"Relations among Adolescent Dating Aggression and Psychological, Somatic, and Adaptive Functioning

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Relations Among Adolescent Dating Aggression, Coercive Control, and Psychological and Somatic Symptomatology

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Background

Adolescent dating aggression is a serious social and public health concern affecting youth across the globe. Psychological aggression has been found to have more deleterious effects than physical aggression (Arias & Pape, 1999; Coker et al., 2002). This is especially true for forms of psychological aggression involving power and control (Coker et al., 2002). Although physical and psychological dating aggression (DA) have been shown to be related to negative psychological functioning, little is known about the impact of coercive control (a) in adolescent dating relationships (b) on adolescent boys, (c) on adolescents’ reports of somatic symptoms, and (d) on adolescents’ adaptive functioning.

Hypotheses

Hypothesis 1: Dating aggression victimization—especially coercive control—would be associated with higher levels of depression, externalizing, and somatic symptoms and poorer adaptive functioning.

Hypothesis 2: Coercive control will be a stronger predictor of poorer psychological, somatic, and adaptive, functioning than physical aggression.

Methods

One hundred eighty-three adolescents (65% female; 54.6% Caucasian) from Southwest Ontario who were 16 years of age and older (range = 16-20 years) and in a heterosexual dating relationship were recruited from a number of sources, including local high school, Kijiji.ca, a local newspaper story about “teen love,” community advertisements, and word of mouth. The majority of participants (54%) were in grade 12 or had recently graduated from high school or in grade 11 (28%). Participants presented to an on-campus research laboratory, and after providing consent to participate in the research, they completed several paper-and-pencil questionnaires and were interviewed about recent incidents of dating aggression that had taken place in their dating relationships. The measures of interest in the current study include the Youth Self Report (Achenbach, 1991) to assess depression/withdrawal, somatic complaints, symptoms of posttraumatic stress, externalizing behaviours, and adaptive
functioning; the Physical and Psychological Aggression victimization subscales of the Safe Dates Dating Violence Scale (Foshee et al., 2007) to assess coercive control and physical aggression victimization; the Jealousy and Dominance victimization subscales of the Psychological Maltreatment Inventory (Kasian & Painter, 1992) to assess coercive control victimization; and the Family-of-Origin Scale (Rosenbaum & O’Leary, 1981) to control for family-of-origin aggression in analyses. Participants were paid for their participation.

Results—Descriptives

Results showed that 89% of teens reported having experienced at least one act of coercive control on the PMI (90% young women; 86% of young men), that 57% reported at least one act of physical DA victimization (49% of young women; 72% of young men), and that 92% reported at least one act of psychological aggression (92% of young women; 94% of young men).

Results—Hypothesis 1

To evaluate hypothesis 1, we explored the bivariate correlations among all variables of interest. Hypothesis 1 was partially supported for both women and men with specific forms of poor functioning emerging differentially across the sexes. For women, externalizing behaviours were significantly related to coercive control and/or physical DA victimization and symptoms of posttraumatic stress was associated with coercive control only. For adolescent men, higher levels of depression were significantly related to both coercive control and physical aggression, and male victims of coercive control also reported engaging in significantly fewer activities than men who reported lower levels of CC victimization.

Results—Hypothesis 2

We ran Poisson regressions because most of our criterion variables were non-normal. We ran separate Poisson regressions for each psychological and adaptive functioning outcome variable of interest and for men and women separately. Similar to bivariate analyses, only a few significant effects emerged. In fact, the same significant relations emerged except that coercive control and physical DA no longer significantly predicted depression in men. Instead, the only significant predictor of poor psychological or adaptive functioning for men was that coercive control victimization predicted participation in significantly fewer extracurricular activities—above and beyond the effects of physical aggression and family-of-origin aggression. For women, coercive control victimization was significantly related to higher levels of posttraumatic stress disorder symptoms and externalizing behaviours, again even when controlling for physical
aggression and family of origin aggression. It is also important to note that, unlike physical and controlling forms of dating aggression, family-of-origin aggression was significantly related to poor psychological and adaptive functioning in all but three models (depression for men and social functioning for both men & women)—even after controlling for coercive control and physical dating aggression—demonstrating a robust effect for child maltreatment.

Discussion

Results thus showed that, at the bivariate level, there was some evidence that poorer functioning was related to physical and controlling forms of aggression in adolescents’ dating relationships. As predicted and consistent with past research, coercive control emerged as a significant predictor, beyond physical DA and family-of-origin aggression. However, coercive control was only related to select forms of poor functioning and these seemed to differ for young men and women. Other effects might not have emerged due to fact that (a) the sample was based on a community sample of adolescents, (b) we examined multiple forms of victimization at once; (c) potentially insufficient statistical power—especially among men; and (d) use of normed measures.

Discussion & Future Directions

As mentioned, coercive control was only related to select forms of poor functioning which differed for young men and women. For young women, higher levels of posttraumatic stress symptoms were related to coercive control, which is consistent with what we would expect and with past findings. As for higher levels of externalizing behaviours (which was associated with higher levels of coercive control victimization among young women), items on this scale include such behaviours as substance use, lying, truancy, screaming, mood changes, being suspicious, etc., which appear to be understandable reactions to being controlled and restricted. It could also be that young women might begin to exhibit more impulsive and aggressive behaviours as a way of trying to establish some control in their lives.

Perhaps for young men, their tendency to experience depressive symptoms and to withdraw from outside activities might be explained at least in part by their embarrassment of being controlled by a female partner given existing gender norms. It could also be that controlling women might be drawn to young men who are more reserved and withdrawn.

The robust association between family-of-origin aggression and poor functioning demonstrates how influential violence in one’s family growing up is on functioning, and the need for researchers and clinicians to assess for such experiences and polyvictimization in general.