

Dating violence among child welfare-involved youth: Results from the Maltreatment and Adolescent Pathway (MAP) Longitudinal Study

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Abstract:

Objectives: Adolescent dating violence (ADV) is a significant public health issue with associated mental health impairments, such as depression and suicidal ideation. Even though ADV is addressed typically within the education system, it remains under-assessed by clinical service sectors, and not often a direct target of intervention. Little research has tracked dating relationships from adolescence to young adulthood among vulnerable youth. Assessing the level and continuity of relationship violence may be important to systems with protection and well-being mandates. This study examined youth reports of ADV victimization and perpetration among those receiving services from child welfare or Child Protective Services (CPS). **Methods:** The study randomly selected youth currently involved in the child welfare system in Ontario and followed for assessment at 6, 18, and 24 months. We examined the endorsement of ADV victim and perpetration by gender and CPS service status at baseline (n=341), as well as by using longitudinal data (n=110). **Results:** The prevalence and scores for ADV perpetration and victimization were similar across genders. Only among males, youth in CPS services, other than those living in foster care, had increased ADV perpetrator, as well as, victim scores, as compared to males in foster care. Over the two-year follow-up period, 33.6% of dating youth did not ever engage in ADV, while 46.4% of youth reported ADV at two time points or more. A minority of youth (9.1%) reported being in an ADV relationship across all four assessment points. **Conclusions and Implications:** Violence in adolescent relationships is an experience for many youths receiving child welfare services. About a third, though, had dating experiences that were not reported to include verbal, physical, and sexual abuse. Further studies examining ADV risks and relationship resilience features among CPS-involved youth across the adolescent years remains a research need.

Keywords:

Adolescent, youth, child welfare, dating, violence, dating violence, resilience

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Introduction

Although there is no universal definition of adolescent dating violence (ADV), ADV is often referred to as violence within adolescent dating relationships. ADV is a public health concern that reflects emotional and physical abuse, as well as sexual coercion. ADV is harmful as it can significantly impact a youth's mental health (increased depression, substance use and suicidality) and academic performance (low achievement and high drop-outs) (Banyad & Cross, 2008; Children's Safety Network, 2012; Hamby, Finkelhor, & Turner, 2012; United States Centers for Disease Control and Prevention (US CDC), 2014). A longitudinal study in the US also found that ADV is related to adverse health outcomes in young adulthood, including intimate partner violence, controlling for child maltreatment and socioeconomic status (Exner-Cortens, Eckenrode, & Rothman, 2013).

The population prevalence of adolescent ADV victimization has been fairly stable over the past decade, based on analyses of the US CDC Youth Risk Behavior Survey. In 2011, 9.4% of high school students (9.5% males, 9.3% females) reported ADV victimization (i.e., hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend during the prior 12 months), and 8.0% (4.5% males, 11.8% females) reported being forced to have sexual intercourse from any type of perpetrator (US CDC, 2011). The dynamic of ADV within adolescent relationships may be mutual: both males and females who are involved with ADV reported similar rates of perpetration and victimization of ADV (Wekerle & Wolfe, 1999; Haynie et al., 2013).

Adolescence is an important window of opportunity to redirect relationship trajectories. Adolescent dating is a key context within which

violence prevention and health promotion can be supported, particularly when youth are receiving services for other issues (mental health, conduct, and substances, protection). For CPS-involved youth, despite receiving caseworker monitoring, dating may not be a consistent feature of case management, and there may be no screening for ADV. Evidence to date suggests that, given a history of victimization and associated trauma, child welfare youth are at-risk for ADV (Wekerle et al., 2009; Jonson-Reid, Scott Jr., McMillen, & Edmond, 2007; Hamby et al., 2012). Jonson-Reid et al. (2007) found a significant association between posttraumatic stress disorder, drug use, child sexual abuse and ADV victimization among CPS-involved youth in a US state (Missouri). However, little work on CPS youth in the area of ADV has occurred, relative to adolescent high school survey of ADV.

It is important from service providers' perspective to understand the ADV trajectory among CPS-involved youth. Maltreatment and Adolescent Pathways (MAP) Longitudinal Study is a study of CPS-involved youth in the Canadian province of Ontario, and provided the unique opportunity to examine the ADV during the two-year study period.

Methods

Sample

The data for this study are from the MAP, a study of randomly selected youth from the active caseload of a large urban child welfare catchment area in Ontario targeting mid-adolescent youth at intake (between 14 and 17 years of age). The overall recruitment rate for the MAP is about 70%. About 60% of the study sample have had parental rights terminated (Crown Ward of the province of Ontario, similar to Ward of the State in the US). Although this status is terminated at age 18, most youth are maintained

on extended care contracts providing, typically, caseworker monitoring and financial support for living in foster or group home, or independent living until age 21. For all youths, a regular caseworker in-person visits (every 90 days), access to CPS service programs, and referral to other services constitutes standard care. The detailed description of MAP youth is found in other publications (Goldstein et al., 2011; Tanaka, Wekerle, Schmuck, Paglia-Boak, & the MAP Research Team, 2011; Wekerle et al., 2009; Weiss, MacMullin, Waechter, Wekerle, & the MAP Research Team, 2011). Of the 561 youths who completed initial data collection, 345 (61.5%) completed the ADV measurement; most of which (n=341) reported having begun dating and reported on current or recent (past 3 months) dating partner. Following the initial data collection, follow-up assessments were conducted at 6, 18, and 24 months. Ethical approval was obtained from CPS agencies and the affiliated university research ethics boards.

Measurement

The Conflicts in Adolescent Dating Relationship Inventory (CADRI; Wolfe, Wekerle, Scott, Straatman, & Grasley, 2004; Wolfe, Scott, Reitzel-Jaffe, Wekerle, Grasley & Straatman, 2001) is a self-report measure that asks about the perpetration and victimization of ADV and contextual information. It asks respondents about a conflict or an argument that they have had with a current partner or an ex-partner in the past 12 months. A dating relationship is defined for respondents as longer than two weeks. The CADRI has strong internal consistency, two-week test-retest reliability, and acceptable partner agreement (Wolfe et al., 2001). A short-form (Wekerle, Wolfe, Hawkins, Pittman, Glickman, & Lovald, 2001) uses 7 items asking about verbal/emotional abuse (1 item), physical abuse (3 items), threat (2 items), and sexual abuse (1 item). Each item consists of a question to respond to as a perpetrator (e.g., “I said things just to make my partner angry”) and as a victim (e.g., “My partner said things just to make me angry”). Participants were asked to choose one response for each item from: (0) Never; (1) Seldom (1-2 conflicts); (2) Sometimes (3-5 conflicts); and (3) Often (6 or more conflicts). For the initial time point, the questions spanned the prior 12 months. At 6, 18, and 24 months, the

questions queried the prior 6 months (i.e., since the last assessment point). At 18 months, the timeframe was the prior 12 months. The internal consistency in study sample was $\alpha=0.56$ for both victimization and perpetration.

Total perpetration score is the sum of response options for the 7 ADV perpetration items (ranged 0-21). The same method is also used to create a total victimization score. For each item, we also created a dichotomous classification for presence (=1) or absence (=0) of the specific act by applying the following cut-point on response options (0-3): presence if responses were “sometimes” or “often”, and absence if responses were “never” and “seldom”. Then we created overall perpetration and victimization indicators: if a respondent had at least one perpetration item coded as present, he/she was defined as experiencing ADV perpetration (=1). Similarly, if a respondent had at least one victimization item coded as present, he/she was defined as experiencing ADV victimization.

As ADV is typically operationalized as a single time point assessment about the past 12 months, we explored an alternate method that takes into account the repeated ADV experience as either perpetrator or victimization across the four of the MAP data points during two years (i.e., initial, 6, 18, and 24 months). We created a count of times ADV was reported, from 0 to 4, across four data points for two years.

Demographics variables that were assessed at initial time self-report are age, gender (1=male, 0=female), and CPS service types (Crown or non-Crown), and length of CPS involvement. Non-Crown status includes Society Ward (parental rights sharing agreement), Community Family/Temporary Care, and Voluntary Care. Ethnicity was assessed for the following categories: White, Black, Native, Multiethnic, and other.

Analyses

We examined the endorsement of each ADV item, overall prevalence and total scores for ADV perpetration and victimization. We tested for group difference (gender, Crown vs. non-Crown) by t-test for continuous variables (ADV scores) and chi-square test for dichotomous variables (% for ADV

endorsement) with a significance level of 5%. We also compared older youth and younger youth within the Crown status to assess the consistency of patterns. Finally, using a longitudinal subsample, we assessed the number of times ADV was reported across four data points. We used chi-square test to examine the group differences by CPS status.

Results

The average age of study sample was 15.8 years (SE: 1.1), 46.0% were male, 29.0% were White, and 26.7% were multiethnic. 60.1% had Crown Ward status, and the average length of being in the CPS services is 5.4 years (SD: 4.1). Sample characteristics by Crown versus non-Crown appear in Table 1. There were significant group differences in assessed variables, except for the % White (Table 1). 341 youth were analyzed for the main analyses, and a subset of 110 youth was used for the preliminary longitudinal analysis.

Table 2 showed the endorsement of ADV items for males and females. The highest endorsement was on Verbal /Emotional abuse item and lowest was on sexual abuse item. There was no significant gender difference in the % ADV perpetration, victimization, as well as total scores.

Table 3 show the endorsement of ADV items for Crown youth versus non-Crown youth for males (Table 3a) and females (Table 3b). The endorsement pattern was similar to Table 2. Among males, while there was no significant difference between CPS status in the % ADV perpetration, % ADV victims was higher for non-Crown youth compared with Crown youth. Total scores for both perpetration and victim were also significantly higher for non-Crown youth compared with Crown youth. There was no significant CPS status difference among females.

Our preliminary analyses of the subset of longitudinal data, where information about ADV were available at all data points (n=110), showed that 33.6% of youth have never been exposed to ADV at initial data collection and throughout the two-year follow-up. There were 20.0%, 21.8%, 15.5%, and 9.1% of youth who reported ADV once, two times, three times, and four times, respectively, during the two-year follow-up. Table 4 provides the breakdown of

results by gender and by Crown status. Compared with Crown youth, non-Crown youth had a larger % for youth who reported ADV twice or more; however group difference was not significant for both sexes.

Discussion

Although direct comparison of prevalence of ADV across studies is difficult due to methodological differences, we found the similar prevalence of both ADV perpetration and victimization between MAP males and females, consistent with previous reports (Wekerle & Wolfe, 1999; Haynie et al., 2013). The ADV prevalence was significantly higher among non-Crown male youth than Crown male youth (i.e., foster care), while it was not significant among females.

Youth in Crown and those in non-Crown differ in several ways, which may have influenced the higher ADV endorsement for non-Crown youth versus Crown youth. Crown youth had a significantly longer length of CPS involvement compared with non-Crown youth and they may have been able to obtain longer term placements than non-Crown youth in various types of care. The average age of entering the CPS for MAP Crown youth was 9.4 years old, while that for non-Crown youth is around 12.7 years old. Early intervention and protection of children into continuous care may have been a protective factor for developing abusive dating relationship, providing support prior to the early adolescent years where dating begins most typically (Wekerle et al., 2001).

Among studies of child placement within child welfare systems, a US study reported that a large portion (76%) of foster home placement disruptions occurred due, at least in part, to foster parents' unwillingness to continue fostering, with most common reason being foster parent's inability to tolerate children's behavioral or emotional problems (Zinn, DeCoursey, Goerge, & Courtney, 2006). These children are then likely to be placed to group home settings (Ryan, Marshall, Herz & Hernandez, 2008). Another US study that employed the propensity score matching procedure, which minimizes the selection bias, to compare levels of delinquency between youth in group home and those in foster care settings (n=8226, aged 7-16 years). Authors of this study found that youth with at least one group home

Table 1: Characteristics of sample who began dating at initial (n=341)

	Crown n=205	Non-Crown n=136
Age, Mean (SE)	16.2 (0.1)	15.5 (0.1)***
Male, %	51.7	37.5*
Ethnicity (% White vs. not)	26.8	32.4
(% Multiethnic vs. not)	31.7	19.1*
Length of involvement with CPS, Mean (SE)	6.8 (0.3)	2.8 (0.3)***

*p<.05, **p<.01, ***p<.001

CPS= child protection services, SE = standard error

Table 2: Conflict in Adolescent Dating Relationships Questionnaire item endorsement by sex

Items	Male (n=157)		Female (n=184)	
	Perpetrators (%) ^a	Victims (%) ^a	Perpetrators (%) ^a	Victims (%) ^a
(V/EA) I said things just to make my partner angry	30.6	33.8	23.4	29.9
(PA) I kicked, hit, or punched my partner	8.9	4.5	6.0	6.5
(PA) I slapped my partner or pulled my partner's hair	5.7	5.1	2.2	4.4
(Threat) I threatened to hurt my partner	8.3	6.4	2.7	3.3
(Treat) I threatened to hit or throw something at my partner	8.9	5.1	4.4	3.3
(PA) I pushed, shoved, shook, or pinned down my partner	7.6	8.3	5.4	4.9
(SA) I threatened my partner in an attempt to have sex	0.0	1.3	0.5	2.2
Any (at least one ADV item is present), % ^b	36.9	28.3	35.7 n.s.	32.6 n.s.
Total scores, 0-21 (SE) and test statistics ^c	2.27 (0.26)	2.25 (0.30)	1.80 (0.22) n.s.	1.90 (0.23) n.s.

V/EA= verbal or emotional abuse subscale; PA = physical abuse subscale; Threat = threatening behavior; SA = sexual abuse subscale; SE = standard error

n.s. not significant at 5% level

For victimization item, replace "My partner" with "I" and "me" with "my partner" to reverse the direction

^a Percentages are based on the cut-point on the frequency: 0, 1=absence and 2,3=presence

^b Chi-square test of gender difference for any perpetration (%) and any victimization (%)

^c t-test of gender difference for perpetration score and victim score

Table 3 (a): Conflict in Adolescent Dating Relationships Questionnaire item endorsement by CPS status for males

	Crown (n=106)		Non-Crown (n=51)	
	Perpetrators (%) ^a	Victims (%) ^a	Perpetrators (%) ^a	Victims (%) ^a
(V/EA) I said things just to make my partner angry	26.4	29.3	39.2	43.1
(PA) I kicked, hit, or punched my partner	4.7	3.8	17.7	5.9
(PA) I slapped my partner or pulled my partner's hair	1.6	2.8	15.7	9.8
(Threat) I threatened to hurt my partner	0.9	2.8	17.7	13.7
(Treat) I threatened to hit or throw something at my partner	3.8	2.8	19.6	9.8
(PA) I pushed, shoved, shook, or pinned down my partner	3.8	4.7	15.7	15.7
(SA) I threatened my partner in an attempt to have sex	0.0	0.9	0.0	2.0
Any (at least one ADV item is present), % ^b	33.0	30.2	45.1 n.s.	47.1*
Total scores, 0-21 (SE) and test statistics ^c	1.63(0.21)	1.75 (0.29)	3.59 (0.65)**	3.27 (0.68)*

*p<.05, **p<.001

^{n.s.} not significant at 5% level

V/EA= verbal or emotional abuse subscale; PA = physical abuse subscale; Threat = threatening behavior; SA = sexual abuse subscale; SE = standard error

For victimization item, replace "My partner" with "I" and "me" with "my partner" to reverse the direction

^a Percentages are based on the cut-point on the frequency: 0, 1=absence and 2,3=presence

^b Chi-square test of group difference (Crown vs. non-Crown) for any perpetration (%) and any victimization (%)

^c t-test of group difference (Crown vs. non-Crown) for perpetration score and victim score

Table 3 (b): Conflict in Relationships Questionnaire item endorsement by CPS status for females

	Crown (n=99)		Non-Crown (n=85)	
	Perpetrators % ^a	Victims % ^a	Perpetrators % ^a	Non-Crown % ^a
(V/EA) I said things just to make my partner angry	25.3	28.3	21.2	31.8
(PA) I kicked, hit, or punched my partner	4.0	4.0	8.2	9.4
(PA) I slapped my partner or pulled my partner's hair	1.0	4.0	3.5	4.7
(Threat) I threatened to hurt my partner	2.0	3.0	3.5	3.5
(Treat) I threatened to hit or throw something at my partner	4.0	3.0	4.7	3.5
(PA) I pushed, shoved, shook, or pinned down my partner	4.0	4.0	7.1	5.9
(SA) I threatened my partner in an attempt to have sex	0	1.0	1.2	3.5
Any (at least one ADV item is present), % ^b	27.3	31.3	29.4 n.s.	34.1 n.s.
Total scores, 0-21 (SE) and test statistics ^c	1.71(0.29)	1.73 (0.27)	1.91 (0.32) n.s.	2.11 (0.37) n.s.

V/EA= verbal or emotional abuse subscale; PA = physical abuse subscale; Threat = threatening behavior; SA = sexual abuse subscale; SE = standard error

^{n.s.} not significant at 5% level

For victimization item, replace "My partner" with "I" and "me" with "my partner" to reverse the direction

^a Percentages are based on the cut-point on the frequency: 0, 1=absence and 2,3=presence

^b Chi-square test of group difference (Crown vs. non-Crown) for any perpetration (%) and any victimization (%)

^c t-test of group difference (Crown vs. non-Crown) for perpetration score and victim score

Table 4: Reporting dating violence across times among longitudinal sample (n=110^a)

Number of times ADV reported	Crown male	Non-Crown male
		N=35, %
No ADV	42.9	20.0
1 time ADV	20.0	20.0
2+ time ADV	37.1	60.0
	Crown female	Non-Crown female
	N=27, %	N=28, %
No ADV	37.0	28.6
1 time ADV	22.0	17.9
2+ time ADV	41.0	53.5

ADV = adolescent dating violence

^aLongitudinal sub-sample: began dating at initial time and information about dating status is available at all follow-up points

There was no significant difference between Crown and non-Crown in the number of ADV reporting overall and by males and females separately based on Chi-square tests.

placement had 2.5 times higher levels of delinquency compared with matched youth in foster care (Ryan et al., 2008). Furthermore, a Canadian study with child welfare sample (n=1063, aged 10-17 years) used multilevel analyses to examine the contextual effects on youth's externalizing behavior. This study found that while majority (72%) of externalizing behaviors was explained by youth's individual characteristic, 18% were explained by the care types – relative to children in regular foster care, those in group care displayed significantly higher levels of problem behaviors (Cheung, Goodman, Leckie, & Jenkins, 2011). Our findings together with these earlier reports provide

insights into possible contextual effects of group care settings that negatively influence youth's relationship skill development. More studies should investigate contextual and process factors within group care settings that may hinder youth's healthy development. Achieving permanency in status (i.e., Crown Wardship) and in residency requires further attention as a potential resilience process, although such mechanisms of action are not yet determined.

Implications

Given the high prevalence of violence in adolescent dating relationships and serious health concerns

and high-risk sexual behaviors associated with ADV, healthcare providers who treat adolescents are expected to familiarize themselves with ADV and available local resources to support those youth being involved with ADV (Cutter-Wilson & Richmond, 2011; Omer, 2004). ADV screening and promoting healthy relationships may also need to be a priority to support youth safety as part of the protection mandate of child welfare. Although CPS's primary focus is to protect youth from harmful parenting, for protecting youth from all types of abusive interpersonal relationships, it is important to include ADV prevention and promotion of healthy relationship while youth are under the CPS care.

The limitations of this study include the difficulty to follow up study youth for a long period, thus our analyses for longitudinal data with reduced sample should be considered preliminary. Despite this, this study added information about possible relationships between CPS service types and adolescent ADV in Canadian child welfare context.

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