

# Intimate Partner Violence in Teen Relationships

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## Introduction

There is a growing body of international evidence relating to intimate partner violence (IPV) in teenage relationships. This evidence highlights the underrecognized existence of partner violence in teenage relationships. It also emphasizes the parallel and unique effects and outcomes of IPV for teenagers as compared to across the life course. Negative health consequences include physical injury, isolation, internalizing and externalizing problems including anxiety, depression and aggression, post-traumatic stress disorder, and substance abuse. Studies also report poor school performance, suicide attempts, self-mutilation, and drug use abetted by the partner (Ismail et al., 2007; Kennedy et al., 2010; Martsolf et al., 2012; Chronister et al., 2014; Hellevik, 2019). For pregnant teenagers, episodes of IPV are linked to fetal deaths, miscarriages, abortions, and premature births (Renker, 2002, 2003). Social and digital media is increasingly recognized as an important dimension in relation to IPV in teen relationships. Digital media is increasingly the primary mode of communication between teenagers and the tendency of online communication to lower behavioral inhibitions, with consequent harm, has been noted (Hellevik, 2019).

The prevalence of IPV in teen relationships is difficult to measure. Baker et al. (2015) state that because of this, prevalence ranges between 5% and 95%. Young people do not always recognize IPV in their relationships, and if they do, can find it difficult to seek help – therefore, occurrence can go unreported and an accurate estimate of prevalence remains

elusive. Nevertheless, IPV in teen relationships is often viewed as a public health concern which practitioners should recognize and be equipped to offer trauma-informed response and support (Chronister et al., 2014; Baker, 2017).

This chapter brings together findings from two meta-syntheses of literature: one regarding the experience of IPV in teenage relationships; and the other, teenage mothers' experience of IPV. The chapter discusses how the experience of IPV among teenagers is frequently located in a context of gendered expectations, family disruption, gang involvement, and community violence. Reciprocal violence, and that pregnancy and birth can precipitate IPV, is notable. The role of digital media in perpetrating harassment, threat, and control has become significant and has been noted across childhood with regard to new dimensions of child abuse with, as yet, little evidence base to inform professional and policy support (Gallagher, 2016). Within this, adolescent development is considered as both a rationale for tolerating IPV in a relationship but also, with time, for reflecting and avoiding, or extricating from, a negative relationship. The chapter also discusses the barriers to seeking support for those experiencing IPV. Reporting IPV is difficult for both non-parenting and parenting teenagers mainly for fear of allegations being dismissed and partner retribution (Ismail et al., 2007). Furthermore, young parents may fear that they could lose custody of their children (Renker, 2006). The chapter concludes with a discussion of implications of these findings for practice.

## **Adolescence**

Adolescence is the period from the onset of puberty during which a young person develops from a child into an adult. A contemporaneous understanding of adolescence recognizes that the biological and social development traditionally attributed to the teenage years continues into the mid 20s (Sawyer et al., 2018). There are both neurological and sociocultural aspects to this developing understanding of adolescence. The adolescent brain goes through a rapid process of developing new neural connections and this process is fundamentally shaped by social interactions and relationships (Hanson and Holmes, 2014). Culturally, education is

increasingly extended, delaying independent living and career establishment – the contemporary, neoliberal prerequisites for ‘settling down’ and starting a family (Bekaert and Bradly, 2019). However, the focus of this chapter is on the teen years. There is a fragility in this period of intense transition that is coupled by relative inexperience with dating relationships (Martin et al., 2012; Baker et al., 2015). Experiences of IPV during this important developmental period, when physical maturity has peaked but cognitive and emotional regulatory skills are still developing, poses health risks and deleterious developmental outcomes and, therefore, warrants specific focus (Gonzalez Guarda et al., 2016).

## **Intimate Partner Violence**

There is a range of terminology evident in the literature that seeks to communicate the phenomenon of violence in teenage relationships. These terms include: intimate partner violence (IPV), dating violence, domestic violence, and domestic abuse. This chapter will use the term IPV, to try to encompass cultures where the word ‘dating’ is little used, as well as relationships that are more established than ‘dating’, yet not ‘domestic,’ as teens tend not to be living together within their intimate relationship. ‘Official’ definitions of IPV are also varied. The Centers for Disease Control and Prevention (CDC) in the US recognizes the social media and reciprocal aspect of IPV, and includes *physical, sexual, and/or psychological abuse by a current or previous boyfriend or girlfriend including stalking and other abusive behaviors communicated in person or electronically* (CDC, 2018). The UK houses IPV within the term ‘domestic abuse’ – and is expansive in seeking to include phenomena such as female genital mutilation and forced marriage, and includes detailed explanations of controlling and coercive behavior. However, it also excludes young people’s experience by stating this term is for those aged 16 and above, consequently excluding the experience of teens aged 15 years and younger (gov.uk, 2012). Nevertheless, the UK has a robust safeguarding and child protection system where child abuse is rigorously examined

which counters this omission. Notably, issues that emerge in the teenage years tend to span both childhood and adult concerns and do not neatly fit one category or the other. This chapter draws mainly from the CDC definition focusing on the relationship between intimate partners and not abusive situations within families.

## **Methodology**

The data on which this chapter is based is drawn from two meta-syntheses – one pertaining to IPV and teen mothers and published (Bekaert and SmithBattle, 2016) and one undertaken for this chapter, focusing on the experience of IPV in teen relationships. The teen mothers study identified 22 papers representing 21 separate studies, and the teen IPV study identified 23 papers representing 19 separate studies. Neither review placed a date parameter – the earliest paper published for the teen mothers study was 2001, and 2005 for the teen IPV study. While this may represent changing terminology, a range of synonyms were employed in the search strategies and results are suggestive of an emerging acknowledgement and exploration of teen IPV and its public health consequences.

The full search strategy for the latter is available from the authors. Overall the ensuing discussion is drawn from data from 40 separate studies across 45 articles.

In the same way as the IPV with young mothers study, the approach to meta-synthesis across the two studies has been systematic and interpretive (Bekaert and SmithBattle, 2016). Studies were systematically evaluated using Kearney's (2001) taxonomy, categorizing qualitative studies by their level of complexity and discovery. Interpretive discussion draws on the approach of Thorne et al. (2004): where qualitative findings across the selected studies are transformed into a new conceptualization; 'a common understanding of the nature of a phenomenon, not a consensual worldview' (2004: 5). This approach seeks to add to our understanding, not reducing but expanding upon what we could have known. This depth of understanding can, in turn, inform our practice.

There is a wealth of literature regarding IPV in teenage relationships, mostly located in a quantitative paradigm and exploring both teens' understanding of, as well as experience with, IPV. Several literature reviews have been conducted in this area, including exploring effective interventions with young people who have experienced IPV (Jennings et al., 2017), and teen dating violence and media use (Manganello, 2008). These are integrative reviews and while informative and important, cannot, by design, focus on the detail of experience for those who have been involved in IPV. It is on the 'thick' descriptions within qualitative research, for those who have experienced IPV, that this synthesis draws. One exception to this was a study with homosexual men where a mixed-method study was included. Same-sex relationships are under-represented in the literature; therefore, to ensure this group was represented, the study was included (Kubiczek et al., 2016). Unfortunately, no equivalent published research articles qualitatively exploring the experience of IPV across the spectrum of sexuality within relationships were identified.

## **Findings**

There are both individual and social dimensions in what is known about IPV in teen relationships. The chapter commences with outlining how teens describe the violence in their lives: characterized by monitoring behavior, control and sabotage, and exploring the role of drug use in some young people's violent relationships. The role digital media plays in amplifying these behaviors is then explored – a new relational dimension for this generation. The aspect of reciprocity is examined within discussion of the outplaying of gender roles within heterosexual and same-sex male relationships. The wider sociocultural contexts are considered – that of family, peer group, and community – where learned behavior and self-preservation can be the order of the day. These multiple aspects of IPV will be considered in the personal context of adolescent development, highlighting how this development is both a reason for teens' vulnerability to IPV as well as a resource for avoiding or extricating themselves from abusive relationships. Conclusions will consider teens' recovery from IPV and how professionals can support this process.

Teens who have experienced violent intimate relationships describe violence that tends to escalate over time, moving along a continuum from verbal to physical insult (Martsolf et al., 2012). On occasion the perpetrator extends the threat to self-harm (Baker, 2016). Young people often experience IPV across multiple partners (Leadbeater et al., 2001; Baker and Carreño, 2016). There appeared to be two types of IPV: purposeful and calculated, or unreflective and spontaneous. Some partners engage in a skillful and insidious escalation of psychological strategies of coercion leading to, or alongside, outright physical violence (Reynolds and Shepherd, 2011).

At the time of the relationship many young people do not feel that the violence was unacceptable. They viewed strong emotions as an indication that their relationship was serious or important, and felt that violence was an expression of these deep feelings (Martin et al., 2012; Giordano et al., 2015). For many there was an indistinguishable moment when their partner's behavior changed from caring to controlling (Reynolds and Shepherd, 2011). Some were conflicted about whether such violence could be an expression of love and justified the abuse as having been deserved based on something they said or did (Wood and Barter, 2014). Many young women thought that accepting abuse was a good way to secure the interest of a man with whom they were seeking a relationship (Johnson et al., 2005). For young men violence was a way of ensuring their partner stayed with them, although some were aware that such controlling actions risked losing their partner. Yet simultaneously they found they could not help this behavior: '*you wanna hold them. Keep them away from people ... but then you don't want to hold them, because like it's pretty much gonna end the relationship*' (Baker and Carreño, 2016: 315).

It was not that violence was generally condoned, but was viewed as acceptable in certain situations. For example, if used by young women, was unintentional (regardless of consequence), was in retaliation for infidelity, or as form of communication when talking about issues that had failed, it was allowable (Bowen et al., 2013). In this way, an act of violence could be viewed as both abusive and non-abusive depending on the context in which it occurred. Opinion appeared to be that if an act was supposedly meant as a joke it was more

acceptable. It could be difficult to distinguish the boundaries between behaviors that were playful versus those that are violent and abusive; nevertheless, less importance was ascribed to an act simply because of supposedly benign intent (Johnson et al., 2005; Foshee et al., 2007). However, this is troublesome, as consensus of intent may not always be present, and it is beholden on the victim to decide whether the act was acceptable or not.

## Controlling Behavior

Monitoring behavior was endemic, most notably facilitated through phones and digital media. The ubiquitous nature of digital media can lead to young people being constantly under surveillance in their relationship, or subject to public humiliation via social media. Some young people talked extensively about concerns that their partner was cheating and digital media was employed to keep track of their partners (Baker, 2016). Other aspects of monitoring were commenting on and controlling a partner's appearance. One young woman described control of how she looked as an act of 'ownership', undermining her confidence in her ability to assess her own appearance: '*I felt like he would buy me clothes so I would dress the way he wanted me to dress*' (Towns and Scott, 2013: 544). This level of monitoring and control could lead to self-surveillance (Rosen, 2004; Towns and Scott, 2013). This same young woman decided not to go out with her friends as she had a boyfriend, curtailing her social life and friendship groups, furthering her isolation.

Controlling behavior was apparent directly from the partner, and sometimes from the partner's family. Control was shown through actions or expectations that hindered school, college, or work attendance. This could be exhibited through harassment at their school or employment, and using emotional or physical abuse tactics that made it difficult to successfully pursue their school and work activities: '*I was always just worried or nervous of something was just wrong with me at school, I could just never, ever focus...*' (Chronister et al., 2014: 389). Sexual coercion by young men (Chronister et al., 2014), or pregnancy-promoting behaviors (Miller et al., 2007) were common. Young men would refuse to use a

condom, or sabotage their partner's contraception use. In this way, they would engineer a pregnancy, then often insist on an abortion (Raphael, 2005; Miller et al., 2007). Ismail et al. (2007) noted that all 11 young women in their study became pregnant by their abusive partners, and in all cases these pregnancies were terminated. Controlling behavior could sometimes extend beyond the partner and include their family – through gift-giving and trying to make the young person feel special, '*They were trapping me there cause they knew I was good for him*' (Reynolds and Shepherd, 2011: 327).

Drug and alcohol use could also be tools for IPV. Some young people used drugs for the first time, or increased their drug use, as a result of being in the abusive relationship (Chronister et al., 2014). Partner violence was more likely to occur when drinking (Baker, 2016). Drink and drugs have a negative impact on cognitive functioning, increasing arguments, decreasing the ability to read cues appropriately, and increasing the likelihood of aggressive reactions. Discrepant use of substances between the partners could be equally problematic with one party not being happy with the other's drug or alcohol use: '*He picked his drugs over me and I didn't like that, I guess*' (Baker, 2016: 909).

## **Digital Media**

A strong theme in the literature was digital media use and its role as a catalyst for violence. Digital media presents a new area where violence can occur, with new boundaries to be negotiated. Once their relationship became official, young people would post this on digital media sites. This served the dual purpose of announcing the status of their relationship, and a message to others to 'keep away' from their partner. Being in a relationship meant cutting off contact with young people of the opposite sex (in heterosexual relationships) and any ex-partners, to the extent that a partner will interfere with the young person's social media to stop any ongoing contact: '*Why are you still talking to him? You guys are over. You shouldn't be doing that. And he actually asked for my password and username, logged in and de-friended him*' (Baker and Carreño, 2016: 315).

Other abusive activity on digital media included making negative comments about photos or posts (Hellevik, 2019), being publicly insulting (Draucker and Martsolf, 2010), applying pressure to send intimate photos, redistributing intimate photos (Hellevik, 2019), or sending threatening messages: '*if you don't return my phone calls, I will hunt you down. I will start at your house, and I will work my way from there*' (Draucker and Martsolf, 2010: 139). The partner can also look to the past and use social media to gather information which they then use to victimize their partner. Furthermore, the partner could involve the victim's social network in the abuse (Hellevik, 2019).

As social media is constant and instantaneous, jealousy would often fester when a partner did not immediately respond to a message. There was an expectation that the partners should always be available to each other. This could result in feeling as though they could never relax (Herrman, 2013; Hellevik, 2019). Nevertheless, most young people did not see a problem with keeping an eye on their partner (Baker and Carreño, 2016; Baker, 2017). Some even downloaded a tracker app to monitor their partner's movements. A break in contact could lead to an increase in harassing behaviors by the monitoring partner. In Baker and Carreño's (2016) study, girls reported feeling fear through a partner's excessive monitoring, whereas boys reported feeling irritation, but not fear.

Digital media was also used as means to end a relationship either directly through a message, or through no action. Some endings were clear cut with a sense of finality, what Draucker et al. (2016) referred to as 'cutting 'em loose stories': '*I just wrote him a letter and I got my phone number changed. I deleted all emails and got new ones. I deleted my IM, my Myspace, my Facebook, and got new ones that are private*' (2016: 116). For others, there would be a fight, the reconciliation message would not arrive, '*until after a few weeks the relationship would just end, often without any further face to face discussion of why it ended*' (Baker and Carreño, 2016: 315). The longevity of social media was also an important fact in that young people would keep negative, and sometimes threatening, messages and reread them, therefore re-experiencing the emotions these elicited and re-victimizing themselves (Hellevik, 2019).

## Gendered Aspects

There were clear gendered dimensions to the occurrence and impact of IPV in teen relationships. This was manifest in the type of violence used and the understanding of the violence itself. While violence was often bidirectional, the concept of reciprocity obscures the overarching gendered nature of the violence (Ismail et al., 2007). Young men were more likely to use physical abuse and young women more likely to use psychological abuse. Self-defense was deemed acceptable for young women, whereas retaliation was viewed as acceptable for young men who had been hit by young women. Male identity within relationships was viewed as embodying physical strength and power, whereas female identity was typified by possessiveness and a need for control, with violence that tended to be verbal rather than physical. In essence, gender was linked to specific roles: males as aggressors, females as victims (Bowen et al., 2013).

When physical violence occurred, many young people stated that this legitimized hitting back in retaliation or self-defense. This could lead to an escalation of violent acts within a relationship that could be seen as equivalent to both partners participating in which there is no clear victim/perpetrator delineation (Foshee et al., 2007; Erdmans and Black, 2008; Kennedy et al., 2010; Newman and Campbell, 2011; Herrman, 2013; Giordano et al., 2015; Landor et al., 2017). Some lashed out after becoming fed-up with their partner's actions. For example, young women could feel so stressed by being in an emotionally abusive relationship that they struck out physically against their partners, surprising both themselves and their partner: '*Wow, you're so psycho bitch. But it's like – you made me like this*' (Baker et al., 2015: 657). In these circumstances the most serious acts were perpetrated by the young women, despite sustained 'lower level' harassment by their partner. Some young men did report de-escalation or restraint responses to violence initiated by their girlfriend, trying to prevent her from harming him (Foshee et al., 2007). Cheating was a context that appeared to

permit the use of violence. This was viewed as a form of moral enforcement, letting the partner know they have done something wrong (Foshee et al., 2007; Bowen et al., 2013).

On the whole, despite violence being reciprocal there were qualitative differences that were gendered. Abuse committed by young women was perceived by the women and men themselves as non-abusive and less serious than that committed by young men, and broadly, young women defined abuse by the impact of the behavior, whereas young men defined abuse by the intent behind the behavior.

## **Same-Sex Relationships**

Same-sex relationships were little represented in the qualitative literature but for one mixed-methods study by Kubichek et al. (2016) with young men (i.e. young men who have sex with men – YMSM). Similar to their heterosexual counterparts, the young men in the study expressed less assertiveness in their early relationships and, at this younger age, tended to place blame for physical altercations on the one who started the argument. Similar controlling behavior was also observed, in person and on digital media, lowering partner self-esteem. Also, many of the young men reported their relationships involved both partners perpetrating violence, although in most instances there was one partner who was seen as the primary perpetrator. Unique to same-sex relationships were instances of one partner threatening to ‘out’ the other to family and/or friends. This study also suggests that sexual and physical violence in male same-sex relationships could be related to internalized homophobia. When sexual violence was described, alcohol or other drugs were nearly always involved.

Ironically, violence in male same-sex relationships was rarely challenged, likely due to the belief that violence between two men is more acceptable in society. The young men were often at a loss as to how to articulate what was occurring in their relationship, perhaps due to not seeing same-sex relationships modelled in society, and relationship and sex education in schools generally being heteronormative. Furthermore, the developmental phase of emerging adulthood may be a particularly vulnerable period for YMSM and other sexual minority youth

through comparatively limited dating opportunities in early adolescence. A development of a coherent personal narrative may come later for YMSM.

## Contextual Considerations

IPV was often ascribed to learned behavior from family and community contexts. For many, violent behaviors are part of family relationships and prevalent in wider community relationships. Landor et al. (2017) observed five contexts in which the young people in their study witnessed, experienced, and perpetrated IPV: teen relationships, siblings and extended family members, parents, friends, and neighbors. Interpersonal violence was a normative part of their daily lives. Even if IPV had not been directly witnessed, the young people had often experienced chaotic and insecure family and home environments including witnessing substance misuse, residential instability, absent fathers, a lack of positive role models, and other delinquent behavior. Many had also been part of the care system (Reed et al., 2008).

Wider peer contexts were also instrumental in normalizing violence. Male gang involvement or cultures that revere ‘machismo’ created a context for behaviors that promote positive value and esteem to the (frequently sexual) maltreatment of girls (Lesser et al., 2010). This is tied explicitly to male social stature among peers, and stigmatizes men if they portray themselves as victims in the peer group (Reed et al., 2008). Male participants described how men used violence against their partners to bolster their self-esteem and sense of power (Johnson et al., 2005). Ismail et al. (2007) noted that young women could be complicit in this, and spoke about their own submissiveness and acquiescence along with a desire to make their partners appear powerful and in control.

IPV is frequently part of general violence contexts where there is pervasive exposure to violence in their communities; ‘*violence ... it's all around, you know? It's just all around ... like I'm walking down the street – this way the other day – and these guys ran up on me ... and basically pulled a gun on me*’ (Reed et al., 2008: 266). In such contexts of family and gender norms which are central in shaping the young people’s experiences, and their capacity

to make sense of the violence in their lives, such normalization means it can take longer to realize the unacceptability of this in their relationships.

For young mothers, there was an added dimension to their struggle with their partners' violent and controlling behavior. A pregnancy can compound entrapment (Knight, 2003; Kennedy, 2005). Furthermore, laws and practices frequently penalized the mother for their partner's behavior by mobilizing 'failure to protect' actions, and therefore contributed to their revictimization (Gonzalez-Guarda et al., 2016).

## **Adolescent Development**

IPV – its occurrence, young people's understanding of it, and eventual recognition of its unacceptability – was intertwined with adolescent development. In early adolescence, young people represented themselves as 'adrift', disconnected from affirming relationships and positive sources of self-esteem (Reynolds and Shepherd, 2011: 320; Chronister et al., 2014). The key tasks of adolescence have been identified as including developing identity, autonomy, intimacy, and sexuality. This is a process and therefore they do not come to these relationships fully formed. Hence this can be particularly problematic when younger (Draucker and Martsolf, 2010). Partner violence during this important developmental period, where physical maturity is achieved, but cognitive and emotional regulatory skills are less so, poses health risks and deleterious developmental outcomes. Teens are learning to manage their emotions generally and this can be especially difficult within the context of new-forming romantic relationships. At this early stage of adolescence, young people struggle to understand and articulate relationship experiences (Baker et al., 2015; Gonzalez-Guarda et al., 2016). In the earlier teenage years, impulse control is underdeveloped and therefore the processes that are used by adults to avoid or end violent intimate relationships may not yet be available to them (Martsolf et al., 2013).

Pressure from peers and the media to have boyfriends and girlfriends from a young age encouraged a willingness to stay in relationships that are violent through a fear of social

ostracism. Being in a violent relationship was sometimes seen as preferable to no relationship at all, and violence could become chronic (Martsolf et al., 2012). Even when the young person did recognize the unacceptability of the violence and wanted to leave the relationship, a lack of social resources at this age can limit exit strategies (Reynolds and Shepherd, 2011). Concerns over practical supports such as housing and finance were additional considerations for young mothers, preventing them from leaving their partners (Moloney et al., 2011).

It was only later, in early adulthood, that young people were able to have a clearer perspective on their earlier vulnerability: '*it was just exciting to me at the time, but I grew out of it though*' (Giordano et al., 2015: 18). Desistance occurred through development. The accumulation of experiences with intimate relationships may form the basis of a learning curve that is likely to be important to an understanding of the cessation of such behavior, representing a life-course view of social learning. However, this is not always straightforward. The motivation to desist can remain constant but the degree of control can vary with individual and life circumstances.

Often there were 'pivotal moments' for change (Reynolds and Shepherd, 2011), 'aha moments' (Martsolf et al., 2013: 73), or 'turning points' (Draucker et al., 2016) that prompted this change narrative. These could be in relation to children, the possibility of arrest, or something specific within the relationship itself. For example, one young woman broke off the relationship when her partner showed no interest in their son: '*I just thought the main reason I was staying with him was because of him building a relationship with his son, and if he's not interested, they why should I?*' (Reynolds and Shepherd, 2011: 327). Other child-related individual breaking points included the child observing the abuse of their mother first-hand, physical abuse to the child, or when the child began to try to protect the mother (Francisco et al., 2008; Brown et al., 2011; Gonzalez-Guarda et al., 2016). A pregnancy within an abusive relationship could also be a catalyst for the young woman to leave an abusive relationship (Kaye et al., 2007).

The flexibility and growth of critical thought across adolescence was seen as a positive resource for recovery, yet supports the understanding of desistance from violence as an often

cyclical process (Renker, 2003; Reynolds and Shepherd, 2011). Over time, personal narratives become more coherent and integrated. Gradually, young people change tactics. For example, rather than lashing out they would leave situations where aggression was escalating. One young man stated: *'like if she would hit me I would just leave and shut up. Separate myself'* (Draucker et al. (2016: 116). Young people employed a variety of breakup strategies, some of which may delay the breakup and expose the teens to more negative consequences. For example, breakups presumed or implied (rather than clearly articulated) avoided an acrimonious breakup and further violence, but prolonged the inevitable; *'I didn't call her no more, she wouldn't call me no more ... it just kind of drifted from that point on'* (Martsolf et al., 2013: 74). Some young people reported resistance to certain behaviors such as getting contraceptive injections to avoid pregnancy without their partner's knowledge (Miller et al., 2007). Others focused on distancing themselves from the violent partner and getting back on track through focusing on schoolwork, securing employment, reestablishing relationships with friends who had been neglected, and learning how to manage money to become independent (Draucker et al., 2016).

Another theoretical perspective on violence desistance with age is growth through adversity. Positive changes in how young people acted in subsequent relationships were based on insights they had gained from their abusive relationships, recognizing the need to develop new ways of communicating around areas of disagreement (Giordano et al., 2015). They had learned the warning signs of abuse and knew what to avoid. This reconceptualization could lead to enduring change (Draucker et al., 2016).

## Seeking Help

Young people remained in abusive relationships for multiple reasons: contexts where violence is normalized, self-blame, shame, feeling alienated or alone, being fearful of worsening their situation by upsetting their abusive partner, seeing violence as indication of love and caring. They believed that they gained more than they lost by staying in the relationship, despite the

violence. The majority of young people experiencing violence in their relationship do not seek help (Martolf et al., 2013).

If young people do reach out for support, friends are favored over parents. However, peers tend not to be helpful because they are at a similar developmental stage and are not likely to have the social skills or knowledge to support their friends: '*They felt sorry for me, but on the other hand they wouldn't do anything (about the abuse)*' (Chronister et al., 2014). Young people also felt that adults may not take them seriously: '*no one had the time to talk to me and even if they did they wouldn't understand me because we were young and I didn't know, they'd probably think it was silly*' (Reynolds and Shepherd, 2011: 321). There was also a reluctance to seek help as seeking help stands in tension with a desire for independence that is typical to this developmental stage. Young people feared that parents might curtail their activities and they did not want to present themselves as 'victims' (Reynolds and Shepherd, 2011).

There was often an extra distance to travel in speaking to parents as the young person may have become isolated from family due to negative reactions to the relationship, or through the isolating behavior of their partner. Parents may have expressed disappointment, been ashamed or despairing, or have argued about the situation – and therefore the young person felt rejected. The support of family members was seen as both helpful and harmful. Helpful when members of the family were able to foresee the abuse, counsel them without passing judgment if they did not leave the relationship, and connect them with help. Harmful involvement was family members not seeing the abuse, not sympathizing with their situation, or rejecting them for not following their advice (Gonzalez-Guarda et al., 2016). Young mothers were often encouraged to 'stand by your man' to ensure their child's continued ties to the father, further exposing them to violence (Lesser et al., 2005; Kulkarni, 2006, 2009).

If young people did ask for help, women described little hesitation towards, and sometimes a preference for, formal services. By comparison men described few barriers in getting support from friends and family, and indicated little interest in formal services (Martin

et al., 2012). However, overall, young people tend not to initiate such discussions (Martsolf et al., 2012). Young mothers are particularly reticent to disclose through fears of losing their children to child welfare services (Renker, 2002; Dalla et al., 2010). Young people who are an immigrant to a country are even less likely to seek support as they do not know the laws around partner violence, or the resources that might be available to them. Some may have had negative experiences in their countries of origin when accessing help for partner violence (Gonzalez-Guarda et al., 2016). When professionals were approached, assistance seemed to focus exclusively on the young women extricating themselves from a violent partner, rather than working with both partners. This tended to communicate the message that the young women were responsible for resolving the situation by themselves (Chronister et al., 2014: 399).

## **Discussion**

The literature has presented a multifaceted and gendered picture of IPV in teenage relationships, which changes and evolves as the young person develops. Overall, IPV in teen relationships appears to escalate over time, moving along a continuum from microaggressions that tend to be psychological, to overt physical aggression. This aggression seems to be either purposeful and calculated, or unreflective and spontaneous. In early stages of adolescence, the young people struggled to understand and articulate their relationship experiences. Furthermore, peer acceptance is important and being in a relationship seen as normative, even if violent. On occasion, young people accepted the abuse as this was preferable to not being in a relationship; similar to the ‘consensual abuse’ described in some Child Sexual Exploitation (CSE) situations by Ellis (2019: 413). Desistance occurred in line with development. Nevertheless, this was variable according to life experience and available resources. The development of critical thought across adolescence was a positive resource for recovery, reflected in recent exploration into the development of resilience in childhood, particularly when faced with adversity (Wright et al., 2013).

Context was an important consideration for the young people in relation to the occurrence and perceived acceptability of IPV in their relationships. Young people were frequently witness to violence in wider social contexts. Interpersonal violence was a normative part of their daily lives. In addition, involvement in gangs or being part of a culture that reveres 'machismo', promoted positive value to the maltreatment of girls. A contextual approach to support and intervention reflects this wider influence. Contextual safeguarding seeks to understand, and respond to, young people's experiences of significant harm beyond their families, and in teen IPV this encompasses influence beyond the relationship itself. Practitioners need to engage with individuals and sectors who have influence on their wider contexts, and recognize that assessment of, and intervention with, these spaces are a critical part of safeguarding practices (Firmin, 2017: 3; 2019).

Types of violence were gendered. Young men were more likely to use physical abuse and young women more likely to use psychological abuse. Self-defense was deemed acceptable for young women, whereas retaliation was viewed as acceptable for young men who had been hit by young women. For YMSM violent acts were most prevalent, with an added dimension of fear of the threat of 'being outed' to family and friends. For YMSM there was almost universal prevalence of drug use linked to IPV. Violence in YMSM relationships was rarely challenged, and it was suggested that this is due to the acceptability of violence between two men in society. YMSM have few role models for same-sex relationships, and a heteronormative SRE leaves them ill-equipped to meet such relationship challenges (Formby, 2016).

At first young people might view controlling behavior and 'passionate' actions as an indication that the relationship is serious. Young men, however, were cognizant that such control risked pushing their partner away. An act of control or violence was seen as abusive and non-abusive, depending on the context in which it occurred. Less importance was also ascribed to an act simply because of supposed benign intent. Surveillance was consistently evident, most notably through mobile phones and digital media. This would lead to self-surveillance, curtailing wider social activity to avoid a negative response from a partner.

Other abusive activity on digital media included making negative comments about photos or posts, being publically insulting, applying pressure to send intimate photos, redistributing intimate photos, or sending threatening messages. There was an assumption with the accessibility of digital media that the partners should always be available to each other. This control could extend to harassment at their school or employment, and using emotional or physical abuse tactics that made it difficult to successfully pursue their school and work activities, strategies that have also been identified in CSE cases (Melrose, 2013). Sexual coercion was also employed with male partners sabotaging contraception, and in some cases then insisting the young women had an abortion with a resulting pregnancy. Drugs and alcohol were also tools for IPV.

Help seeking was fragmented and generally did not happen. Pivotal moments in young people's lives such as witnessing the effect on young children, were often catalysts for change. Young people's preferred source were their peers; however often their friends would do very little, equally unable to articulate what is IPV and what is appropriate behavior in a relationship. Parental help was rarely sought due to fear of freedoms being curtailed or an embarrassment over what might be seen as poor judgment in their early forays into independent relationship formation. For teen mothers IPV is a barrier to seeking support from parents, where often a pregnancy can be a catalyst for reconciliation with family (Macvarish and Billings, 2010; Warnes and Daiches, 2011). Professionals were equally low on the list for support, as young people felt they would not be believed. For young mothers as with their older counterparts, there was the added barrier of fear that their children may be taken into state care (DeVoe and Smith, 2003; Mandel, 2010).

## **Recommendations**

Foshee et al. (2007) have noted that IPV has differing etiologies, which therefore need various approaches for support. Looking across the landscape of findings such support could be separated into prevention and intervention. Within this, there should be an emphasis on building trust and being aware of community resources to support young people in the varied

aspects of coming out of, or healing, a violent relationship. In this sense, IPV begins to show some parallels with recent explorations of Child Sexual Exploitation; for example, Melrose (2013) emphasizes that young people who are exploited should not be treated as a homogenous group due to individual life contexts and trajectories.

Many aspects of these findings could be incorporated into curriculum-based relationship education, and reinforced through professional interactions with young people in wider contexts. The dominant gendered narratives of what it means to be a woman and man should be challenged, with concepts of ‘machismo’ explored, both for the detrimental effect on women but also to men – with the narrow view of what it means to be masculine. Exploration of what is control and abuse within a relationship, and what are true signs of love and respect can also be explored. Discussions regarding digital media are also vital; considering what are appropriate boundaries of digital media use in relationships, and the importance of giving each other ‘space’ in a growing relationship (Knightsmith, 2016; Hayes, 2017). These preventive conversations will equip all young people with knowledge and strategies for avoiding abusive relationships, or noting early signs of abuse in relationships, that they can both apply to their own relationships and to those of their peers if support is needed.

Erratic contraception use, repeat pregnancy tests or emergency contraception use, as well as drug and alcohol use could be signs of an abusive relationship (Ismail et al., 2007; Miller et al., 2007; Kubichek et al., 2016). Professionals should ask specifically about partner abuse. This both validates the experience, and can be a turning point at which young people begin to recognize the abuse they are experiencing (Martin et al., 2012; Doornbos et al., 2013). Recent CSE cases in the UK have led to standardized screening for young people attending health appointments called ‘Spotting the Signs’ (Ashby et al., 2015) which includes exploration of coercion and power within relationships. It should be recognized, however, that screening for IPV alone disregards cumulative trauma from multiple sources (Bekaert and SmithBattle, 2016: 14). Young people do not necessarily separate IPV from other kinds of

violence in their lives (Johnson et al., 2005). Mindful of cumulative trauma, screening such as the Adverse Childhood Experiences (ACE) screening tool that explores broader childhood trauma (Finkelhor et al., 2013), and mental health screening tools (see Wissow et al., 2013 for a review on effective tools) rather than screening for IPV alone could be beneficial for more holistic support. Although professionals should be mindful that assessment tools and particularly ACE assessments can prioritize risk and obscure the material and social conditions of the lives of its subjects (White et al., 2019; Asmussen et al., 2020). Trauma-informed practice is important. Such practice understands and considers the pervasive nature of trauma and promotes environments of healing and recovery rather than practices and services that may inadvertently re-traumatize, such as the ‘failure to protect’ legalistic approach to mothers in violent relationships. Services that offer the opportunity to build trusting relationships through dedicated and long-term approaches should be developed that acknowledge the gradual process of recognizing and avoiding violence in relationships within the contextual and developmental aspects of teen IPV.

Professionals should be ready for the ‘pivotal’ moments at which young people can seek help. This support can either be one-to-one or as ‘couple’ counselling. Strategies may differ according to the type of abuse: calculated or ‘spontaneous’. Whilst both individuals need support in the former, the focus may be on supporting the young person experiencing the IPV to extricate safely from the relationship. In the latter, there may be a case for working with the couple to explore ‘triggers’ and strategies to avoid outbursts. This approach supports the growth of critical thought and impulse control across the teenage years. ‘What works’ regarding targeted intervention is beyond the scope of this review and warrants a focused exploration. However, programs such as the Strengthening Relationship Program is an example of an intervention that helped young mothers understand how they communicated and dealt with conflict with their partners, gaining an understanding of the importance of effective communication and conflict resolution strategies through a growth in self-awareness (Toews and Yazedijan, 2010; Toews et al., 2011).

Practical support can also be instrumental in supporting a young person to leave an abusive relationship; professionals can advocate for young people in accessing such support. Baker et al. (2015) noted that health promotion programs often focus on one topic in isolation, which fails to raise awareness among teens of how risks are interrelated. Wider support would include safe housing, legal assistance, reproductive and mental healthcare, and educational and vocational resources as critical supports for extricating from abusive relationships (Bekaert and SmithBattle, 2016). Building a new life requires community resources that are in short supply and difficult to navigate without an advocate (Kennedy et al., 2010).

Prior to all this ‘action’ however, it is vital that the professional examines their own gendered understandings of the perpetration and consequences of IPV. This is to ensure that we are not blind to the specific experiences of young men and women; mindful of the finding that violence in YMSM relationships was rarely challenged due to a normalization of physical violence between men in society, and that in other studies young people felt they would not be believed by professionals. We should also be aware of the contexts of IPV, and that there are cumulative understandings of what is normal in a couple at play in the young people’s own relationships. Such formative understandings, coupled with an evolving maturity of thought and action, makes for incremental change. Furthermore, this trajectory can be waylaid through the added challenges of extricating from gang involvement, or fear of losing your children as a mother in a violent relationship. If a young person decides to remain in an abusive relationship they should command respect in their efforts to cope with complex situations (Davies, 2009) and discussions might center around maintaining safety within the relationship (Renker, 2003). Again, similar to approaches emerging from engagement with CSE evidence, professionals working with young people experiencing IPV should strive towards a ‘fluid’ understanding that takes account of the young person’s particular circumstances rather than applying rigid model approaches (Melrose, 2013: 165).

## Conclusion

Bringing together the findings from two meta-syntheses into IPV in the relationships of teenagers and teenage mothers has given a comprehensive picture of the trajectory, outcomes, emerging challenges, and help-seeking aspects. The wider contextual and developmental dimensions to IPV in teen relationships have also been considered. Similar to IPV across the lifespan, teens can confuse control and passionate reactions as a sign of the importance of their relationship, or even love. Controlling behaviors include monitoring, sabotage of school, work and contraception, and engineering a pregnancy. Such monitoring and control are facilitated and exacerbated by the increasing use of digital media. Whilst violence can be bidirectional it is also gendered, with, on the whole, males seen as aggressors and females as victims. Often violence was tolerated as a reasonable reaction to a behavior, in retaliation or self-defense. For YMSM both partners tended to be perpetrators, and such violence was rarely challenged by people outside the relationship, by comparison to the common understandings of unacceptability of violence within heterosexual relationships. Drugs and alcohol played a significant part in the occurrence of IPV in relationships for YMSM, being almost universally present. Contextual aspects of cumulative traumatic life events and pervasive violence were notable across the studies, and is an important consideration in supporting young people as they begin to question the normalcy of IPV in relationships. The pervasive and powerful discourse of male violence as acceptable and validating is to be challenged, as is the gendered expectation of young mother's assumed responsibility for protecting, or indeed 'failing to protect', their children when in an abusive relationship. The importance of professional reflexivity on their own assumptions regarding such stereotypes cannot be underestimated. Adolescent development is a unique consideration for teens in abusive relationships. Whilst the importance of peer acceptance is powerful and may keep young people in abusive relationships, the development of critical thought over time is a positive resource for recovery.

Professional support can be either preventative or through intervention. Binary gendered stereotypes should be challenged and positive communication and violence avoidance strategies explored. The professional can advocate for the young person with education/work and support agencies, such as housing, and managing finances – which provide sound foundations for independent living. There is a place for ‘screening’ – for IPV, mental health, drug use and adverse life events. However, such screening is a tool to use within, rather than replace, a contextual approach to support. This support should be offered over time, as the young people work their way towards a new narrative for relationship.

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