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Young Mothers' and Fathers' Perceptions of Relationship Violence: A Focus Group Study

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Abstract

Teens and young adults who are pregnant or parenting are important targets for efforts to prevent intimate partner violence (IPV). To intervene appropriately and effectively, we need to fully understand the unique issues and contexts for IPV in this population. This focus group study examined young parents' ($N = 28$) perceptions of their relationships, stressors and sources of conflict, forms of IPV, and help-seeking behaviors. We examined data using template, content, thematic, and framework analyses. Findings about relationships and violence between young parents provide valuable insights for future intervention programs designed to prevent or address IPV among teen parents.

Keywords

intimate partner violence; teen parents; relationship violence; focus groups

Introduction and Background

Teens and young adults who are pregnant or parenting experience high rates of intimate partner violence (IPV). For example, recent studies demonstrate that more than half of pregnant teens attending a prenatal clinic had experienced IPV in their lifetime and that pregnancy and early parenting periods represent periods of increased IPV among teen parents (Agrawal, Ickovics, Lewis, Magriples, & Kershaw, 2014; Milan, Lewis, Ethier, Kershaw, & Ickovics, 2005; Udo, Lewis, Tobin, & Ickovics, 2016). In addition to the potential consequences of IPV for teens in general, which include both emotional and physical impacts for the victim and perpetrator, IPV among teen parents incurs additional risks for their children, including child maltreatment and emotional, physical, behavioral, and social impairments (Born, 2012; Chung, 2007; Gibson, Callands, Magriples, Divney, &

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Kershaw, 2015; Kulkarni, Lewis, & Rhodes, 2011). Given their elevated IPV risk, pregnant and parenting teens have great potential to benefit from prevention programs. There are effective, group-based teen dating violence prevention programs for general populations of middle and high school students. However, pregnant and parenting teens likely have unique circumstances and needs that are not fully addressed with general programs.

The current study is part of a larger project to adapt an evidence-based teen dating violence prevention program for use with young parents. The existing literature did not thoroughly assist us in understanding the issues that would resonate with teen parents and the contexts or situations that would be important to include in an intervention program. For example, it is important to know the stressors that contribute to IPV among teens who are pregnant or parenting, how IPV is experienced by those teens, and their perceived resources and obstacles in addressing IPV. Accordingly, we conducted focus groups with teen and young adult parents to explore these issues.

Review of the Literature

This review summarizes the extant literature concerning teen parent intimate relationships, stressors and sources of conflict in teen parenting, forms of IPV among teen parents, and help-seeking behaviors associated with IPV.

Relationships Between Teen Parents

There are myriad intimate relationship contexts in which teen parents may live and raise their children; however, the literature gives insight into which situations are most common. Ng and Kaye (2012) noted that most teen mothers (88%) were unmarried, with about one third of unmarried teen mothers (34%) marrying before their child turns 5. Kulkarni (2006) and Rosen (2004) described teen parents' intimate relationships as being in a constant state of change and turmoil. Herrman (2013) also noted that teen parents' relationships are often characterized by instability that may not survive the strain of pregnancy or early parenting. Forty-two percent of teen parents cohabiting during pregnancy dissolved their relationship before their child was 5 years old (Ng & Kaye, 2012). This was in contrast with findings that indicated that young mothers often believed that pregnancy will solidify their relationship (Bekaert & SmithBattle, 2016).

A number of relationship characteristics were found to be related to IPV risk. Unmarried teen parents experienced more violence than those who were married, researchers conjecturing that marriage often provided more financial security (Leaman & Gee, 2008). Teen parent relationships were considered at increased risk for IPV if they were characterized by unrealistic goals for a relationship, financial dependency, cohabitation early in a relationship, decreased contact with the family of origin, family pressure to stay in the relationship, and lack of paternal involvement in childrearing (Chung, 2007; Herrman, 2013; Kalil, Ziol-Guest, & Coley, 2005; Kershaw et al., 2013; Milan et al., 2005; Renker, 2002; Toews & Yazedjian, 2014).

Previous studies examined the termination of teen parent relationships. Young parents attributed relationship dissolution to decreased or perceived inadequacy of financial support,

pressure for sexual activity, and a lack of emotional support between partners (Kershaw et al., 2010). However, teen parents often stayed together because they lacked the skills to detect the deterioration of a relationship or were unwilling to end a relationship, leading to stress and the potential for violence (Kulkarni et al., 2011). Teen parents noted that leaving a violent relationship may incite other concerns such as financial instability, family discord and opposition to leaving, and sadness over loss of the relationship or after separation of the family (Dalla, Marchetti, Sechrest, & White, 2010). Milan et al. (2005) found that parenting teens were less likely to leave a relationship in the face of IPV than non-parenting teens who were also experiencing IPV, proposing that teen parents were more committed to a relationship with the parent of their child. This finding was supported by Kershaw et al. (2010), who also noted that relationships that were the least likely to be intact were those in which one's partner was not the parent of one's child.

Despite high levels of instability in teen parents' relationships and relationship risk factors for IPV, no studies have asked teens to describe their intimate relationships and the potential for IPV with a variety of intimate and non-intimate partner types (e.g., their child's father even if they are no longer a couple). There is also a dearth of literature about the dynamics and potential risks involved when teen mothers and/or their children's fathers enter new intimate relationships.

Stressors and Sources of Conflict

Stress is an inherent feature of the first years of parenting that is often exacerbated for teen parents. Stress may be considered both a risk factor for and a consequence of IPV among teens who are pregnant or parenting (Agrawal et al., 2014; Herrman, 2013). Authors contended that pregnancy itself may cause stress that was intensified when the pregnancy was unintentional or unwanted (Florsheim, McArthur, Hudak, Heavin, & Burrow-Sanchez, 2011; Harner, 2004; Lesser, Ocos-Sanchez, & Davis, 2010; Milan et al., 2005; Newman & Campbell, 2011; Wood & Barter, 2015). The response of the family to the pregnancy, the partner, or a new living situation augmented the level of stress, potentially leading to IPV (Dalla et al., 2010). Specific family stressors included family disapproval of the pregnancy or partner, differences in parenting styles between teen parents and family members, lack of family support, and perception of family interference (Dalla et al., 2010; Herrman, 2013; Kalil et al., 2005; Kershaw et al., 2013). However, it is important to note that, at times, family support assisted to mitigate the stress involved in teen parenting (Herrman, 2013).

Teen parents also contended with stressors that would have been present regardless of parenting. Substance use and abuse, depression, and other mental health issues were identified as sources of conflict for young parenting couples (Agrawal et al., 2014; Harrykisson, Rickert, & Wiemann, 2002; Herrman, 2013; Kennedy, 2005, 2006; Kennedy & Bennett, 2006). Usual aspects of having and raising children, including the demands of parenting, financial responsibilities, and lack of sleep, increased levels of stress (Agrawal et al., 2014; Herrman, 2013). Given their age, teen parents may lack coping skills that would allow them to respond to typical parenting stressors in healthy and productive ways (Herrman, 2013; Leaman & Gee, 2008).

The literature also suggests some stressors related to teens' intimate and co-parenting relationships that may be relevant to IPV. These included conflicts over infidelity and jealousy, threatened or actual termination of the relationship due to the pregnancy, and partner involvement in child care or lack thereof (Dalla et al., 2010; Harner, 2004). However, previous studies have not directly asked teen parents about the most common sources of conflict in their relationships.

The Forms of IPV Between Teen Parents

Some behaviors associated with IPV among teen parents were noted to be similar to those of teens who were not parenting and of older parents, but some behaviors were unique to this population (Renker, 2002; Rosen, 2004). Covington, Justason, and Wright (2001) noted the propensity for perpetrators of IPV to inflict abdominal trauma on pregnant women, especially teens. Verbal abuse, sometimes related to lack of perceived competence or confidence in the parenting role, and emotional violence related to parenting styles, disciplining, or the stressors of parenting were noted among some teen parents (Agrawal et al., 2014; Born, 2012; Herrman, 2013; Kennedy, 2005). Researchers identified that abuse among teen parents also included sexual coercion, reproductive coercion or pressuring to have children, refusal to use birth control, sabotaging birth control, or interfering with the use of contraception; these may have led to previous pregnancies or may lead to unwanted pregnancies in the future (Herrman, 2013; Kulkarni, 2009; Miller et al., 2007; Rosen, 2004). Both pregnancy-promoting behaviors and additional unintended pregnancies may further exacerbate stress and IPV (Herrman, 2013; Miller et al., 2007; Toews & Yazedjian, 2014).

Teen parents were found to attempt to exert control over their partners by limiting their educational or work opportunities, ability to meet commitments, or engagement in strategies to promote their success (Bekaert & SmithBattle, 2016; Kennedy, 2005; Rapheal, 2005). Controlling a victim's access to transportation, money, communication, or the outside world, thereby creating social isolation, were other methods to overpower another individual and limit their chances to improve their lives or leave the relationship (Kennedy, 2005; Raphael, 2005; Scheiman & Zeoli, 2003). Control or abuse was also related to access to children. Young mothers limited fathers' access via maternal gatekeeping, including time spent with children, pick up and return times, or changing details of scheduled visits (Berger & Langton, 2011), although the literature did not tend to frame these behaviors as abusive. Young fathers threatened to take children away from mothers if an abused mother proposed to leave a relationship (Born, 2012; Milan et al., 2005). Researchers found that fathers engaged in maternal alienation, a form of emotional abuse that attempted to harm the mother-child relationship (Morris, 2009).

Researchers noted that violence between teen parents was often mutual, wherein both partners engaged in emotionally and physically violent behaviors (Herrman, 2013; Herrman & Waterhouse, 2014; Milan et al., 2005; Newman & Campbell, 2011). Some sources indicated that female partners enacted emotional and minor physical abusive behaviors at a higher rate while males tended to engage in severe physical and sexual abuse (Hokoda, del Campo, & Ulloa, 2012; Sears, Byers, & Price, 2007). In contrast, Newman & Campbell (2011) found that young mothers inflicted more frequent minor *and* severe emotional and

physical abuse than they received, and reported comparable levels of sexual coercion perpetration compared with their partners. Unfortunately, detailed accounts of common abusive behaviors and dynamics between teen parents and their partners are lacking in the literature.

Help-Seeking and Resources

In general, teens were found to be reluctant to seek help from others when in an abusive relationship (Chung, 2007; Florsheim et al., 2011; Rosen, 2004). They feared that they would not be believed, would be constrained due to gender roles that accept or minimize abuse, would be blamed, or their partner would retaliate (Bekaert & SmithBattle, 2016; Born, 2012; Dalla et al., 2010; Kulkarni, 2006; Scheiman & Zeoli, 2003; Wood & Barter, 2015). Teen parents reported the additional fear of being judged as a bad parent when seeking services, which they thought could jeopardize their relationship with or custody of their children (Born, 2012). Teens' concerns about confidentiality and need for privacy, in addition to lack of perceived community resources to enhancing teen parent relationships, further precluded their help-seeking (Bekaert & SmithBattle, 2016).

Positive relationships between teen parents and professionals, including social workers and health care providers, increased confidence in other authority figures and fostered trust in such services as orders of protection, restraining orders, social services, and supports provided by health care agencies (Renker, 2003). Teen parents were also more likely to use family and community resources if barriers such as cost, transportation, and lack of teen or parent friendliness were eliminated (Scheiman & Zeoli, 2003). To adequately tailor an IPV prevention program, it is important to understand resource availability in the local communities and help-seeking barriers for teens in any program's target audience.

The Current Study

Although this literature review demonstrated important work with teens who are pregnant or parenting, we required a richer, more in-depth exploration of perceptions to ensure that our adapted intervention would be grounded in the real contexts of teens' lives and relationships. Specifically, this study aimed to supplement the existing literature with a deeper understanding of the types of relationships in which IPV might arise, salient stressors and sources of conflict in teen parents' relationships, examples of common violence and abusive dynamics, and teen parents' access to resources that could help them have healthy relationships.

Method

Design

This descriptive, qualitative study used focus groups to examine teen and young adult parents' perceptions of and experiences with IPV. Following institutional review board approval from an agency in a southern state in the United States and in partnership with teen parent assistance agencies, we conducted five focus groups: three with young mothers and two with young fathers. Research team members solicited agency participation in the formative focus groups, as well as a subsequent study to test the feasibility and acceptability

of an adapted IPV prevention program for pregnant and parenting teens. Three agencies (one rural and two suburban) agreed to participate in the formative focus groups. Staff from the teen parent assistance agencies recruited participants by sending private emails and messages via Facebook®, sending text messages, and talking with teens in person during program services. For participants younger than 18 years of age, teen parent assistance program staff sought written parental permission during home visits. If this was not feasible, the forms were left at the home, teens took the forms home, or the form was mailed to the home and participants returned it signed prior to or at the time of the focus groups. Researchers and teen program staff obtained teen assent (for teens younger than 18 years of age) or consent (for teens aged 18 or older) prior to the focus groups using an approved script that included critical human subjects' protection information. Participants received snacks and a US\$40 gift card, and were offered child care during the focus groups.

Sample and Setting

Our purposive, convenience sample included 28 participants: 22 females and six males. Participants were 16–22 years old ($M = 19.1$ years) and primarily Caucasian (68%) or African American (29%). Among the females, two were pregnant at the time of the focus groups and the rest were already mothers; all the young men were fathers of infant children. All of the sample members were current or past participants in the teen parent assistance program through which they were recruited. Although the participants were not all teens at the time of the focus groups, they were teens when pregnant and met the criteria for entry into the teen parenting assistance program. Three of the students were in high school or a graduate equivalency diploma (GED) program, five were in college, and the remaining were not in school, either because they had already graduated from high school or because they had dropped out of school. Each focus group was conducted in a quiet, private room at the respective teen parent assistance program sites. Two researchers were present at each focus group, and the groups lasted 75–90 min.

Instrument

The semistructured focus group guide was built on prior experiences of the researchers and an extensive review of the literature. We created separate versions for mothers and fathers. The guides included questions and probing items about individual and relationship risk and protective factors for IPV among pregnant and parenting teens (such as parenting stress or family violence), specific forms of IPV unique to pregnant and parenting teens (such as reproductive coercion, work or educational sabotage, and manipulation of partner's involvement with the child), potential barriers to reducing IPV among pregnant and parenting teens, help-seeking behaviors and resources for teen parents and those involved in IPV, and perceived needs and unique issues related to this population (such as poverty or community violence) that should be considered when delivering prevention programming. All focus group leaders were acquainted with the guide and the intent of the probes and had experience in conducting focus groups.

Data Analysis

Focus groups were audio-recorded and transcribed verbatim. We believe saturation was achieved, wherein no new information or themes were elicited, following the fifth focus

group. Observational notes documenting the nonverbal aspects of the focus groups were merged with the transcriptions, and transcripts were read repeatedly for meaning and to allow for immersion in the data. Data were analyzed using a variety of processes. The extensive review of the literature informed the delineation of major study domains, including relationships between teen parents, stressors and sources of conflict, forms of IPV among teen parents, and help-seeking and perceptions of resources. Template analysis allowed for the data to be organized according to the focus group interview guide questions. These categories were superimposed on the major study domains to create search threads or codes for use in content analysis. Through an iterative, constant comparative technique, researchers conducted content analysis throughout the process of completing the focus groups, with two researchers assessing the data using NVivo (QRS International Pty Ltd, 2014) while another researcher coded the data manually. Content analysis allowed for the extractions of prominent data points, clusters, study domains, and template threads. Thematic analysis identified the major patterns as they emerged from the data, creating a document reflecting themes and exemplar quotes. The researchers shared thematic analyses across the team to increase the credibility, transferability, and authenticity of the findings. Finally, framework analysis offered the ability to place the findings within a matrix that organized study domains, themes, subthemes, and exemplar quotes. Framework analysis, as a means of data organization and interpretation, provided a mechanism to enhance rigor in qualitative data analysis and allowed for deductive use of assigned domains (Gale, Heath, Cameron, Rashid, & Redwood, 2013). The lead author compared coding schemes and themes as identified by each of the coders, yielding very few coding or interpretation discrepancies. These differences were reconciled via discussion among the authors during data analysis.

Results

Relationships Between Teen Parents

Our sample included teen parents and young adults in a variety of relationship configurations. Some were in an intimate relationship with their child's father, whether married, engaged, cohabiting, or living separately with their own parents or alone. Others were in relationships with a new partner, and some denied currently being in an intimate relationship, with one participant indicating "I think it is a waste of time to start over again [in a new relationship]."

Teen and young adult parents commonly talked about jealousy and infidelity in their relationships with their partners. Young parents discussed the potential for cheating and the need to monitor their partners' whereabouts to maintain some level of control in the relationship. Participants also mentioned the potential for their partners' controlling and abusive behaviors to be a manifestation of jealousy and a need to limit their exposure to temptation or other potential intimate partners; one father noted "She put a tracker on my phone." One young mother relayed,

Yeah, they don't want you to meet anybody else, they don't want you to meet somebody better than them that could possibly catch your eye, you see how better they [a new potential partner] are than them [current partner] and you leave them for the person that is better.

Awareness of the conflict in their own relationships sometimes inspired fear that their partner could be easily drawn to someone else: “I don’t treat her ... we don’t treat each other the way we should, so maybe someone else will come along.” Abusive, jealous behavior may persist even after the relationship ended, with one mother sharing,

Or not even cheating, if it’s like a long standing abusive relationship, I knew a friend where there was a time where they had broken up and she went and spent time with another friend that was a male and he came back and found out about it and cut up clothes and there was physical abuse. They weren’t even together ... it still happens.

Although they discussed leaving a relationship as an option, the participants acknowledged that having a baby with an abusive partner made it difficult to leave that partner because of the potential for less financial stability, noting “It is someone who provides things” and “They don’t want to lose what they think they have.” Several focus group members also mentioned the importance of staying with the baby’s father because they believed that “keeping the family together” was important for its own sake. The participants stated that they wanted “to be a family ... they don’t want their child to grow up and their dad be with someone else,” or they do not want children growing up and “when they are old they would say, why did you leave Dad?” Their own families also encouraged them to stay with their partner. In addition, sample members feared the difficulties associated with raising their child on their own.

Participants acknowledged that, as teens and young adults, they were new to dating and did not have the experience to know what abuse looked like or what they wanted out of a relationship. Before they had a chance to make decisions about the relationship’s viability, becoming pregnant put them in a situation where they were now bound in a long-term relationship with someone they may not have stayed with otherwise. One young mother affirmed this with the statement “I think a lot of teen moms are in the same kind of relationship. There is a few that are over-the-top happy but I feel a lot of them are comfortable.”

The difficulties in choosing a new intimate partner seemed to be an additional factor that kept young mothers in their current relationships, or led them to remain single after leaving their relationship. Mothers wanted to be discriminating about whom they chose to date because they did not want to select someone who would be “bad for their baby.” They discussed the need to avoid exposure to multiple men, stating “You don’t want men coming in and out of your child’s life.” They noted that having a child may be a negative when dating, stating “You have to time it right ... you can’t just meet a guy and be like, oh these are my kids” and “There’s a mind-set ‘Well, I really don’t want to date you because it ain’t my kid ... that’s not my responsibility.’” They noted that they did not have much time or the opportunity to find or go out with new partners, stating “You have to make time for yourself, your kids, and then dating.” Therefore, they discussed choosing to stay single or with a less-than-ideal partner rather than seek out a new one, as in “If you’re with someone you want to stay there just because you know that he’s already there” and “Like you probably could be happier with somebody else, but you’re just, you’re fine.”

The participants were astutely aware of the negative influence that their own parents' abusive relationships had on their worldview and on their relationships. They mentioned that victimized teens may be from "toxic homes [that] teach them to be abused" and referred to some homes as "grooming [the] child how to be abused." Participants also considered the impact of home life on perpetrators, saying "They see their fathers hit their mothers, so [they think] 'I probably should do what my father did.'" Focus group members acknowledged that witnessing violence may make teen parents more likely to engage in it in their own relationships, stating it "might teach them not to be violent or it might make them think it's okay to be violent." Several mentioned that they wanted to "end the cycle" or make sure that their own child did not experience the same thing, one father relaying "I'm trying to be opposite [from my parents] ... I'm trying to learn from things that they did and work it into how I can take care of [my daughter]." A young mother concurred with these sentiments, stating "You take the good from your parents and then like change the things that you didn't necessarily agree with."

Stressors and Sources of Conflict

Like many nonparenting teens, our sample noted that the natural processes of growing up, learning about themselves, and navigating relationships with their own parents, peers, and intimate partners were stressful. However, the stressors of normative adolescent development were exacerbated by their roles as parents. Participants noted, "You took on responsibility at an early age ... didn't get to experience and be able to do all the things you wanted to," "You have to mature and grow up for the child," and "You're still learning a lot about yourself and you're trying to teach what you know to the children." Participants said that it was difficult to "be parented while I was trying to learn to parent" and "You don't have as much room to figure out how you want to do things because [your parents] are still parenting you ... especially when you're growing up in the same house." Respondents stated that their parents tried to tell them what to do because they did not think the teens could "figure it out on their own." When the teens lived with parents or could not drive yet, the grandparents were often very involved in the baby's life, making it difficult for the teens to establish personal parenting styles and creating the opportunity for increased conflict over parenting decisions.

Participants said that their own parents created conflict between partners by having differing opinions about the couple's relationship or raising the baby. One teen mother stated, "His parents think that I should spank my child and I don't believe in it so his parents get mad." Others mentioned cultural differences between the father's and mother's families, one mother relaying, "And I think it's more of like because we're not their culture and also because we're also teen parents. They think we don't know what we're doing." If grandparents were intensely involved with helping to raise the baby, conflict emerged between the two teens as they tried to navigate the familial and cultural differences in parenting styles.

The young people discussed the social isolation associated with parenting. As teen parents relayed, "It's harder to do the things you used to do ... your child is in the equation." The child limited their opportunities; parents stated they stayed home and played with their child and that they did not "really feel like going out anymore." Friendships become more distant

because teen mothers had less in common with non-parenting friends, as noted by one participant who lamented, “People who don’t have kids can’t relate to my situation.” A participant added, “Most of your friends won’t be going through what you are going through.” The young parents discussed losing friends and difficulty in making new ones, focus group members noting, “My friends never really said anything bad to me but it’s kind of like they just started fading off” and “We have no friends and that’s so hard.”

Money and responsibilities were consistent stressors and sources of conflict in young parents’ lives. One father emphasized, “Financial stress, definitely, that’s the biggest thing, you know, and just trying to figure out money.” “I’m working full-time ... he’s working full-time ... like it’s still not cutting it” said one mother. Juggling the time commitments of caring for a baby, going to school, and having a job was difficult for them, one teen parent noted, “I think balancing school is the hardest thing.”

Some teens discussed the mixed impact of co-parenting on their relationship with their partner, one stating, “Sometimes it seems like the child is pulling you apart ... but at the same time I felt like she’s brought us together.” Mothers cited conflicts centering around the expectations they had of the baby’s father even if they were not in an intimate relationship with the father. These expectations included spending time with them and the baby, as in “I want him to spend time with the baby ... but he always wants to go party and do other things.” The mothers appeared to resent that the fathers could move in and out of the baby’s life, while mothers were saddled with the primary responsibility for parenting. Two mothers relayed “Men have freedom ... you’re stuck with the baby” and “You’re living with it every day and they are sort of visiting the situation.” The teen parents engaged in conflicts over who should buy supplies for or care for the baby, one mother stating, “I do it all alone ... he has to pay child support ... and other stuff ... but he don’t pay it.” Teen mothers expected the baby’s father to contribute financially to supporting the baby, even if they were not actively involved with child care, noting, “[He should be] getting a stable job ... growing up and doing the responsibilities he’s supposed to do for his children.”

The parents commented that lack of communication skills was a cause of ongoing stress when addressing conflicts, appreciating the need to “solve a problem before it escalates.” Participants mentioned “We just yell ... we don’t actually talk” and “The first year we had her it was really hard. Now we actually talk everything out without screaming at each other.” Stress and exhaustion, along with admitted lack of communications skills, were cited as reasons for poor relationships, one mother commenting, “We’re both tired and we’re ... butting heads.” Another challenge was the lack of private time and space to resolve conflicts, one participant stating, “someone’s always there.” If the teens still lived at home with their parents, needed to be driven around, or the teen’s parents were heavily involved in child care, it was simply difficult to get time alone to communicate about issues.

The participants correlated stress with IPV, one young mom saying, “We were stressed ... I broke his nose ... we started fighting and he broke my jaw ... right in front of the child.” One young father commented, “I never would have thought of harming a woman ... but after marriage and with the stress of being married and having a child ... that thought appeared.”

The Forms of IPV Among Teen Parents

The young parents broadly defined IPV and suggested many behaviors that constituted physical, emotional, verbal, and sexual abuse. Unique to parenting, participants noted that name-calling and putting the woman down, especially right after pregnancy, was particularly hurtful because of the changes in postpartum women's bodies. A young mother shared, "After the baby—a whole new person came out—the fat jokes ... pushing ... hitting ... it just progresses on and you figure out whether to deal with it or move on."

Our participants discussed that young parents may threaten to limit contact with children to control each other, though mothers and fathers would use this threat in different ways. For example, one mother threatened, "If you don't send me money this month—then you won't see him [the child] no more." However, young mothers more frequently discussed limiting access to the child to protect the child from an unreliable father, rather than as a way to manipulate. This was exemplified in this young mother's statement:

If you feel that you're doing something to protect your child or if you do feel like you reserve that right, if you feel like someone's in and out [of their life], you have to think about your child's life, you have to choose.

In contrast, the father might threaten to take the child away if the woman left the relationship—one young man conjectured, "You don't agree with me and I am going to keep the baby from you."

The young mothers cited a variety of experiences related to partners' limiting access to school or work. For some teen mothers, restricting access to school or work was primarily because of gender role expectations of the mother as primary caregiver. Mothers relayed, "he didn't want me working ... some men like to be the provider" and "Because I know a lot of men are against the women working, that they should be home taking care of the house and the children." With others, especially younger teen mothers, limiting opportunities to meet someone else of the opposite sex was also a factor. One participant stated, "Some days he'll want me to go to school or he'll like encourage me to get a job, and then the next day he's like, 'I don't want you going out and, you know, meeting another guy.'" Another reason for limiting access was the insecurity that if the mother goes to school, she could better herself by furthering her education, making the partner less appealing. This was exemplified by the quote, "Their self-esteem is not where they want it to be and [they] feel like if you go and further yourself then you're going to be a better person than them."

Young mothers identified sexual coercion as another form of IPV, stating, "he was beating up on her because she didn't want to have intercourse," "they are using your body parts to control you," and "[Partners say] If you don't give [sex] to me, someone else will." They also noted that men tried to pressure the mother into sex right after childbirth; one young man said, "A man has needs." Young women defended not wanting to engage in sexual activity and the need for partners to respect that decision, indicating that forced sex was considered abuse, with one participant noting, "It becomes a power thing." One young mother expressed, "You want to protect your body—you want your body to heal and you don't want to get pregnant again, but you want to keep that person happy." Reproductive coercion and birth control sabotage were described as being inflicted by both genders,

participants mentioning “my husband is against birth control but this is my body, my decision,” “he said ... if you love me—I don’t like using condoms,” and “She’d poke a hole in the condom before she used it.”

The mutuality of violence was noted by our sample. Male-perpetrated abuse of women was thought to be intentionally conducted to control or hurt women, whereas female abuse or aggression against men were characterized as more sporadic and spontaneous in reaction to stress. One young father relayed, “She’d throw things at me and I would run real fast and lock myself in the shed.” Some mentioned that abusive men targeted insecure women, but that a woman abusing her partner was not as intentional or premeditated. The focus group members acknowledged that teen mothers, at times, abused their partners in punishment for something they did wrong in the past. They discussed that abusive behaviors may take the face of retaliation, one mother noting, “They did this to me last week and I will get back at them.” They noted that some teen mothers abused their partners for any infraction, as small as not changing the diapers correctly or as large as cheating. When asked about who initiated abusive episodes, young mothers agreed that women were often the instigators because they would verbally attempt to agitate their male partner. This would escalate into more violence when their partner “snapped.” They said they often “nitpicked” or tried to annoy their partners “just because they can.” Participants noted, “I think there is a lot of women out there who instigate it and then blame it on the guy” and “Females start it and it just keeps rolling.”

Help-Seeking and Perceptions of Resources

Our sample members discussed reluctance to seek help with relationships and demonstrated little knowledge of resources to assist with conflict and abusive relationships. Participants felt that victims often “keep it hid—you keep it to yourself.” They acknowledged that because they were teens or young adults, they would first go to their friends for help. However, they believed that their nonparenting friends would not understand their circumstances and could not help them, stating, “They try to be empathetic but they can’t because they haven’t lived it” and “Non-parenting teens— they don’t understand what you mean—they don’t have the extra responsibility.”

The teen parents discussed the value of having other teen parents in groups and programs with them, noting, “Being in a group of teen mothers is easier than being in a group of friends that none of them have kids but you.” When conversing with other teen or young adult parents, not in the presence of their partners, participants discussed the ability to be candid, stating, “They can give you advice without judging you or judging the person who is beating you, or taking actions to get them in trouble because that’s not what you want to happen.” The ability for young parents to empathize with each other’s situations, as reflected in this statement, “Talking with people who have the same problems ... you feel more at peace knowing that it’s not just your problem,” demonstrated the importance of peers and support from those who could relate to their situation. Despite its recognized value, few participants cited actually getting together or having any relationship with other parenting teens outside of their teen parent assistance program.

Participants also mentioned family members as resources to turn to in an abusive situation. However, others cautioned that “You keep that part of your relationship hid from your parents and you deal with it by yourself” and “Parents are going to call the police ... they’re going to jump on them ... it’s going to be a mess.”

Participants noted that their teen parent assistance program and staff were both accessible and highly supportive. The teen parent counselors were cited for being available, as in “I call her all the time ... I get ideas from her” and able to meet the needs of the young parents, participants saying “they give us money for food ... take you to Goodwill and get you some clothes ... they are really helpful and really nice.” Despite their reluctance to seek out resources, the sample members appeared to value supports, one young mother stating, “Having someone to go to for advice ... that’s always helpful.”

The young parents were unable to propose community supports to go to for help in an abusive situation, stating, “Teen parents are overlooked a lot when it comes to resources.” Another mentioned, “We are part of a group that you really need to be reaching.” Some suggested that resources that may be helpful, like counseling, were unaffordable, one mother lamenting “We don’t have anything [in this community] that will let you go with Medicaid or anything.” They also mentioned that there was intense, negative stigma against young, unmarried couples with children, so they did not feel like they could turn to the community for help, one stating

Young parents already have this stigma—that we are going to break up or whatever ... it’s not going to be positive ... so if something is going wrong with your relationship, you may not be so quick to reach out and seek help.

Participants valued education about relationships and communication. One father noted, “I think talk about communication obviously is huge ... talking about the differences between how men and women communicate.” Another said there “should be help to couples to be better in a relationship but also to help people who aren’t in a relationship find the right person.” The “early warning signs of violence in a relationship” were also noted as critical for this population’s learning needs.

Discussion

The four domains identified early in this study related to IPV among young parents provided the framework for emerging, underlying themes (See Figure 1). The first domain was related to the nature of teen parent intimate relationships. These relationships varied in terms of who the partners were (co-parents or new partner), their status (dating, engaged, married), and residential status. However, regardless of configuration, relationships were frequently characterized as involving jealousy and infidelity. These elements were identified in the literature, several researchers noting the potential for control and jealousy in teen parent relationships to escalate into IPV (Dalla et al., 2010; Herrman, 2013; Rosen, 2004; Toews & Yazedjian, 2014). Although our sample identified the potential for jealousy and cheating to lead to abuse and control, they appeared to relate to and identify with both the victims’ and the perpetrators’ perspectives. Participants noted that these conflicts may be associated with the temptation to engage in infidelity in response to the stress of parenting, their level of

maturity, how they defined monogamy, and their lack of readiness to settle into permanent relationships. They also cited the need to control their partner's behavior to reduce the opportunity for cheating, also reflecting maturational perspectives on relationships.

The relationships were also perceived as being difficult to leave and hard to replace. These traits may be related to the largely unintentional nature of the pregnancy, the developmental capacities of the young people to deal with stress and relationships, the tenuousness of young relationships, and interpersonal pressures and demands that often serve to augment, rather than mitigate, the stressors of parenting (Kulkarni, 2006, 2009; Newman & Campbell, 2011). It is not known whether teen parents experience greater barriers to leaving a relationship than older parents, indicating a need for further investigation.

Sample members, especially young mothers, discussed the need to protect their children from temporary or less than optimal men. Although the literature explored the difficulty encountered by victims in leaving a relationship, the finding that young parents "settled" into less than satisfying relationships was new. Economic, familial, or personal factors were perceived in the literature as enough impetus to stay in a relationship (Baekert et al., 2016; Herrman, 2013; Wood & Barter, 2015). Our participants described, instead, that the amount of energy, time, and effort that would be needed to end their current relationship and start a new one was sufficiently daunting, encouraging them to "settle" for their current partner. The sample members' accepting and resigned references to their current relationship was not expected by the study team. For young people to express such levels of fatalism about their life and relationships contrasts with previous descriptions of young people's relationships in the literature depicting them as more short-term with less devotion to continuing relationships, especially in the face of difficulties or adversity (Bekaert & SmithBattle, 2016; Herrman, 2013).

Our findings indicate, as noted in other research, the influence that families of origin have on their parenting children's relationships (Lesser et al., 2010; Rosen, 2004; Toews & Yazedjian, 2014). This may be associated with childhood experiences as teens watch and role model parents' positive and negative relationships. It may also be related to the support or lack of assistance parents or guardians and other family members may offer teen parents. Leaman & Gee (2008) noted that parental attitudes that normalize violence as part of relationships may set the stage for IPV.

The second domain focused on the stressors experienced by teen and young adult parents. These included the complications of normative adolescent development, conflict with one's parents about parenting, social isolation, having additional and competing responsibilities, needing to co-parent, and lacking communication skills to deal with relationship conflicts. Participants linked these stressors to IPV. One area of stress cited by our sample members concerned the potential for the parents of young parents, and their offered or provided assistance with parenting, to be perceived as both positive and negative in nature. Our participants discussed, across focus groups, the difficulties associated with "parenting while being parented." The literature often portrays grand-parent assistance as a beneficial, if not mitigating factor, in young parent success (Herrman, 2013). Our sample members also expressed frustration and anger in response to parental help, which they often referred to as

interference and “overstepping” in the lives of young parents. As teens and young adult parents engaged in developmentally appropriate behaviors to separate themselves from parents and establish their own identity, their own pregnancy and parenting necessitated a dependency on parents that led to clashes and conflict. The urge to be an independent parent on the part of young people was confounded by financial stress, the need for help with child-rearing to accomplish daily commitments, and a lack of knowledge about parenting. Our sample members also had disagreements with their parents about parenting styles, further exacerbating stress.

The third domain related to unique forms of IPV that teen parents experience. Our group discussed verbal abuse in the form of body shaming of postpartum partners as a type of IPV. This finding was not previously found in the literature but represented an important consideration as we created an intervention for young parents. Previous studies focused on limiting or restricting contact with children among couples across the life span and the propensity for this to be cited during conflicts to exert control over a co-parent (Berger & Langton, 2011; Born, 2012; Milan et al., 2005; Morris, 2009). Although our participants referred to limiting their partners’ contact with their children, the idea that this was done to control or abuse their partner did not resonate with our group. Instead, these restrictions were enforced to protect their child from exposure to a negative influence, behavior, or trait their partner may bring to the family. Participants relayed that these restrictions often led to conflict and the potential for abuse. These observations were not previously cited in the literature, indicating an area of future study.

Both young fathers and mothers discussed limiting access to school and work, although our group attributed it to gender roles in parenting in addition to exerting control or power over a partner. Our group discussed sexual coercion, reproductive coercion, and birth control sabotage as they related to IPV. Our findings are similar to those of Miller et al. (2007) and other researchers, but represent a need for in-depth study as they pertain to teen and young adult parents in a variety of relationship and living configurations.

Although noted by other researchers (Herrman, 2013; Herrman & Waterhouse, 2014; Milan et al., 2005; Newman & Campbell, 2011), the degree of mutuality of violence discussed by our participants reflects an important finding as we develop prevention interventions. Much literature and intervention is devoted to male-perpetrated and female-victimized violence, wherein the outcomes of such violence are found to be more negative for female victims and the severity of violence greater when perpetrated by males (Chung, 2007). Although the significance of this should not be minimized, our sample members discussed the mutuality of violence and control, the ability for females to instigate conflict while expecting retaliation for hurt inflicted upon partners, and the shared responsibility for IPV often found in teen parent relationships (Herrman, 2013). Retaliation was often initiated for actions from the recent or distant past. As in other research, though, our sample discussed the tendency for women to use more verbal and emotional tactics, whereas males were thought to be more likely to resort to physical violence and sexual coercion (Hokoda et al., 2012). Although Newman & Campbell (2011) surmised that mutual violence is often the product of reciprocation of violence and may be in self-defense, our findings related to young mothers’ instigation of this mutual violence have not been previously noted in the literature.

Our fourth domain related to help-seeking and resources for IPV. Our sample substantiated the findings in the literature that teens are unlikely to seek out support for relationship problems or IPV (Renker, 2003). When they did conjure up the courage to seek help, our sample was unaware of the local resources available. It is not known whether this represents an actual lack of services, an educational deficit on the part of the young parents, or the young people's perceptions that the teen parent assistance programs were adequate in meeting their needs. The participants in this study validated the importance of peer support and the inadequacy of nonparenting peers in meeting this need. They reinforced the value of establishing relationships with other young parents and of the teen parent support resources that allowed them to meet each other. Interestingly, they did not appear to see their personal role in finding peers with similar social circumstances but, instead, saw this as the responsibility of others or adults in their world. The role of peer support in addressing IPV among young parents represents another area of potential study.

Sample members were emphatic about the stigma associated with teen parenting and the role this played in their reticence to seek resources. Sample members discussed the supposition that young relationships will fail, so young parents may be reluctant to seek help and "prove" negative adults in their world "right." Several members expressed the need to keep problems to themselves to be considered better qualified for the parenting role, thereby neglecting their own educational or social service needs.

Implications for Intervention

The purpose of this study was to inform the adaptation of an existing dating violence prevention program. Indeed, we did learn more about appropriate messaging and content for a program for pregnant and parenting teens. In general, existing teen dating violence prevention programs (e.g., Foshee & Langwick, 2010) have messages and content that are consistent with what young parents experience: Intimate relationships can take a variety of forms, it can be difficult to leave an abusive partner, stress is a risk factor for IPV, good communication can help reduce stress and IPV, and there are social and community resources to assist teens experiencing IPV. However, our study underscored enhancements that might help to increase the relevance and comprehensiveness of a tailored program. Teen and young adult parents have additional barriers to leaving an abusive partner. They experience additional forms of stress and unique forms of IPV that are not typical of the teen experience. They may also have a harder time asking for and receiving help, in part due to a lack of true peers, unique family pressures, and stigma around teen parenting.

This study also reveals intervention needs beyond our current curriculum adaptation project. It suggests that targeting the unique stressors accompanying teen parent-hood may be a viable strategy for reducing IPV. For example, young parents could participate in programs like Family Foundations (Feinberg & Kan, 2008) to improve their co-parenting skills. Teen parents and grandparents might also benefit from participation in a family-strengthening program (Kumpfer & Alvarado, 2003) that is adapted to address the unique challenge of their new family dynamic.

The unique forms of IPV that teen and young adult parents experience, including limiting access to school and work and reproductive coercion, also suggest potential intervention points for this population. For example, educators and employers could be trained to intervene with young parents who are frequently absent from school and work. This might include helping teens and young adults identify barriers to attendance, identifying work-arounds for those barriers, and linking to IPV-related resources as appropriate. Health care providers for teen parents can suggest long-acting reversible contraceptive methods that are not susceptible to sabotage. Finally, the participants in our study suggested community supports that might be helpful to them. These included opportunities to interact with other teen parents and IPV-related services that are accessible, affordable, and welcoming for teen parents.

Limitations

This study was limited by several factors. Our sample had a mean age of 19 years. This reflects the older end of the age spectrum of teens and may limit the applicability of the findings to younger teens. Our participants were predominantly female, some of whom were in a relationship with the father of their child, in a relationship with a new partner, or not in a relationship at the time of the focus groups. In contrast, fewer males participated in the study and all the young men were involved in a relationship with the mother of their child. The responses of the teen fathers or fathers in different relationships, therefore, may be underrepresented in this analysis. Newman & Campbell (2011) discussed the need to address gender and sexual orientation in teen parent families. Although we did not ask about sexual orientation, many of the teen parents discussed partners of a different gender, so we assumed that our sample was predominantly heterosexual. Therefore, our results may not fully represent the experiences of homo-sexual couples. Our sample was drawn from parents involved in a teen parent assistance program and already engaged in some social service programming. This suggests that our sample may have better resources and fewer risk factors than teen parents who are less connected. Addressing the needs identified in our study would likely benefit all teen parents, but we would need to learn more about how best to reach and intervene with teens who are not already connected to services.

Conclusion

Our findings enrich what we know about teen parent relationships and were used to adapt a teen dating violence group-based curriculum for the specific needs of teen parents. Our results may also prove useful as others intervene to enhance not only the health of teen parent relationships but also their ability to have a healthy family life and raise healthy children.

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Biography

Judith W. Herrman is a nurse, researcher, and emerita professor at the School of Nursing, University of Delaware. Her research focuses on adolescent sexual development and sexual decision making, teens who are pregnant or parenting, and intimate partner violence. She explores adolescent and young adult brain development and how these impact learning. She is recognized as a national and international speaker, with numerous publications, on creative teaching strategies and fostering learning across the life span.

Lori-Ann Palen is an evaluation researcher in the Behavioral Health and Criminal Justice Division at RTI International. Her work focuses on the evaluation of interventions to prevent adolescent substance use, sexual risk behavior, and dating violence and to promote positive youth development. She received a PhD in human development and family studies from the Pennsylvania State University in 2008, and she is a former pre-doctoral fellow in Penn State's Prevention and Methodology Training program, funded by the National Institute on Drug Abuse.

Marni Kan received her MS (2004) and PhD (2007) in human development and family studies from the Pennsylvania State University. Her graduate work focused on family relationships and promotion of positive coparenting at the transition to parenthood. Since 2007, she has worked as a research psychologist at RTI International. Her research focuses on evaluating programs and practices that promote healthy intimate and family relationships and prevent intimate partner violence/teen dating violence, sexual violence, and unintended pregnancy.

Mark Feinberg, PhD, is research professor in the Prevention Research Center, the Pennsylvania State University. He conducts a range of bio-psychosocial research on youth, families, and communities. He has developed and/or tested several successful prevention programs addressing family conflict and violence, youth substance use and mental health, adverse birth outcomes, and childhood obesity.

Jennifer Hill received her master's of public health in health behavior in May 2015 from the University of North Carolina. Following graduation, she accepted a research position at RTI International. Her research is primarily qualitative and focuses on intimate partner violence prevention.

Erin Magee received her MPH and MSW from the University of North Carolina at Chapel Hill. Following her graduation in 2015, her research has focused on the prevention of sexual assault in the military, the prevention of intimate partner violence (IPV) among pregnant and parenting teens, the content of sexual misconduct policies from colleges and universities in the United States, and IPV among transgender populations. She currently works at the North Carolina Institute of Public Health.

Katherine M. Haigh received her BSN (2001), MSN (2007), and currently is working on a PhD at the University of Delaware. Most of her clinical work has been in the field of reproductive endocrinology, although she has worked with both adults and children throughout her 16-year career as a nurse. She has a passion for education and research, with

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DOMAINS AND THEMES IDENTIFIED IN FOCUS GROUPS

Relationships Between Teen Parents

- Varying configurations
- Jealousy and infidelity
- Difficulties in leaving relationship
- Difficulties in finding a new partner

Stressors And Sources Of Conflict

- Complication of normative adolescent development
- Conflict with parents over parenting
- Social isolation
- Additional and competing responsibilities, including money
- Co-parenting
- Lack of communication skills
- Links with intimate partner violence

Forms Of Intimate Partner Violence

- Body shaming
- Limiting contact with children
- Limiting access to school and work
- Sexual coercion
- Reproductive coercion and birth control sabotage

Help-Seeking And Perceptions Of Resources

- Reluctance to seek out resources
- Friends
- Other teen parents
- Family
- Teen parent assistance programs
- Community supports
- Educational programs

Figure 1.
Domains and themes identified in focus groups.