

Adolescent predictors of female dating violence perpetration

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ABSTRACT

Teen dating violence is a significant problem impacting the adolescent experience with adolescent females at-risk to perpetrate violence. The National Longitudinal Study of Adolescent Health (*Add Health*) was used to assess perpetration risk behaviors through an examination into adolescent behaviors that shape their dating experiences. This study examined adolescent female perpetration of dating violence and the associations between alcohol use, racial identification, and delinquency using a nationally representative longitudinal sample. It was hypothesized that both models would predict dating violence perpetration based on prior knowledge and research studies that have been conducted among adolescent samples. Although risk behaviors were present among adolescents in this nationally representative sample, threats of violence and physical perpetration of violence were reported at levels lower than hypothesized. The findings of this study identified adolescent female minorities as being at an increased risk to perpetrate physical dating violence. These findings demonstrate the continued need to examine female perpetration of dating violence and incorporate these experiences in prevention and intervention efforts.

ARTICLE HISTORY

Received 22 September 2016

Accepted 23 September 2016

KEYWORDS

Teen dating violence;
adolescents; Add Health;
perpetration

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. In 2008, females 12 and under experienced approximately 552,000 nonfatal victimizations while males experienced 101,000 nonfatal victimizations by intimate partners (U.S. Department of Justice, 2009). The Centers for Disease Control have defined dating violence as ‘... a type of intimate partner violence...between two people in a close relationship. The nature of dating violence can be physical, emotional or sexual’ (Eaton et al., 2012, p. 113). Nationwide, abuse is a component in dating relationships for 1 in 10 high school students (Eaton, Davis, Barrios, Brener, & Noonan, 2007). Research studies have consistently established the presence of physical and psychological abuse in teenage dating relationships (Arriaga & Foshee, 2004; Mulford & Giordano, 2008; Swahn, Simon, Arias, & Bossarte, 2008b). This can be physical abuse such as 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) or psychological (emotional) to include

insults, criticism, humiliation in front of friends, threatening behaviors, or berating a partner (Draucker & Martsoff, 2010; Smith & Donnelly, 2001). Although sexual abuse is a component of dating violence, this research study focuses on the examination of physical and psychological abuse experienced by adolescents.

Teen dating violence has been considered a public health problem due to its prevalence and growing impact. As such, the Centers for Disease Control (CDC) provides the most comprehensive means to protect adolescents through their focus on the promotion of healthy and safe behaviors, communities, and environments by supporting all public health decisions with high quality scientific data that is accessible and objective (“CDC mission”, 2016).

According to the CDC Youth Risk Behavior Surveillance System, the prevalence of dating violence among youth and young adults ranged from 6.5% to 16.1% in 41 states during the reporting period of September 2010–December 2011 (Eaton et al., 2012). While dating violence perpetration is traditionally viewed from a perspective that places males as aggressors or batterers, literature does support examinations of female dating violence perpetration (O’Keefe, 1997; O’Leary, Slep, Avery-Leaf, & Cascardi, 2008). Numerous academic and professional researchers examining high school students have reported higher rates of female dating violence perpetration in contrast to male perpetration (Champion, Foley, Sigmon-Smith, Sutfin, & DuRant, 2008; Coker et al., 2000; O’Leary et al., 2008; Swahn et al., 2008b). Champion et al. (2008) and Swahn et al. (2008b) explored these behaviors utilizing retrospective inquiry focused on the respondent’s ability to recall behaviors during the 12 months preceding survey completion. Given the examination of adolescent relationships and related risk behaviors, existing studies have added to the exploratory knowledge of female dating violence perpetration.

Potential influencers of female perpetration

A variety of factors have been examined that potentially contribute to female dating violence perpetration; however, the contributing factors have yet to be identified. Female initiation of violence has been related to 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 well as child abuse or inter-parental violence (Kendra, Bell, & Guimond, 2012; Lewis & Fremouw, 2001). Increased perpetration among older adolescents may be attributable to early adolescent behaviors. 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 girls engaged in delinquent behaviors, dating violence has been reported to be highly prevalent (Kelly, Cheng, Peralez-Dieckmann, & Martinez, 2009). Adolescent samples also report risky sexual behaviors such as early age at initial sexual intercourse (Alleyne, Coleman-Cowger, Crown, Gibbons, & Vines, 2011; Lormand, 2009); non-condom use (Alleyne et al., 2011; Howard & Wang, 2003), and multiple sex partners (Alleyne et al., 2011; Howard & Wang, 2003). Moreover, exposure to violence can lead to adverse childhood experiences that can contribute to significant effects on adolescent development (Osofsky, 1999) and adolescent conduct problems (Ireland & Smith,

2009). Those experiences can lead to difficulties forming intimate relationships in childhood and adulthood (Osofsky, 1999), negative adult outcomes (Ireland & Smith, 2009; Ronfeldt, Kimberling, & Arias, 1998), and violent crime in early adulthood (Ireland & Smith, 2009).

Substance use and related perpetration risk factor considerations

The impact of substance use has been well researched among adolescent samples for its association with dating violence. Despite this, the literature has been varied in its review of early adolescent alcohol use. Researchers have examined binge drinking behaviors (Howard & Wang, 2003), drinking and driving (Champion et al., 2008), drug use (Ackard, Neumark-Sztainer, & Hannan, 2003; Howard & Wang, 2003; Lormand, 2009; O'Keefe, 2005), and alcohol use in adolescent dating violence samples (Ackard et al., 2003; Foshee, Linder, MacDougall, & Bangdiwala, 2001; Lormand, 2009; O'Donnell et al., 2006; Swahn, Bossarte, & Sullivent, 2008; Temple, Shorey, Fite, Stuart, & Le, 2013). Currently, early adolescent alcohol use has not been examined to incorporate its potential role related to future adolescent dating violence behaviors.

Selekman and Praeger (2006) reported a series of dating violence risk factors that increase adolescent female perpetration risks in their school violence report to include: alcohol, tobacco or cocaine use; unhealthy weight control activities; first intercourse prior to age 15; multiple sex partners; pregnancy; serious consideration of, or attempted, suicide; a need for power and control; demonstration of threats, verbal abuse and aggression; violence in the home; and weapon ownership. O'Keefe (1997) identified the association of alcohol and/or drug use and prior dating violence victimization as female perpetration risk factor among racially/ethnically and socioeconomically diverse group of high school students in the Los Angeles area. Female perpetration risk factors have also been associated with being a victim of dating violence and alcohol and/or drug use (O'Keefe, 1997).

Racial and ethnic considerations

Domestic violence has been reported to occur more frequently within particular racial groups in the United States. It was reported to be highest among African-Americans adolescent samples ranging from middle to high school (Foshee et al., 1996; Kreiter et al., 1999; O'Keefe, 1997). In Malik, Sorenson, and Aneshensel's (1997) study, African-American respondents from an urban high school sample reported higher levels of dating violence (perpetration and victimization) than their Asian, White, and Latino counterparts. O'Keefe (1997) examined race, gender, and socioeconomic status and inflicted dating violence among Los Angeles high school students ($N = 1,012$) and found that African-Americans reported significantly greater levels of dating violence than Whites, Latinas/os, and Asians. Rothman et al. (2011) also found violence perpetration reported more frequently by females (21.2%) and African-American non-Hispanic youth (18.3%) as compared to males (7.4%), White, non-Hispanics (9.2%), Hispanics (14.3%), and Other/multiracial individuals (10.7%). Edwards, Green, and Perkins (2006) conducted research using an African-American sample of students to assess dating violence psychological aggression among middle school, high school, and

college students. The perpetration prevalence rates were higher among girls than boys on all levels. For example, middle school girls reported more perpetration (66.7%) than middle school boys (63.6%). On the high school level, girls continued to perpetrate more (86.7%) psychological aggression than boys (64.3%). The prevalence rates continued to increase among college students (girls-90.1%, boys-78.4%). Additionally, exposure to neighborhood violence can also influence perpetration risk factors within predominately African-American low-income communities (Ward, McMahon, & Ingram, 2006). Research has further delved into race-related examinations of perpetration, with minority backgrounds being associated with dating violence perpetration (Champion et al., 2008; Foshee et al., 2008). Research has continued to support higher levels of minority violence perpetration (Edwards et al., 2006; Rothman et al., 2011; Windle & Mrug, 2009). Moreover, African-American adolescent samples have reported higher dating violence prevalence rates when compared to white adolescents (O'Keefe, 1997; O'Keefe, Brockopp, & Chew, 1986). Among a North Carolina adolescent sample, African-American girls were the group most likely to initiate dating violence (Foshee, Reyes, & Ennett, 2010). These research findings support the continued need to expand and clarify adolescent dating violence perpetration using a nationally representative sample, specifically as it relates to female youth.

Current study

Adolescent female dating violence perpetration was examined using the National Longitudinal Study of Adolescent Health (*Add Health*), a nationally representative longitudinal database of adolescents residing in the United States. The Add Health research study was funded by the National Institute of Child Health and Human Development (NICHD) in conjunction with 23 other federal agencies and foundations (<http://www.cpc.unc.edu/projects/addhealth/about>). Add Health provides a comprehensive examination into adolescent behaviors and environments that shape their lived experiences. Prior Add Health data has been used to explore other phenomenon for associations with dating violence.¹ The current study utilized Add Health data to explore identified risk factor variables as predictors of future perpetration of dating violence by female adolescents.

This research seeks to address the salient issue by advancing the knowledge related to female perpetration of dating violence through secondary analysis with a nationally representative sample. The study sample from Waves I and III, consisted of adolescents between the ages of 10–20, with 58% self-identifying as White, 29.5% as African-American, 5.7% American Indian, 6.5% Asian and 6.7% as Other. Baseline demographics are provided in Table 1.

The behavioral indicators for our research questions were selected based on previous research with longitudinal and regional samples of adolescences and professional experiences with the population. We hypothesized racial identification, adolescent engagement in delinquent activities, and early onset alcohol use reported at baseline would predict future dating violence perpetration by adolescent females. We also hypothesized that criminal activity participation (current), current alcohol use, and racial identification would be predictive of female perpetration of dating violence reported 7 years after baseline (Wave III). It was hypothesized that both models

Table 1. Demographic data (Wave I).

	<i>Frequencies</i>	<i>Percentages</i>
	<i>N =</i>	105
<i>Approximate age</i>		
12–13 years of age	55	52.4%
11–12 years of age	44	41.9%
10–11 years of age	6	5.7%
<i>Race</i>		
White	61	58.1%
African-American/Black	31	29.5%
American Indian	6	5.7%
Asian	7	6.7%
Other	7	6.7%
Hispanic origin	13	12.4%
<i>U.S. Born^p</i>		
Yes	83	92.2%
No	7	7.8%
<i>Grade[†]</i>		
7th	62	61.4%
8th	38	37.6%
9th	1	1%

^p*N* = 90[†]*N* = 101

would predict dating violence perpetration based on prior knowledge and research studies conducted among adolescent samples. The hypothesized questions for this study reflect the perceived impact early and current risk behaviors can have on the lived experiences of adolescent females.

Methods

The National Longitudinal Study of Adolescent Health (*Add Health*) restricted files were used to examine adolescent female perpetration of dating violence. According to Harris (2013), *Add Health* was designed 'to help explain the causes of adolescent health and health behavior with special emphasis on the effects of multiple contexts of adolescent life' (p. 2). The development of the *Add Health* study was in response to a U.S. Congressional mandate in the NIH Revitalization Act of 1993² to develop a longitudinal study to examine adolescent health and well-being behaviors that support health promotion or health-risk behaviors (Blum & Rinehart, 1997). The data collection field work for Wave I was conducted by the National Opinion Research Center (NORC) at the University of Chicago with Wave III field collection being completed by the Research Triangle Institute (RTI). Data collection was primarily collected in respondent homes with a laptop computer to maximize confidentiality.

The *Add Health* study consisted of 80 high schools and 52 middle schools with unequal probability of selection during the baseline phase of data collection, incorporating systematic sampling methods, and implicit stratification to ensure a representative sample of the U.S. schools with respect to region of country, urbanity, school size, school type, and ethnicity (Harris et al., 2009). The current study utilizes the restricted use files obtained from the Inter-university Consortium for Political and Social Research (ICPSR). Two waves of *Add Health* data (Wave I and Wave III) were examined in the current study for longitudinal analysis.^{3,4} Approximately 15,170 young adult in-home interviews

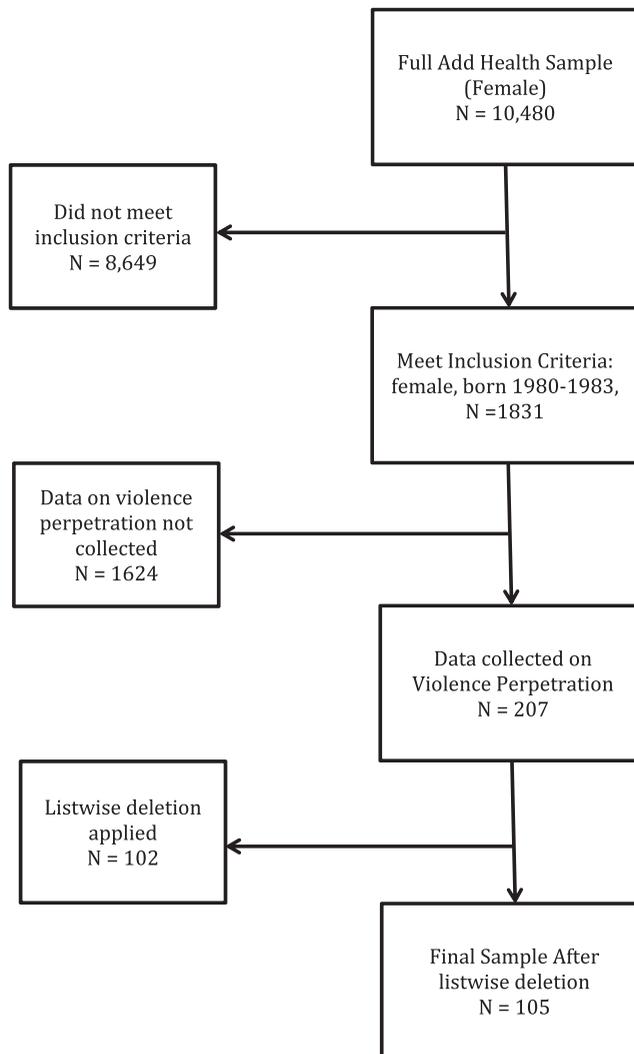


Figure 1. Sampling criteria

were completed during this period, with a 76% response rate during Wave III (see Harris, 2013). At the time of interviews, the Add Health Wave III participants were between 18 and 26 years of age. Sample weights were used to compensate for nonresponse in subsequent waves of data collection (Harris & Udry, 2009). This research was derived from the initial Wave I sample of 10,480 female respondents. Of those, 1,831 met the study inclusion criteria based on the established age demographics. The sample was further reduced ($N = 105$) to include female respondents who completed the dating violence questions (See Figure 1). No random sampling was employed to further stratify the sample due to the limited sample size. Institutional Review Board's (IRB) approval was obtained for analysis of secondary data.

Study variables and measures

The study variables in the *Add Health* survey were developed and pilot tested by the *Add Health* researchers (see Udry, 2001 for details). Based on the literature, the following variables were used for this current research study: race, alcohol use, delinquency, and violence perpetration.

Race

Survey participants were asked, 'What is your race?' The response 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

Alcohol use was examined in both waves. Wave I examined early use during adolescence while Wave III examined current use between the ages of 18 and 20. The early onset question asked, 'Do you ever drink beer, wine, or liquor when you are not with your parents or other adults in your life?' This was coded as a dichotomous variable.

Binge drinking was used as an additional measure of current alcohol use in Wave III. Binge drinking was established as four or more drinks of alcohol on one occasion (NIAAA, 2004). The question was, 'During the past two weeks, how many times did you have four or more drinks on a single occasion, for example, in the evening?' The alcohol use questions in Wave I and Wave III were individually analyzed.

Delinquency

Criminal justice involvement and participation in delinquent activities in Waves I and III synonymously represented the delinquency variable. Four questions were selected to provide a summated score of delinquency for each wave. The research questions examined physical fights, selling drugs, threatening others, and burglary. The questions used were, 'In the past twelve months, how often did you . . . go into a house or building to steal something?; use or threaten to use a weapon to get something from someone?; sell marijuana or other drugs?; and take part in a fight where a group of your friends was against another group?' Respondents were considered to have engaged in delinquent behavior if they reported at least one of these behaviors. The questions were dichotomously categorized and summated for analysis.

Violence perpetration

Two items were used to assess violence perpetration. These questions were taken from Wave III and represent the research-dependent variables. The questions asked, 'How often have you threatened <PARTNER> with violence, pushed or shoved {HIM/HER}, or thrown something at {HIM/HER} that could hurt?' and 'How often have you slapped, hit, or kicked <PARTNER>?' The questions focused on threats of violence and physical violence. The threats variable was used to represent the psychological (emotional) aspect of dating violence. We did not examine injuries from physical violence due to its low prevalence among the sample. These research questions were coded as dichotomous variables.

Data analysis

The Add Health sample design features include stratification, clustering, and sample weights. Data were analyzed through descriptive and inferential statistics using the Statistical Package for the Social Sciences (SPSS) version 18. Although the dataset was reported to have a large sample size, violence perpetration questions were not asked of all respondents due to their prior responses, as such this subsequently resulted in a reduced sample. Of the recoded variables, some were summated and others 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. Logistic regression analyses were conducted to determine predictors of dating violence perpetration. Logistic regression was selected as an appropriate test given the categorical responses of the dependent variable (Pedhazur, 1997). The completed analysis used a maximum of 10 variables, due to the limited sample size ($N = 105$). There were two dependent variables (threats and physical violence) for each research question analyzed.

Results

The prevalence of at-risk behaviors of alcohol use and delinquency were examined for current use and long-term use. This study examined early adolescent alcohol use through baseline (Wave I) and current use in Wave III. In Wave I, over half of the respondents (55.2%) reported drinking when they were not with their parents or other adults. The respondents who reported drinking four or more drinks of alcohol within the past 30 days was minimal, with 37% of respondents engaging in this behavior. Additionally, respondent participation in alcohol use behaviors decreased from Wave I to Wave III.

The examination of delinquent behaviors 12 months prior to survey completion were reviewed from Wave I to Wave III. There were low numbers of adolescents involved in early risk behaviors. In Wave I, 23.8% reported engaging in delinquent acts. Approximately 21% of acts occurred once or twice. In Wave III, 9.5% reported participation in a delinquent act with 7.6% of those acts occurring once or twice. Fewer adolescents report delinquent activity in Wave III although there are some increases in behaviors (weapon use or threats and selling of drugs). The self-reports for not fighting with friends increased from Wave I (77.1%) to Wave III (95.2%). The percent of adolescents engaging in delinquency varied from Wave I to Wave III (chi square = 6.72, $df = 1$, $p = 0.0095$). [Table 2](#) summarizes the delinquency responses from both waves of data collection.

While study participants reported many risk behaviors during baseline, the self-reports of these behaviors were lower during Wave III of the data collection period. Participants self-reported positive academic and employment trajectories during Wave III with 84% completing 12th grade or higher, 65% currently attending school, and 93% of those are employed full time. Additionally, 92% were employed for pay with 47% being employed full time.

Violence perpetration among this sample was relatively low as established by Wave III questions that specifically examined threats and physical violence. An examination

Table 2. Delinquency (Wave I and Wave III).

	Never	1 or 2 times	3 or 4 times	5 or more times
Go into a house or building to steal something?	97.1% (102) ¹ 100% (105) ³	1% (1) ¹ _3	1% (1) ¹ _3	1% (1) ¹ _3
Use or threaten to use a weapon to get something from someone?	98.1% (103) ¹ 97.1% (102) ³	1% (1) ¹ 2.9% (3) ³	1% (1) ¹ _3	_1 _3
Sell marijuana or other drugs?	98.1% (103) ¹ 95.2% (100) ³	1%(1) ¹ 1% (1) ³	1% (1) ¹ 1.9% (2) ³	_1 1.9% (2) ³
Take part in a fight where a group of your friends was against another group?	77.1% (81) ¹ 95.2% (100) ³	20% (21) ¹ 4.8% (5) ³	1% (1) ¹ _3	1.9% (2) ¹ _3

N = 105 ¹ Wave I variable, ³ Wave III variable

Table 3. Violence perpetration (Wave III).

	Threats Percentage (Frequencies) <i>N</i> = 105	Physical Violence Percentage (Frequencies) <i>N</i> = 105
Never	83.8% (88)	87.6% (92)
Once	6.7% (7)	7.6% (8)
Twice	2.9% (3)	1% (1)
3–5 times	2.9% (3)	1.9% (2)
6–10 times	1% (1)	1% (1)
11–20 times	1.9% (2)	0% (0)
More than 20 times	0% (0)	1% (1)
Has not happened in the past year but has happened before	1% (1)	0% (0)

of threats identified respondents reporting their frequency of partner threats as ‘never’ (83.8%), ‘once’ (6.7%), ‘twice’ (2.9%), ‘3 to 5 times’ (2.9%), ‘6 to 10 times’ (1%), ‘11 to 20 times’ (1.9%), and ‘previously occurring, just not this past year’ (1%). 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 3 for violence perpetration responses.

The initial research question hypothesized racial identification, early onset alcohol use and early adolescent delinquency would be predictive of female dating violence perpetration. Logistic regression analyses found no statistically significant variables that predicted adolescent female dating violence perpetration for either threats or physical violence (Table 4).

Our secondary hypothesis sought to assess the impact of current risk behaviors on female dating violence perpetration. This question examined racial identification, current substance use, and current criminal involvement for its ability to predict female dating violence perpetration. The threats and physical violence-dependent variables were analyzed for correlations between the established independent variables. Among the variables in the perpetration of threats, there were no statistically significant variables in this model. The logistic regression analysis indicated that race was a statistically significant predictor of physical violence perpetration when controlling for alcohol use and delinquency (*OR* = 4.145, 95% *CI*: 1.006, 17.072). See Table 4 for findings.

Table 4. Logistic regression analysis.

Predictor	Violence perpetration			
	<i>b</i> (<i>SE</i>)	<i>Sig.</i>	<i>OR</i>	(95% <i>CI</i>)
Race/ethn				
(Early use)	.575 (.563) ^t	.307 ^t	1.777 ^t	.590, 5.352 ^t
	1.302 (.697) ^v	.062 ^v	3.676 ^v	.938, 14.404 ^v
(Current use)	.529 (.574) ^t	.357 ^t	1.698 ^t	.551, 5.233 ^t
	1.422 (.722) ^v	.049 ^v	4.145 ^v	1.006, 17.072 ^v
Alcohol use				
(Early use)	-1.189 (.657) ^t	.070 ^t	.304 ^t	.084, 1.104 ^t
	-.004 (.852) ^v	.996 ^v	.996 ^v	.187, 5.293 ^v
(Current use)	-.002 (.006) ^t	.722 ^t	.998 ^t	.986, 1.010 ^t
	.004 (.007) ^v	.527 ^v	1.004 ^v	.991, 1.018 ^v
Delinquency				
(Early use)	.757 (.723) ^t	.295 ^t	2.132 ^t	.517, 8.791 ^t
	.742 (.826) ^v	.369 ^v	2.10 ^v	.416, 10.609 ^v
(Current use)	-.615 (1.122) ^t	.584 ^t	.541 ^t	.060, 4.872 ^t
	1.050 (.950) ^v	.269 ^v	2.857 ^v	.444, 18.375 ^v

^t Threats, ^vPhysical Violence

Discussion

This study examined adolescent female perpetration of dating violence and the associations between alcohol use, racial identification, and delinquency using a nationally representative longitudinal sample. It was hypothesized that both models would predict dating violence perpetration based on prior knowledge and research studies that have been conducted among adolescent samples.

The initial research question focused on risk behaviors reported during Wave I to assess their potential to predict adolescent female perpetration of dating violence as identified by violent threats or physical violence in Wave III. Data analysis determined that none of the variables were statistically significant in the prediction of adolescent female perpetration of teen dating violence in the threats or physical violence model (See Table 4).

The second hypothesis examined self-reports of current risk behaviors. There were no statistically significant variables in the threats model. In the physical violence model, race was statistically significant. In this model, female minorities were found to be approximately four times more likely to perpetrate physical violence than whites when controlling for alcohol use and delinquency (See Table 4). This finding supports the heightened risk that may be present in the lived experiences of minority females to engage in dating violence perpetration and aligns with previous study findings around race perpetration risks (Foshee et al., 2010; Rothman et al., 2011).

The occurrence of many of the risk behaviors in this sample decreased as participants transitioned into adulthood (see Table 3). Although over half of the sample engaged in early alcohol use, binge drinking is only reported by 40% of respondents. The reduction in alcohol use from Wave I to Wave III, could contribute to the non-significance of this variable. This non-significant finding differs from other regionalized studies that have found alcohol use as a risk factor for dating violence perpetration among minorities (Foshee et al., 2001; O'Donnell et al., 2006; Swahn, Bossarte, & Sullivent, 2008a). Studies of college-aged samples have presented mixed findings with acknowledgment of the significance of alcohol use and its decreased strength over time

in predicting dating violence perpetration (Reyes, Foshee, Bauer, & Ennett, 2011, 2012) while others support its predictive abilities (Temple et al., 2013).

Additionally, delinquency was lower in Wave III (9.5%) than in Wave I (23.8%) among participants. The reduction of at-risk behaviors could be an indication of increased participation in pro-social behaviors that are evident in the academic and career behaviors of the sample at Wave III. Survey respondents identified participation in employment (92%) and school (65%). The respondents' participation in pro-social behaviors could reduce their availability to engage in negative dating violence behaviors. Despite the overall reduction of delinquency, use or threats of weapon use and selling of marijuana or drugs increased in Wave III, which does not support participation in pro-social behaviors.

The current body of literature addressing adolescent perpetration of dating violence has largely maintained a discourse that focuses on male perpetration of violence. This research provides the needed shift of dialogue toward the exploration of female violence perpetration. We extend the literature by moving the discourse with the examination of risk variables using a nationally representative adolescent sample. This sample provided a glimpse into adolescent risk behaviors as they relate to dating violence and potential intervention and prevention components for this population. Despite what has been discovered regarding adolescent female perpetration of dating violence, these findings did not fully replicate findings from previous studies. This may be due to a myriad of factors such as societal norms, age, the influence of the media, or the use of a normalized sample as opposed to studies that have not been as geographically diverse. Additionally, this study used an American-based nationally representative sample to examine this issue unlike other studies that have used regional samples as their context. While certain delinquent and substance use behaviors may be correlated with adolescent female perpetration of dating violence, this was not supported with the hypothesized variables. This does not diminish the importance of recognizing the empirical reality of adolescent female dating violence perpetration.

As with any research study, limitations were present within this study. This study relies on the use of self-reports which may not always be completely reliable. Some of these concerns were minimized through the use of computer assisted data collection methods providing privacy and confidentiality. Additionally, the presence of at-risk behaviors was minimal in the sample (see Tables 2 and 3). This may be due to the changing dynamics of the United States households and adolescent risk behaviors. There may be contemporary issues and circumstances that were not relevant during data collection. This study also did not explore the potential mediating impact of work or school on dating violence. We can only speculate its influence on our study. Recent studies with similar analysis methods have supported the presence of dating violence perpetration among the adolescent population (Eaton et al., 2012).

Although the rationale for adolescent female dating violence remains unknown, its imperative practitioners are trained to target those at-risk to engage in dating violence perpetration. This research adds to the body of knowledge that currently exists regarding female perpetration of dating violence. There is potential to influence academic programming, practice, and policy. It is critical that the research and practice community begin to identify and target prevention and intervention services for the adolescent female population, particularly paying careful attention to prevention and intervention

services available in minority communities. The use of an alternate perspective for behavioral health practitioners and legislative policymakers could vastly increase prevention and intervention services for adolescents related to dating violence. Traditionally, the focus on dating violence has been on male perpetration of violence. This research demonstrates an additional perspective that can aid in efforts to reduce teen dating violence.

Future research studies should continue to widen the scope of dating violence perpetration. This study underscores the need for continued teen dating violence research that examines adolescent female perpetration of violence. Additional longitudinal studies that examine factors that predict dating violence are needed to better inform prevention programs (Temple et al., 2013). Moreover, future research should seek to incorporate an assessment of prevention and intervention initiatives (community or school-based) with potential to positively influence the trajectory toward the reduction of teen dating violence perpetration.

Notes

1. Add Health studies have examined prevalence (Halpern, Spriggs, Martin, & Kupper, 2009), mental health (Fang, Massetti, Ouyang, Grosse, & Mercy, 2010; King, Hatcher, & Bride, 2015), child abuse (Gomez, 2011), and alcohol use (Renner & Whitney, 2012; Wiersma, Cleveland, Herrera, & Fischer, 2010).
2. Public Law 103-43, Title X, Subtitle D, Section 1031
3. Wave II data was omitted from data analysis due to the established research questions and absence of violence perpetration among the targeted age demographic.
4. Wave IV data was omitted as it fell beyond the established study parameters.

Research materials

Add Health research materials can be accessed through the Inter-consortium for Political and Social Research.

Disclosure statement

The authors declare they have no conflict of interest.

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