Making a Difference . . .

Interpersonal Violence and Adolescent Pregnancy

ISSUE IN BRIEF

Interpersonal violence and adolescent pregnancy are intricately intertwined. While no national data is available on all aspects of the relationships between these two factors, state and other evidence strongly indicates a direct connection. Many adolescents are currently in violent or coercive intimate relationships (Leiderman S., Almo C., 2001). This is particularly the case for adolescents who become pregnant. For this reason, there is a tremendous need for support systems to assist young families trapped in abusive situations. Closer examination of the Temporary Assistance for Needy Families (TANF) program reveals that many of its policies could place adolescent parents in danger of interpersonal violence. Thus, both legislators and advocates must be mindful of how welfare reauthorization contributes to and affects the lives and safety of teen parents.

Putting Healthy Teen Network’s Advocacy Resource Guides to Work

You can use Healthy Teen Network’s Advocacy Resource Guides to:

1. Urge local and state policymakers to address issues that are important to the health and success of today’s youth.
2. Educate school administrators or health care officials about unique issues facing adolescents.
3. Engage with the media (e.g., in a letter to the editor or an interview) using effective language to frame an issue facing youth.
4. Present to funders on why they should invest in your work with or on behalf of youth.
5. Connect to more information on youth issues and other organizations advocating for youth.
BACKGROUND INFORMATION

The Concern

Interpersonal violence and adolescent pregnancy frequently intersect and place young mothers and families in hazardous situations. Research indicates that adolescents and young adults experience the highest degree of intimate violence of any other age group and that 16 to 24 year old women are the subgroup most likely to be victimized. (Family Violence Prevention Fund, 2004). Of these young women, teen mothers are especially vulnerable to interpersonal violence. Poverty, past sexual abuse, low educational attainment and estrangement from family members or friends are contributing factors to this abuse. Adolescent mothers are frequently trapped in violent relationships due to an emotional or financial dependency on their abuser. Often, they do not have access to shelter, money, or transportation and feel too intimidated or ashamed to ask for help.

Marriage promotion initiatives, mandated under current TANF law, are dangerous propositions because they encourage adolescent mothers and adult women to remain in life-threatening relationships. They also promote a message of sustained female dependency. Young women are being discouraged from achieving economic self-sufficiency simply to increase marriage rates, regardless of whether it is in the best interest of the individuals involved to get or remain married. The lesson becomes that the only avenue young mothers can turn to for financial and physical safety is matrimony. (Legal Momentum, 2006).

Prevalence

For adolescent mothers, the incidence of interpersonal violence is fairly ubiquitous and considerably higher than adult women. A little over twenty-seven percent of teens report experiencing abuse, compared to 15.9% of adult women. (Rosewater, 2003). In one study of 724 young mothers, aged 12 to 18, one out of eight pregnant adolescents reported physical abuse by the baby’s father during the preceding 12 months. (Family Violence Prevention Fund, 2004). Another state-specific survey of new mothers (PRAMS) found that 26% of women between 13 to 17 years of age experience violence before, during or just after pregnancy. (Center for Assessment and Policy Development, 2001).

Poverty adds to a teen mother’s already precarious state. Young mothers on welfare face increased rates of physical and emotional abuse, intimidation, and birth control sabotage by their partners. Moreover, rapid repeat pregnancy (RRP), miscarriage, and spontaneous abortion rates are higher among low-income adolescents who experience interpersonal violence. (Family Violence Prevention Fund, 2004).

Male teens can also be victims of interpersonal violence but the affect of the violence is often entirely different. Mutually violent relationships among adolescents are increasingly common, with 66% of 77 adolescent study participants reporting that they were both the recipient and the perpetrator of abuse. However, female teens in these relationships caused more minor injuries to their partners, while male teens were more likely to inflict substantial injuries like choking, burning, and/or sexual victimization. (Armour, 2000).

Impact on Behavior

For adolescent mothers, interpersonal violence may lead to depression, anxiety, and disillusionment with children and life. Physical injury or emotional disaffection could affect a teen mother’s capacity to carry out vital parenting functions. This can severely impair a child’s connection to their parents and have negative long-term repercussions. Furthermore, a marked decline in their mother’s sense of self-worth could significantly affect a young child’s emotional and behavioral development. (Rosewater, 2003).

Interpersonal violence impacts teen mother’s behavior in various ways. Adolescents may have been victims of incest or sexual abuse and become pregnant as a result of this violence. If not, prior abuse may have contributed to teen mother’s
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placing themselves in unsafe living situations or self-medicating with drugs or alcohol, and thus becoming even more at risk. Regardless, interpersonal violence and adolescent pregnancy rates display immense correlation.

Teen parents are usually unprepared for the stress, responsibility and pressures of parenthood, and find themselves emotionally ill-equip to summon the patience and will that the role demands. When combined, these two factors can manifest into anger, violence and eventually abuse. Abstinence-only-until-marriage programs don’t relay facts regarding interpersonal violence and promote narrow gender roles. Similarly, TANF funded marriage promotion programs don’t provide adequate protection for adolescent mothers against intimate partner violence. For this reason, there is a tremendous need for the creation and implementation of support systems to assist young families trapped in abusive situations.

ACTION RECOMMENDATIONS

Healthy Teen Network makes the following recommendations in order to increase awareness about the link between interpersonal violence and adolescent pregnancy and monitor welfare reauthorization. We strongly urge the creation of comprehensive support services that address the physical, emotional, and social concerns of violence survivors and advocate the widespread prevalence of these programs.

Awareness

✓ HTN recommends widespread efforts to inform, educate, and train practitioners and policymakers about the nature, extent and consequences of interpersonal violence and its links to adolescent pregnancy.

Education

✓ HTN recommends trauma-sensitive comprehensive sexuality education that:
  • Includes information on the prevalence of interpersonal violence in this country, and the different forms that violence can take in relationships;
  • Includes a component on how to deal with coercive behavior; and
  • Refrains from shame- and fear-based approaches as well as abstinence-only-until-marriage for they run the risk of re-traumatizing victims of violence.

✓ HTN recommends that practitioners have access to relevant best practices and receive training to identify typical consequences, behaviors, and attitudes stemming from violence and abuse and link adolescents with appropriate supports, programs, or treatment. They will also need to have access to secondary trauma support to prevent compassion fatigue.

✓ HTN recommends that abstinence-only-until-marriage as the sole strategy for adolescent pregnancy prevention is inappropriate for a number of reasons including the high levels of coercion and violence in the lives of adolescents. Since teens’ ability to choose abstinence is often compromised, it is imperative that we give adolescents all of the information and skills they may need to prevent pregnancy and sexually transmitted infections.

Support Systems

✓ HTN recommends that supports for adolescents who have experienced interpersonal violence should balance strategies that build on and reinforce their strengths and resiliency with strategies focused on acknowledging and recovering from trauma and victimization.
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✓ HTN recommends that changes be made in subsidized housing programs and domestic and homeless shelters to ensure that adolescent and their children can be placed in safe, stable and supportive housing. Pregnant and parenting adolescents who experience interpersonal violence need safe places to live, both in the short term when they are in crisis and for the longer term as they parent their children.

✓ HTN recommends that youth workers, eligibility workers, and others who influence or inform teens about TANF regulations should understand fully, publicize, and implement existing exemptions to the minor parent living arrangement provisions in TANF. Further, HTN recommends a transitional determination of eligibility to give teen’s time and opportunities to disclose information about interpersonal violence in their lives. Safe housing must be provided that allows parents and children to stay together (unless the minor parent is the perpetrator of the violence).

Behaviors

✓ HTN recommends caution about promoting marriage among adolescents because of the prevalence of interpersonal violence in the lives of pregnant and parenting adolescents.

✓ HTN recommends resources to reduce or eliminate interpersonal violence in the lives of children and adolescents should be targeted to both men and women. Further, we believe it is important to acknowledge differences between the ways men and women experience violence in targeted programming and practice.

✓ HTN recommends that the bonuses awarded to states that show the greatest reductions in the rates of out-of-wedlock births should be eliminated. This is consistent with our recommendation for caution when promoting marriage among adolescents. Rather, we recommend these resources be redirected to reducing rates of adolescent pregnancy through researched-based pregnancy prevention programs, including comprehensive sexuality education.

✓ HTN recommends that each state and program review its regulations and practices with respect to paternity establishment, to make sure they are not putting adolescents at increased risk for interpersonal violence.

✓ HTN recommends that states affirmatively identify pregnant and parenting adolescents who have been victims of interpersonal violence and may have difficulty meeting the applicable work, school, or living arrangement requirements. For these adolescents, states need to provide a qualified program that:
  ▪ Re-establishes housing, income, transportation and other supports;
  ▪ Reinforces skills needed for school success that may have been disrupted by interpersonal violence;
  ▪ Begins a process of healing and discovery

Funding

✓ HTN recommends increased funding for:
  ▪ Initiatives designed to promote awareness regarding the link between adolescent pregnancy and interpersonal violence
  ▪ Programs that discuss relationship violence prevention and warning signs
  ▪ Support systems that provide safe shelter, food and legal counseling for violence survivors.
  ▪ Training resources for sex educators, health and social services professionals that articulate how to teach communicate interpersonal violence issues to adolescents; producing educational resources for teens with basic issue and contact information on it, like bookmarks, pamphlets, magnets, and/or key chains.
  ▪ Advertising and marketing in markets easily accessible to adolescent audiences—i.e. print ads in teen-oriented magazines, television spots, bus stops, daily planners, etc.
DEFINITIONS

Interpersonal violence (also called relationship or intimate partner violence): while there is no standard definition, interpersonal violence is usually defined as violent acts between individuals including throwing an object at someone, pushing, slapping, kicking, hitting, beating up, threatening with a weapon and using a weapon. Interpersonal violence may also include sexual assault, sexual abuse, stalking, psychological abuse, enforced social isolation, intimidation and the deprivation of key resources such as food, clothing, money, transportation or health care. (Technical Bulletin: Domestic Violence, No. 209, American College of Obstetricians and Gynecologists.)

Compassion fatigue: for a practitioner, cumulative feelings of being overwhelmed, exhausted and/or unable or unwilling to continue one’s efforts to assist victims of maltreatment. Compassion fatigue is particularly likely to occur when a practitioner cannot access the resources to help everyone with whom he or she works, and/or when the root causes of the maltreatment persist.

Secondary trauma: trauma experienced by a practitioner (or other person) trying to support or treat an abuse victim. Secondary trauma can be the result of repeated exposure to overwhelmingly painful or graphic information (especially in high volumes) and/or from resurfacing of one’s own past abuse or trauma as a consequence of working with others.

Trauma-sensitive: a condition of heightened awareness about the nature, extent and consequences of violence or abuse reflected in, for example, practitioner choices about how to work with young people, curricula offered, incentives and sanctions built into eligibility requirements and guidelines for programming, practitioner training and legislative and other policies affecting young people.

Temporary Assistance for Needy Families (TANF): a current federal welfare program first created in 1996 as part of the Personal Responsibility and Work Opportunity Reconciliation Act. Benefits of the program are limited to 60 months in a person’s life and recipients must participate in some type of work activity in order to receive them. Work activity can be fulfilled by employment, job searches, community service, job training and/or education. Program expires every five years and must be reauthorized by Congress.

Marriage promotion initiatives: government programs that use TANF funds to persuade unmarried parents to marry and deter separation or divorce. Marriage promotion programs support two parent households and aim to give low-income couples greater access to marriage-education services.

Rapid Repeat Pregnancy (RRP): pregnancy onset within 12-24 months of the previous pregnancy outcome. (Family Violence Prevention Fund, 2006)

ABOUT HEALTHY TEEN NETWORK

Healthy Teen Network (HTN) is a national membership organization that provides resources and services to professionals working in the field of adolescent reproductive health – specifically teen pregnancy prevention, teen pregnancy, and teen parenting.

Healthy Teen Network believes youth can make responsible decisions about sexuality, pregnancy and parenting when they have complete and accurate information, resources, and support that are culturally relevant and appropriate to their age, gender, and developmental stage.
REFERENCES


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Grateful acknowledgement is made to Healthy Teen Network for the use of the following materials: [insert here]