

***Dating Matters*TM: The Next Generation of Teen Dating Violence Prevention**

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This Special Section was introduced with the assertion that most programs, to date, have been ineffective in preventing intimate partner violence (IPV) and teen dating violence (TDV) because they do not take into account recent work about the development and nature of IPV/TDV (Capaldi and Langhinrichsen-Rohling 2012). Each contribution highlighted dimensions of relationship functioning that can be used to inform the development of prevention programs. The findings in this issue underscore the importance of considering the independent and interactive effects of risk factors occurring at each level of the social ecology, such as alcohol use (Reyes et al. 2012) and violence in the home (Ehrensaft and Cohen 2012), as well as the importance of developing prevention strategies for high-risk groups (Langhinrichsen-Rohling and Turner 2012) that target both boys and girls (Chiodo et al. 2012; O’Leary and Slep 2012) and are strategically administered at key times in adolescent development to stop the initiation or persistence of violence across time and relationships (O’Leary and Slep 2012; Shortt et al. 2012). As national estimates of the frequency of physical dating violence victimization have remained unchanged over the past decade (Centers for Disease Control and Prevention (CDC) 2011), the translation of these findings into effective prevention programs has the potential to transform the field of partner violence prevention.

Although some programs (e.g., *Building Lasting Love*, Langhinrichsen-Rohling and Turner 2012) that reflect these findings have been developed and evaluated, a transformation of the field would require the refinement of many programs currently in practice and the development of new prevention approaches. As an example of a new comprehensive approach that reflects some of the critical findings in this Special Section, the Division of Violence Prevention at CDC is embarking on a new initiative: *Dating Matters*TM: *Strategies to Promote Healthy Teen Relationships*. This commentary describes the programmatic strategies involved in *Dating Matters*TM, when and with whom these strategies will be implemented, and additional characteristics that have been incorporated to enhance the public health impact of the initiative.

*Dating Matters*TM involves a variety of primary prevention strategies to address gaps in prevention programming for youth in urban communities with high crime and economic disadvantage, who may be at highest risk for TDV perpetration and victimization (O’Leary and Slep 2012). To address boys’ and girls’ dating violence (e.g., Chiodo et al. 2012; O’Leary and Slep 2012) and to accommodate transient and amorphous dating relationships that often occur in early adolescence, *Dating Matters*TM employs universal primary prevention focused on 11- to 14-year-old youth. The initiative is implemented in middle school in order to build a foundation of healthy relationship skills among all youth before dating and/or severe TDV is initiated. *Dating Matters*TM has the potential to prevent the onset of TDV, which could disrupt the stability of violence across relationships and over time. Moreover, in middle school, parents and educators are strong influences and *Dating Matters*TM seeks to engage them as key prevention agents.

*Dating Matters*TM takes a novel approach to TDV prevention that bridges diverse areas of public health by

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drawing on the best available research in areas such as TDV, youth violence, and sexual risk prevention. As such, *Dating Matters*TM addresses the co-occurrence of a constellation of adolescent risk behaviors and violence (Whitaker et al. 2006) that may be particularly relevant in urban environments. Risk behaviors may have common influences, including fundamental problems with how youth interact in relationships and how parents communicate with youth about healthy relationships. Evidence suggests dating violence is distinct in certain ways from other youth risk behaviors and youth violence, so *Dating Matters*TM also includes elements of other theories that address the role of gender in relationships.

In line with these theories, *Dating Matters*TM programmatic activities target risk factors that have been associated with psychological, physical and sexual teen dating violence perpetration in longitudinal studies and factors that have been discussed in this Special Section. Individual level factors include youth substance use (O'Donnell et al. 2006; Reyes et al. 2012), sexual risk behaviors (Cleveland et al. 2003), poor emotion regulation (Foshee et al. 2010), and acceptance of traditional gender roles (Lichter and McCloskey 2004). Relationship-level factors include conflict in dating relationships (Connolly et al. 2010), parental modeling of conflict (Stocker and Richmond 2007), peers experiencing and perpetrating peer and/or dating violence (Foshee et al. 2010), and negative parent–child interactions (Ehrensaft and Cohen 2012; Linder and Collins 2005).

The programmatic activities implemented in *Dating Matters*TM are described in Table 1. Because it is unclear how effective, sustainable, or feasible comprehensive TDV prevention is, *Dating Matters*TM will administer and evaluate two models of prevention: a standard approach—*Safe Dates* (Foshee et al. 1998) implemented in Grade 8—and a comprehensive approach, which includes implementation of prevention strategies across levels of the social ecology for youth, parents, and educators in Grades 6 to 8, in addition to policy change efforts and communications strategies. *Safe*

Dates was selected as the cornerstone of the initiative because of its demonstrated and sustained primary and secondary preventive effects on multiple forms of dating violence for boys and girls (Foshee et al. 1998, 2004). *Parents Matter!* (Dittus et al. 2004) was selected for use with parents in Grade 6 because of its success engaging parents in urban communities, effectiveness in reducing youth sexual risk behaviors, and because it builds foundational skills of communication and positive parenting among participants (Miller et al. 2011). *Parents Matter!* has been adapted by CDC for *Dating Matters*TM to include TDV education and prevention tools for parents. *Families for Safe Dates* was selected for use in Grade 8 for parents because its delivery method (mailed booklets to families) facilitates engagement of parents who may have limited transportation and availability and because preliminary results suggest it may be effective in reducing TDV victimization (Foshee et al. in press). In order to target risk factors and youth risk behaviors associated with TDV, the additional student and parent curricula developed by CDC reflect content adapted from *Safe Dates*, *Parents Matter!* and *Families for Safe Dates*, and content influenced by other evidence-based curricula such as *Fourth R* (Wolfe et al. 2009), *Second Step* (Frey et al. 2000), and *Life Skills Training* (Botvin 2000). Given the frequency and consequences of mutual violence in adolescent relationships (Chiodo et al. 2012; O'Leary and Slep 2012), the CDC-developed student curricula also target dyadic processes that may contribute to mutual violence, such as emotion regulation and poor communication skills. Educators will complete a free online training developed by CDC in partnership with Liz Clairborne Inc.—*Dating Matters: Understanding Teen Dating Violence Prevention* (available at www.vetoviolence.org)—which is intended to increase recognition of the risk factors and warning signs of dating violence as well as prevention and response tools. Messages from the curricula and training will be reinforced with communication strategies, such as social marketing and networking strategies and message

Table 1 Two prevention approaches in *Dating Matters*TM: Strategies to Promote Healthy Teen Relationships

Grade	Youth/peers	Parent/guardian	Educators	Communications	Policy
Standard practice					
8	Safe Dates	—	—	—	—
Comprehensive approach					
6	Dating Matters TM 6th Grade Curriculum ^a	Parent's Matter! for Dating Matters TM ^a	<i>Dating Matters: Understanding Teen Dating Violence Prevention</i> Online Training	Communications Strategies ^a	Policy Enhancement or Development
7	Dating Matters TM 7th Grade Curriculum ^a	Dating Matters TM for 7th Grade Parents ^a			
8	Adapted Safe Dates	Adapted Families for Safe Dates			

^a CDC developed or adapted

promotion through influential, slightly older youth who serve as brand ambassadors.

*Dating Matters*TM activities reflect key and time-tested principles of prevention (Nation et al. 2003). In particular, the initiative employs a high dose of TDV prevention by implementing universal prevention strategies throughout middle school, by involving youth, parents, and educators, and by reinforcing these strategies with communications strategies and policy. The initiative seeks to be socioculturally relevant to high-risk urban communities by training communities to make surface adaptations to program curricula. Adaptation tools developed for *Dating Matters*TM will enable communities to adapt aspects of each program that are not considered core components and would not reduce effectiveness.

*Dating Matters*TM also takes a public health approach to TDV prevention. By funding local health departments to implement and coordinate the two models of prevention, *Dating Matters*TM will use a data-driven approach to build the capacity of local health departments to implement violence prevention. Building the capacity of local public health departments is a step toward developing a national prevention system through which evidence-based violence prevention can be disseminated. Surveillance is a cornerstone of public health prevention, but due to the dearth of information about community level indicators of TDV, tracking TDV without administering youth surveys currently is not possible. Therefore, CDC will work with funded communities to identify and validate community level indicators for TDV, which eventually will constitute a sustainable tracking system for TDV in these communities. Finally, to demonstrate whether the effectiveness of a comprehensive model of TDV prevention surpasses that of evidence-based, school-based curricula, CDC will direct a cluster randomized cross-site evaluation involving approximately 45 schools in Baltimore, Maryland; Ft. Lauderdale, Florida; Oakland, California; and Chicago, Illinois that will assess effectiveness and cost of the two models. To determine the maximum benefit of each prevention approach (standard vs. comprehensive), it is anticipated that the evaluation will follow youth through the peak in TDV approximately at age 17 years (O'Leary and Slep 2012) and will examine multiple adolescent violent and risk behaviors including psychological, physical, sexual, and electronic teen dating violence, sexual risk behaviors, substance use, and peer violence. If effective, the products developed for the initiative will be available and free of charge to the public. In the future, the *Dating Matters*TM framework of delivering high doses of developmentally appropriate prevention across levels of the social ecology may be modified to address the unique needs of other high-risk groups identified in this Special Section, such as young parents or youth who have witnessed or experienced violence in the

home. It may also be modified to reflect the culture of high-risk rural communities.

The promotion of healthy relationships in early adolescence represents a critical element of TDV prevention. The teen years are a malleable time during which healthy relationship behaviors can be learned, and preventing relationship violence early may disrupt stability across time and may ultimately prevent IPV in adulthood as well as the intergenerational transmission of violence. The development of effective prevention for TDV has been limited and *Dating Matters*TM seeks to promote the next generation of TDV prevention by implementing and evaluating a comprehensive and cohesive model of prevention in high-risk urban communities that takes into account current research on the etiology and stability of TDV as well as the limited evidence base about what works in preventing TDV.

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