Teen Dating Violence and Substance Use: Challenges to Collecting and Using Data to Inform Prevention Strategies

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The Delaware State Epidemiological Outcomes Workgroup (SEOW), formerly known as the Drug and Alcohol Tracking Alliance (or DDATA) is charged with providing assessments on gaps in services and programs for Delaware residents across the lifespan, as well as gaps in research and data to inform these services. This Gap Report discusses the importance of – and the challenges associated with – collecting meaningful data regarding teen dating violence (TDV) to inform prevention and intervention practices and policies.

Teen Dating Violence: Definition and Prevalence, Related Adverse Consequences, and Prevention and Intervention Programming in Delaware

Definition & Prevalence

Teen dating violence (TDV) is generally conceived as physical, emotional, verbal, psychological, or sexual abuse perpetrated by an adolescent against another adolescent with whom they are in a dating/romantic relationship (Offenhauer & Buchalter, 2011; Taylor & Mumford, 2016). It is broadly recognized that there are three commonly studied subtypes of TDV: psychological/emotional abuse, physical abuse, and sexual abuse. Psychological/emotional abuse, in the context of TDV, includes any act in which an adolescent insults, belittles, or says things to hurt the feelings of their partner, damages items belonging to their partner, blames their partner for things that were not their fault, and tries to control their partner’s activities. Physical abuse includes pushing, shoving, scratching, slapping, hitting, choking, and threatening physical harm. Sexual abuse refers to unwanted sexual experiences and these could include kissing, touching, fondling, verbal pressure to have sex, physical force to have sex, and sex when the victim is incapacitated from the use of alcohol or drugs or for other reasons, and therefore is not able to provide consent.
Unfortunately, however, TDV’s operational definition (which refers to how researchers measure a phenomenon in surveys) has been inconsistent across studies. The lack of a consistent operational definition of TDV has contributed to variations in prevalence estimates. In addition to variations in defining and operationalizing TDV, many studies have utilized different reference periods (i.e., lifetime history versus past 12 months) when collecting data on TDV, or have not distinguished among different subtypes of abuse (i.e., emotional, physical, and sexual).

Prevalence estimates also vary by the scopes of study samples. Nationally representative data sources (e.g., National Crime Victimization Survey [NCVS], Catalano, 2012; Youth Risk Behavior Survey [YRBS], CDC, 2012) tend to report lower prevalence rates of TDV, as opposed to local or regional studies (Hickman, Jaycox, & Aronoff, 2004). This could be because nationally representative samples typically include fewer questions to capture TDV, may not differentiate between TDV types, and use shorter reference periods, whereas local and regional studies often utilize instruments specifically designed to collect data on TDV, such as a modified Conflict Tactics Scale (CTS, O’Keefe, 1997) and the Safe Dates survey. Due to the variations in collecting data on TDV, prevalence estimates vary between 9.4% (YRBS, CDC, 2012) to 69% (National Survey on Teen Relationships and Intimate Violence [STRiV], Taylor & Mumford, 2016). Furthermore, most likely due to the inconsistencies in TDV data collection, research identifying the risk and protective factors of TDV is largely inconsistent (Hickman et al., 2004).

In addition, when data is collected on TDV, there is limited data collected on the correlates believed to impact TDV. For instance, much of the research on TDV does not collect data on the presence of alcohol and drugs in abuse incidents, even though research suggests alcohol and/or drug use is a risk factor for TDV (World Health Organization, 2006). Although nationally representative surveys that address TDV typically have multiple variables that can be considered in correlation to TDV - and thus would be useful in identifying disparities and developing prevention and intervention strategies – the definitions of TDV provided in these instruments are less comprehensive than the more in-depth questions used to capture TDV in single, focused studies, such as STRiV and Safe Dates (Taylor & Mumford, 2016; Foshee et al., 1998). Conversely, single studies on TDV often do not collect information on the correlates of TDV.

As a logical consequence, to date, there has been limited data collected identifying subgroups that are at higher risk for TDV. Among what is known, Dank and colleagues found that lesbian, gay, and bisexual teens are at greater risk for experiencing TDV than their heterosexual counterparts (Dank, Lachman, Zweig, & Yahner, 2013). Another study utilizing the YRBS, but only examining physical violence in a dating relationship and sexual violence overall (e.g., DSV), found that Black and Hispanic youth had higher prevalence of DSV than White youth (Boothe, Wilson, Lassiter, & Holland, 2014). Lastly, high school students with disabilities were more likely to report TDV than youth without disabilities (Mitra, Mouradian, & McKenna, 2013).
**Related Adverse Consequences**

Regardless of the data challenges, it is recognized that TDV is a ubiquitous public health concern that has both short- and long-term adverse effects. Available data indicate that TDV is associated with mental, physical, and interpersonal problems that manifest at earlier and later points throughout the lifespan. For instance, adolescents who experience TDV are more likely than their peers to use alcohol and other substances (Roberts & Klein, 2012), have unhealthy weight control (Ackard & Neumark-Sztainer, 2002), suicide attempts (Choido et al., 2012), depression (Exner-Cortens, Eckenrode, & Rothman 2013), risky sexual behavior (Hanson, 2012), and poorer mental and physical health overall (Howard, Wang, & Yan, 2007). Other research has found that students who have experienced TDV were more likely to report missing school because they felt unsafe, being threatened or injured with a weapon on school property, having a physical fight at school, or being bullied on school property (Vivolo-Kantor, Olsen, & Bacon, 2016). In terms of impact in adulthood, TDV appears to be a risk factor for either being the victim or perpetrator of intimate partner violence in adult relationships (Arriaga & Foshee, 2004; Berkowitz, 2010; Exner-Cortens et al., 2013; Foshee et al., 2015; Gomez, 2011; Halpern et al., 2009; O’Keefe 1997; Taylor & Mumford, 2016).

**Implications for Prevention & Intervention Programming in Delaware**

Understanding the overall and subgroup prevalence of and risk and protective factors for TDV is paramount to developing adequate and effective prevention and intervention programming. Data should be used to support the need as well as evaluate the effectiveness of prevention programming. The Delaware Coalition Against Domestic Violence compiled a list of teen dating violence prevention programming currently implemented in Delaware. These programs address TDV prevention as well as other “cross-cutting” factors that are empirically connected to TDV, such as those listed in the paragraph above. Overall, multiple CSAP prevention strategy types are implemented through these programs, such as prevention education, community based processes, alternative activities and environmental strategies. And, noted in the third column of the table n Appendix A, the goals of the specific programs are provided. For more information about the TDV prevention programs, please refer to Appendix A (page 9).

The YRBS, collected across the nation in participating states, including Delaware, is utilized in research to determine the prevalence and correlates of TDV, including which subgroups are at higher risk. These data can support the implementation of prevention focused programs by demonstrating the need of services for high school age youth. There is an increasing global emphasis on utilizing data to drive prevention and intervention practices. In fact, one of the goals of the State Epidemiological Outcomes Workgroup, a component of the state’s Strategic Prevention Framework – Partnerships for Success (SPF-PFS) is to use Delaware data sources in the planning, implementation, and adaptations to programming. Thus, the YRBS – which can be used to identify the prevalence of TDV overall, by subgroup, and its correlates – can inform data driven decisions about TDV prevention and intervention strategies in Delaware.

**Data Specific to Delaware Youth**

Funding for this project (SP020704) has been provided by the Department of Health and Social Services, Division of Substance Abuse and Mental Health - State of Delaware through a grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) - CFDA 93.243.
The following data are from the 2015 Youth Risk Behavior Survey of Delaware public high school students based on the CDC survey administered in many states throughout the U.S. The high school survey, conducted by the University of Delaware Center for Drug and Health Studies on behalf of the Delaware Division of Public Health, is administered every other year in odd-numbered years to a random and representative sample of 9-12th grade students. The Center develops the Delaware version of the survey with input from state and community agencies.

The high school version of the YRBS administered in Delaware, included the following three questions to collect data on TDV:

- During the past 12 months, how many times did someone you were dating or going out with say things to you or say things to other people about you to purposely hurt you?
- During the past 12 months, how many times did someone you were dating or going out with physically hurt you on purpose? (Count such things as being hit, slammed into something, or injured with an object or weapon.)
- During the past 12 months, how many times did someone you were dating or going out with force you to do sexual things you did not want to do? (Count such things as kissing, touching or being physically forced to have sexual intercourse.)

The six response categories for each question were: I did not date or go out with anyone during the past 12 months; 0 times; 1 time; 2 or 3 times; 4 or 5 times; or 6 or more times.

For the data presented below, we have only included respondents who indicated that they had dated or gone out with someone within the past twelve months. TDV victimization was recoded into three categories: 0 times; 1 times; 2 or more times, although “times” was relabeled in the tables below to “incidents.”

This report is a product of the SEOW, which focuses specifically on substance use and related factors, including violence. In the Spring of 2016, the SEOW highlighted the importance of focusing not only on substance use but on cross-cutting factors, such as violence, when discussing substance use. As previously mentioned, there is a wide range of associated adverse consequences from experiencing TDV. This report focuses on the relationship between TDV and substance use.

Particularly, this report highlights the percentage of high school students in Delaware that have experienced TDV (e.g., emotional, physical, and sexual) and reported lifetime illicit drug use, and past month cigarette, alcohol, marijuana, and non-prescribed prescription drug use. In addition, this report highlights the prevalence of heavy substance use and TDV. Regarding the level of drug use, for alcohol use this refers to the number of days within the past 30 days that the respondent used alcohol. Responses were coded: 0 days, 1-9 days, 10-19 days, and 20 or more days. For marijuana and non-prescribed prescription drug use, the Delaware YRBS asks respondents how many times they used.

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1 All but the category of illicit drugs, which the Delaware YRBS collects only lifetime use, reports on the past month use of substances.

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the substance within the past month with a range of available responses that have been recoded as: 0 times, 1-9 times, 10-19 times, 20 or more times.

**Rate of TDV**

Seventy-one percent of the high school students in the sample reported that they dated within the past 12 months. Among 1,684<sup>2</sup> students who responded that they had been in a dating relationship during the past twelve months, 73 percent of these respondents did not experience any TDV, while 8 percent experienced one incident of TDV, and 19 percent experienced two or more incidents of TDV.

![Percentage of Delaware high school students, who dated in the past 12 months, reporting they had experienced TDV (2015)](#)

<table>
<thead>
<tr>
<th></th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No incidents</td>
<td>73.3</td>
</tr>
<tr>
<td>1 incident</td>
<td>7.5</td>
</tr>
<tr>
<td>2 or more incidents</td>
<td>19.2</td>
</tr>
</tbody>
</table>

**Rates of specific subtypes of TDV**

Of those who experienced TDV, approximately half experienced only emotional abuse, 9 percent experienced only physical abuse, 8 percent experienced only sexual abuse. Almost one-third (30%) experienced either two or all subtypes of abuse.

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<sup>2</sup> This analysis is based on weighted data provided by 1,684 students who responded that they had been in a dating relationship during the past twelve months, and who had responded to all of the questions relevant to the TDV and substance use presented in this report.

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Substance use and TDV

The findings illustrate that students who have experienced TDV in Delaware, especially those who experienced TDV more than one time, are at heightened risk for substance use. Sixty-two percent of teens who had experienced two or more incidents of TDV reported current use of alcohol; 46% reported current use of marijuana, 18% reported current use of a prescription drug that they had not been prescribed, 26% reported current cigarette smoking, and 30% reported current use of illicit drugs.

Students who had experienced TDV were at much greater risk for heavy substance use. Among students who reported multiple incidents of TDV, 6.1% reported heavy alcohol use, compared to 0.5% of students with no incidents; 15.1% reported heavy marijuana use, compared to 6.6% of students with no incidents; 30.1% reported heavy use of illicit drugs, compared to 10.3% of students with no incidents.

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use, compared to 7.6%; and 8.5% reported heavy use of prescription drugs that they had not been prescribed, compared to 0.2%.

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Conclusion

- Among Delaware public high school students who reported dating or being in a relationship with someone within the past 12 months, more than one in four experienced some form of TDV. This is quite possibly a conservative estimate, due to the limited number and type of questions asked on this survey.
- Emotional abuse was the most commonly reported subtype of TDV, although nearly one in three students who reported experiencing TDV reported experiencing two or all three types of abuse.
- Finally, students who report experiencing TDV are at greater risk for all types of substance use, including heavy use.

(Although not depicted here, similar results were found even when broken down by subtype of TDV (i.e., emotional, physical, and sexual)).

It is important to note that based on this data source (DE High School YRBS) we cannot draw the conclusion that TDV leads to higher rates of substance use, or that substance use causes higher rates of TDV. But the correlations exist, and these issues warrant further investigation. Additional research to identify subgroups of teens that may be at increased risk is also needed, so that prevention and intervention programs are strategically developed and implemented.
## Appendix A

### Teen Dating Violence Prevention Programming in Delaware

*Prepared by the Delaware Coalition Against Domestic Violence for the University of Delaware, Center for Drug and Health Studies (CDHS)*

<table>
<thead>
<tr>
<th>Program/Service</th>
<th>Description</th>
<th>Organization Contact</th>
<th>Data/Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Project PIN</strong></td>
<td><strong>Project PIN (Performing, Informing, Norming),</strong> a partnership between the Delaware Coalition Against Domestic Violence and Art Fusion, Inc., is a strength-based school and community-level prevention strategy grounded in prevention research and best practice. The 2-part program uses an interactive bystander intervention theater performance to collect data that communities can then use to create effective, culturally-specific, community-relevant messaging to promote positive social norms around gender equality, respect, and healthy relationships.</td>
<td><a href="http://www.dcadv.org">www.dcadv.org</a></td>
<td>• Norms around prosocial bystander behaviors</td>
</tr>
<tr>
<td><strong>Safe + Respectful</strong></td>
<td>Safe+Respectful is a strategy aimed at affecting structural determinants of health in a Delaware neighborhood with a history of systemic adversity and individual, community, and historical trauma. The strategy is a multi-level outreach effort that seeks to address community violence through youth engagement and education, community engagement, and building healthy youth and adult partnerships. Although still in an initial stage of implementation, the strategy offers a model for and early insight into the experience of implementing and evaluating a neighborhood-based structural determinants of health intimate partner violence prevention strategy which also addresses shared impact on multiple forms of violence (teen dating, sexual violence, youth violence, child maltreatment, elder abuse, suicide, etc.).</td>
<td><a href="http://www.safeandrespectful.org">www.safeandrespectful.org</a> <a href="http://www.childinc.com">www.childinc.com</a></td>
<td>• Indicators – rates of relationship violence, community violence • Improving community conditions • Community Connectedness • Youth Leadership and Prosocial Behaviors</td>
</tr>
<tr>
<td><strong>REAL Relationships</strong></td>
<td>The REAL Relationships program operated by People's Place is partnering with the Delaware Adolescent Program, Inc. (DAPI), a statewide social service and education program that provides an alternative education setting for pregnant and/or parenting girls between the ages of 12-19. DAPI has agreed to serve as the implementation setting for testing organizational policy and practice strategies that are trauma-informed and prevent dating and domestic violence. The partnership is primarily concentrated on efforts at DAPI’s two downstate sites: Camden (Kent County) and Georgetown (Sussex County). The overall goal is to support and facilitate review, adoption, and</td>
<td><a href="http://www.realrelationships.sde.org">www.realrelationships.sde.org</a> <a href="http://www.peoplesplace2.com">www.peoplesplace2.com</a></td>
<td>• Organizational policies and practices around response to and prevention of teen dating violence • Staff’s knowledge of TDV • Staff efficacy with supporting students around TDV</td>
</tr>
</tbody>
</table>

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### Healthy Relationships Units of Instruction

Operationalization of organizational policies and practices that reflect best practice for the primary prevention of dating violence among DAPI students. Efforts are comprehensive; reach across all layers of the social ecology, and include a whole school (organization) approach that seeks to promote a positive school environment.

<table>
<thead>
<tr>
<th>Youth knowledge of TDV</th>
</tr>
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</table>

This standards-based curricula is learning focused and includes units for grades 6-8 and 9-12. The units and evaluation tools can be accessed on the Health Education Model Units of Instruction section of the Delaware Department of Education website. The Healthy Relationships Curricula is designed to meet health education regulations that now require interpersonal violence prevention programming, and help schools comply with the Liane Sorenson Act (14 Del.C. §4112E. School teen dating violence and sexual assault act), which requires comprehensive healthy relationships programming in schools for grades 7-12.

<table>
<thead>
<tr>
<th>Youth knowledge, attitudes, and beliefs that support and promote healthy relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth efficacy with setting boundaries</td>
</tr>
<tr>
<td>Youth advocacy skills for promoting a respectful environment</td>
</tr>
</tbody>
</table>

### DCADV By-Request Trainings

The Training & Prevention Department of the Delaware Coalition Against Domestic Violence provides by-request trainings to a wide variety of audiences, such as youth and practitioners in schools, camps, churches, community/service groups, juvenile detention, etc. Trainings cover a range of topics, such as teen dating violence, healthy relationships, trauma/resilience, media literacy, gender stereotypes, boundaries, communication, bystander intervention, and the intersection of teen dating violence and other issues (teen pregnancy, substance abuse, bullying, suicide, etc.) Practitioner materials and training are offered in the “Hanging Out or Hooking Up?” evidence-based model that prepares practitioners to provide universal education on healthy teen relationships, screen and assess for teen dating violence, sexual violence and reproductive coercion, and provide “warm” referrals to dating violence advocacy and services.

| Youth knowledge of TDV and related concepts |
| Practitioner knowledge of TDV |
| Practitioner confidence of implementing H0/HU protocol |

### Delaware MEN (Men's Education Network)

Delaware MEN (Men's Education Network) is a collaboration of campus, military, neighborhood and community-based organizations working to develop and sustain best practices for engaging men and boys in sexual, domestic and dating violence prevention. Delaware MEN works to address the aspects of unhealthy masculinity which hurt everyone, of any gender, in our community.

| Organizational capacity to engage men/boys in violence prevention (DV/SV/TDV); |

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| Prevention Education | Community, while promoting a healthy masculinity which not only helps to prevent sexual and dating violence, but allows for men to live healthy, full lives. Delaware MEN is part of the outreach and prevention efforts of the Delaware Coalition Against Domestic Violence (DCADV). DCADV provides training and technical assistance to Delaware MEN partner organizations in order to assist their efforts, as well as provides a collaborative space for discussion and support of partner organization work. | • Collective ability to engage men/boys in violence prevention;  
• Adherence to the nine key principles of effective prevention (Nation et al). |
| --- | --- | --- |
| Jewish Family Service’s Prevention Education Programs engage small groups of youth (ages 12-25) in discussions, activities, and projects that address risky or destructive behaviors in empathetic, authentic, and non-judgmental ways. | https://www.jfsdelaware.org/youth-advocacy/prevention-education/#preventieducationmore | • Youth knowledge of topics such as dating, sexual violence, or substance abuse  
• Youth ability to identify and reduce risk factors in the individual, family, school, peer group, neighborhood/community and society/media  
• Youth communication and technological skills to share pro-social messages with their peer group in an appropriate and accessible video medium |
| ESTEEM | The ESTEEM package addresses many of the issues our youth face today. Doing so in an atmosphere of acceptance and invitation allows youth to learn about themselves and how they relate to the world around them, empowering them with a voice to make their needs known and be a part of the solution! Schools and organizations can build their ESTEEM program, choosing, from our offerings, the workshops that most relate to the youth they serve. Current offerings in the ESTEEM package include: Character Building, Self-awareness and respect, Problem solving skills/decision making, Leadership, Conflict resolution/relational | www.ywcade.org  
www.ppde.org  
DVCC | Contact agency for more info. |

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| **Sexuality Education Training Institute (SETI)** | The SETI of Planned Parenthood of Delaware provides age and culturally appropriate programs that are designed to fit the specific needs of the school and community. | https://www.plannedparenthood.org/planned‐parenthood‐delaware/local‐training‐education/local‐education‐outreach#sthash.6tGTJXXb.dpuf | Contact agency for more info. |
| **Sexual Assault Network of Delaware (SAND)** | SAND facilitates sexual assault community service coordination, and takes part in legislation tracking, policy recommendations, education and training, and prevention. | http://www.contactlifeline.org/sand/ | Contact agency for more info. |

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