>A little</td>
<td>57.5% (42)</td>
</tr>
<tr>
<td>Not at all</td>
<td>16.4% (12)</td>
</tr>
</tbody>
</table>

N=73

Adult physical violence (Table 9) was measured by reported occurrences of physical mistreatment by parents or adult care-givers. When asked how often the respondent had been slapped, hit or kicked by an adult care-giver or parent, 68.6% reported ‘never’, 6.9% reported ‘once’, 7.8% reported ‘twice’, 8.8% reported ‘3-5 times’, 2.9% reported ‘6-10 times’, and 4.9% reported ‘more than 10 times’.

Table 9: Exposure to Violence (Adult Physical Violence)

<table>
<thead>
<tr>
<th>Percentage (Frequencies)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>68.6% (70)</td>
</tr>
<tr>
<td>Once</td>
<td>6.9% (7)</td>
</tr>
<tr>
<td>Twice</td>
<td>7.8% (8)</td>
</tr>
<tr>
<td>3-5 times</td>
<td>8.8% (9)</td>
</tr>
<tr>
<td>6-10 times</td>
<td>2.9% (3)</td>
</tr>
<tr>
<td>More than 10 times</td>
<td>4.9% (5)</td>
</tr>
</tbody>
</table>

N=102
Risk Propensity

The motivation to engage in risky behaviors was examined in wave three with six questions. Experience-seeking and dis-inhibition behaviors were the primary behaviors explored. Respondents were asked to select between a high risk and low risk behavior. As a whole, the respondents overwhelmingly reported low risk behaviors. Almost 75% (74.5%) of the sample preferred quiet parties in contrast to wild, uninhibited parties. The substance use risk rates were more evenly represented with 42.9% reporting they like to drink alcohol or smoke marijuana to 47.1% that did not like to engage in these behaviors. Forty percent (40.4%) of respondents liked to have new and exciting experiences even if those experiences or sensations were sometimes illegal compared to 59.6% that were not interested in those experiences. Only 18.5% of respondents were interested in dating physically exciting people. The vast majority (81.5%) of respondents preferred to date people with shared values. Twenty-two percent of respondents felt it was important for married people to engage in sexual experiences with each other prior to marriage while 78% of respondents thought a person should have had considerable sexual experiences prior to marriage. Ninety percent (90.7%) of the sample felt something was wrong with people who needed liquor to feel good while 9.3% reported they felt best after having a few drinks. All responses are provided in Table 10.
<table>
<thead>
<tr>
<th></th>
<th><strong>High Risk response</strong></th>
<th><strong>Low Risk response</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>I like wild, uninhibited</td>
<td>25.5% (13)</td>
<td>74.5% (38)</td>
</tr>
<tr>
<td>parties.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I like quiet parties with</td>
<td></td>
<td></td>
</tr>
<tr>
<td>good conversation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I often like to drink alcohol</td>
<td>42.9% (24)</td>
<td>47.1% (32)</td>
</tr>
<tr>
<td>or smoke marijuana.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I don’t like to drink alcohol</td>
<td></td>
<td></td>
</tr>
<tr>
<td>or smoke marijuana.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am not interested in</td>
<td>40.4% (21)</td>
<td>59.6% (31)</td>
</tr>
<tr>
<td>experience for its own sake.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I like to have new and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>exciting experiences and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>sensations, even if they are</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a little frightening,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>unconventional, or illegal.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I like to date people who</td>
<td>18.5% (10)</td>
<td>81.5% (44)</td>
</tr>
<tr>
<td>are physically exciting.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I like to date people who</td>
<td></td>
<td></td>
</tr>
<tr>
<td>share my values.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A person should have</td>
<td>22% (11)</td>
<td>78% (39)</td>
</tr>
<tr>
<td>considerable sexual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>experience before marriage.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>It’s better if two married</td>
<td></td>
<td></td>
</tr>
<tr>
<td>people begin their sexual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>experience with each other.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel best after having a</td>
<td>9.3% (5)</td>
<td>90.7% (49)</td>
</tr>
<tr>
<td>couple of drinks.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Something is wrong with</td>
<td></td>
<td></td>
</tr>
<tr>
<td>people who need liquor to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>feel good.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Two questions examined violence perpetration. The first question measured threats of violence. The second assessed physical violence. When asked how often they have threatened a partner, 83.8% reported ‘never’, 6.7% reported ‘once’, 2.9% reported ‘twice’, 2.9% reported ‘3 to 5 times’, 1% reported ‘6-10 times’, 1.9% reported ‘11-20 times’, and 1% reported this previously occurring just not in the past year. See Table 11 for responses.

Table 11: Violence Perpetration (Threats)

<table>
<thead>
<tr>
<th>Percentage (Frequencies)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
</tr>
<tr>
<td>Once</td>
</tr>
<tr>
<td>Twice</td>
</tr>
<tr>
<td>3-5 times</td>
</tr>
<tr>
<td>6-10 times</td>
</tr>
<tr>
<td>11-20 times</td>
</tr>
<tr>
<td>Has not happened in the past year but has happened before</td>
</tr>
</tbody>
</table>

Physical violence was reported by 87.6% of respondents as ‘never’, 7.6% as ‘once’, 1% as ‘twice’, 1.9% as ‘3 to 5 times’, 1% as ‘6 to 10’ times, and 1% ‘more than 20 times’. See Table 12 for responses.
Table 12: Violence Perpetration (Physical Violence)

<table>
<thead>
<tr>
<th>Percentage (Frequencies)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>87.6% (92)</td>
</tr>
<tr>
<td>Once</td>
<td>7.6% (8)</td>
</tr>
<tr>
<td>Twice</td>
<td>1% (1)</td>
</tr>
<tr>
<td>3-5 times</td>
<td>1.9% (2)</td>
</tr>
<tr>
<td>6-10 times</td>
<td>1% (1)</td>
</tr>
<tr>
<td>More than 20 times</td>
<td>1% (1)</td>
</tr>
</tbody>
</table>

Research Question 1

This question examined race, adolescent delinquency and early onset substance use. Two dependent variables (threats and physical violence) were analyzed for correlations between the established independent variables. Logistic regressions were run to analyze the data for potentially significant variables. None of the variables in this model were found to be statistically significant in the prediction of adolescent female dating violence. Analysis findings are available in Table 13 and 14.

Table 13: Logistic Regression Research Question 1 (Threats)

<table>
<thead>
<tr>
<th>Variable</th>
<th>b(SE)</th>
<th>Sig.</th>
<th>OR</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Race/Ethn</td>
<td>.575 (.563)</td>
<td>.307</td>
<td>1.777</td>
<td>.590, 5.352</td>
</tr>
<tr>
<td>Alcohol Use</td>
<td>-1.189 (.657)</td>
<td>.070</td>
<td>.304</td>
<td>.084, 1.104</td>
</tr>
<tr>
<td>Delinquency</td>
<td>.757 (.723)</td>
<td>.295</td>
<td>2.132</td>
<td>.517, 8.791</td>
</tr>
</tbody>
</table>
Table 14: Logistic Regression Research Question 1 (Physical Violence)

<table>
<thead>
<tr>
<th>Variable</th>
<th>$b(SE)$</th>
<th>Sig.</th>
<th>OR</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Race/Ethn</td>
<td>1.302 (.697)</td>
<td>.062</td>
<td>3.676</td>
<td>.938, 14.404</td>
</tr>
<tr>
<td>Alcohol Use</td>
<td>-.004 (.852)</td>
<td>.996</td>
<td>.996</td>
<td>.187, 5.293</td>
</tr>
<tr>
<td>Delinquency</td>
<td>.742 (.826)</td>
<td>.369</td>
<td>2.10</td>
<td>.416, 10.609</td>
</tr>
</tbody>
</table>

**Research Question 2**

This question examined race, current substance use and current criminal involvement. Two dependent variables (threats and physical violence) were analyzed for correlations between the established independent variables. There were no statistically significant variables in the threats model. In the physical violence model, race was statistically significant. This model found minorities to be approximately four times as likely to perpetrate physical violence when controlling for alcohol use and delinquency. Tables 15 and 16 provide the research findings.

Table 15: Logistic Regression Research Question 2 (Threats)

<table>
<thead>
<tr>
<th>Variable</th>
<th>$b(SE)$</th>
<th>$\beta$</th>
<th>Sig.</th>
<th>OR</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Race/Ethn</td>
<td>.529 (.574)</td>
<td>1.698</td>
<td>.357</td>
<td>1.698</td>
<td>.551, 5.233</td>
</tr>
<tr>
<td>Alcohol Use</td>
<td>-.002 (.006)</td>
<td>.998</td>
<td>.722</td>
<td>.998</td>
<td>.986, 1.010</td>
</tr>
<tr>
<td>Delinquency</td>
<td>-.615 (1.122)</td>
<td>.541</td>
<td>.584</td>
<td>.541</td>
<td>.060, 4.872</td>
</tr>
</tbody>
</table>
Table 16: Logistic Regression Research Question 2 (Physical Violence)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Violence Peretration (Physical Violence)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Variable</td>
</tr>
<tr>
<td>Race/Ethn</td>
<td>1.422 (.722)</td>
</tr>
<tr>
<td>Alcohol Use</td>
<td>.004 (.007)</td>
</tr>
<tr>
<td>Delinquency</td>
<td>1.050 (.950)</td>
</tr>
</tbody>
</table>

Research Question 3

This question examined race, exposure to violence, adolescent alcohol use, propensity to engage in risk behaviors, mental health and delinquency for their ability to predict female dating violence perpetration. Logistic regressions were run to identify any statistically significant relationships that would predict female perpetration of dating violence. When all variables were present in the model, no statistically significant variables were found (Tables 17 & 18).
Table 17: Logistic Regression Research Question 3 (Threats)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Violence Peretration (Threats)</th>
<th>b(SE)</th>
<th>Sig.</th>
<th>OR</th>
<th>(95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Race/Ethn</td>
<td></td>
<td>.195 (.661)</td>
<td>.768</td>
<td>1.215</td>
<td>.333, 4.441</td>
</tr>
<tr>
<td>Alcohol Use</td>
<td></td>
<td>-.002 (.007)</td>
<td>.755</td>
<td>.998</td>
<td>.985, 1.011</td>
</tr>
<tr>
<td>Delinquency (W1)</td>
<td></td>
<td>.946 (.923)</td>
<td>.305</td>
<td>2.577</td>
<td>.422, 15.742</td>
</tr>
<tr>
<td>Delinquency (W3)</td>
<td></td>
<td>-.665 (1.233)</td>
<td>.590</td>
<td>.514</td>
<td>.046, 5.762</td>
</tr>
<tr>
<td>Risk Propensity</td>
<td></td>
<td>.077 (.230)</td>
<td>.739</td>
<td>1.080</td>
<td>.688, 1.694</td>
</tr>
<tr>
<td>Mental Health (W1)</td>
<td></td>
<td>-.056 (.121)</td>
<td>.646</td>
<td>.946</td>
<td>.746, 1.199</td>
</tr>
<tr>
<td>Mental Health (W3)</td>
<td></td>
<td>-.211 (.133)</td>
<td>.112</td>
<td>.810</td>
<td>.625, 1.050</td>
</tr>
<tr>
<td>Community Violence</td>
<td></td>
<td>1.109 (.865)</td>
<td>.200</td>
<td>3.032</td>
<td>.556, 16.534</td>
</tr>
<tr>
<td>Parent Violence</td>
<td></td>
<td>.240 (.590)</td>
<td>.684</td>
<td>1.271</td>
<td>.400, 4.041</td>
</tr>
<tr>
<td>Adult Physical Violence</td>
<td></td>
<td>-1.308 (.850)</td>
<td>.124</td>
<td>.270</td>
<td>.051, 1.429</td>
</tr>
</tbody>
</table>
Summary

Despite what has been researched regarding adolescent female perpetration of dating violence, these findings did not support previously researched studies. This may be due to a myriad of factors. While certain delinquent and substance use behaviors may be correlated with adolescent female perpetration of dating violence, the statistical
analyses did not fully support the hypothesized research questions for this study. Future research is needed that continues to examine adolescent female perpetration of dating violence and the related risk factors.
Chapter 5

DISCUSSION

Introduction

The current body of literature that addresses adolescent perpetration of dating violence has maintained a discourse that largely focuses on male perpetration of violence. As a result of this, research is needed to shift the dialogue towards the exploration of female violence perpetration. The purpose of this study was to provide a broader knowledge base regarding adolescent female perpetration of dating violence while establishing a model of adolescent female dating violence perpetration through the use of a national longitudinal dataset focused on adolescent health. The use of secondary data facilitates potential replication and reduces the cost and time that is often associated with lengthy research studies. This chapter will summarize and interpret the research findings outlined in chapter four. The limitations of this study will also be discussed along with the implications for social work education, practice, research and policy. Finally, future research recommendations will be provided.

Findings

This study has the potential to impact the literature on adolescent female perpetration of dating violence for an array of reasons. There may be concerns regarding the demographic sample of this study in contrast to that of other studies that also examine adolescent health risk behaviors. Although this sample is representative of United States households, at-risk behaviors are not overly represented in the sample. This sample may not be representative of current American households due to the changing dynamics of
United States households and adolescent risk behaviors. An alternate study such as the Center for Disease Control (CDC) Youth Risk Behavior Surveillance Survey (2011), which utilized a three stage cluster sampling design, reports higher adolescent female at-risk behaviors.

Due to the longitudinal nature of this study, respondents are currently between the ages of 29 and 31. This demographic may have experienced different challenges during childhood and adolescence than those currently faced by adolescents. The use of certain drugs during the 90s and 2000s may be different than the substances adolescents are currently experimenting with. The differences in age onset of drug use may also impact the research findings. The findings of this study should be considered in relation to the time period in which respondents were surveyed.

**Research Question 1**

This research question examined race, adolescent delinquency and substance use as reported in the first wave of data collection to assess its potential to predict adolescent female perpetration of dating violence in wave three. Two forms of violence perpetration were considered: threats and physical violence. Logistic regressions were run to analyze the data for potentially significant variables for the threats and physical violence model. None of the variables in the model were found to be statistically significant in the prediction of adolescent female perpetration of teen dating violence. When assessing the predictability of adolescence female (threats of violence) perpetration, the following variables were examined: race \((p=.307)\), alcohol use \((p=.070)\), and delinquency \((p=.295)\). When assessing predictability of physical violence, the following variables were examined: race \((p=.062)\), alcohol use \((p=.996)\), and delinquency \((p=.369)\).
**Research Question 2**

This research question examined race, current substance use and current delinquency as reported in wave three for its ability to predict adolescent female perpetration of dating violence. Two forms of dating violence perpetration were assessed: threats and physical violence. There were no statistically significant variables in the threats model. The following variables were examined: race ($p=1.698$), current alcohol use ($p=.998$), and current delinquency ($p=.541$). In the physical violence model, race was statistically significant. The variables examined were: race ($p=.049$), current alcohol use ($p=.527$), and current delinquency ($p=.269$). In this model, minorities were found to be approximately four times as likely to perpetrate physical violence when controlling for alcohol use and delinquency. This model supports previous study findings around race (Foshee et al., 2010; Rothman et al., 2011; Windle & Mrug, 2009).

**Research Question 3**

This research question examined several variables for their ability to predict adolescent female perpetration of dating violence. Exposure to violence, race and the propensity to engage in risk behaviors as reported in wave one were examined. Current alcohol use as reported in wave three. Mental health behaviors and delinquency were examined from waves one and three. Two forms of dating violence were assessed: threats and physical violence. The logistic regressions analyses revealed no statistically significant relationships between the independent variables and dependent variables when all variables were present in each model. The variables examined in the threats model were: race ($p=.768$), alcohol use ($p=.755$), delinquency-wave one ($p=.305$), delinquency-wave three ($p=.590$), risk propensity ($p=.739$), mental health-wave one ($p=.640$), mental
health-wave three ($p=.112$), community violence ($p=.200$), parent violence ($p=.590$) and adult physical violence ($p=.124$).

The variables examined in the physical violence model were: race ($p=.089$), alcohol use ($p=.692$), delinquency-wave one ($p=.281$), delinquency-wave three ($p=.520$), risk propensity ($p=.433$), mental health-wave one ($p=.620$), mental health-wave three ($p=.397$), community violence ($p=.581$), parent violence ($p=.098$) and adult physical violence ($p=.084$). It should be noted that the variables may have served as protective factors to reduce the impact from other behaviors or variables may have been omitted from analysis that could have impacted the models. For example, protective factors such as religion were not examined in any models. This particular protective factor could have impacted the model analysis.

**Limitations**

Assessing the limitations of any research study is an important aspect of the research process. As with any research study limitations were present within this study. As a nationally representative longitudinal sample there were challenges with attrition. All participants could not be found to be re-interviewed in future waves. Given, the absence of respondents, this could impact the model if the participants who failed to complete subsequent waves were involved in violence perpetration. Additional waves of data were excluded from analyses to reduce threats to external and internal validity.

While the study primarily consisted of adolescents, at-risk adolescents may not be adequately represented in the sample. This assessment is based on frequency analyses of at-risk behaviors reported by survey respondents in the baseline wave of data. This may have influenced the results of this research study unlike the previously researched cohort
studies such as the CDC Youth Behavior Surveillance Survey where female perpetration has been satisfactorily established.

Additionally, there are variables that may be relevant but are not included in the research which can impact the model. The violence perpetration variable was not introduced until the third wave of data collection which makes longitudinal research possible but has the potential to impact responses. The researcher also chose to select specific questions from each variable of interest. The variables that were not included in the research models may prove to be relevant to the model of female perpetration of dating violence if analyzed.

According to Rubin and Babbie (2008), secondary data can be outdated and not specifically address the study research questions. As a researcher, limited control over questionnaire wording or the conceptualization of variables was also a weakness of the research design. The use of individual variables versus summated scores for some variables can also be considered limitations that existed as a result of the use of secondary data. The original study researchers designed several questions using research scales as a reference but did not summate those questions or score them. Despite the weaknesses of this study, the research questions were successfully answered and can provide additional knowledge to a growing area in social work while demonstrating the need for future research.

**Implications for Social Work Education**

The social work educational process should shape the profession through its training of competent professionals who are able to promote the well-being of individuals, families and communities. The Council on Social Work Education (CSWE)
Educational Policy and Accreditation Standards (EPAS) provide the foundation for baccalaureate and master’s level social work programs. The EPAS are established guidelines for schools of social work to develop the professional competence of students. The four features of an integrated curriculum design identified in the EPAS guidelines are program mission and goals, explicit curriculum, implicit curriculum and assessment. The explicit curriculum includes the curriculum and coursework implemented by schools of social work to prepare graduates for social work practice.

Several of the explicit curriculum competencies support the inclusion of dating violence specifically teen dating violence to prepare graduates for practice with vulnerable at-risk populations. Social workers are expected to master core competencies such as: the application of critical thinking to inform and communicate professional judgments; advance human rights and social and economic justice; application of knowledge of human behavior and the social environment; and engage in policy practice to advance the social and economic well-being and to deliver effective social work services (Council on Social Work Education, 2008). Adolescent dating violence perpetration is reflected in each of these core competencies with an academic expectation that this issue should be included in social work educational curriculum to strengthen the practice experiences of future social workers. While this research did not demonstrate the ability to predict female perpetration of violence, it is still an adolescent issue. Social workers should be prepared to adequately support clients and families if these challenges arise. By providing social workers effective training on the issue of adolescent dating violence, social workers can enter practice settings adequately prepared to provide services and interventions that will promote the well-being of their clients.
Implications for Social Work Practice

This research provides many opportunities for social work practice. According to Carlson (1999), there is a need for programs that specifically target youth that have previously been involved in violent dating relationships. The results of this research can shape programming and policies implemented in schools, community agencies and medical facilities. In each of these social service settings, social workers often interact with female adolescents that may be at-risk for dating violence perpetration. Despite the need for programs that target at-risk youth, only a few programs specifically target this population (Weisz & Black, 1999). As social workers, many of our adolescent clients are considered ‘at-risk’.

School Settings

In school settings, social workers often meet with students who have challenges in their personal lives that may interfere with their ability to have a positive school experience. This research provides social workers the opportunity to examine issues that increase the propensity for adolescent females to engage in relational violence. When social workers are aware of these challenges, they can provide effective referrals to intervene or prevent occurrences of violence. Training for social workers should be ecologically-based bringing parents of victims and perpetrators to the table so that resources can be provided. This may also provide additional support for adolescents who become alienated from peers due to abusive relationships. School social workers also have the opportunity to recommend and support the implementation of dating violence prevention and intervention curriculums (see Howard, K.S., 2006 for review of curriculum evaluations). School social workers should be prepared to provide support to
the families particularly if there is a history of violence and make appropriate referrals for youth if substance use issues are present. The practice implications in schools are numerous providing vast opportunities to develop students who value healthy dating relationships. Furthermore, this research provides an alternate viewpoint of violence perpetration that can wholeheartedly benefit school communities through education and awareness.

**Community Settings**

In community agencies and medical settings, adolescents often participate in programs and receive services. These agencies have a unique opportunity to disseminate information regarding healthy relationships. According to Weisz and Black (2009), prevention programs should include community agencies at their inception to enhance community support. This is particularly important in agencies that work with at-risk females that may have a prior criminal justice history, drug or alcohol use or involvement in risky behaviors. This research demonstrates the need to shift the focus to prevention and intervention programs that evaluate behaviors instead of the assessment of attitudes and perceptions of dating violence.

In each of these settings, the influence of social workers is paramount to addressing the issue of dating violence perpetration by adolescent girls. While this research did not predict or demonstrate large-scaled numbers of female perpetration this is still a practice issue that affects and impacts adolescent development. As a result of the representative sample of research respondents, these findings can support social work practice in many community settings. This research has broad implications for social work practice through its ability to transcend a multitude of settings and populations.
Implications for Social Work Research

This research adds to the teen dating violence knowledge base due to its focus on female perpetration. The use of a longitudinal sample to develop a model for female violence perpetrators in dating relationships is unique to existing research. It is imperative that researchers continue to examine adolescent female perpetrators of dating violence to enhance prevention and intervention efforts. According to Wolfe, Wekerle and Scott (1997),

“Adolescence represents a critical link in the prevention of violence in relationships. It is an important time for relationship formation, and it is also a period in which the scars of childhood or inadequate opportunities for adaptation can impair normal adjustment. The passive choice would be to continue addressing the needs of youth in an inconsistent, reactionary manner. The active choice involves a new paradigm committed to the needs and resources of youth (p.42).”

There are several opportunities to create new paradigms that strengthen the literature through program evaluations that examine effective interventions for all perpetrators of teen dating violence and longitudinal studies that assess behavioral changes among perpetrators. This research strongly demonstrates the need for future research to examine factors that influence female dating violence perpetration in addition to the prevention and intervention needs of adolescent females who engage in dating violence.
Implications for Social Work Policy

Adolescent dating violence has gained greater notoriety in policy settings. It has been recognized by the White House through a presidential proclamation that praised existing preventions and recommended existing prevention programs (http://www.ovw.usdoj.gov/teen_dating_violence.htm). It is important for social work to consider the political and criminal implications of teen dating violence.

Legislation

There have been several states that have made an effort of inclusivity regarding teen dating violence. In the state of Georgia, Senate Bill 46 (2011), seeks to amend the “Quality Basic Education Act” by providing curriculum related to dating violence; requiring policies against dating violence be adopted; and to repeal any conflicting laws. House Bill 243, sought to include the provision or rape prevention and personal safety education programs through the Love Is Not Abuse Curriculum. Although Senate Bill 346 (GA Statute 20-2-314) does address rape prevention, personal safety education and teen dating violence prevention, local boards have the option to implement the programs at any time and for any grade between 8 and 12 the local board deems appropriate. These bills would have required local communities to make a larger impact on teen dating violence and potentially alter the Georgia political landscape relating to adolescent dating violence. Unfortunately, neither bill was passed. The response to teen dating violence has varied in southern states. Alabama, Mississippi and South Carolina do not have any legislation pending or in effect addressing this salient issue (http://www.ncls.org/issues-research/health/teen-dating-violence.aspx). The state of Florida requires a teen dating violence and abuse component be taught in public school
health education for grades 7 through 12 (2010 SB 642/HB 467). Additionally, victims of dating violence, those with reasonable cause to believe they are in imminent danger or parents or legal guardians of minor children living at home can seek protection orders (Fla. Stat. 784.046). This research study addresses issues of female perpetration to provide an alternate framework for policymakers so that legislative efforts that support prevention and intervention will continue to adopt a gender-neutral framework.

**Policy Implementation**

The criminal justice system has largely ignored teen dating violence. Because of the perpetrators are minor, the policies that often support adults do not apply. The procedure for obtaining protective orders usually involves parental consent which may prohibit youth from pursuing (Sanders, 2003). Absent of this legal order, a violent perpetrator has no legal consequences for their behaviors. Adolescents may be referred to juvenile or civil courts but these courts do not have statutes regarding teenage violence. In the state of Georgia, adolescents cannot be served in domestic violence shelters so those who are victimized have limited recourse or protection. Additionally, protective orders often only apply to cohabitating individuals, which is not a common living situation for adolescents (Sanders, 2003). Despite challenges in supporting teen dating violence in Georgia, Florida allows minor children to petition the court for protective orders with or without parental support. This research helps demonstrate that dating violence is an issue that impacts adolescent health.
**Recommendations for Future Research**

This research has opened the door to a plethora of research opportunities as they relate to adolescent female dating violence perpetration. Future research recommendations should focus on the development of correlated and predictive factors for dating violence as well as the expansion of intervention and prevention efforts for female perpetrators of dating violence.

**Predictive modeling**

This model provided limited predictability in the area of adolescent female perpetration of teen dating violence. Much work remains to establish a more precise model. Given the respondents were initially interviewed for behaviors in the mid-90s, it may be appropriate to conduct this research with a more recent sample of adolescents. Future research should examine additional at-risk variables that are present in the longitudinal study. In addition, the expansion of ages should also be considered, examining wave three and wave four. Furthermore, other longitudinal datasets with younger respondents should be considered for future analysis.

**Adult Dating Violence Treatment Interventions**

It is important to examine the ways in which female adult violence perpetrators receive treatment (Buttell, 2002; Carney & Buttell, 2004; Dowd, 2001). The absence of treatment for adult violence perpetrators is paramount to understanding intervention practices for adolescent female perpetrators. The options that specifically focus on female-inflicted violence are limited. This is a direct result of the awareness that has been placed on male perpetration of dating violence against women.
Adult perpetrators of violence often participate in court-mandated interventions that use the Duluth model of violence (www.theduluthmodel.org). The Duluth model of violence focuses on power, control and submission which was established by female theorist to explain male perpetrated violence. This model does not effectively explain female perpetration of violence (Kernsmith & Kernsmith, 2009). When examining perpetration of violence the same counseling interventions should not be used for male and female offenders (Kernsmith, 2005). An alternate theory that has been situated in the context of female perpetration of violence is attachment theory (Carney & Buttell, 2006). This is an important milestone in the shift towards recognition and acceptance of female perpetration of violence outside of self-defense rationales. According to Dutton, Nicholls and Spidel (2005), female perpetration of violence treatment should reflect “evidence-based practice, a comprehensive assessment of the woman and her partner, and interviews with collaterals (p. 20)”. While this is appropriate for adult females, it does not apply to adolescent females that perpetrate violence.

**Adolescent Dating Violence Treatment Interventions**

There are numerous gaps in the dearth of treatment modules for adolescent females who perpetrate dating violence. Despite the lack of adolescent female intervention treatments, the literature provides resources and suggestions for appropriate prevention programming. According to Wolfe et al. (1997), there are seven components necessary to promote healthy non-violent relationships.

“Opportunities should be present to 1) establish and build trust, 2) share thoughts, ideas, and feelings; 3) respect each other’s thoughts, ideas, and feelings, 4) encourage and support each other to grow, 5) permit each person to feel loved and
valued, 6) ensure that each person feels safe to express disagreement and negative feelings including anger, disappointment, frustration, and so on, and 7) ensure that each person feels safe when another person expresses disagreement and negative feelings.”

Additionally, programs for adolescents should help them develop strategies to cope with their emotions and provide conflict resolution skills while rejecting violence (Kaestle & Halpern, 2005). Although interventions are needed, the use of prevention programs can aid in the reduction of adolescent dating violence when programs address the totality of violence perpetration that occurs regardless of gender.

As a result of scant research regarding best practices, research is needed to identify appropriate strategies that evaluate the aptness of curriculum and programs for adolescent female perpetrators. It is imperative that the adolescent dating violence research move beyond prevention into interventions to address the violent behaviors of adolescent girls. The literature should also begin to focus additional attention on strategies that reduce adolescent female and male perpetration of violence.

Summary

The use of this secondary data analysis research study with the National Longitudinal Study of Adolescent Health has the potential to be beneficial to the research and practice community by providing a broader understanding of the role of female perpetrated violence among adolescent youth. It can influence prevention and intervention programming that leads to more gender inclusivity. Although limitations exist when secondary data is used, this research will add to the body of knowledge that currently exists regarding female perpetration of dating violence. Despite, the minimal
findings from this study, there is still potential to influence educational programming, social work practice and policy. It is critical that the research and practice community begin to identify and evaluate interventions for this population. Furthermore, much work remains to move teen dating violence research forward through the use of effective interventions and prevention curriculum.
References


intimate partner violence victimization from adolescence to young adulthood in a nationally representative sample. *Journal of Adolescent Health, 45*(5), 508-516.


Appendix A

Add Health Questionnaire Variables

Early onset alcohol use (Wave 1)

The question addressing early onset alcohol use is located in the public use portion of the data set-Study 21600, Section 28.

1. Do you ever drink beer, wine, or liquor when you are not with your parents or other adults in your life? (H1TO13)

Current alcohol use (Wave 3)

The question addressing current alcohol use (past two weeks) is located in the public use portion of the data set-Study 21600, Section 28.

1. During the past two weeks, how many times did you have four or more drinks on a single occasion, for example, in the evening? (H3TO42)

Delinquency (Wave 1)

Each of these questions are specific to the twelve months prior to survey completion.

These questions can be accessed through the public use dataset-Study 21600, Section 29.

In the past twelve months, how often did you…

1. go into a house or building to steal something? (H1DS10)
2. use or threaten to use a weapon to get something from someone? (H1DS11)
3. sell marijuana or other drugs? (H1DS12)
4. take part in a fight where a group of your friends was against another group? (H1DS14)

Delinquency (Wave 3)
The questions addressing delinquency and criminal justice involvement is located in the public use data set-Study 21600, Sections 26.

In the past twelve months, how often did you...

1. go into a house or building to steal something? (H3DS3)
2. use or threaten to use a weapon to get something from someone? (H3DS4)
3. sell marijuana or other drugs? (H3DS5)
4. take part in a physical fight where a group of your friends was against another group? (H3DS7)

**Mental health (Wave 1)**

These questions are included in the public use dataset-Study 21600, Section 10.

How often was each of the following true during the last week?

1. You were bothered by things that usually don’t bother you. (H1FS1)
2. You felt that you could not shake off the blues, even with help from your family and your friends. (H1FS3)
3. You felt that you were just as good as other people. (H1FS4)
4. You had trouble keeping your mind on what you were doing. (H1FS5)
5. You felt depressed? (H1FS6)
6. You felt that you were too tired to do things. (H1FS7)
7. People were unfriendly to you. (H1FS14)
8. You enjoyed life. (H1FS15)
9. You felt sad. (H1FS16)

**Mental health (Wave 3)**

These questions are located in Section 12 of Study 21600. All questions address the frequency in which mental health symptoms occur.
Now, think about the past seven days. How often was each of the following things true during the past seven days?

1. You were bothered by things that usually don’t bother you. (H3SP5)
2. You could not shake off the blues, even with help from your family and your friends, during the past seven days. (H3SP6)
3. You felt that you were just as good as other people, during the past seven days. (H3SP7)
4. You had trouble keeping your mind on what you were doing, during the past seven days. (H3SP8)
5. You were depressed during the past seven days. (H3SP9)
6. You were too tired to do things, during the past seven days. (H3SP10)
7. You enjoyed life, during the past seven days. (H3SP11)
8. You were sad, during the past seven days. (H3SP12)
9. You felt that people disliked you, during the past seven days. (H3SP13)

**Exposure to Violence (Wave 1 & 3)**

There is one question that addresses community exposure to violence in the adolescent questions, Section 31. There is another question in the parent behaviors that address parental violence. This question is in Study 27021, Section B. The third question that examines adult physical violence is included in Study 21600, Section 29.

1. During the past 12 months, how often did each of the following things happen?
   You saw someone shoot or stab another person (H1FV1)

2. How much do you fight or argue with your current spouse/partner? (PB20)
3. How often had your parents or other adult care-givers slapped, hit, or kicked you? (H3MA3)

**Risk Propensity (Wave 3)**

The questions that address the propensity for risk among adolescents is located in Study 21600, Section 21.

In each pair of sentences, choose the one that better describes what you like or how you feel.

1. 1. I like wild, uninhibited parties.
   
2. I like quiet parties with good conversation. (H3PR1)

2. 1. I often like to drink alcohol or smoke marijuana.
   
2. I don’t like to drink alcohol or smoke marijuana. (H3PR2)

3. 1. I am not interested in experience for its own sake.
   
2. I like to have new and exciting experiences and sensations, even if they are a little frightening, unconventional, or illegal. (H3PR3)

4. 1. I like to date people who are physically exciting.
   
2. I like to date people who share my values. (H3PR4)

5. 1. A person should have considerable sexual experience before marriage.
   
2. It’s better if two married people begin their sexual experience with each other. (H3PR5)

6. 1. I feel best after having a couple of drinks.
   
2. Something is wrong with people who need liquor to feel good. (H3PR7)

**Violence perpetration (Wave 3 only)**

These questions are located in Study 27021, Section 19.
1. How often have you threatened <PARTNER> with violence, pushed or shoved (HIM/HER), or thrown something at (HIM/HER) that could hurt? (H3RD109)

2. How often have you slapped, hit, or kicked <PARTNER>? (H3RD111)

**Race (Wave 1)**

There is one question in wave one that references race which will be used for data analysis. This question is in Section 1.

1. What is your race?

   White (H1GI6A), Black or African American (H1GI6B), American Indian or Native American (H1GI6C), Asian or Pacific Islander (H1GI6D), or Other (H1GI6E)