

Dating Violence and Psychosocial Risk Correlates Among District of Columbia Adolescents: The Syndemic Relationship

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BACKGROUND

- Violence between partners often begins in adolescents when individuals begin dating – making adolescents an appropriate focus for primary prevention (Avery-leaf, et al., 1997)
- Physical dating violence (DV) and sexual violence (SV) victimization among adolescents can result in negative physical and mental health consequences (Coker et al., 2002)
- Prior national research has demonstrated an association between psychosocial risk correlates and DV/SV victimization (Silverman, et al., 2001; Swahn, et al., 2009; Yan, et al., 2010; Howard et al., 2007; Howard et al., 2008)
- But, studies have not examined the extent of these associations among D.C. adolescents
- D.C. has a higher prevalence of DV (17%) compared to the national average (10%); slightly higher prevalence of SV (9% v. 8%) (Centers for Disease Control and Prevention (CDC) Youth Risk Behavior Survey (YRBS), 2007)

OBJECTIVES

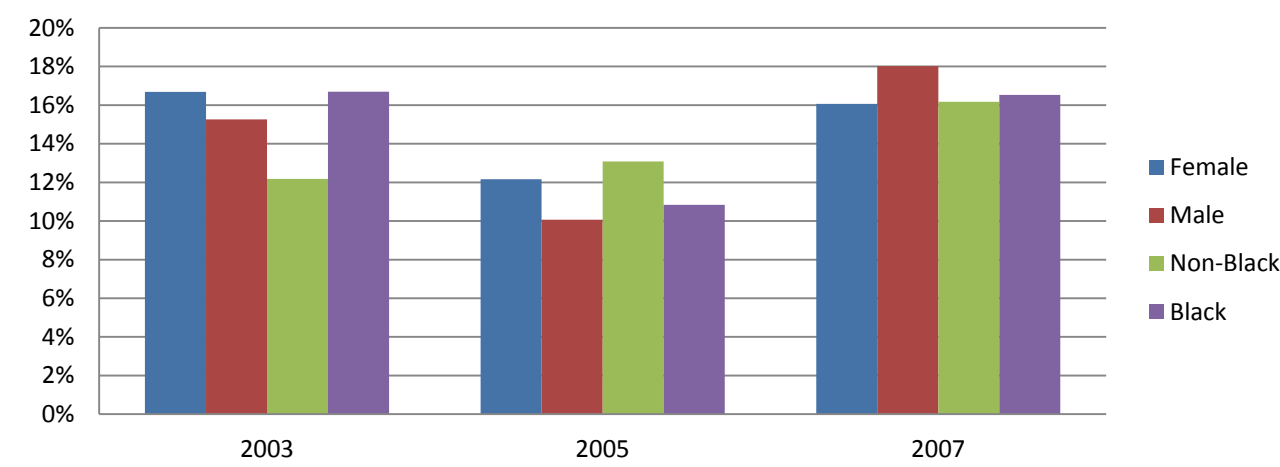
- Identify psychosocial risk correlates associated with DV and SV among adolescents in D.C.
- Assess the risk correlates for adolescents in this region to facilitate the development of primary prevention interventions to reduce the health consequences of DV/SV

METHODS

- Ninth through twelfth grade adolescents in D.C. who completed the 2003, 2005, or 2007 CDC YRBS (n=5,474)
- Bivariate and multivariate logistic regression was used to assess DV/SV victimization with risk correlates (i.e., other violence, psychological well-being, substance use, and sexual risk behaviors)
- Dummy variables for 2005 and 2007 were included to control for time (ref=2003)

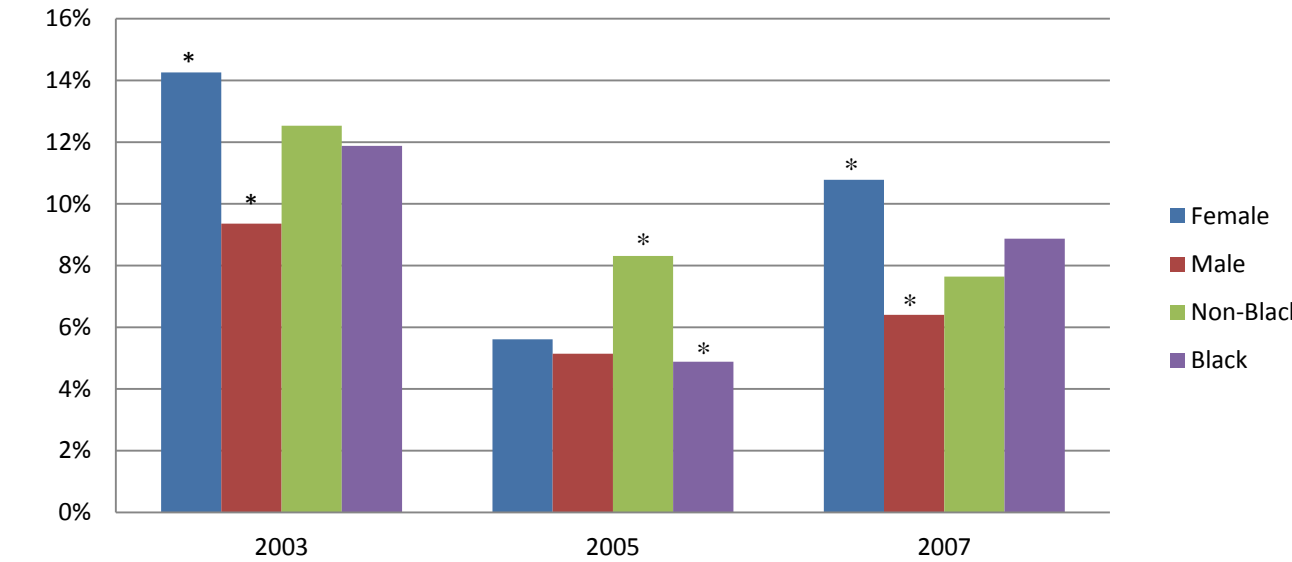
FINDINGS

Physical Dating Violence Victimization Prevalence (Past 12 Months)



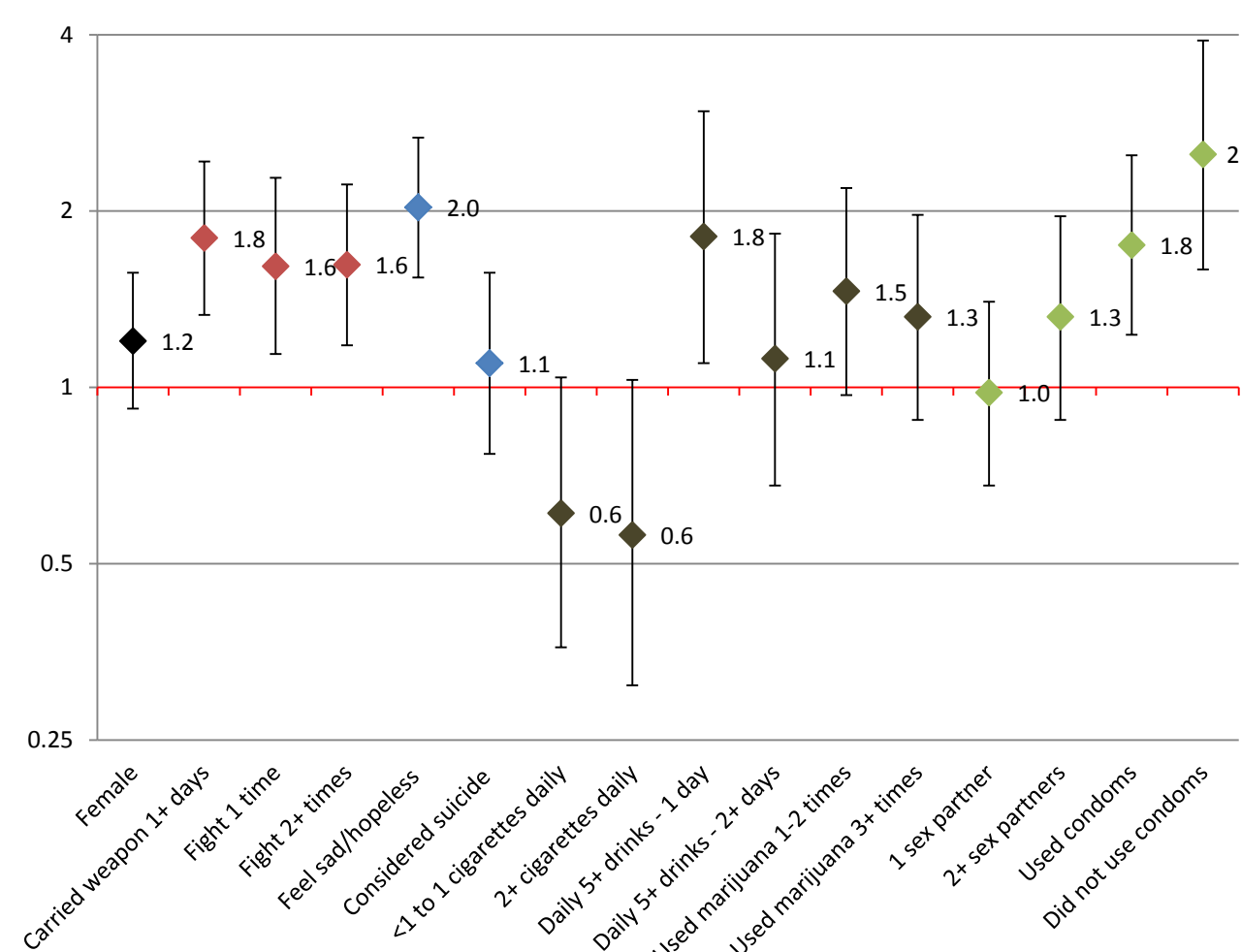
- In 2007, 16.1% of females and 18.0% of males reported DV victimization
- No significant differences across years
- No differences by race (non-black/black) across the years, except in 2005 for SV

Sexual Violence Victimization Prevalence (Lifetime)



- *p<.01
- In 2007, 10.8% of females and 6.4% of males reported SV victimization
- There were significant differences in SV between 2003 (OR: 2.1; 95% CI 1.6-2.9) and other years and 2005 (OR: 0.5, 95% CI: 0.3-0.7) and other years

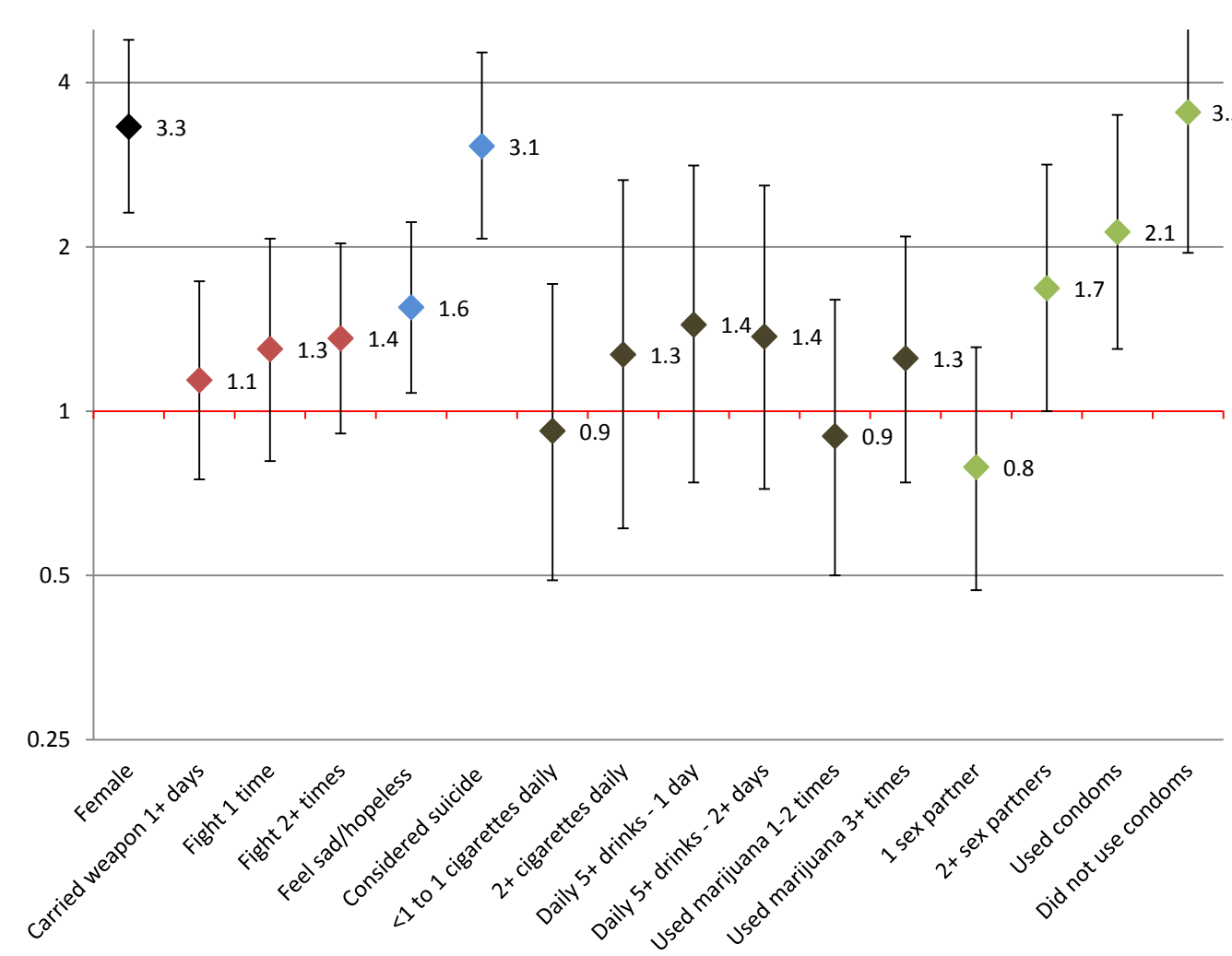
Physical Dating Violence Victimization (Past 12 Months)



Reference groups: male, 0 days, 0 times, no, no, did not smoke, 0 days, 0 times, never/none, never had sex

- Females were not at greater odds of DV than males (OR: 1.2, 95% CI: 0.9, 1.6)
- There was a positive association with recent reports of fighting, weapon carrying, feeling sad/hopeless, excessive drinking, and lack of condom use (ORs range from 1.6 – 2.5)

Sexual Violence Victimization (Lifetime)



- Females were at 3.3 greater odds of SV than males (95% CI: 2.3-4.8)
- There was a positive association with recent reports of feeling sad/hopeless, considering suicide, and lack of condom use (ORs range from 1.6 – 3.5)
- There was evidence of an interaction for gender in the SV model (F 1.67, p=0.04)

CONCLUSIONS

- Findings suggest a strong correlation between DV/SV and psychosocial risk correlates among D.C. adolescents
- Findings are congruent with prior national research and highlight the local need for prevention and services to reduce the health burden of DV/SV among D.C. adolescents
- Given differences of SV by gender, future studies should examine gender-specific aspects of such violence
- Interventions to reduce other forms of violence (e.g., community violence), emotional well being, and sexual risk behaviors could alleviate DV/SV and its effects
- Future research should employ a longitudinal design to assess temporal order and causality
- Will help identify the broader context of both victimization and perpetration

REFERENCES

•Avery-leaf, S., Cascardi, M., O'leary, K. D., & Cano, A. (1997). Efficacy of a dating violence prevention program on attitudes justifying aggression. *Journal of Adolescent Health*, 21(1), 11-17.

•Coker, A. L., Davis, K. E., Arias, I., Desai, S., Sanderson, M., Brandt, H. M., & Smith, P. H. (2002). Physical and mental health effects of intimate partner violence for men and women. *American Journal of Preventive Medicine*, 23(4), 260-268.

•Howard, D. E., Wang, M. Q., & Yan, F. (2007). Psychosocial factors associated with reports of physical dating violence among U.S. adolescent females. *Adolescence*, 42(166), 311-324.

•Howard, D. E., Wang, M. Q., & Yan, F. (2008). Psychosocial factors associated with reports of physical dating violence victimization among U.S. adolescent males. *Adolescence*, 43(171), 449-460.

•Silverman, J. G., Raj, A., Mucci, L. A., & Hathaway, J. E. (2001). Dating violence against adolescent girls and associated substance use, unhealthy weight control, sexual risk behavior, pregnancy, and suicidality. *JAMA: Journal of the American Medical Association*, 286(5), 572.

•Swahn, M.H., West, B., Bossarte, R.M. (2009). Urban girls and boys who date: A closer look at the link between dating and risk for alcohol and drug use, self-harm, and suicide attempts. *Vulnerable Children and Youth Studies*, 4(3), 249-254.

•Yan, F. A., Howard, D. E., Beck, K. H., Shattuck, T., & Hallmark-Kerr, M. (2010). Psychosocial correlates of physical dating violence victimization among Latino early adolescents. *Journal of Interpersonal Violence*, 25(5), 808-831.

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