

2019

Considering Gender in Intimate Partner Violence Prevention for Youth

Lori Ann Hertel
Walden University

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Walden University

College of Social and Behavioral Sciences

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Review Committee

Dr. Brandon Cosley, Committee Chairperson, Psychology Faculty

Dr. Christie Nelson, Committee Member, Psychology Faculty

Dr. Bonnie Nastasi, University Reviewer, Psychology Faculty

Chief Academic Officer
Eric Riedel, Ph.D.

Walden University
2019

Abstract

Considering Gender in Intimate Partner Violence Prevention for Youth

by

Lori Ann Hertel

MA, Fort Hays State University, 1989

BS, Fort Hays State University, 1982

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Health Psychology

Walden University

July 2019

Abstract

Intimate partner violence (IPV) is considered a pressing public health concern. Adolescent victims of IPV are at risk of a number of severe consequences which can lead to poorer academic performance, relationship problems, and being revictimized by or perpetrating IPV later in life. The purpose of this study was to conduct a qualitative case study on the Love Doesn't Hurt (LDH) program run in 100 schools in Kansas to understand the professional viewpoints of the counselors/teachers who led the program, determine whether they saw improvements among the male adolescent population, obtain knowledge of ways the program worked or did not work, and determine suggestions for future practices. The central question was: What experiences and reactions do Kansas middle school students have while participating in the LDH program? Open-ended unstructured interviews were held with 9 family and consumer science teachers/counselors from 3 sites in Kansas (1 each from a rural, suburban, and urban setting) selected through purposive sampling and analyzed through NVivo 12 software. The theoretical foundation for this study was social learning and feminist theory. Students participating in the LDH program seemed to communicate more openly with and have greater awareness related to IPV. Girls felt more comfortable and participated more than boys. Boys seemed more mature when separated from girls but perceived the curriculum as "male-bashing." This study is critical for policymakers; they may want to integrate the program more permanently into their academic curriculum, especially since longer sessions of IPV prevention programs seem to produce more long-term effects.

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Dedication

Firstly, I would like to dedicate this dissertation to my beautiful daughter, Ana. She was born with a muscle disease called Multiple Pterygium Syndrome. Although that was the case, she did everything to ensure her disability did not interfere with her dreams. She taught me the meaning of pursuing your dreams no matter what gets in your way. I will always be indebted to her for demonstrating tenacity, perseverance, and persistence. Unfortunately, Ana did not live long enough to see my dream come true, but I will always be thankful to her for giving me the strength and courage to pursue and accomplish my dream. Rest In Peace, my beautiful Angel.

Next, I would like to dedicate this dissertation to my son, Daniel. He is the light of my life and has a special place in my heart. Although he has struggled with his sister's loss, he has grown up a positive young man who has given me many reasons to be very proud. I love you, my son.

It is with gratitude that I dedicate this dissertation to my husband, Stan. He is and has always been my greatest supporter. If it wasn't for his unending patience, support, and love, I would have questioned my ability to complete the steps necessary to accomplish my doctoral degree. Thank you, and I love you, Stan.

Finally, but not least, I would like to dedicate this dissertation to my wonderful parents, Ron and Freda Broetzmann. They have not only supported my dreams through the years but also have made it clear that they were so very proud of me. Unfortunately, although they supported this effort, they too did not live long enough to see it come true. Rest In Peace, my wonderful and very proud parents.

Acknowledgments

In completing this dissertation, there are many people who have earned my complete generosity and respect for their contribution, patience, and guidance in helping me finish not only a difficult task, but one that gave me an abundance amount of information and knowledge. There are so many people that reached out and gave me the support needed to complete this project and each have earned by deepest respect. In thanking these professionals, friends, and family members, I have divided the various members into groups.

I would like to acknowledge a professional I feel deeply indebted to, my Mentor/Chair Dr. Brandon Cosley. Since beginning the dissertation process, Dr. Cosley provided me with unlimited amount of guidance, direction, and support. He helped me do my best and think through times when I struggled with the many steps involved in completing such a large project. He has been very supportive during the full process and helped me believe that I can complete the dissertation process.

I also feel indebted to my Second Committee Member, Dr. Christine A. Nelson. As a part of the reviewing committee, Dr. Nelson's guidance was invaluable. During the process of completing this dissertation, she helped me build confidence through her kind, generous advice and direction. Dr. Nelson's demeanor when helping students provides an environment that is not only supportive but also builds student's self-confidence. Dr. Nelson's unending knowledge and supportive demeanor was helpful in building my confidence during the review process.

I am so blessed to have a consultant who has given me the strength and knowledge to complete my dissertation. Cathrin Myburgh is not only a fantastic person, but she is also knowledgeable in completing dissertations. Her support was unending, and I have wondered many times whether I would have had the strength to complete this project if it wasn't for Cathrin's support, knowledge, guidance, and direction. I have earned a valuable friend who I cherish and someone who has gained my complete respect.

I am blessed to have principals and staff from three separate schools who ensured that I could collect data for my dissertation. The principals and personnel from the three schools in this study graciously agreed to allow me the opportunity to collect essential information regarding the effectiveness of the program "Love Doesn't Hurt," as presented by Jana's Campaign. Their generosity has allowed me to evaluate a valuable topic that effects our youth in a detrimental way.

I would like to thank Christi Brungardt, Curt Brungardt, and the staff at Jana's Campaign for providing information and unending support in completing my dissertation. These individuals work daily to prevent gender related violence in our schools and the public. I thank them for allowing me the opportunity to review their program, "Love Doesn't Hurt," and provide valuable research that will hopefully allow further opportunities to develop and expand a program that makes a difference to our youth and their families.

Finally, I want to express my deepest gratitude to my family and friends. This dissertation would not be possible without their unending support, continued patience, and love shown to me on a daily basis as I completed this project.

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Chapter 1: Introduction to the Study

In the United States, Tjaden and Thoennes (2000) estimated that 25% of women were victims of violence perpetrated by their intimate partners, making intimate partner violence (IPV) an urgent public health concern (Centers for Disease Control and Prevention [CDC], 2015). In contrast to women, Tjaden and Thoennes (2000) reported 7.6% of males were victims of IPV, and Eckhardt, Samper, Suhr, and Holtzworth-Munroe (2012) reported more were likely compared to women to perpetrate such violence, illustrating the gendered nature of this problem. In response to this crisis, leaders have implemented numerous programs involving education as a response to aggression between partners. Due to insights from the literature regarding the commonality of aggression in adolescent relationships, creators have aimed many programs at adolescents; these programs have involved three main approaches: (a) school interventions, (b) family-based interventions targeted at high risk adolescents, and (c) group-based interventions targeted toward high risk youth (National Institute of Justice, 2014).

However, few researchers have investigated the differences between adolescent males and females in their receptivity to programs aimed at preventing intimate partner violence, as well as the particular components of the program related to gendered reactions to these components. The purpose of this study was to conduct a qualitative, case study on the Love Doesn't Hurt program to understand the professional viewpoints of the counselors/teachers who led the program; to determine whether they saw improvements among this vulnerable, male, adolescent population; to obtain knowledge

of ways the program worked or did not work (i.e., opinions of program effectiveness); and to determine suggestions for future practices. I ascertained whether certain components of the program were more effective compared to others, as perceived by the leaders of the program who worked closely with these adolescents, and whether effectiveness correlated with gender-specific content and gender of the students by interviewing these leaders. This study expanded knowledge presented in existing literature by utilizing these professionals' valuable observations and knowledge of the program to understand the methods used in the program that helps this vulnerable population. Separating the effective components of such programs from ineffective ones might improve the effectiveness of such programs, and therefore could be linked to the norms and ultimate behavior exhibited in intimate partner relationships.

The severity of intimate partner violence includes repercussions, such as homelessness, psychological problems, unhealthy relationship patterns, physical injuries, and even death (Temple, Le, Muir, Goforth, & McElhany, 2013). Therefore, any attempt aimed at improving efforts to prevent this problem was necessary and could cause positive social change. In this chapter, the background surrounding IPV is discussed, followed by the problem of focus, the purpose of the current study, and research questions. Next, the theoretical framework (social learning and feminist theories) is described, followed by the nature of the study, definitions of terms used, assumptions, the scope, and delimitations of the present study. Chapter 1 then concludes with a discussion of the limitations, significance, and an overall summary of the chapter.

Background

Women and men, yet significantly fewer men, are often victims of violence from their intimate partners. The CDC (2015) defined IPV as harm of a sexual, physical, or psychological nature inflicted by a current or previous intimate partner. Cornelius and Resseguie (2007), Langhinrichsen-Rohling and Capaldi (2012), and O’Leary and Slep (2012) stipulated the many controversies and inconsistencies regarding gender in IPV research and prevention. Brown, Bowen, Brown, and Sleath (2015) found that most school-based programs derived from feminist and social cognitive theory; however, these programs varied greatly in content, duration, delivery styles, training, and overall rigor, thereby urging the need for more comprehensive research on the influence of IPV programs assisting victims.

Due to the pressing concern of IPV and its effect on society, leaders have implemented numerous programs involving education as a response to aggression between partners. Foshee et al. (2004); Temple et al. (2013); and Whitaker, Murphy, Eckhardt, Hodges, and Cowart (2013) provided evidence that leadership employed effective comprehensive, school-, and community-based IPV prevention programs to prevent IPV among youth. However, Edwards and Hinsz (2014) found that the multicomponent nature of most school-based programs and the lack of a clear operational definition found in these programs made program evaluation difficult. Whitaker et al. (2013) noted that many researchers who studied comprehensive, multicomponent programs did not investigate the efficacy of specific elements. Therefore, this study expanded the knowledge presented in existing literature by utilizing the teachers’ or

counselors' valuable observations and knowledge of the program to understand the methods used in the program that helped this vulnerable population.

Problem Statement

The CDC (2015) acknowledged IPV as a pressing public health concern. The CDC (2015) defined IPV as “physical, sexual, or psychological harm by a current or former partner or spouse” (p. 1). Moreover, adolescent victims of IPV are at risk of suicidal ideation, substance use, risky sexual behavior, teen pregnancy, disordered eating, and injury, which can lead to poorer academic performance, relationship problems, and being revictimized by or perpetrating IPV later in life (Temple et al., 2013). According to Eckhardt et al. (2013), many researchers discovered “significant increases in safety behaviors” (p. 196) from adults who participated in IPV programs; however, these results contrasted with a lack of “enhanced use of community resources” (p. 196) and failed to acknowledge any adolescent IPV programs. Moreover, researchers have also shown that adolescent males have reacted to IPV in a more violent manner and may have turned to IPV themselves in older age; hence, this evidence has lent necessity to exploring an IPV program that has specifically helped male adolescent victims of IPV (Eckhardt et al., 2012).

To influence these negative, reactive traits that male adolescents have or may express in the future from IPV experiences, leadership (e.g., counselors, administrators, and teachers) have implemented adolescent IPV programs at schools to provide beneficial support to these suffering students. Researchers have proven that male adolescents usually express these negative, reactive traits (Eckhardt et al., 2012) and that

IPV programs seem beneficial to the adult population (Eckhardt et al., 2013). However, I intended to conduct a case study of the perceptions of counselors, teachers, and administrators who led the all-male, adolescent IPV program of Love Doesn't Hurt, about ways IPV programs assisted these adolescent males to cope with IPV.

Some comprehensive and multifaceted school-based programs have helped prevent IPV (Edwards & Hinsz, 2014; Temple et al., 2013; Whitaker et al., 2013). The Love Doesn't Hurt program equates to one of these IPV programs, which counselors/teachers have implemented across the state of Kansas in middle and high schools (Jana's Campaign, 2015). Other programs tended to vary in content, duration, delivery styles, training, and overall rigor, making evaluation difficult (Bowen & Walker, 2015; Edwards & Hinsz, 2014; Whitaker et al., 2013); however, the Love Doesn't Hurt program ran on a strict curriculum that occurs over a 12 week period. Thus, I focused on this program and its strict guidelines (e.g., timeline) to control for many of the variations suffered in other evaluations.

Controversies also exist regarding gender in terms of defining IPV and prevention approaches (Bowen & Walker, 2015; Ross & Babcock, 2010). Researchers found that males reacted negatively to a gender-specific, adolescent IPV prevention program (Cornelius & Resseguie, 2007); however, little else was known regarding IPV prevention programs and ways these actually assisted adolescent males experiencing IPV, especially from the viewpoints of the professionals who worked closely with this vulnerable population. For example, according to the Love Doesn't Hurt Program's website:

We utilize evidence-based prevention strategies and practices that illustrate the greatest impact. Our educational programs are designed to raise awareness, reduce risk factors while supporting protective measures, engage bystanders, promote healthy and respectful relationships, and encourage the development of new social norms. (Jana's Campaign, 2015, para 4)

Despite this claim, no researchers focused on Love Doesn't Hurt, the methods used by this specific program, and the effectiveness of this intervention tactic amongst this vulnerable population, especially through interviewing leadership who facilitated and implemented the program. Therefore, I intended to conduct a qualitative, case study of Love Doesn't Hurt to ascertain the feasibility of studying which program elements seemed influential or problematic by interviewing the counselors/teachers associated with the program to understand their perceptions of the effectiveness of the program. Their perceptions expanded knowledge by utilizing valuable observations and knowledge of the program and its students to extend the assessment to ways the program worked for male adolescents in Love Doesn't Hurt. Their interviews also opened the conversation among these professionals, who had not previously been interviewed about the validity and quality of their program; researchers tended to focus on the victims themselves and not the implementers of such programs.

I sought to interview these counselors/teachers because they represented the leaders in the program. They had adult perceptions and emotional detachment, which the victims might lack, which they could add to existing literature (see Cater & Øverlien, 2014). The literature contained investigations that directly studied adolescent or parental

victims' viewpoints only, avoiding the detached opinions of those working with them (see Cater & Øverlien, 2014). The emotions that might have derived from victims discussing IPV might have hindered previous researchers who interviewed this vulnerable population (e.g., Feeny, Juniper, Ferrie, Griffith, & Guyatt, 1998).

IPV represented a sensitive subject; therefore, directly interviewing the adolescents in Love Doesn't Hurt might pose an issue (see Feeny et al., 1998). Their young minds might not allow them to feel comfortable or express honesty when answering questions about whether the program assisted them or would assist them in the future (Feeny et al., 1998). Hence, I chose to only interview adult counselors/teachers associated with the program to protect this vulnerable population and obtain professional opinions regarding the effectiveness of the program. The intention of this study was to conduct a qualitative, case study of counselors/teachers, who facilitated and implemented all program activities, to (a) add to existing literature on IPV programs that interviewed only victims and avoided professional opinions; (b) avoid any bias in the results deriving from emotional reactions; (c) obtain their rarely sought after viewpoints; and (d) avoid any ethical issues that might arise from interviewing a vulnerable population, such as adolescent males exposed to IPV.

Purpose of the Study

The purpose of this study was to conduct a qualitative, case study on the Love Doesn't Hurt program to understand the professional viewpoints of the counselors/teachers who led the program; to determine whether they saw improvements among this vulnerable, male, adolescent population; to obtain knowledge of ways the

program worked or did not work (i.e., opinions of program effectiveness); and to determine suggestions for future practices. This study expanded knowledge presented in existing literature by utilizing these professionals' valuable observations and knowledge of the program to understand the methods used in the program that helped this vulnerable population.

Case study researchers expand existing knowledge by observing a specific case, such as the Love Doesn't Hurt Program, to add to already existing literature to broaden available information on a given subject, such as determining effectiveness of gender-based IPV programs by interviewing professionals who lead these programs (see Yin, 2015). The Love Doesn't Hurt program and similar programs represent new, widespread phenomena occurring in over 100 schools in Kansas. Few researchers have interviewed professionals associated with such programs, as previous researchers have usually focused on victim interviews (Eckhardt et al., 2013; Izaguirre & Calvete, 2015; Pernebo & Almqvist, 2016). Thus, a gap existed in the literature regarding counselors/teachers' perceptions, who implemented an adolescent, gender-specific IPV program, to obtain their professional opinions about the effectiveness of methods used in the program. To address this gap, I conducted a qualitative, case study. The rationale for this choice was that this study's purpose was to interview counselors/teachers in a specific program, Love Doesn't Hurt, to determine their professional opinions about the effectiveness of methods used in gender-based, IPV programs on this vulnerable population of students.

Additionally, I examined the effectiveness of the program by discussing the methods used in the program by leadership, evaluating their perceptions of the efficacy of

the various stages of the curriculum, collecting their observations of how reactions to those elements differ between genders, and studying concepts fundamentally qualitative in nature. Izaguirre and Calvete (2015) and Pernebo and Almqvist (2016) studied IPV programs but only interviewed victims of IPV who participated in the program; hence, these researchers did not include opinions from the professionals who facilitated and implemented such programs. To address this gap, I interviewed the leaders (i.e., counselors or teachers) who implemented an IPV program for male youth to develop an understanding of the effectiveness of various program components through their professional, detached insight on this vulnerable population.

Research Questions

- RQ. What experiences and reactions do Kansas middle school students have while participating in the Love Doesn't Hurt program?
- SQ1. Do students seem to be changing their knowledge, skills, or attitudes related to IPV?
- SQ2. Does the gender-specific component of this program affect the students who participate positively?

Theoretical Framework

The theoretical foundation for this study was social learning (Bandura, 1969; Lee, Reese-Weber, & Kahn, 2014; Mihalic & Elliott, 1997) and feminist theory (Bowen, 2011; Pence & Paymar, 1993). Bandura's (1969) social learning theory was one of the primary frameworks in understanding and preventing IPV. Mihalic and Elliott (1997) maintained, "Violence is learned, through role models provided by the family. . . as a

coping response to stress or a method of conflict resolution” (p. 21). Researchers could apply Bandura’s (1969) theory to understanding how helpers in programs could model positive behaviors to prevent interpersonal violence. According to Bandura (1969), “The provision of social models is . . . an indispensable means of transmitting and modifying behavior in situations where errors are likely to produce costly or fatal consequences” (p. 213).

Feminist theorists view IPV as fundamentally a product of sexism and patriarchy (Bowen, 2011). I used the feminist theory to inform this study. Pence and Paymar (1993) first applied feminist theory to domestic violence. In their framework, the goal of treatment was to teach men how to change behaviors and values that reinforced patriarchal privilege and power (Pence & Paymar, 1993). Social learning and feminist theory represented the foundations of most school-based IPV prevention programs (Whitaker et al., 2013); thus, I used these theories to guide this case study to evaluate counselors’/teachers’ perceptions of the effectiveness of a gender-based, adolescent IPV program on this vulnerable population of students related to preventing IPV. The theoretical framework is discussed in Chapter 2.

Nature of the Study

The nature of this study was a qualitative case study. Such an approach was best when the researcher sought to understand a specific object, program, or issue (Yin, 2015); in this study, the specific issue included studying a gender-based, adolescent IPV program, Love Doesn’t Hurt, through the viewpoints of those who facilitated and implemented the program (i.e., teachers/counselors). Case study research is appropriate

when the researcher wishes to obtain an in-depth understanding of how a phenomenon/experience influences, has influenced, or has brought about significant change in a group (Yin, 2015). The case study methodology allows for the collection of rich, detailed, and nuanced data from multiple perspectives (Yin, 2015). To elucidate how students experienced and responded to Love Doesn't Hurt, I conducted unstructured interviews with those who facilitated and implemented Love Doesn't Hurt regarding their perceptions of the effectiveness of this program among such a vulnerable population.

Definitions

Feminist theory: Bowen (2011) defined feminist theory as focusing on the link between intimate partner violence, patriarchy, and sexism. The link is relevant to IPV prevention programs. For example, components of the program teaches males ways they can counteract values and behaviors that bolster patriarchal privileges and power dynamics (Pence & Paymar, 1993).

Gender: Gender refers to the cultural, behavioral, and psychological characteristics associated with a particular sex (Helgeson, 2016).

Intimate partner: An intimate partner refers to “a current or former partner or spouse” (CDC, 2015, para. 2).

Intimate partner violence: The CDC (2015) defined IPV as physical, psychological, and/or sexual harm perpetrated by a current/prior spouse or partner.

Love Doesn't Hurt program: The Love Doesn't Hurt program is an intimate violence prevention program targeted toward middle school and high school students in Kansas. This program involves three main components in its educational strategies aimed

at the prevention of teen dating violence: (a) the self, involving self-awareness and reflection; (b) peers, involving the recognition of relationship “red flags;” and (c) the community, which is aimed at social change (Jana’s Campaign, 2015).

Patriarchy: Patriarchy refers to the disproportionate control of power by men in a society (Messerschmidt & Messner, 2018).

Sexism: Sexism refers to sex-based prejudice and/or discrimination, particularly against women, and involves behavior, attitudes and/or conditions that foster sex-based stereotypes and normative perceptions of social roles (Sloan, 2017).

Social learning theory: Social learning theory is a theoretical framework that focuses on the role of observational learning on behavior (Bandura, 1969). Bandura (1969) defined the process of social learning as involving observation and recreation of behavior; for example, individuals exposed to violence are more likely to engage in violence themselves.

Assumptions

One assumption in the study was that the perceptions of the program administrators and educators generally would reflect the behavior of children in the classroom in response to the Love Doesn’t Hurt campaign. The perceptions of the students might differ from the perceptions of educators and program administrators; however, I assumed that significant insights could still be gained based on their interactions with and observations of students who participated in the Love Doesn’t Hurt program. In addition, although actual behavior related to IPV was not a part of the study, I assumed that the behaviors and attitudes exhibited by students when discussing IPV

indicated their actual behaviors. These assumptions were necessary because it was difficult to observe actual behavior relating to intimate partner violence, due to it commonly occurring in private. These assumptions were also necessary because this was not a longitudinal study over many years that could measure actual intimate partner violence-related behavior.

Scope and Delimitations

In exploring the impact of IPV programs aimed at adolescents, I chose a single program for evaluation due to its recent proliferation in Kansas. Education regarding IPV was difficult to explore if approached generally (rather than focusing on a specific program); thus, I chose a single program to study. Therefore, the results of this research were most applicable to the Love Doesn't Hurt campaign. I sought to evaluate the impacts of this specific program on adolescents' values, attitudes, and behaviors relating to IPV, as observed by program administrators and educators; I also focused on the gender differences in reactions to components of the Love Doesn't Hurt program. This approach to the problem of IPV was taken because O'Leary and Slep (2012) demonstrated that IPV as manifested in adolescents differed from that of adults, and Cornelius and Resseguie (2007) found gender-specific prevention programs might negatively influence males involved in the program. Therefore, I focused on studying adolescents (middle and high school students) through perceptions/observations of program administrators and educators.

Due to the focus on adolescents, it would be difficult to generalize the findings of this study to adults. In addition, due to this research occurring in the United States, it

would be difficult to generalize the findings of this study to developing countries where different patterns of gender relations and gender violence might be exhibited in adolescents. I excluded two relevant theories from this analysis: the evolutionary theory of male aggression against females (Muller & Wrangham, 2009) and Bronfenbrenner's (1992) ecological systems theory. The evolutionary theorist focuses on evolutionary reasons that drive male violence against females (Muller & Wrangham, 2009). However, I did not use the evolutionary theory because the purpose of this study was not to explain the behavior but to determine the impact of an IPV program on adolescents. The reason for excluding Bronfenbrenner's (1992) ecological systems theory, which explained behavior due to multi-level influences (e.g., at the individual, familial, community, and societal levels), was due to the purpose of the study focusing on the impacts of the Love Doesn't Hurt program on adolescents rather than an explanation of intimate partner violence, which was investigated in the literature.

Limitations

To meet the goals of this study, I employed open-ended, unstructured interviews at specific time intervals with teachers, school administrators, and community advisors involved in teaching and delivering Love Doesn't Hurt in schools and communities throughout Kansas. Because of the limited sample size (20 to 30 participants), as well as limitations associated with qualitative research, care was taken when transferring the results of the current study to other populations (e.g., adults) in other geographical locations with cultural differences (e.g., developing countries or countries with laws that systematically targeted women and protected perpetrators of violence).

Due to the nature of qualitative research, the results of the current study could not answer questions regarding how many adolescents were generally receptive to such programs in a given population. Qualitative researchers might struggle to find commonalities across interviews due to the open-ended nature of the interview questions; however, this approach reduced my influence (and associated biases related to leading questions and existing beliefs) by allowing the interviewees to discuss their perceptions freely of the issue at hand.

Significance

I interviewed the leaders of the Love Doesn't Hurt program to improve the understanding of the effectiveness of these gender-based, IPV intervention programs by obtaining their detached and professional opinions. These counselors/teachers knew their students best and provided a more detached, unemotional, and professional view of the effectiveness of such a program, which remained previously unstudied in the literature (see Izaguirre & Calvete, 2015; Pernebo & Almqvist, 2016). These participants represented the leaders of the program; therefore, the present work was designed to understand their perceptions regarding the effectiveness of the program because they established the program and worked closely with this vulnerable population.

These program implementers noticed issues with the students that even the students did not notice or might feel too emotional to express properly, especially when addressing such a sensitive subject matter as IPV (see Eckhardt et al., 2012, 2013; Feeny et al., 1998). Many people who have experienced IPV feel uncomfortable answering questions that may cause unwanted, negative memories to arise (Eckhardt et al., 2012,

2013; Edwards & Hinsz, 2014; Feeny et al., 1998). Consequently, conducting a study on those (i.e., counselors, teachers, and administrators) who have a more removed and professional opinion about the subject yet remain closely involved with the victims added insight into the effectiveness of these IPV programs that prior researchers did not explore.

This study was unique in terms of interviewing the leaders of the program to understand the efficacy of specific program components involved in a gender-based, IPV program. To date, little research focused on the relative efficacy of the specific components within comprehensive, gender-specific, and school-based IPV prevention programs for adolescents, especially from the viewpoints of those professionals who implemented such programs (Edwards & Hinsz, 2014; Whitaker et al., 2013). Researchers suggested that adolescent IPV exhibits gender patterns of perpetration and abuse that varied from adults (O'Leary & Slep, 2012) and gender-specific prevention might have negative impacts on male learners (Cornelius & Resseguie, 2007). The Love Doesn't Hurt program's implementers claimed the opposite remains true (Jana's Campaign, 2015). Hence, insights from this study could inform the design and evaluation of future adolescent IPV prevention programs in ways that addressed gender issues in a more nuanced fashion to improve program effectiveness. Moreover, the findings could add insights into whether leadership perceive effectiveness in their program associated with the gender-specificity of implementation in this school-based IPV program.

Eckhardt et al. (2013) extensively studied IPV programs and the effectiveness of these programs; however, even these researchers failed to include any professional opinions of those closely working in the program with the victims. Eckhardt et al. (2013)

determined, “Several studies have found significant increases in safety behaviors, but enhanced use of community resources is often not found” (p. 196). Despite this finding, they could not determine why the situation occurred; hence, the findings might explain why or why not such a program was effective through interviewing professionals who had working knowledge of the program and the vulnerable population in the program. This new approach might lend understanding of the effectiveness behind conducting adolescent, gender-based IPV programs that previous research did not establish, which might encourage more school leaders to implement such programs.

Summary

As discussed in this chapter, the focus of the current study was an evaluation of the impacts of the Love Doesn't Hurt campaign on adolescents who participated in the program. In particular, the purpose of this study was to conduct a qualitative, case study on the Love Doesn't Hurt program to understand the professional viewpoints of the counselors/teachers who led the program; to determine whether they saw improvements among this vulnerable, male, adolescent population; to obtain knowledge of ways the program worked or did not work (i.e., opinions of program effectiveness); and to determine suggestions for future practices. Understanding which components of the program were effective in reaching their goals, as well as aspects of the program that were counter-productive, enabled a better understanding of similar programs targeting IPV, as well as ways these programs could be made more effective. The findings showed why or why not such a program was effective through interviewing professionals who had working knowledge of the program and the vulnerable population in the program.

This new approach might lend effectiveness levels to conducting adolescent, gender-based IPV programs that previous research did not establish, which might encourage more schools to implement such programs. In Chapter 2, the relevant literature is outlined to inform the efforts of the current study, and Chapter 3 describes the methodology.

Chapter 2: Literature Review

Introduction

IPV is a pressing public health concern (CDC, 2015). There are controversies regarding gender in terms of defining IPV and prevention approaches (Bowen & Walker, 2015; Ross & Babcock, 2010). The premise is that males, particularly adolescent males, may often be predisposed to commit IPV or be more likely to commit IPV compared to females (Eckhardt et al., 2012). However, this predisposition may be more due to upbringing and inculcated cultural values than any inherent male violent tendencies (Theobald & Farrington, 2012). However, Dutton (2012a) disputed the traditional view of gender in the cases of IPV. Dutton (2012a) conducted a series of longitudinal studies and found that gender had only weak correlations with the phenomenon of IPV. Due to these discrepancies, I believed that while there was little scholarly consensus on whether males were more predisposed to IPV than females, the two genders probably did react differently to situations that could produce cases of IPV. This study expanded knowledge presented in existing literature by utilizing these professionals' valuable observations and knowledge of the program to understand the methods used in the program that helped this vulnerable population.

The first section of the literature review provides an introduction to the chosen theoretical framework. I used the framework of social learning theory, developed by Bandura (1969), and feminist theory, first applied to IPV by Pence and Paymar (1993). Social learning theorists have posited that children learn behaviors by observing the behaviors and actions of their parents and others (Mihalic & Elliott, 1997). Feminist

theorists, or the feminist model, have viewed IPV as fundamentally from a woman's unequal position within sexist and patriarchal societies (Pence & Paymar, 1993). This section also discussed the rationale for choosing these theories for the present research. The second section provided an exhaustive review of relevant studies, which are organized in categories, progressing from general themes to the specific research problem studied. In this process, three major sections are discussed: intimate partner violence and its causes, prevention programs, and gender issues related to IPV. The third section of the chapter focuses on the gap in the literature based on the reviewed literature and the need for conducting the present study. Finally, the review ends with a summary of the findings of the chapter.

I used the following databases to conduct a search for studies related to the topic: Google Scholar, Science Direct, Taylor and Francis, PubMed, Educational Resource Information Center (ERIC), ProQuest, and JSTOR. To carry out the search for relevant literature, I used the following search terms: *intimate partner violence*, *dating violence*, *intimate partner violence and gender*, and *domestic violence prevention programs*. The use of these keywords, either individually or in combination, yielded relevant studies from the preceding databases. Those deemed relevant to the present study were included in the literature review.

Out of the literature included in this chapter, most studies were taken from those published in and from 2012 to 2015 to ensure only the latest and most relevant developments and insights were included in the review. However, a number of older studies were used to add foundational studies on the theoretical framework of the present

research alone with other seminal studies on the topic of research. The total percentage of studies published before 2012 formed 9.20%. The total percentage of studies published in and after 2012 formed 90.80% of the whole reviewed literature.

Theoretical Framework

The chosen theoretical framework for conducting the present study comprised of two theories: social learning theory, developed by Bandura (1969); and feminist theory, first applied to IPV by Pence and Paymar (1993). The problem that the present study addressed had a number of constructs that became significant based on these theories. The first was the extent to which males and females differed in their predisposition to commit IPV, if any. The second was the extent to which upbringing and inculcated values mattered in this regard. Feminist theorists have viewed IPV as fundamentally due to women's unequal position within sexist and patriarchal societies (Pence & Paymar, 1993). Thus, the theory was significant in relation to the former construct. Social learning theorists have posited that children have learned behaviors by observing the behaviors and actions of parents and others (Mihalic & Elliott, 1997). Thus, this theory was significant in relation to the latter construct. The present section provides an overview of these two theories, focusing on the origin and development, while showing the rationale for choosing these theories to form the theoretical framework for the present study.

Social Learning Theory

Bandura (1969) developed the social learning theory, which researchers later defined as one of the most significant frameworks for exploring IPV, as well as for preventing IPV. According to this theory, violence is a learned behavior, which enters the

life of an individual through his or her authority figures in the family, as well as role models (Mihalic & Elliott, 1997; Shafer & Silverman, 2013). This trait is learned by the individual from these role models and interpreted as a mechanism for responding to stress, as well as for bringing resolution to conflicts (Mihalic & Elliott, 1997). According to Rutherford-Hemming (2012), researchers can use this theory to examine how prevention program helps create affirmative behaviors to stop the occurrence of violence between individuals.

Bandura (1969) noted that a social model could prove the most significant medium regarding influencing and changing behaviors in situations where, as in the cases of IPV, mistakes could result in fatal or risky consequences. As a social model, social learning theory becomes an important tool in a study exploring an interpersonal issue (e.g., IPV, as in the present study). Further, I sought to conceive the extent to which upbringing and inculcated values mattered in this regard. As these were social constructs, learned most significantly from the family, especially role models and authority figures, the significance of social learning theory in the context of the present study was established. The purpose of this study was to conduct a qualitative, case study on the Love Doesn't Hurt program to understand the professional viewpoints of the counselors/teachers who led the program; to determine whether they saw improvements among this vulnerable, male, adolescent population; to obtain knowledge of ways the program worked or did not work (i.e., opinions of program effectiveness); and to determine suggestions for future practices. Hence, one construct, the extent to which upbringing and inculcated values matter in this regard, was an important theme to study

from the perspective of social learning theory, based on the insights found so far.

Therefore, the significance of the social learning theory in the context of the present study was established.

Social learning theory was built on the basis of works conducted in the field of sociology and psychology (Bingham & Conner, 2015). Building on these works, Bandura (1969) noted that it would be extremely hard, as well as dangerous, to build behavior based only on negative and known behaviors as sources of guidance. However, Bingham and Conner (2015) posited that individuals could learn despite the difficulties presented. Bandura (1969) pointed out that most behavior was learned through observation (Bingham & Conner, 2015). The basic tenant of Bandura's (1969) social learning theory is that individual behaviors are results of and are continued through a person's interaction with the environment to which he or she is exposed (Grusec & Lytton, 1988). Further, the psychological framework of an individual stems from a constant two-way interaction between functions of the environment and of the individual. According to social learning theory, almost all behavior related to learning in an individual is due to observing the behavior of people and its impact on an individual (Rutherford-Hemming, 2012). According to social learning theory, despite that human behavior is highly influenced by the environment that people find themselves in, there is a capacity in people to modify their behaviors, as well as their perceptions (Rutherford-Hemming, 2012). For instance, victims of bullying can change their actions by modifying their thought patterns about their actions (Rutherford-Hemming, 2012).

These insights were important in the context of the present study in two ways. First, as social learning theory asserted that behavior was learned through environment, it helped in understanding one of the themes the present study was concerned with: the extent to which upbringing and inculcated values mattered in IPV-related behavior among males and females. The goal of the dissertation was to conduct an exploratory study of “Love Doesn’t Hurt” to ascertain the feasibility of studying which program elements were particularly impactful or problematic, specifically in relation to gender considerations and how male and female students might respond differently to the various components. The different upbringing that males and females were exposed to, along with the installation of different values in terms of gender in them, could be understood through social learning theory; males and females were brought up with different values and expectations. What was tolerable for one was unacceptable for the other, and vice versa; these behaviors were observed by the individuals in their family and through their role models. Thus, social learning played a significant part in understanding the feasibility of studying which program elements were particularly impactful or problematic.

Secondly, the social learning theory asserted that although the behavior of an individual derived from his or her environment, he or she could change said behavior by modifying thoughts and perceptions. Therefore, this theory indicated that cases of IPV could also be prevented through the same method. One of the most important assertions of social learning theory was that it was impossible to study either environment or thought in isolation to each other (Rodela, 2013). Both were interconnected; hence, a

productive discussion must consider both (Brauer & Tittle, 2012; Rosenthal, 2014). The goal of the present study was to provide insights to strengthen the IPV prevention programs. Hence, based on insights found from the present study, with social learning theory as part of the theoretical framework, important recommendations were suggested for strengthening the IPV prevention programs.

Social learning theory presents an interaction between the behavior of an individual, the environment, and the individual himself (Hanna, Crittenden, & Crittenden, 2013). This interaction is always reciprocal, as all influence each other (Freeman, Mahoney, Martin, & Devito, 2004). Therefore, to understand a particular behavior, I considered a number of factors while conducting the investigation (see Freeman et al., 2004). I considered the upbringing of the individuals as well as the values instilled in them through their environment, while exploring the constructs of IVP, both in terms of its occurrence as well as in terms of its prevention.

Mihalic and Elliott (1997) described social learning theory as one of the most significant frameworks, as well as the most famous among researchers conducting studies on IPV. In the context of intimate partnership and family, researchers have used the theory to assert that the behaviors of individuals are shaped by the conditions that they were exposed to in their childhood (Mihalic & Elliott, 1997). Thus, Mihalic and Elliott (1997) viewed violence based on this theory as a learned behavior, which was learned by the individual through family. In this regard, family includes parents, relatives, siblings, and even romantic partners (Mihalic & Elliott, 1997). As I examined constructs related to

IPV, this view of social learning theory was valuable, which made its use a part of the theoretical framework of the present study justified.

Social learning theorists further stated that violent behavior was learned through different sources in the family through direct and indirect means in childhood; these continued in adulthood as a way to fight against stress and resolve conflict (Mihalic & Elliott, 1997). The individual learns what is acceptable behavior in an intimate relationship based on what he or she has been exposed to during childhood through the behavior of the family member (Mihalic & Elliott, 1997). Thus, seeing the father expressing violent behavior against the mother makes the boy see this as an acceptable behavior, which he later performs in his own relationship (Ehrensaft & Cohen, 2012).

The same applies to females (Ehrensaft & Cohen, 2012). Seeing violence as a method of ending arguments, fighting against stressors, and expressing frustration in parents leads the child to perform the same behavior in adulthood (Mihalic & Elliott, 1997). Consequently, children brought up in such an environment are at a higher risk of IPV (Mihalic & Elliott, 1997). This insight was important to the study as an adequate view for analyzing IPV. The constructs of the problem that I addressed became significant based on this theory. Thus, I used social learning theory as part of the theoretical framework to understand the extent upbringing and inculcated values mattered in IPV behavior, as well as its prevention among males and females.

Feminist Theory

Feminist theorists have viewed IPV as a product of sexism and patriarchy; I used this theory to inform this study. Pence and Paymar (1993) were among the first to apply

feminist theory to domestic violence. In their framework, the goal of treatment was to teach men how to change behaviors and values that reinforced patriarchal privilege and power (Pence & Paymar, 1993). Pence and Paymar (1993) defined social learning and feminist theory as the foundations of most school-based IPV prevention programs; thus, I used the feminist theory to guide this exploratory study to evaluate how students learned knowledge, beliefs, skills, and behaviors related to the prevention of IPV through the implementors' viewpoints.

Donovan (2012) defined feminist theory as a development of feminism in the realm of theoretical studies and discussions. Donovan defined the goal of feminist theory as exploring the concept of inequality in the realm of gender. Researchers could use feminist theory to explore roles, duties, interests, politics, and experiences of women in different fields, such as sociology, psychology, domestic economics, philosophy, education, and literature (Donovan, 2012). Researchers could use the theory to analyze the phenomenon of gender inequality (Donovan, 2012). Hence, researchers used the theory to examine and understand related constructs, such as gender discrimination, patriarchy, sexual and other types of objectification, art, oppression, and aesthetics (Donovan, 2012).

Feminist theorists have analyzed the dominance of men, especially through the norms in culture that have provided support, thus perpetuating the superiority of males (Caldwell, Swan, & Woodbrown, 2012). Caldwell et al. (2012) defined this superiority as existing in all types of interactions men had with women, which included intimate and romantic relationships. Donovan (2012) stated that feminist theorists posited that women

were not born but were made. In this characterization, feminist theory mirrors social learning theory because young girls learn how to be “feminine” by observing and learning from female family members, who serve as their role models (Donovan, 2012). Thus, this similarity indicated a link between the two theories, which further justified the use of both these theories together to form the theoretical framework of the present study.

Caldwell et al. (2012) posited that the socialization of gender almost universally provided rights to men as figures of authority over their female partners, as well as in their families. Additionally, men are physically stronger and larger compared to women, which ensures their higher power in matters related to women (Caldwell et al., 2012). Caldwell et al. (2012) suggested that due to this power, women participants usually reported higher fear of violence from their partners when compared to males. This insight helped in understanding the cases of IPV where women were at a higher risk of becoming a victim compared to men (Caldwell et al., 2012). Thus, feminist theory provided an important view in exploring gender differences while examining the phenomenon of IPV, as well as for strengthening its prevention programs. I found the feminist theory most significant while exploring the extent, if any, to which males and females differed in their predispositions to commit IPV. The insights found in feminist theory indicated that women were at a higher risk of becoming victims of IPV. Further, there were social and biological reasons behind the vulnerability of women in interpersonal relationships. As I examined gender-based predisposition to IPV among young people, feminist theory was an important and significant theory as a part of the theoretical framework.

Regarding aggressive behavior, research in feminist theory has indicated a number of insights. Mardorossian (2002) noted that in feminist theory, researchers had not focused on IPV and sexual violence. Instead, researchers have examined other issues related to the domination of men, such as sexual harassment and pornography (Mardorossian, 2002). Mardorossian (2002) stated that when researchers focused on IPV, they only identified the sources, as well as its effects. Mardorossian noted that detailed attention was lacking in this domain. Mardorossian pointed out that this lack of attention was even more significant when considering that domestic violence increased.

I used feminist theory as a part of the theoretical framework to examine the extent to which males and females differed in their predispositions to commit IPV. The findings contributed insights on gender-based predispositions toward IPV among young people, thereby making this study significant. The goal of feminist theory was to analyze society's viewpoints and explore deeper layers within these (Mardorossian, 2002). Theorists can analyze societal issues by asking new questions and providing different contexts (Mardorossian, 2002; Prati, 2012). Mardorossian (2002) suggested that feminist theorists explored relationships in society through a self-conscious mind. Mardorossian defined the goal as not only showing the facts but also exploring the ways these were understood. Understanding feminist theory based on these notions, I used the theory not only to justify its use as a part of the theoretical framework for examining IPV and its constructs but also to contribute to research on IPV in the literature on feminist theory.

A significant theme of feminist theory relevant to the present study was patriarchy. For instance, Wagers (2015) defined patriarchy as the notion that the primary

motives of the batterer (i.e., in cases of IPV) were based on control and power. Wagers posited that many researchers had accepted this explanation to define the occurrence of IPV. Likewise, Perilla, Serrata, Weinberg, and Lippy (2012) associated the perspective of feminist theory on domestic violence with patriarchy; domestic violence was viewed as deriving from gender inequality due to the patriarchic system of society. Perilla et al. viewed the subordinate role of women to men as the cause of physical, psychological, and sexual violence inflicted toward women. Perilla et al. defined this view as having historic roots that perpetuated as beliefs in society. According to feminist theory regarding domestic violence, men are perpetrators, and women are victims of IPV (Perilla et al., 2012).

The views of feminist theory on domestic violence have similarities to social learning theory. For instance, the feminist theory of domestic violence indicated that male children learned the phenomenon of violence by seeing their male authority figures and role models using it to show their power and keep their control over women in their families (Perilla et al., 2012). Researchers used this idea, similar to social learning theory, to posit that violence was a learned behavior; thus, one could unlearn the behavior (Perilla et al., 2012). As a consequence of this belief, social learning theorists did not accept the presence of IPV among lesbian couples (Perilla et al., 2012). However, this issue was beyond the scope of the present study, as the participants were heterosexual. I used the insights from the feminist theorists regarding IPV while conducting the present study. Feminist theorists viewed domestic violence as deriving from patriarchy. I considered this insight when examining the extent, if any, to which males and females

differed in their predispositions to commit IPV. Thus, using feminist theory as part of the theoretical framework for the present study, which examined gender-based predisposition to IPV among young people, was justified.

As noted before, Pence and Paymar (1993) were among the first to apply feminist theory to domestic violence. Pence and Paymar noted that the tactics that batterers used in IPV had striking similarities to those used by people in powerful positions. The former also had similarities to the tactics used by individuals who wished to dominate other people (Pence & Paymar, 1993). These tactics were similar to those used by people who wished to continue the practice of racism, classism, anti-Semitism, ageism, and so on (Pence & Paymar, 1993). Further, these tactics were taught mainly to men in society, especially in the family, as well as through the culture of male dominance (Pence & Paymar, 1993). At this point, the phenomenon of IPV and feminist theory intersect. The culture of dominance is similar between IPV and other aspects of society where individuals and groups try to dominate other individuals and groups. Thus, this view justified the use of feminist theory in the present study, as I examined IPV and its constructs, specifically through gender differences.

Regarding dominance, feminist theorists defined culture based on a community's acceptance of dominance. Pence and Paymar (1993) defined dominance in a culture as an unwritten assumption that due to some differences, a particular group of people could dominate other groups. Weldon and Gilchrist (2012) posited that some viewed the right to dominance as a plan of God, where the dominating groups viewed it as their roles to raise the oppressed groups, which they viewed as underdeveloped. Further, Pence and

Paymar (1993) observed that, in cases of IPV, most aggressors were men, and the victims were women. Pence and Paymar (1993) noted that all data, from hospital emergency rooms to police reports, showed a gap in terms of gender regarding aggressors and victims. This finding indicated that IPV was an issue deeply attached to gender. Therefore, I used feminist theory as a part of the theoretical framework to examine gender-based predispositions to IPV among young people.

Review of the Literature

Intimate Partner Violence

Breiding, Basile, Smith, Black, and Mahendra (2015) identified IPV as an important problem for public health. Each year, more than 10 million U.S. people, including both men and women, become victims of physical violence through either present or previous intimate partners (Breiding et al., 2015). At some point in their lives, 1 out of 5 women and 1 out of 7 men experience IPV (Breiding et al., 2015). The incidence of stalking from an intimate partner was measured at 9.2% and 2.5% among women and men, respectively (Breiding et al., 2015). At some point in their lives, one out of 11 women reported being raped by previous and present intimate partners (Breiding et al., 2015). These numbers were alarming, especially when considering that IPV had not only immediate consequences in the lives of the victims but also consequences with lifelong influences (Breiding et al., 2015).

Breiding et al. (2015) stated a victim of IPV would experience several negative outcomes, from acute stress to engagement in risky health behaviors to the worse effects of IPV, such as death and injury. As I aimed to examine the significance of an IPV

prevention program, Love Doesn't Hurt, to ascertain the feasibility of studying which program elements were influential or problematic, specifically regarding gender considerations and how male and female students might respond differently to the various components, I first evaluated the current state of IPV, as well as its causes. This evaluation indicated the severity of the issue, while providing a conceptual understanding about the motivations that led to cases of IPV among men and women.

Stover and Lent (2014) defined IPV as consisting of violence in physical, psychological, or sexual form; and stalking by a present or previous intimate partner, such as a partner in dating, girlfriend or boyfriend, sexual partner, spouse, and so on. Stover and Lent defined intimate partner as an individual that another had a personal, close relationship with, as understood in terms of emotional closeness, continued sexual and physical closeness, familiarity, contact on a regular basis, and knowledge of each other's lives. Stover and Lent explained that it was not necessary for the relationship to have all these factors. Further, the couple might be living together, and they could be of the same or opposite sex (Stover & Lent, 2014).

Stover and Lent (2014) defined physical violence as a person intentionally using force to cause harm, injury, or death through physical means. Physical violence may consist of biting; throwing; slapping; punching; burning; pulling hair; and using a harmful weapon, such as gun, against someone (Stover & Lent, 2014). Stover and Lent (2014) further defined physical violence as involving forcing someone to do any of these activities.

Stover and Lent (2014) defined sexual violence as acts of sexual nature undertaken or attempted by someone without the consent of the victim. These may consist of penetrating the victim by force, forcing someone to use alcohol or drugs to do so, or forcing the victim to penetrate someone by force or by the use of alcohol or drugs (Stover & Lent, 2014). Sexual abuse may also include the forceful sexual act facilitated by the aggressor to a victim toward a third party (Stover & Lent, 2014). The most significant characteristic of sexual violence is lack of consent by the victim who is capable of giving such consent (Stover & Lent, 2014). Many conditions exist where the victim is incapable of giving consent, such as age, disability, and lack of consciousness (Stover & Lent, 2014). Stover and Lent (2014) stated that a person committed sexual violence when the victim was incapable of refusing the aggressor's advances to sexual act due to blackmailing, threats, and use of a gun. Stover and Lent categorized sexual in two types: attempted or completed.

A characteristic part of IPV is using physical tactics that are aggressive in nature over disagreements (Capaldi & Langhinrichsen-Rohling, 2012). These are used by men, as well as women (Capaldi & Langhinrichsen-Rohling, 2012). Researchers have described IPV as a heterogeneous act; some cases of IPV have higher symmetry in terms of gender when compared to others (Gómez & Montesino, 2014). Desmarais, Reeves, Nicholls, Telford, and Fiebert (2012a) noted symmetry in terms of gender when conducting a large scale study regarding IPV.

Gómez and Montesino (2014) defined situational IPV as deriving from disagreements; Gómez and Montesino found this type of IPV as lesser in severity and

free from control and coercion. These cases usually start through arguments among couples (Gómez & Montesino, 2014). Conversely, Gómez and Montesino (2014) studied data from police reports, women's shelters, and emergency rooms. The researchers found that the violence involved in IPV was influenced primarily by control and coercion, from which violence emerged. In this form of IPV, Gómez and Montesino found that the aggressors were mostly men, and they were motivated primarily by control and power. This power also usually resulted in the injury of more women (Gómez & Montesino, 2014). Regarding cases of IPV, the prevalence of situational violence is usually higher when compared to coercive violence (Langhinrichsen-Rohling & Turner, 2012). Thus, regarding studies on the topic, the former was researched more (Langhinrichsen-Rohling & Turner, 2012).

Insights emerged from the research conducted on IPV so far. Researchers established two categories when establishing unidirectional form of IPV (Langhinrichsen-Rohling & Turner, 2012). These consisted of male aggressors and female victims, and female aggressors and male victims (Langhinrichsen-Rohling & Turner, 2012). This categorization referred to those cases of IPV where only one aggressor existed among the couple, the other being the victim (Langhinrichsen-Rohling & Turner, 2012). Conversely, in cases where males and females both were aggressors and victims, Langhinrichsen-Rohling and Turner (2012) defined the situation as mutual violence. Researchers termed these cases as "both-violent," although the term "bidirectional violence" remained used by many (Lewis et al., 2015).

In the field of IPV, researchers focused on psycho-physiological reactions among the individuals involved in IPV (Stare & Fernando, 2014). Clarifying the previous beliefs that emphasized the similarities between antisocial tendency among individuals in general and the phenomenon of IPV, later researchers pointed out the differences between these. For example, Stare and Fernando (2014) showed the psycho-physiological indicators previously associated with IPV were more likely to be predictors of antisocial behavior. Following these findings, modern researchers concluded many reactions existed within an individual that would result in different types of IPV (Stare & Fernando, 2014). Stare and Fernando (2014) noted that men who got involved in higher levels of physical violence had qualitative differences when compared to those who got involved in lower level of physical violence. Most importantly, Stare and Fernando realized that more severe cases of IPV showed a desire in the aggressor to get and keep control of the victim. Conversely, lower levels of IPV resulted from a disagreement between a couple where violence was seen by them as a way of resolving the conflict when no other solution was available (Stare & Fernando, 2014). As the present research was a qualitative study, I contributed important insights about the constructs of IPV and its prevention qualitatively, thereby contributing important findings in this research field.

I examined the significance of an IPV prevention program, Love Doesn't Hurt, through the viewpoints of teachers, counselors, and school administrators. I aimed to ascertain the feasibility of studying which program elements were influential or problematic, specifically regarding gender considerations and how male and female students might respond differently to various components. IPV among adolescents has

been a significant area of interest among researchers. Researchers have mostly focused on IPV in dating, an activity more common among adolescents that involves intimate relationships (Lee et al., 2014). Researchers have also focused on IPV in relation to emerging adulthood, a period understood by researchers as the one occurring after adolescence between the ages of 18 and 25; individuals are then more concerned with issues related to identity regarding their work, views, and love (Lee et al., 2014).

Regarding love, Lee et al. (2014) analyzed dating and found that this activity would start as a recreational activity in the middle of adolescent years; from there, dating evolved into static relationships during emerging adulthood. In this period, romantic relationships provided the individuals the chance to have experiences creating and continuing relationships. Individuals can use these experiences to predict the quality of future relationships, especially their marriages (Lee et al., 2014). Students make up a large part of this population, as most are still pursuing their education (Lee et al., 2014). This finding was significant in the context of the present study. As described by Lee et al. (2014), this period consisted of learning experiences that helped students predict the quality of relationships, especially marriages, in life. Thus, it was a critical period in the life of individuals regarding their intimate relationships. I examined the significance of an IPV prevention program, Love Doesn't Hurt, by qualitatively studying leadership in the program. I provided important insights about the development and attitude of these populations on intimate relationships, thereby contributing findings to the literature on the topic. The qualitative nature of the present study made me capable of providing deeper and more and multidimensional insights about adolescents and their intimate

relationships regarding the sources of their attitudes and the outcomes. Thus, the study was an important contribution to the existing literature on the topic regarding the modern development of the literature on the topic.

Further, as noted before, experience of romantic relationship through dating provides adolescent individuals with the opportunity to learn lessons that help them strengthen their future relationships (Lee et al., 2014). They learn how to resolve conflicts through compromise and communication (Lee et al., 2014). However, these experiences may also lead to violence (Bowen & Walker, 2015). Bowen and Walker (2015) noted that the rate of adolescent violence was increasing. Further, despite the image that violence between dating partners is usually started by men, Bowen and Walker found that, among adolescents, females were more likely, when compared to men, to utilize aggression in physical form, and they utilized it more when compared to males.

Kann et al. (2014) found that when it came to reporting behaviors related to violence, males were more likely to report them in as much as six types of behavior they identified, including the carrying of weapon in school. Conversely, regarding females, they showed higher chances of reporting safety concerns, being forced to have sex, experiencing sexual and physical dating violence, and experiencing online bullying (Kann et al., 2014). Regarding IPV, gender differences have varied sources and motivations; therefore, researchers should analyze these qualitatively to attain a better understanding. Therefore, I conducted a qualitative study to provide important insights on the gender differences related to IPV-related behavior among students through the

viewpoints of leadership of the program; these findings contributed important information to the existing literature.

Researchers have noted that IPV among young males and females in intimate relationships has become an important issue in public health because of the higher occurrence and long-term, negative mental and physical consequences on health (Shortt, Capaldi, Kim, & Tiberio, 2013). I examined the significance of an IPV prevention program to contribute significant insights on the issue to facilitate debate and provide empirical, qualitative data. These data could be used to strengthen prevention programs, thus reducing the occurrence of IPV among young individuals. The findings also contributed important insights about the sources of IPV.

Regarding dating, Edwards and Hinsz (2014) reported that one among three teenagers said they experienced emotional, sexual, physical, or verbal abuse from the person they dated. Approximately 1.5 million individuals who were the age of high school students were reported as having experienced violence in dating (Bowen & Walker, 2015). The age of females among these individuals ranged from 16 to 24 (Bowen & Walker, 2015). Edwards and Hinsz (2014) noted dating violence as a significantly common category of violence among youth. Statistics showed an increase when compared to those of the previous decade on similar population (Edwards & Hinsz, 2014). More importantly, adolescents who are engaged in dating violence are more likely to experience violence even later in their lives and relationships (Edwards & Hinsz, 2014). They are at a higher risk of developing eating disorders, as well as addiction to drugs (Edwards & Hinsz, 2014). The future violence among these individuals tends to

increase with time (Edwards & Hinsz, 2014). Thus, Edwards and Hinsz (2014) described IPV among adolescents as a significant issue that needed further examination through different constructs.

I ascertained the feasibility of studying which program elements were particularly impactful or problematic to provide significant research to tackle this public health issue. Leaders could use the findings to strengthen IPV prevention programs, as the finding showed what components of these programs were more effective among students. Given the severity of the issue and the long-term negative health consequences that emerged, the findings of the present study had significant implications on the overall problem.

Regarding the causes that lead to IPV, one must understand a number of insights about adolescents engaging in IPV mentioned by Pepler (2012). To begin with, Pepler mentioned that the adolescents who engaged in IPV experienced something nontraditional in their lives in their youth that made them incapable of relating to other people in a positive, nonaggressive way (Pepler, 2012). Based on an analysis of the studies conducted on the topic, Pepler (2012) found that many abilities necessary to form a healthy intimate relationship with a partner were not developed in those adolescents who engaged in IPV. This finding indicated a need to conduct a qualitative study on these factors connected with IPV in adolescents, which I aimed to find. Pepler (2012) mentioned the need to carry out research on adolescents and their experiences with IPV to analyze their behaviors and its causes. Therefore, I analyzed the components that related to the sources of engagement in IPV, as well as its effects, to fill this gap in literature.

Regarding causes, researchers have studied adolescents engaged in IPV and have provided important insights. Jouriles, Mueller, Rosenfield, McDonald, and Dodson (2012) found that adolescents exposed to high IPV, especially through their parents, showed a higher chance of becoming associated with IPV themselves. Another cause among adolescents related to IPV was harsh parenting, which caused symptoms related to anger that led them to be at a higher risk of being experiencing IPV (Jouriles et al., 2012). Mainly among the females, sex in adolescent years had relation to being engaged in IPV (Jouriles et al., 2012). A number of mechanisms led to developing IPV among adolescents, such as lower social learning of positive forms and relationship understandings, along with lack of knowledge about one's worth in an intimate relationship (Pepler, 2012).

Children brought up in an environment of violence may have issues with their abilities to resolve conflict in relationships, thereby resulting in aggressive behavior for conflict resolution (Pepler, 2012). Showing an association with one of the theories that make up the theoretical framework of the present study, social learning theory, Pepler (2012) discovered that children viewed their parents as primary role models, and violent behavior among them was interpreted as natural reactions by children. These experiences also influenced behavior through constructs related to reinforcement among the children (Pepler, 2012). For instance, if a child acted aggressively, their parents might respond harshly to this behavior (Pepler, 2012). However, when the children were compliant, their behavior might go unnoticed by the parents because of their own stress (Pepler, 2012).

Seeing parents utilizing violent means during a conflict may lead the child to think that relationships are naturally not reliable (Ehrensaft & Cohen, 2012). Further, these parents who experience IPV also report lack of satisfaction with their children (Ehrensaft & Cohen, 2012). These factors lead the children to show higher aggression like their parents as well as lack of self-worth in their own intimate relationships (Ehrensaft & Cohen, 2012). Further, they also show a tendency to choose intimate partners who behavior aggressively toward them, increasing the incidents of IPV (Ehrensaft & Cohen, 2012). Rejection from parents leads them to have insecurity in their relationships (Ehrensaft & Cohen, 2012). One other source of IPV found among adolescents in research literature consists of peers. This relates to having peers who show and encourage aggression in intimate relationships (Pepler, 2012). This is another reflection of social learning theory, one of the theories forming the theoretical framework of the present study (Capaldi, Knoble, Shortt, & Kim, 2012). Further, antisocial adolescents associated themselves with similar individuals, who encourage each other in their aggressive behavior (Capaldi et al., 2012). This escalates IPV if it is already present in the individual (Capaldi et al., 2012). Peers also encourage adolescent individuals' view of relationship (Capaldi et al., 2012). Thus, lack of good peers can lead to a deformed view of relationships, resulting in IPV (Capaldi et al., 2012). Nature of one's romantic partner may also cause an individual to engage in IPV (Capaldi et al., 2012). It has been noted that aggressive adolescents choose partners who are similar to them in terms of their nature (Capaldi et al., 2012). A change in partner leads to higher chances of IPV (Pepler, 2012). Generally, it has been noted that IPV is more likely to occur among

individual in lower social and economic groups (Theobald & Farrington, 2012). Lower levels of education, income, as well as unemployment lead to higher chances of IPV (Theobald & Farrington, 2012). These individuals, unfortunately, also lack skills to cope with aggression (Theobald & Farrington, 2012).

Thus, I noted that research on the topic of IPV so far yielded a number of important and influential insights. The severity and prevalence of IPV among adolescents was noted. A number of sources caused IPV among individuals. However, a lack of interrelationships existed between the various factors related to IPV that helped in the prevention of IPV among adolescents. Therefore, I found it important to qualitatively establish the factors most likely to be responsive toward IPV prevention programs. With this study, I contributed these insights in the literature; thus, this study had important implication for research on this topic. The next subsection provides a review of literature on prevention programs for IPV.

Prevention Programs

To understand the need to conduct the present research, a review of literature on prevention programs for IPV is essential. Based on the current state of research on such programs, a conclusion about the nature of contemporary IPV prevention programs can be reached. This analysis also reveals whether the present prevention programs are successful and, if not, the areas where these have failed. As the goal of the present research was to examine the significance of an IPV prevention program, Love Doesn't Hurt, this subsection shows the need to carry out such an investigation based on the current status of research on IPV prevention programs.

The phenomenon of IPV affects millions of individuals each year, a population that includes both children as well as adults (Arroyo, Lundahl, Butters, Vanderloo, & Wood, 2015). The consequences of IPV take many forms, from homicide, emergency care needs, legal interventions, to child welfare involvement (Arroyo et al., 2015). Further, those who survive IPV are affected by its scars, which include somatic and psychological trauma such as depression, anxiety, social and economic challenges, and so on (Arroyo et al., 2015). To provide relief from these consequences, prevention programs are required that can provide support before cases of IPV can emerge, during the presence of IPV, as well as after incidents of IPV have taken place (Arroyo et al., 2015).

At present, many programs provide prevention assistance for IPV in various different settings, from community in general to universities and schools (Heffernan, Nurse, Habibula, & Sethi, 2013). For them to succeed in their goal, researchers should study various constructs of these programs to establish whether these provide adequate results that affect IPV prevention in the long run (Heffernan et al., 2013). Further, the effectiveness of prevention programs is a major issue in the research, as Fellmeth, Heffernan, Nurse, Habibula, and Sethi (2013) pointed out in their review on IPV prevention programs. Based on an analysis of 38 IPV prevention-related studies, the researchers found that these programs failed to show any convincing proof of reducing IPV or positively modifying the behaviors, attitudes, and skills of the participants in the context of IPV (Fellmeth et al., 2013). The only positive effect the researchers found was a slight increase in knowledge of relationships among the participants (Fellmeth et al., 2013). This is an important insight, as the review consisted of an analysis of many studies

on IPV prevention programs, which, though limited in number, does succeed in providing an idea about the success rate of many IPV prevention programs. In the light of this fact, I wanted to examine which program elements of IPV prevention programs were particularly impactful or problematic. I wanted to ascertain the feasibility of studying which program elements were particularly impactful or problematic, specifically in relation to gender considerations and how male and female students might respond differently to the various components.

Further, IPV prevention consists of a wide variety of techniques (Horst et al., 2012). Regarding IPV-related research, there was a lack of proper consensus among researchers about the feasibility, as well as effectiveness of IPV prevention program constructs (Hackett, McWhirter, & Lesher, 2015). Study results on IPV prevention programs ranged from “variable” to “unsuccessful” (Hackett et al., 2015). These findings showed that there was a need to present a qualitative study that examined the significance of an IPV prevention program to ascertain the feasibility of studying which program elements were particularly impactful or problematic. As pointed out by Dutton (2012b), IPV prevention programs, provided after incidents of IPV have occurred, were generally known as being unsuccessful. IPV prevention programs that utilize psychology and education, in the likeness of “Duluth” IPV prevention programs, have been consistently shown as unsuccessful when it comes to treatment (Dutton, 2012b). Some IPV prevention programs are based on psychological constructs currently being developed; however, these constructs are limited by gender-related views; these assert that IPV among married couples cannot represent a psychological issue (Dutton, 2012b; Lila, Oliver, Galiana, &

Gracia, 2013). Both of these facts provided a significant understanding for the need to conduct the present study. I studied the significance of an IPV prevention program to ascertain the feasibility of studying which program elements were particularly impactful or problematic, specifically in relation to gender considerations. The issue of gender stereotype, where males were seen as violent and aggressive, while females were shown as passive victims, was pointed out as an issue that hampers the understanding of IPV prevention (Dutton, 2012b). This pattern was observed in only 4% of the surveys of victims in cases of IPV in the study conducted by Dutton (2012b). I adopted a theoretical framework made up of two theories, social learning theory and feminist theory, to balance this stereotype and address the gap in literature.

Many reasons existed as to why there was a need to strengthen IPV prevention programs, especially through studies on adolescents, as the present research aimed to do (Bermudez et al., 2013). After this study was conducted and the effects of the Love Doesn't Hurt program was explored, further quantitative research would be needed to determine the extent of its effectiveness. Firstly, Bermudez et al. (2013) showed that the sources of IPV that occurred later in adulthood among individuals of both sexes could be traced back to their teenage years. As I noted in the beginning of this chapter in the theoretical framework section, these were caused by the psychological behavior of parents, which developed into a source of transmission of violent behavior between two generations (Bermudez et al., 2013). Exposure to violence is a critical function in the development of IPV-related behavior in an individual, such as the use of alcohol and violence in dating (Bermudez et al., 2013). Thus, examination of IPV prevention program

and its constructs among adolescents can result in significant positive implications on the overall success of IPV prevention programs (Bermudez et al., 2013). These positive implications can appear in the form of reduction in both perpetration of IPV, as well as the process of IPV victimization (Bermudez et al., 2013). Positive results have been suggested from studies on both adolescent populations, as well as IPV prevention before cases of IPV have occurred (Bermudez et al., 2013). These results have also shown a positive change in the relationship between parents and children, as well as better overall wellness in family (Bermudez et al., 2013). The present study about IPV prevention programs focused on students, thus fulfilling an important need for research on IPV prevention programs. Gender was also an important part of the present study, as I focused on gender considerations and how male and female students might respond differently to the various components of IPV prevention programs. Thus, I contributed important findings in the literature on IPV prevention programs.

Whitaker et al. (2013) estimated that the public cost per year due to becoming a victim of IPV was \$5.8 billion. Hence, prevention of IPV was not only an issue of health and well-being of individuals but also of public health (Stover & Morgos, 2013). One of the most significant constructs of IPV prevention was primary prevention (Whitaker et al., 2013). Primary prevention refers to preventing IPV before it begins (Bair-Merritt et al., 2014). IPV starts in the teenage years, when adolescents start forming intimate relationships (Whitaker et al., 2013). Whitaker et al. (2013) stated that IPV reached its peak in the early years of adulthood. Hence, prevention of IPV must start among students (Ritchie, Nelson, Wills, & Jones, 2013). As noted by Whitaker et al. (2013), prevention

methods have been focused on students traditionally. However, lack of in depth studies has resulted in a failure to provide conclusive findings about their effectiveness (Whitaker et al., 2013). This aspect called for a more qualitative approach toward the evaluation of different constructs of IPV prevention programs. As I examined the significance of an IPV prevention program, Love Doesn't Hurt, I contributed important findings in this field of research.

Prevention programs also include couple therapy; however, researchers are skeptical about this method due to safety-related issues as well as its lack of effectiveness (Todahl, Linville, Tuttle Shamblin, & Ball, 2012; Rhodes et al., 2015). In couple therapy, couples showing violent behavior usually have bilateral violence, and among them, the most common form of violence was situational violence (Madsen, Stith, Thomsen, and McCollum, 2012). Other programs, such as batterer intervention, focus on gender socialization, where the problems related to control and power are examined (Todahl et al., 2012).

Additionally, researchers have examined group therapy in the context of IPV prevention. For instance, Todahl et al. (2012) examined a group therapy program, CARE. Todahl et al. found it an effective method, as the participants mentioned experiencing positive results. Many reasons were mentioned for its success, such as the ability to know about other people with similar experiences, which resulted in increase in knowledge (Todahl et al., 2012). Todahl et al. (2012) mentioned the participants in the CARE program found that it helped them combat their problems and increased their hopes.

Todahl et al. concluded that group therapy might help individuals externalize their problems by seeing other people who suffered from similar problems.

Studies have also been carried out to assess the effectiveness of IPV prevention programs specifically created for adolescent girls. For instance, Langhinrichsen-Rohling and Turner (2012) conducted a study to measure the constructs of the IPV prevention program, “Building a Lasting Love (BALL).” This program instructed adolescent girls about skills necessary to create healthy relationships by showing the significance of relationships that are not violent (Langhinrichsen-Rohling & Turner, 2012).

Langhinrichsen-Rohling and Turner (2012) found that the program showed some positive changes in the participants in terms of their relationships. Conversely, a review of literature did not show any similar study conducted to assess the IPV prevention program, Love Doesn’t Hurt. As I examined the significance of an IPV prevention program, Love Doesn’t Hurt, to ascertain the feasibility of studying which program elements were particularly impactful or problematic, I provided new insights about this particular program, as well as other factors of the study that could be generalized.

Adolescents formed the sample population of the present study. Researchers have carried out studies focusing on adolescent IPV. For instance, Shorey et al. (2012) conducted a review of studies on IPV prevention among adolescents. A significant, if alarming, insight from this review was that a lack of evidence showed that these programs succeeded in lowering IPV among adolescents (Shorey et al., 2012). Even when contrary results were found, such as Safe Dates that showed the capacity to reduce violent behavior over time, Shorey et al. (2012) concluded that this was an exception, and

most IPV prevention programs for adolescents had not succeeded. This program showed success only in a rural population and was limited in its generalization abilities (Shorey et al., 2012). Shorey et al. (2012) posited the reason for this failure was due to the limits of methodology.

There was a lack of studies on IPV prevention programs specifically among adolescent students (Shorey et al., 2012). I aimed to examine the significance of an IPV prevention program, Love Doesn't Hurt, to ascertain the feasibility of studying which program elements were particularly impactful or problematic, specifically in relation to gender considerations and how male and female students might respond differently to the various components. The lack of success of IPV prevention programs required new studies to provide qualitative insights about the strength and weaknesses of current IPV prevention programs. Therefore, the findings of the present qualitative study contributed to the literature to improve current IPV prevention programs.

Researchers have mentioned that most programs to prevent IPV have been ineffective (Temple et al., 2013; Tharp, 2012; Wray, Hoyt, & Gerstle, 2013). Apart from the reasons already mentioned that hinder the success of IPV programs, Capaldi and Langhinrichsen-Rohling (2012) have asserted that this lack of success might be due to these programs not taking into account the recent development in the research on IPV. In the light of this fact, it becomes important to design and conduct a study that is capable of providing practical insights and information for the practicing professionals as well as the designers of these programs. The findings of the present study might provide important information for these professionals. For instance, I examined the significance of an IPV

prevention program to ascertain the feasibility of studying which program elements were particularly impactful or problematic. Thus, based on the findings of the present study, it would be more helpful to see these elements and potentially reduce the less effective ones, while increasing the more effective elements.

Based on the review of literature on IPV prevention programs, I concluded that so far, the IPV prevention programs have been ineffective in reducing IPV among adolescents. Further, there was no study in the literature that assessed the significance of the IPV prevention program, Love Doesn't Hurt. Therefore, I examined the significance of Love Doesn't Hurt to ascertain the feasibility of studying which program elements were particularly impactful or problematic, specifically in relation to gender considerations and how male and female students might respond differently to the various components. I contributed important findings in the body of literature on the topic. Another important construct in research on IPV and its prevention programs is gender, which is explored in the next subsection.

Gender Issues Related to Intimate Partner Violence

Regarding IPV and its prevention, gender becomes a significant construct, as noted through the review of literature associated with feminist theory and social learning theory in the context of IPV in this chapter. Norms in society that traditionally give more power to men above women enhance the danger of violence carried out against women (Wagman et al., 2015). These norms also lower the ability of females to manage consensual sexual relationships and sexual safety, as well as their abilities to seek help against abuse (Wagman et al., 2015). These factors are influential in the context of IPV,

as the cases of IPV include all these factors. This aspect shows the significance of gender in the context of IPV, which is the focus of this subsection.

Regarding gender, one of the most significant issues in IPV has been that of gender symmetry (Ferraro, 2012). Ferraro (2012) provided an analysis of gender symmetry in the context of IPV. Ferraro established that gender influenced many significant aspects of people's lives, from their psychology as individuals to society, its institutions, and culture as a whole. The arguments concerning gender in IPV have traditionally mixed the functions of gender and sex, overlooking conceptual interpretations of violence as well as gender (Ferraro, 2012). However, these arguments are not capable of including a number of constructs related to IPV that are established as related to gender (Ferraro, 2012). For instance, gender symmetry is not able to include rape in its framework, along with reproductive factors as well as pregnancy and the violence associated with it (Ferraro, 2012). After providing this analysis, Ferraro (2012) concluded that future studies on IPV, as well as the consequent policies of IPV prevention programs, should consider the basic function of gender, as IPV was significantly associated with gender. As gender was one of the main constructs driving the present study and its research design, I fulfilled the need for research, as well as findings, with gender in focus.

The traditional superiority of males finds its expression in virtually all forms of associations between men and women, which includes romantic and intimate relationships too (Caldwell et al., 2012). The socialization in the context of gender almost universally provides rights to men as a figure of authority for their female partners as

well as in their families (Caldwell et al., 2012). Additionally, physically men are stronger and larger than women, which ensures their higher power in matters related to women (Caldwell et al., 2012). As a result of this, studies mostly find women in higher fear of violence from their partners when compared to men (Caldwell et al., 2012). This insight helps in understanding IPV where women are at a higher risk of becoming a victim when compared to men (Caldwell et al., 2012). Conversely, Kimmel (2002) provided the reasons why gender symmetry has been raised as an important factor in IPV by researchers. Kimmel noted that debate about the place of gender in IPV led to a number of studies focusing on this factor. Some researchers asserted that, regarding cases of IPV, the risk of becoming a victim was equal between men and women (Kimmel, 2002). Thus, in contrast to many studies that showed that in cases of IPV, usually the perpetrators were male, while the victims were female, Kimmel (2002) showed that these roles were seen among both genders equally. Regarding the United States, Kimmel found that both genders of participants in the study equally mentioned hitting their partners. This finding led to a debate concerning the policy about IPV prevention programs, suggesting that the prevention programs of IPV that have traditionally focused entirely on the safety of females may have been misdirected (Kimmel, 2002). This finding led to researchers arguing that there was a gender symmetry in IPV (Kimmel, 2002).

An important contribution to this debate was to evaluate the rate of victimization between genders in IPV. This was contributed by Desmarais et al. (2012b). Noting that many studies have found that IPV is primarily directed against females, the researchers also mentioned the increasing literature where males were found as victims (Desmarais et

al., 2012b). Desmarais et al. (2012) noted that, due to the serious negative consequences that cases of IPV had, one must conduct studies on IPV and its prevention focused on gender. As this was the goal of the present study, the study was an important contribution in the body of literature on the topic. Further, in their own review of literature on the issue, Desmarais et al. (2012b) found that one out of four women were victims of IPV, while the statistics of men indicated the prevalence to be in one out of five men. The most important finding from this review, in the context of the present study, was the fact that when it came to studies with large samples such as colleges and communities, studies found higher number of female victims (Desmarais et al., 2012b). Conversely, when the studied sample was of higher school and middle school students, studies found higher number of male victims (Desmarais et al., 2012b). Desmarais et al. (2012b) noted that the issue of gender differed across countries. The study showed that the issue of gender symmetry is a complicated phenomenon involving various different factors (Desmarais et al., 2012b).

Gender symmetry is associated with victims and perpetrators in IPV (Hamel, 2013). However, researchers have found that gender also plays a significant role when it comes to people's attitude toward violence (Valdez, Lilly, & Sandberg, 2012). In this context, it was found that men with higher attachment anxiety were more likely to accept the occurrence of IPV, perpetrated by either gender, when it was done due to abandonment (Valdez et al., 2012). Conversely, men with higher attachment avoidance showed this attitude of acceptance only toward IPV that was perpetrated by women (Valdez et al., 2012). Regarding motivations for IPV, different behaviors were noted

between the two genders (Elmqvist et al., 2014). For instance, among men, the most common motivation for IPV was reported to be anger in early literature (Elmqvist et al., 2014). However, later research noted a number of reasons as motivations for IPV (Elmqvist et al., 2014). Researchers found that among men, the most common reason for IPV was related to the behavior of the partner (Elmqvist et al., 2014). Later researchers also found control, desire, and suppressed anger to be central issues motivating men to start IPV with their partners (Elmqvist et al., 2014).

Different motivations were noted among women for IPV by researchers studying the issue (Elmqvist et al., 2014; Semiatin, Murphy, & Elliott, 2013). It was also noted that the studies that explored constructs of IPV among women were few (Elmqvist et al., 2014). As the present study will examine how both male and female students may respond to the various components of an IPV prevention program, the present study will be an important contribution to the literature on the topic. The researchers who explored the motivations of women have come across a number of reasons. The most significant reasons stated by most female propagators of IPV included self-defense and intense anger (Elmqvist et al., 2014). Other researchers came across four main reasons for perpetrating IPV, which included psychological motivations, violations of rules expected in intimate relationships, the desire to restore one's image, and the desire to get attention (Elmqvist et al., 2014). Female participants reported that aggression often seemed to be the only way to gain the attention of their partners (Elmqvist et al., 2014). Other researchers found lack of proper regulation of emotion, retaliation, and provocation to be some of the primary reasons motivating females to start IPV (Hamby & Turner, 2013). Further, those

couples who are directed by court to consult IPV prevention programs are usually involved in a mutually abusive relationship (Hamel, 2012). Based on the literature on the issue, I observed differences and similarities between men and women regarding motivations for IPV. For instance, a pattern emerges based on related literature that for men, engagement in IPV against their partners is often a way to stop themselves from becoming victims of IPV (Elmqvist et al., 2014). While women most frequently mention, as noted before, self-defense as the primary motive for engaging in IPV (Elmqvist et al., 2014). Conversely, some studies have also found that there is a gender symmetry in IPV, and both women and men report anger as a reason motivating them to perpetrate IPV against their partners (Elmqvist et al., 2014). Finally, even though studies have been conducted on both male and female motivations for IPV individually, it has also been mentioned that there is a lack of studies where the constructs of IPV were measured and compared between men and women directly (Crane, Hawes, Mandel, & Easton, 2014; Elmqvist et al., 2014). I examined the significance of an IPV prevention program, Love Doesn't Hurt, to ascertain the feasibility of studying which program elements were particularly impactful or problematic, specifically in relation to gender considerations and how male and female students might respond differently to the various components.

IPV has historically been seen as a phenomenon where men conduct violence against women (Mejdoubi et al., 2013). As a result of this, most of the research and prevention programs for IPV have focused on women. Hence, there is a lack of balance between examination of both male and female involvement in IPV (Mejdoubi et al., 2013). However, some studies have found that the occurrence of IPV cases where the

proprietor were males, and those where they were females are equal (Stewart, Gabora, Allegri, & Slavin-Stewart, 2014). There is a lack of studies where the examination of IPV factors was conducted among both genders with equal attention (Kelley, Edwards, Dardis, & Gidycz, 2015; O'Leary & Slep, 2012; Stewart et al., 2014). Emerging research suggests considerable differences between male and female behavior in the context of IPV (Stewart et al., 2014), and to assess them it is important to consider a more effective methodology where both genders are examined equally to see how they may respond differently to the various components of IPV prevention programs (Lothstein, 2013; Stewart et al., 2014). I examined the significance of an IPV prevention program, *Love Doesn't Hurt*, to ascertain the feasibility of studying which program elements were particularly impactful or problematic, specifically in relation to gender considerations and how male and female students might respond differently to the various components. Therefore, this study addressed the gap in research, as discussed in the following section.

Research Gap

The literature reviewed in the current chapter highlighted the prevalence and risks associated with the phenomenon of IPV. Researchers have mentioned the phenomenon of IPV as a public health issue (Breiding et al., 2015; CDC, 2015; Shortt et al., 2013). The components of the present study contained two important factors. I studied participants involving both genders to assess the reactions of both genders simultaneously regarding the phenomenon of IPV. The review of literature showed the significance of this research design. There were controversies regarding gender in terms of defining IPV and its prevention approaches (Bowen & Walker, 2015; Ross & Babcock, 2010). Due to the

discrepancies regarding this theme in the present review of literature, I believed that while there was little scholarly consensus on whether males were more predisposed to the phenomenon of IPV than females, the two genders probably did react differently to situations that could produce IPV. The purpose of this study was to conduct a qualitative, case study on the Love Doesn't Hurt program to understand the professional viewpoints of the counselors/teachers who led the program; to determine whether they saw improvements among this vulnerable, male, adolescent population; to obtain knowledge of ways the program worked or did not work (i.e., opinions of program effectiveness); and to determine suggestions for future practices. The issue of gender stereotype, where males were seen as violent and aggressive, while females were shown as passive victims, was pointed out as an issue that hampered the understanding of IPV prevention (Dutton, 2012b). I adopted a theoretical model made up of two theories, social learning theory and feminist theory, to balance this stereotype. I examined the significance of an IPV prevention program specifically regarding gender considerations to address this gap in literature.

Further, Stare and Fernando (2014) noted that men involved in higher levels of physical violence had qualitative differences when compared to those involved in lower levels of physical violence. Based on an analysis of the studies conducted on the topic of IPV, Pepler (2012) concluded that many abilities necessary to form a healthy intimate relationship with a partner did not develop in adolescents engaged in IPV. A lack of interrelationships between the various factors related to IPV that helped in the prevention

of IPV among adolescents also existed. Therefore, I sought to establish the factors more likely to be responsive toward IPV prevention programs qualitatively.

The qualitative nature of the present study made it capable of providing deeper and more multidimensional insights about adolescents and their intimate relationships in terms of the sources of their attitudes and the outcomes in the context of IPV and its prevention through teachers/counselors' viewpoints. Thus, the qualitative research design of the present study was an important contribution to the existing literature on the topic of IPV. The lack of success of IPV prevention programs also required new studies to provide qualitative insights about the strength and weaknesses of current IPV prevention programs. Therefore, I contributed qualitative insights about the constructs related to IPV and its prevention, thereby contributing important findings in this research field.

Regarding prevention, a number of other research gaps were found in the reviewed literature. For IPV prevention programs to succeed, one must study various constructs of these programs to establish whether these provide adequate results that affect IPV prevention in the long run (Heffernan et al., 2013). Further, IPV prevention consists of a wide variety of techniques (Horst et al., 2012). Therefore, regarding IPV-related research, there was a lack of proper consensus among researchers about the feasibility and effectiveness of constructs related to IPV prevention programs (Hackett et al., 2015). Further, the effectiveness of prevention programs was a major issue in the research, as many researchers pointed out their failures in reducing IPV incidents. The failure of current IPV prevention programs, along with the issue of gender mentioned previously, provided a significant understanding for the need to conduct the present

study. I examines which program elements of IPV prevention programs were influential or problematic as the goal of the present study. I examined the significance of an IPV prevention program, Love Doesn't Hurt, specifically in relation to gender considerations and how male and female students might respond differently to the various components.

Studies have shown that the sources of IPV that have occurred later in adulthood among individuals of both sexes can be traced back to their teenage years (Bermudez et al., 2013). Examination of IPV prevention program and its constructs among adolescents can result in significant positive implications on the overall success of IPV prevention programs (Bermudez et al., 2013). I studied IPV prevention programs and focused on students, thus fulfilling an important need for research on IPV prevention programs. Thus, I contributed important findings on IPV prevention programs among adolescents to the literature.

The review of literature showed a number of IPV prevention programs studied by researchers. However, a review of literature did not show any similar study conducted to assess the IPV prevention program, Love Doesn't Hurt. I examined the significance of an IPV prevention program, Love Doesn't Hurt, to ascertain the feasibility of studying which program elements were particularly impactful or problematic. Therefore, I provided new insights about this particular program, as well as other factors of the study that could be generalized.

Summary

The review of literature presented in this chapter gave an overview of existing literature to show the gaps in literature on the topic, as well as the need for conducting the

present study. The first section of the literature review provided an introduction to the chosen theoretical framework. I used the social learning theory, developed by Bandura (1969), and feminist theory, first applied to cases of IPV by Pence and Paymar (1993). Social learning theory posits that children learn behaviors by observing the behaviors and actions of their parents and others (Mihalic & Elliott, 1997). Feminist theorists see IPV as deriving from women's unequal position within sexist and patriarchal societies (Pence & Paymar, 1993).

This chapter also discussed the rationale for choosing these theories for the present research. I sought to conceive the extent to which upbringing and inculcated values mattered in occurrence of IPV among both genders. As these factors were social constructs, learned most significantly from the family, the significance of social learning theory in the context of the present study was observed. There were social and biological reasons behind the vulnerability of women in interpersonal relationships for becoming victims of IPV. As I examined gender-based predisposition to IPV among young people, feminist theory was seen as an important and significant theory as a part of the theoretical framework.

The second section of the review gave an exhaustive review of relevant studies, which was organized in categories, progressing from general themes to the specific research problem studied. Regarding intimate partner violence and its causes, I found that IPV was a public health issue and its victims suffered from long-term health risks. The inability to form healthy relationships due to a number of factors resulted in engagement in IPV. Regarding prevention programs, I found that most studies concluded no

significant reduction in IPV cases through the current IPV prevention programs.

Regarding gender issues, I found that different factors between men and women motivated them toward IPV. However, I also found that some similar factors motivated both men and women for IPV.

The third section of the chapter focused on the gaps in the literature found on the basis of the reviewed literature and the need for conducting the present study. I noted that no previous study focused on the IPV prevention program, Love Doesn't Hurt. Further, the need for a qualitative study was found to examine the constructs of IPV and IPV prevention programs more deeply. The need to conduct a study involving both genders directly was also established. Based on these factors, the need for conducting the present study was pointed out.

The next chapter focuses on the methodological plan for the present study. Based on the problem, as well as the research gaps identified in this chapter, an exploratory study of the Love Doesn't Hurt program is conducted. The descriptions of the selection process of participants, recruitment procedures, instrumentation, participation, data collection, data analysis plan, and issues of trustworthiness are also provided in the next chapter.

Chapter 3: Research Method

Introduction

To reiterate, the purpose of this study was to conduct a qualitative, case study on the Love Doesn't Hurt program to understand the professional viewpoints of the counselors/teachers who led the program; to determine whether they saw improvements among this vulnerable, male, adolescent population; to obtain knowledge of ways the program worked or did not work (i.e., opinions of program effectiveness); and to determine suggestions for future practices. In this chapter, the methodology implemented to answer the research questions is described. First, the design and rationale of the current study are discussed, followed by the role of the researcher, logic of participant selection, and instrumentation. I then outline the procedures relating to recruitment, participation, and data collection. Next, the data analysis plan, issues of trustworthiness, and ethical procedures relevant to the current study are included. Finally, the summary of the chapter concludes Chapter 3.

Research Design and Rationale

To reiterate, the research questions of focus in the present study includes the following:

- RQ. How do Kansas middle school students experience and react to their participation in the Love Doesn't Hurt program?
- SQ1. Are students changing their knowledge, skills, or attitudes related to IPV, and in which way?

SQ2. How does the gender-specific component of this program affect the students who participate positively?

Through this qualitative case study, the impact of the Love Doesn't Hurt program was estimated through dialogue with counselors or teachers who led the program regarding their experiences with adolescents involved in the program, as well as their professional viewpoints. I ascertained whether certain components of the program were more effective compared to others, as perceived by leaders of the program who worked closely with these adolescents, and whether effectiveness correlated with gender-specific content and gender of the students by interviewing these leaders. For the purposes of this study, CDC (2015) defined IPV as "physical, sexual, or psychological harm by a current or former partner or spouse" (p. 1).

The reason for choosing a qualitative study involving interviews was because of the nature of the interview questions; the interview questions focused on the teachers, administrators, and community advisors (i.e., leaders of the program) and their experiences with the Love Doesn't Hurt program, as well as gender differences observed regarding the receptivity to the program. Conducting a qualitative case study allowed for proper exploration of this study's purpose by yielding deeper insights regarding the perceptions of counselors/teachers on the success of the Love Doesn't Hurt program. More specifically, qualitative case studies allowed for the collection of rich, detailed, and nuanced data from participants' perspectives, which applied to this study (see Yin, 2015). Hence, I sought to gain rich information on people's (i.e., leaders of the program) experiences and perceptions. Because of the in-depth nature of these interview questions,

use of surveys were deemed inadequate for the present study, and the research questions of interest were not appropriate for quantitative methods. Next, the role of the researcher is discussed.

Role of the Researcher

As an observer-participant in the current study, information gathered from the unstructured interviews was triangulated with a content analysis of Love Doesn't Hurt program materials to identify gendered components of the program. No pre-existing personal or professional relationships existed between the study participants and the researcher; however, the role of the researcher in this case was to develop rapport with study participants, as well as equal and open communication. Research alludes to males being the primary aggressors in IPV (which could lead to a presence of bias in the research); however, it is also recognized that females may be aggressive in relationships. I recognized this information and that the adolescents taking part in the program would not be directly interviewed to control bias in the present study.

In addition, the open-ended nature of the interview questions helped minimize my bias. By approaching this research in an objective manner, the minimization of bias was possible, as well as the establishment of equal power relationships between the counselors or teachers taking part in the study and myself. These counselors or teachers knew their students best and provided detached, unemotional, and professional views of the effectiveness of such a program. This issue was previously unstudied in the literature (see Izaguirre & Calvete, 2015; Pernebo & Almqvist, 2016). In the next section, participant selection logic involved in the present study is discussed.

Participant Selection Logic

Leadership provided the Love Doesn't Hurt program in 100 schools across the state of Kansas (Jana's Campaign, 2015). The school-based portion of the program was taught within Family and Consumer Science (FACS) classes, and the community portion consisted of community service projects completed through the Future Career and Community Leaders of America (FCCLA) organization. Moreover, I selected three school-community sites with one each from rural, suburban, and urban areas to interview these leaders of the program about their perceptions. I used purposive sampling to select five FACS teachers, three school administrators, and three FCCLA advisors from each of the school-community sites.

Purposive sampling represents an ideal technique for a researcher to use to achieve the main goal of qualitative inquiry, which includes yielding cases that can provide rich and deep information regarding the phenomenon central to the study (Patton, 2002; Yin, 2015). The relatively small sample size parallels conventions of qualitative case studies, where researchers have generally recommended using 20 to 30 participants (Patton, 2002; Yin, 2015). Therefore, purposive sampling represented an ideal method to achieve this target amount.

The FACS teachers, school administrators, and FCCLA advisors represented the individuals with the closest relationship to the program and its participants because they were the leaders associated with this program. Thus, they provided the most meaningful and relevant information regarding the program's impact on the students and its effectiveness (see Mason, 2010). These program implementers noticed issues with the

students that even the students did not notice or might feel too emotional to express properly, especially when addressing such a sensitive subject matter as IPV (see Eckhardt et al., 2012, 2013; Feeny et al., 1998). People who experienced IPV might feel uncomfortable answering questions that might breach the personal aspect of the program or that might cause unwanted, negative memories to arise (see Eckhardt et al., 2012, 2013; Edwards & Hinsz, 2014; Feeny et al., 1998). Consequently, conducting a study on those (i.e., counselors, teachers, and administrators) who have a more removed and professional opinion about the subject, yet remain closely involved with the victims, may add insight into the effectiveness of these IPV programs that prior researchers have failed to explore.

Instrumentation

I collected data from three different school-community sites to explore the effects of the Love Doesn't Hurt program on middle school students through the perspectives of the program leaders. I randomly chose one site from each of the three lists of school-community locations where leadership delivered Love Doesn't Hurt in the spring 2016 semester. Each list consisted of school-community sites that represented the geographic, socioeconomic, and racial/ethnic diversity of the state. I randomly selected interviewees from the roster of teachers, school administrators, and community advisors (i.e., leaders of the program) in each site. I conducted unstructured interviews face-to-face by using a protocol consisting of open-ended, unstructured questions, which lasted approximately 30 to 45 minutes each. In addition to interviews, I gathered data from curricular and cocurricular materials (e.g., lesson plans, reading materials, and activity worksheets).

Procedures for Recruitment, Participation, and Data Collection

The purpose of this study was to conduct a qualitative, case study on the Love Doesn't Hurt program to understand the professional viewpoints of the counselors/teachers who led the program; to determine whether they saw improvements among this vulnerable, male, adolescent population; to obtain knowledge of ways the program worked or did not work (i.e., opinions of program effectiveness); and to determine suggestions for future practices. I ascertained whether certain components of the program were more effective than others, and whether effectiveness was correlated with gender-specific content and gender of the students. This section describes the methodology and discusses the chosen research approach, including the study design, population, sampling strategy, data collection and data analysis techniques, and the strategies to maintain the trustworthiness of the study. I used the case study method to conduct the research. Case studies allow for the collection of rich, detailed, and nuanced data from multiple perspectives (Yin, 2012). Hence, this study was a qualitative study; I sought to gain rich information on people's experiences and perceptions.

I conducted unstructured interviews with counsellors and teachers regarding their perceptions of how students experienced and responded to Love Doesn't Hurt. In contrast, quantitative researchers seek to achieve a breadth of understanding by identifying statistical relationships between phenomena (Patton, 2002). Furthermore, other methods exist in qualitative research, such as phenomenology, grounded theory, and ethnography. However, researchers use those methods to achieve/develop different fundamental questions; whereas, researchers have traditionally used the case study to

assess programs and other activities for effectiveness, such as the Love Doesn't Hurt Program (see Merriam, 1998; Simons, 1980). I gathered the following data:

Safe Dates for The Love Doesn't Hurt campaign was a 12-week curriculum with 10 sessions. Therefore, the work was designed to conduct open-ended, unstructured interviews at specific time intervals with teachers, school administrators, and community advisors involved in teaching and delivering Love Doesn't Hurt in schools and communities throughout Kansas. The present work was designed to interview these potential participants at the beginning, middle, and end of this specific program. In this manner, I interviewed them to determine whether they observed different outcomes amongst their students at each interval in time. For example, at the start of the program, leaders might view their students a certain way that drastically evolved by the end of the program. This evolution of viewpoints might provide more information on the subject under study; moreover, the finding might show the effectiveness of the program. I researched, studied, and compared documents and other materials collected from the Love Doesn't Hurt program. These includes curricular and extra-curricular syllabi, teaching guides, reading material, assignments, and worksheets.

Data Analysis Plan

I analyzes interview transcripts for content related to the central question and subquestions and performed content analysis on the program materials to investigate specific elements of Love Doesn't Hurt for evidence of gender issues, presented from the interviews of the leaders of the program. I performed initial, qualitative coding on the data to discern key words, phrases, and topics that related to the research questions. In

turn, I analyzed these interviews for themes and concerns to show perceptions of teachers, counselors, and administrators (i.e., leaders of the program) relating to the effectiveness of gender-based, adolescent IPV programs (see Saldaña, 2011).

This process of analyzing data followed the case study approach (Moustakas, 1994), which posed several of the following steps:

- preparing the researcher's self to remain as unbiased and nonjudgmental as possible, which involved staying aware of existing prejudices and assumptions throughout the research process;
- reducing the data to meaningful parts, labeling the content, and summarizing meanings to generate themes and categories;
- generating imaginative variation, which identified common themes among different participant perspectives; and
- developing a narrative from the data to represent the whole of the data, focusing on the commonalities, and addressing the divergences.

Issues of Trustworthiness

To maintain the trustworthiness of the data, I completed the following steps. First, I exercised continuous awareness of my own biases, perceptions, and judgements and how these might influence data collection, analysis, and reporting (see G. Thomas, 2011; E. Thomas & Magilvy, 2011). Second, I performed member checks by sharing preliminary coded data with some participants, so they could help confirm the data accurately reflects their perceptions (see Saldaña, 2011). Third, I compared data sets to

confirm that my interpretation of one set represents the data as a whole (see G. Thomas, 2011; E. Thomas & Magilvy, 2011).

To facilitate the transferability and external validity of the findings of this study to other similar populations, the population of students and context was described. In addition, the findings of the present study were only transferable to adolescent-focused programs with similar program components in similar contexts (e.g., industrialized, Western countries). Notes of the interviews, audio recordings (i.e. audit trails), and triangulation of the data (through content analysis) were employed to enhance the dependability of the present study. To establish the confirmability of the present study, inter-rater reliability was assessed with the assistance of another coder, who coded 10% of the interview data utilizing the categories that I identified through the initial process of coding.

Ethical Procedures

To follow ethical research procedures, participants were informed of their rights as a research participant, including an informed consent form that they received with the contact information of the IRB, as well as that of myself (see Appendix B). Following this process, participants were asked about whether they verbally consented to these procedures, which were recorded with an audio recorder. In addition, IRB approval was sought for the present study (IRB Approval # 05-04-18-0153146).

I used purposive sampling to select five FACS teachers, three school administrators, and three FCCLA advisors from each of the school-community sites. Potential barriers to implementing the study design included resistance from teachers,

school administrators, and community advisors who might perceive the study as intrusive and disruptive to the program, and or they might simply be too busy doing their jobs to spend time for the interview. I mitigated these concerns by reassuring them that data collection occurred only outside of program delivery, and I worked diligently to schedule interviews at their convenience. I did not collect data directly from students or any other vulnerable populations. I avoided this situation because, as discussed earlier, IPV entailed a sensitive subject matter; therefore, interviewing students directly might not have the desired outcome needed to understand the purpose of this study.

In addition, I kept teachers, school administrators, and community advisors' identities confidential by deidentifying their interview transcripts and all other documents containing names of persons, schools, or other identifying information. I will store research documents in a locked location that only I can access for up to 5 years. After this period, I will destroy all documents via shredding.

Summary

This chapter discussed the methodology implemented to answer the research questions of focus in the current study, which focused on the professional viewpoints of the counselors/teachers who led the program. I aimed to determine whether they saw improvements among this vulnerable, male, adolescent population to obtain knowledge of ways the program worked or did not work (i.e., opinions of program effectiveness) and to determine suggestions for future practice. In short, the methodology included both a content analysis of Love Doesn't Hurt program materials, as well as a series of interviews with program leaders in Kansas schools involving one school in an urban area, one in a

suburban area, and one in a rural area. To identify themes relating to the research questions of interest, open coding was used. Throughout this process, issues of trustworthiness, and ethical issues, were considered. Next, Chapter 4 describes the results of the study identified using the methodology, followed by Chapter 5, which includes a discussion of the results from this study and concludes the dissertation.

Chapter 4: Results

Introduction

The purpose of this study was to conduct a qualitative, case study on the Love Doesn't Hurt program to understand the professional viewpoints of the counselors/teachers who led the program; to determine whether they saw improvements among this vulnerable, male, adolescent population; to obtain knowledge of ways the program worked or did not work (i.e., opinions of program effectiveness); and to determine suggestions for future practices. LDH was an IPV prevention program targeted toward middle school and high school students in Kansas. One primary research question and two subquestions were used to guide the study:

- RQ. What experiences and reactions do Kansas middle school students have while participating in LDH?
- SQ1. Do students seem to be changing their knowledge, skills, or attitudes related to IPV?
- SQ2. Does the gender-specific component of LDH affect the students who participate positively?

Chapter 4 includes a description of the setting of data collection, followed by a description of the relevant demographic characteristics of the study participants. Next, this chapter includes descriptions of the implementation of the data collection and data analysis procedures described in Chapter 3. This chapter then proceeds with a discussion

of the evidence of the trustworthiness of the study's results, followed by a presentation of the results of the data analysis. The chapter concludes with a summary.

Setting

One-on-one, face-to-face interviews were conducted with participants in their offices at their school-community sites. Interviews were conducted in offices because privacy was available, and participants could give full and candid responses to the interview prompts with the assurance that their identities would remain confidential. Interviews were conducted at a time of each participant's choice to ensure that participants could give complete responses to the interview questions without feeling pressured to attend to other obligations.

Demographics

Participants included nine Family and Consumer Science (FACS) teachers, counselors, and school administrators from three school-community sites at which LDH was conducted. Table 1 indicates the relevant demographics characteristics of study participants. To ensure confidentiality, participants' names were replaced with serial designations (e.g., P1, P2, etc.), and school names were replaced with numbers (i.e., School 1, School 2, and School 3).

Table 1

Participant Demographics

Participant	Gender	School	Position
P1	M	School 1	Administrator
P2	F	School 1	Teacher
P3	F	School 1	Counselor
P4	F	School 2	Counselor
P5	F	School 2	Teacher
P6	M	School 2	Administrator
P7	M	School 3	Administrator
P8	F	School 3	Teacher
P9	F	School 3	Counselor

School 1

School 1 included Grades 7 through 12 and had a student population of 128. The student population identified as approximately 95.5% Caucasian, 1.5% Hispanic, and 3% from other races and ethnicities. Twenty-five percent of students were from homes considered economically disadvantaged. School 1 had a 100% graduation rate in 2018, and 100% of its teachers were fully licensed.

School 2

School 2 included Grades 9 through 12 and had a student population of approximately 900. The student body identified as approximately 94% Caucasian, 3% Hispanic, and 3% from other races or ethnicities. Approximately 35% of School 2's students were from economically disadvantaged homes. School 2 had an 89% graduation rate in 2018, and 98% of the teachers were fully licensed.

School 3

School 3 had a student population of approximately 850 and included Grades 9 through 12. Approximately 80% of the students identified as Caucasian, 10% as Hispanic, 3% as African American, and 7% as other races and ethnicities. About 26% of the students were from economically disadvantaged homes. School 3 had a graduation rate of approximately 91% in 2018, and 98% of its teachers were fully licensed.

Data Collection

One face-to-face interview was conducted with each participant at each participant's school-community site. Interviews were audio-recorded using a digital

recording device. The average duration of the interviews was approximately 30 minutes. No unusual circumstances were encountered during data collection, and there were no deviations from the data collection procedure described in Chapter 3.

Data Analysis

Data were analyzed thematically according to the procedures described by Saldaña (2011). After the recorded interviews were transcribed verbatim into MS Word documents, the transcripts were uploaded into NVivo 12 software for analysis. I then reduced the data to the smallest units that could be evaluated in a meaningful way (i.e., phrases or groups of phrases expressing a single idea, perception, or experience). Different data units expressing a similar idea, perception, or experience were grouped together into a child node in NVivo, and the node was labeled with a descriptive word or phrase. The child nodes represented the codes from the initial, qualitative coding of the data to discern key words, phrases, and topics that related to the research questions. In the next phase, I grouped similar codes into themes, by grouping the child nodes together under parent nodes, which were labeled with descriptive phrases. Table 2 indicates the themes that emerged during data analysis and the number of data units grouped into each theme (i.e., theme frequency).

Table 2

Data Analysis Themes

Theme	<i>N</i>	%
Students seem to communicate more openly about IPV	21	27%
Students seem to have greater awareness related to IPV	19	24%
Girls seemed more comfortable when separated from boys, and seemed generally more receptive to LDH curriculum	22	28%
Boys seemed more mature when they were separated from girls, but they sometimes seemed to perceive the curriculum as “male-bashing”	17	22%

Evidence of Trustworthiness

Trustworthiness of the results was enhanced through procedures designed to establish the four elements of trustworthiness. These elements included credibility, transferability, dependability, and confirmability. The following subsections include descriptions of the procedures used to enhance each element.

Credibility

Lincoln and Guba (1985) defined credible results as the extent that results accurately reflected the reality these were intended to describe. To enhance credibility in the present study, I conducted member-checking and triangulation of different data

sources. Member-checking was conducted by emailing each participant the transcript of his or her interview with a request that he or she should review it and suggest any corrections that would allow the data to reflect his or her perceptions and experiences more accurately. All participants responded, and no participants recommended changes. Triangulation was conducted by comparing data from the three case sites. The comparisons are given as part of the presentation of results below.

Transferability

Lincoln and Guba (1985) defined transferable results as the extent that results would hold true in a different research context. To allow future researchers to assess transferability, I included descriptions of the study sample, of the inclusion criteria, and of LDH.

Dependability

Lincoln and Guba (1985) defined dependable results as the extent that results would be replicated in the same research context at a different time. Dependability was enhanced in the present study through triangulation and member-checking. Additionally, methodological descriptions were provided to ensure that the study could be replicated and the integrity of its procedures verified.

Confirmability

Lincoln and Guba (1985) defined confirmable results as the extent that results would reflect the experiences and opinions of the participants, rather than biases of the researcher. To enhance confirmability, I conducted member-checking. Additionally, I

prepared to remain as unbiased and nonjudgmental as possible, which involved staying aware of existing prejudices and assumptions throughout the research process. Lastly, quotations from the data are provided in the presentation of results below to allow the reader to verify the integrity of the analysis.

Results

The primary research question used to guide the study was the following: What experiences and reactions do Kansas middle school students have while participating in LDH? The primary research question was answered by answering the two subquestions, and this presentation of results was accordingly organized by subquestion. Results related to Subquestion 1 indicated how participants perceived students changing their knowledge, skills, or attitudes related to IPV due to LDH. Results associated with Research Question 2 indicated how participants perceived the gender-specific component of LDH positively affecting the students who participated. Within the presentation related to each subquestion, results were organized by theme. A theme was identified when four or more participants reported similar perceptions or experiences.

Subquestion 1

Subquestion 1 was the following: Do students seem to be changing their knowledge, skills, or attitudes related to IPV? Two major themes emerged to answer the subquestion. Table 3 indicates the major themes and the participants (by case) who contributed to them.

Table 3

Subquestion 1 Themes

Theme	Participants contributing to theme ($n = 9$)		
	School 1 ($n = 3$)	School 2 ($n = 3$)	School 3 ($n = 3$)
Students seem to communicate more openly about IPV	P1, P2	P4, P5, P6	P7, P8, P9
Students seem to have greater awareness related to IPV	P2, P3	P5, P6	P7, P8

Theme 1: Students seem to communicate more openly about intimate partner violence. Theme 1 included two related subthemes. Table 4 indicates the subthemes included in Theme 1 and the participants who contributed to each. The following discussion includes evidence of the subthemes in the form of quotations from the data.

Table 4

Theme 1 Subthemes

Subtheme	Participants contributing to subtheme (<i>n</i> = 9)		
	School 1 (<i>n</i> = 3)	School 2 (<i>n</i> = 3)	School 3 (<i>n</i> = 3)
Students seem to communicate more openly with adults about IPV	P1, P2	P4, P5, P6	P7, P9
Students seem to communicate more openly with peers about IPV	P1, P2		P8

Subtheme: Students seem to communicate more openly with adults about intimate partner violence. Seven out of nine participants expressed the perceptions that after LDH students seemed to communicate more openly about IPV with adults, such as counselors, teachers, and school administrators. P1 reported that students had begun to approach him during and after LDH:

I'd have a student come to me and say that so and so was--it wouldn't necessarily be a student of ours, it could be a friend--and said that she told them that that sounds like a red flag.

P2 said of students who had participated in LDH:

[Students are] more willing to have that conversation about what's right, what's wrong. Having the communication, I think that's the most important thing. 'Cause a lot of times kids just have the thoughts in their brain but they don't really wanna

[sic] speak it out, . . . and so, with LDH, it allowed them to have an open conversation with an adult.

P4 had been approached by a student who reported IPV in her home: “I had a student come up and open up to me like she had never opened up before.” P5 had observed an increase in students communicating to adults about IPV that had taken place between adults at home:

I did have quite a few students who approached me, and they more discussed situations that their friends were in or situations that they were living in at home, which directly impacted them because normally it was the mom who was involved in an unhealthy relationship, and so there were quite a few discussions.

Similar to P1, P6 had noticed an increase in students reporting IPV that had taken place between peers: “I think there have been guys that have come to counselors or principals to say, ‘this guy isn’t treating this girl right.’ And there had been girls saying, ‘this girl or this guy isn’t treating another person right.’” P7 stated, “I think school-wide our students feel more comfortable in sharing personal stories or reaching out for help from staff, counselors, administrators.” P9 stated that during and after LDH, “I think more students came down to the counselor's office if they were concerned about, you know, were they in an unhealthy relationship.”

Subtheme: Students seem to communicate more openly with peers about intimate partner violence. Three out of nine participants expressed the perceptions that after LDH students seemed to communicate more openly about IPV with peers. P1

described an exercise used in LDH to increase communication among peers: “We did practice how to help a friend. We did role-playing for that part.” P2 described conversations she had heard between students during and after LDH:

The conversations that I did hear when we were in passing periods or in other classrooms and I had observed, they would always say [in relation to other students’ IPV], “That's not right.” Or, “That's inappropriate,” in conversations with one on one. Or, “That's not how you're supposed to interact.” Or when they're starting to date an individual, “Like how are you handling it? How are they treating you?” Those types of questions were more relevant than [prior to LDH, when] it was just like, “Oh, what'd you guys do?”

P8 said of students in her school who participated in LDH: “They were more open to talk about [IPV]. They seemed more confident, educated, and equipped to know what they can do for a friend, what they can do if they themselves are going through it.”

Theme 2: Students seem to have greater awareness related to intimate partner violence. Six of nine participants expressed the perceptions that students seemed to have greater awareness related to IPV after LDH. P2 described increased awareness among students of the prevalence of IPV:

Going into the program, [students] didn't necessarily know what it was about . . .
When they came out of [LDH], they knew about stats [statistics], and especially when it came to the amount of domestic violence that there is out there.

P3 described how discussions demonstrated students' increased awareness of

IPV:

Throughout the program, we had multiple discussions, small group discussions, large group discussions, and the students really did participate well in that. I really felt like they paid attention and they noted a lot of the stuff [from the LDH curriculum] based on what they had to say during these class discussions.

P5 reported the perception that students were becoming increasingly aware of what behaviors constitute IPV: "Probably the coolest thing is the students actually recognizing behaviors that aren't necessarily appropriate, behaviors that they maybe have definitely seen in the past and didn't think twice about, because that's how things have been going." P6 described how speakers were used in LDH to raise students' awareness of what behaviors constitute IPV:

The other day what we did was, we brought in a couple of victims that are now adults in our community. That really much of their victim mentality and allowing themselves to be abused without really even realizing they're in an abusive relationship, is what many of our kids experience.

P7 reported that students seemed more aware of danger signals and support resources after LDH:

I think students gained a greater understanding of some of the warning signs of relationships that may be headed toward danger . . . I think students have become more informed about that, more aware of those signs of an unhealthy relationship,

and also about resources to reach out to should they find themselves in that scenario.

For P8, one of the most valuable aspects of LDH was making students aware that they were not alone in witnessing or suffering from IPV:

The biggest thing was awareness . . . when I do a little tally, . . . and I have [students] put their heads down and raise their hand, [and] when I put the little numbers on the board and they see it later, then they realize [they're] not the only ones that observed that [IPV]. They're not the only one in that class that has seen this or heard this or been through something like this, and it becomes very real. So I think it's a huge awareness.

Subquestion 2

Subquestion 2 was the following: Does the gender-specific component of LDH affect the students who participate positively? Two themes emerged during data analysis to answer the subquestion. Table 5 indicates the major themes and the participants (by case) who contributed to each.

Table 5

Subquestion 2 Themes

Theme	Participants contributing to theme ($n = 9$)		
	School 1 ($n = 3$)	School 2 ($n = 3$)	School 3 ($n = 3$)
Girls seemed more comfortable when separated from boys, and seemed generally more receptive to LDH curriculum	P1, P2, P3	P5	P7, P9
Boys seemed more mature when they were separated from girls, but they sometimes seemed to perceive the curriculum as “male-bashing”	P1	P6	P8, P9

Theme 3: Girls seemed more comfortable when separated from boys, and seemed generally more receptive to Love Doesn’t Hurt curriculum. P1 expressed the perception that girls were more willing to open up when they were separated from boys:

The conversation with the young ladies when you separate [boys from girls] is awesome. They can talk freely and know that they're not going to be teased because usually a fellow girl won't do something like that. The boys might.

P2 indicated that girls were empowered by the curriculum, in contrast to boys:

The girls, it empowered them more so to speak for themselves and stand up for themselves . . . I think for the girls, they learned that they needed to make sure they speak with one another and have that communication.

P2 also described girls as more receptive to LDH curriculum than boys:

I think the girls obviously take to [LDH] a little bit more so. Just based off of what the campaign's about, you know it connects to 'em more, obviously.

Dealing with the person who is involved with the whole [IPV] situation. They could see themselves in that type of area and kinda [*sic*] concern. And so, I think the girls took to it a little bit more [than the boys].

P3 had noticed more participation from girls than from boys: "The levels of participation pretty much varied, and like I said, the females did participate quite a bit better than the males did." P5 agreed that participation from female students was stronger than participation from male students, particularly toward the beginning of LDH: "I feel like the females participate stronger, and I feel like their attention span is better during the programming . . . the females usually get more involved during the program and the role playing and things like that." However, P5 speculated that another possible explanation for the apparent disparity between male and female students was that male students did not signify their attentiveness as overtly as females did: "Males' way of learning and paying attention is completely different, and so just because they're not nodding like a female, or eye contact or whatever, doesn't mean that they're not necessarily taking it in."

P7 suggested that female students were more attentive and receptive because they identified with victims of IPV:

I think the emotional tie was probably stronger with the female students because this happened to a female. I think male students, while attentive and engaged with the program, I'd say, if just a visual observation, it seemed you see more of the emotional concerning looks on the girls' faces probably more so than the males. And I think that was just because it happened to a female student.

Similar to P2, P9 described female students as “empowered” by LDH:

The girls, I felt they were a lot more empowered, and felt strong in a session with [teacher] . . . just the in air activity of the girls talking to [teacher], asking questions and speaking up and speaking out was tremendous.

Theme 4: Boys seemed more mature when they were separated from girls, but they sometimes seemed to perceive the curriculum as “male-bashing.” P1 explained why boys and girls were separated for part of LDH:

Sometimes when the boys and the girls were together I feel like the boys were kind of squirrely, for lack of a better term, not as serious as they should've been. I think it's just to save face with the opposite sex there . . . with the boys [when] they didn't have these young ladies present sometimes we talked about that and then they seemed to behave better.

P6 expressed the perception that some freshmen boys were conspicuously immature in general assemblies:

I think sometimes the freshman boys are just so immature that they struggle to start with [in LDH], and . . . it takes until late spring before they stop acting like eighth grade boys . . . They're still punching each other on the shoulders or pinching them in certain places and pretty immature group.

P6 also expressed the perception that boys were less receptive to LDH curriculum because it challenged their loyalty to their fathers, who may have been perpetrators of IPV:

There've been one or two cases where guys have really kind of almost, taken offense to the topic. And you just wonder what's going on because they're smart enough to realize it's a problem. Right? But it's almost a denial that they don't want to acknowledge that maybe my house needs change a little bit too. Or maybe when I grow up probably shouldn't be like dad. And that conflicts with what his loyalty to his dad is telling him.

P8 explained that her male students sometimes seemed to perceive the focus on IPV as “male-bashing”:

The guys sit there and they feel like they're getting bashed . . . it makes the male look bad, because we think of more physical things when we think about male, when we think about abuse in a relationship, but females can be abusive too in a relationship. So I make sure we bring that back to the surface of we're not bashing

males, and females can be this too even though statistics show it's usually the male.

P9 perceived male students as feeling disproportionately burdened with the responsibility for preventing IPV: “The feedback that I heard from the guys is they felt like they were the villains and that other than just being a nice person, I think they felt like the onus was on them.”

Summary

The research question was the following: What experiences and reactions do Kansas middle school students have while participating in Love Doesn't Hurt? The research question was answered by answering the two subquestions. The first subquestion was the following: Do students seem to be changing their knowledge, skills, or attitudes related to IPV? Findings indicated that students at all three case sites seemed to communicate more openly about IPV during and after LDH. Students at all three case sites seemed to communicate more openly about IPV with counselors, teachers, and administrators, and students at School 1 and School 3 seemed to communicate more openly with peers about IPV. Students at all three case sites also seemed to develop more awareness of the prevalence and warning signs of IPV.

The second subquestion was the following: Does the gender-specific component of Love Doesn't Hurt affect the students who participate positively? Findings indicated that students at all three case sites were affected positively by the separation of boys from girls during certain components of LDH. Boys were perceived as behaving more

maturely when they were separated from girls, although some boys also appeared to interpret statistics indicating that IPV was more often perpetrated by men than by women as “male-bashing.” Girls seemed to communicate more openly about IPV when they were separated from boys, possibly because this process relieved them of anxiety about being teased by boys. Girls also seemed more receptive to the curriculum and to participate more than boys did, possibly because they identified with victims of IPV. Chapter 5 includes interpretation and implications of these findings.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

The purpose of this study was to conduct a qualitative, case study on the Love Doesn't Hurt program to understand the professional viewpoints of the counselors/teachers who led the program; to determine whether they saw improvements among this vulnerable, male, adolescent population; to obtain knowledge of ways the program worked or did not work (i.e., opinions of program effectiveness); and to determine suggestions for future practices. Such research was essential considering the prevalence of IPV and its severe repercussions on both the physical and mental health of the victims (Temple et al., 2013). Temple et al. (2013) purported that, although IPV prevention program studies were scarce, evidence has shown that these programs at least raised awareness and increased the knowledge of adolescents on IPV; these benefits could outweigh the costs of implementing such programs in schools.

LDH has been implemented in many middle and high schools; however, researchers had yet to examine it in today's existing literature. Therefore, I raised the following research questions and subquestions:

- RQ. What experiences and reactions do Kansas middle school students have while participating in Love Doesn't Hurt?
- SQ1. Do students seem to be changing their knowledge, skills, or attitudes related to Love Doesn't Hurt?
- SQ2. Does the gender-specific component of Love Doesn't Hurt affect the students who participate positively?

After open-ended interviews on the LDH leaders in three different schools, patterned after those research questions, four main themes emerged: Students seemed to communicate more openly about IPV, students seemed to have greater awareness related to IPV, girls seemed more comfortable when separated from boys and seemed generally more receptive to LDH curriculum, and boys seemed more mature when separated from girls but sometimes seemed to perceive the curriculum as “male-bashing.”

These findings are discussed in more detail and in line with existing literature in the following interpretation section. That section is followed by a section on the limitations of the study. Then, I present the recommendations for future research and the implications of the current study. The chapter will conclude with a summary.

Interpretation of Findings

Openness to Communicate About Intimate Partner Violence

The first theme found in the interviews with the LDH leaders was that students seemed to communicate more openly about IPV to both adults and their peers. This finding was in line with other studies, showing that IPV prevention programs might influence how people communicate about IPV (Drury, 2003). In this study’s interviews, some LDH leaders reported how students would approach them or other school staff and tell them about friends or family members experiencing IPV. This finding indicated that the LDH program might have helped adolescents be more comfortable opening up to adults about IPV, especially considering how the adolescent stage was known to encompass numerous communication barriers with adult authority figures, such as teachers and parents (Drury, 2003).

The goal of the LDH program was to foster a school environment and culture where everyone could feel safe from IPV, and this type of cultural shift often showed a problem existed to open discussion about the issue (Jana's Campaign, 2019). Therefore, the finding that students were openly communicating about IPV supported the LDH's intention to bring the problem of IPV into the open. Miller et al. (2015) found similar results about another IPV prevention program, Start Strong, which was implemented on middle school students. They found that students who underwent Start Strong showed stable parent-child communication about their relationships, while their control group students who did not undergo Start Strong showed a decrease in parent-child communication. Just as LDH seemed to help students communicate more openly with adults, such as teachers and staff, the Start Strong program appeared to do the same to their students. The helpers aided students in communicating more with their parents than their peers who did not undergo any program. This finding indicated that IPV prevention programs might give students the inclination and confidence to communicate with adult authority figures about IPV. Learning to and being comfortable enough to communicate with adults regarding IPV was a necessary skill, as adolescents might not yet be fully aware of how to handle these kinds of situations.

Another type of IPV prevention program that showed similar results, the Mindfulness-Based Stress Reduction (MBSR), implemented mindfulness tactics. These included meditation, mindful listening, mindful inquiry, and nonjudgmental acceptance of one's own experience. Bermudez et al. (2013) found the program helpers promoted assertive communication, an empowering type of communication that allowed

participants to express their feelings properly. Assertive communication allowed victims to speak freely about and share their experiences with others, similar to how the LDH program allowed students to talk about their experiences on IPV with adults. This type of communication worked the other way around as well, as participants learned to be more mindful and communicate their pent-up feelings of anger instead of turning to IPV (Bermudez et al., 2013). With programs, such as LDH, MBSR, and Start Strong, adolescents learned to be more assertive, confident, and motivated to talk to adults about issues, along with their feelings and experiences, regarding IPV.

Other than adult authority figures, adolescents are also influenced by their peers, which means that peer discussion about IPV can influence students' thoughts and attitudes about them (Swanson, Edwards, & Spencer, 2010). This finding highlighted the importance of this current study's finding that students communicated more openly about IPV with their peers after LDH. One part of LDH, the bystander intervention training, which was used by several other programs, taught students how to identify red flags and to best deal with issues (Jana's Campaign, 2019). Bystander intervention is utilized in programs, such as Bringing in the Bystander, and was found to be effective in increasing knowledge and behavior on preventing IPV, more so than traditional IPV awareness programs. The program helped similar to the way LDH students in this current study displayed more knowledge, bystander behavior, and intention to help by integrating IPV prevention concepts in their conversations with peers (see Banyard, Moynihan, & Plante, 2007; Peterson et al., 2016).

Moynihan et al. (2014) found long-term effects of the bystander approach with their experimental participants' self-report of helping out their friends more in terms of dealing with IPV. They noted that bystander training seemed to not only help participants recognize danger signs but also gave them tools to intervene. This finding was also evident in the way the LDH students in this current study not only talked about IPV with their friends but also pointed out the inappropriate behaviors or red flags that their friends were subjected to. These studies on the bystander approach support this current study's finding that the bystander intervention training part of the LDH program might have positive influences on how students could communicate and intervene better with their peers in terms of dealing with IPV. As they learned more about IPV and shared insights and knowledge with each other, they created a more positive safer school environment and culture (see De La Rue, Polanin, Espelage, & Pigott, 2016).

Greater Awareness About Intimate Partner Violence

The second theme in this study was that students seemed to have greater awareness related to IPV, as they participated more and showed greater interest during LDH sessions. This finding was shared by several existing literatures that showed the effectiveness of IPV prevention programs in raising awareness about IPV and assuring students that they were not alone in experiencing some red flags of IPV. Gage, Honoré, and Deleon (2016) conducted a study in Haiti that showed similar results; they assessed the pre and posttest knowledge of high school students on dating violence. Applying the Safe Dates curriculum, one of the most popular curricula in the United States, they found that students showed significantly greater knowledge during post-test on IPV myths and

warning signs, on how to defuse their anger, on how to protect themselves, as well as on how to help friends experiencing IPV.

Several meta-analyses also supported this study's finding, showing how various school-based IPV intervention programs increased knowledge and awareness of students regarding IPV; however, most found that this increased awareness did not directly translate to actual changed behavior (De La Rue et al., 2016; Fellmeth et al., 2013; O'Leary & Slep, 2012). Comparing these extant data to the current study, I observed that IPV prevention programs, such as LDH, raised IPV awareness and knowledge, but its effect on actual changed behavior remained to be seen; the participants did not mention changes in IPV perpetration and victimization rates. A couple of existing studies showed a slight deterioration in IPV prevention attitudes after students were exposed to IPV education (Edwards & Hinsz, 2014). In this current study, LDH leaders did not explicitly state the actual IPV behavior changes of the students; however, positive IPV prevention attitudes were present in the interest and participation of the students, and also in the way they helped their friends experiencing IPV, which was already a changed behavior.

The problem of actual changed behavior was something that skills-based intervention programs tried to address, such as how the bystander approach, which was a part of LDH, allowed students to practice or role-play certain behaviors that helped IPV victims (see Peterson et al., 2016). This study's LDH leaders mentioned how participative the students were in role-playing, which allowed them to become more aware of the danger signs of IPV and some of the available resources that they could use in IPV situations. This issue was addressed to by the first theme of this study, showing

signs of changed behavior in the form of increased participation, reporting, and communication. However, actual IPV behavior changes regarding perpetration and victimization required a more quantitative examination and was beyond the scope of this current study.

Girls' Higher Participation and Receptivity Compared to Boys

Considering the gender-specific aspects of LDH, leaders found that girls felt more comfortable and participated more in LDH sessions than boys. Moreover, girls seemed generally more receptive to the LDH curriculum, showing how IPV prevention programs had positive effects for females. This finding was shared by other previous studies. The term “empowerment” was brought up multiple times, revealing a positive aspect of LDH where girls could share and find strength in each other without fear of judgment or being teased by boys. Going beyond creating a safe space for discussion, Perilla et al.'s (2012) Caminar Latino program allowed their female participants to shape the program based on their experiences and needs. Their group format used a communal method where all the women, including the advocates and facilitators, were part of the sessions and contributed to the conversations. This process increased the confidence level of the IPV survivors to participate and feel empowered. This process enabled all the women to learn from each other and provide guidance and support to one another, just as one of the participants in this current study noted how the girls learned the importance of talking to each other about their own experiences. This finding showed the empowering effect of IPV prevention programs, such as LDH.

Bermudez et al. (2013) also found that their female participants were initially hesitant to participate and share their experiences. However, they eventually found it a positive experience. Participants said that the program allowed them to gain insights from each other, similar to how the girls in this current study were willing to participate and share insights with one another. These findings supported the positive influence of the gender-specific aspect of IPV programs, such as LDH, on girls.

The gender-specific format allowed the girls in this study, and in the other studies mentioned above, to feel more comfortable and safer. However, another study showed how some women involved in IPV find conjoint therapy with their partners to be more effective because of its dyadic nature, although they admitted that it was not for everyone (Todahl et al., 2012). This result might appear contradictory to this current study's findings, but these women were older and voluntarily attended sessions; moreover, they received options to withdraw anytime, which might account for their feeling safer than the adolescent girls in this current study. Shorey et al. (2012) proposed similar ideas as they suggested that younger couples, as is with this current study, had a higher risk of breaking up and dating other people, which would make it difficult to employ and assess conjoint sessions.

This current study's finding that females seemed to participate more than males was observable in other literature. Gage et al. (2016) found that females appeared to have gained more knowledge about IPV than males after similar treatments, although they also noted that the curriculum was taught by a female teacher, which might have affected the outcome. Moynihan et al. (2014) found that their intervention program affected females

more significantly compared to males in terms of bystander prevention behaviors on strangers experiencing IPV. However, they later raised questions on whether this finding was because males were more resistant to their program or because certain gender-specific contexts were not addressed by their program. In this current study, one participant mentioned that males might have different, more subtle ways of paying attention and participating than females.

Boys' Maturity and Perception of "Male-Bashing"

Existing literature regarding gender-specific IPV prevention programs' influence on males were scarce and showed contrasting results. In this study, participants noted that the boys seemed more mature when separated from girls, but they sometimes seemed to perceive the curriculum as "male-bashing." Although the gender-specific aspect of LDH allowed the boys to take it more seriously, some leaders still attributed their lower participation in LDH sessions to their immaturity or to the perception that they, the male gender as a whole, were being treated as "villains." While this "male-bashing" perception was a prevalent theme in this study, some leaders stated that they attempted to remind the boys that the roles could be reversed and that females could be perpetrators too. Indeed, the presence of gender symmetry in existing literature supported the idea that both males and females shared similar perpetration rates in IPV (see Desmarais et al., 2012a; Kimmel, 2002), which was one of the concepts that the LDH leader in this current study used to try to alleviate the "male-bashing". However, Desmarais et al. (2012a) stated that these rates only showed the quantity and not the severity of IPV, which showed that gender-specific intervention might still be necessary. This finding was supported by

several studies' findings that males and females differed in motives, attitudes, norms, and power regarding IPV (Kelley et al., 2015; Lundgren & Amin, 2015).

The notion that boys seemed to take LDH more seriously in gender-specific sessions showed a positive light on the program. One of the LDH leaders mentioned that the absence of girls allowed the boys to be less conscious of their behavior, as males often found it difficult to discuss sensitive topics, such as sexual behavior, with girls (see Shorey et al., 2012). Research comparing the effectiveness of IPV intervention programs between males and females was scarce, but some studies showed effective approaches for male-only groups, such as the protherapeutic group approach. In this approach, positive confirmation and encouragement to take responsibility for abusive acts were given by both the therapists and other male participants in the group (Semiatin et al., 2013). Their results indicated that these types of protherapeutic behaviors by male peers significantly correlated not just with better participation but with positive behavior change as well. One of this study's LDH leaders similarly mentioned how boys behaved better and took LDH more seriously in all-male sessions. Wolfe et al. (2009) displayed findings that their program, Fourth R: Skills for youth relationships that tackled dating violence, substance abuse, and risky sexual behavior, was found effective in reducing IPV for boys but not for girls. This finding might seem contradictory to this current study's findings but supported the notion that males and females had different learning styles and needs, which called for the gender-specific aspect of studies, such as LDH.

Themes in Relation to the Theoretical Frameworks

The first theoretical framework applied in this study was Bandura's (1969) social learning theory, which posited that behaviors, such as IPV, were learned from influential role models. This theory was evident in what one of the LDH leaders mentioned, how some students had conflicted feelings about the way their father, whom they considered a role model, displayed IPV behaviors. Several studies supported this theory that exposure to family violence correlated with IPV perpetration (e.g., Lee et al., 2014). However, This theory could work both ways. The LDH leaders mentioned how they used role-playing to display effective means of helping IPV victims, and although they were just pretending, the students could experience and observe firsthand the proper behaviors they should be doing. The program introduced to the students some victims who experienced IPV in the past. These people gave important insights based on their past experiences and might serve as good role models for students. While some students might learn violent behaviors from their parents or even from some of their peers, programs such as LDH could utilize this theory to help the students learn ways to prevent IPV.

The second theoretical framework, feminist theory, was even more prevalent in this study's findings. Based on feminist theory, Pence and Paymar (1993) endorsed approaches that would change behaviors and values that reinforced cultural norms, such as patriarchal privilege and power, which might serve as grounds for IPV. Leaders of LDH applied this theory in the way that the curriculum helped empower female students not just to communicate more openly but also to protect themselves and their friends, as observed in the increased communication about IPV and the way that students warned

each other about red flags. Unfortunately, some male students were observed to take this feminist approach negatively, as they considered it “male-bashing.” This way of thinking might be a direct effect of feminism, placing more power on the females than males in terms of IPV prevention, or it may put the limelight back on males instead of the larger issue of IPV as a whole, thereby encouraging the very patriarchal norm that the feminist theory goes against. One way that LDH tried to remedy this “male-bashing” viewpoint was by presenting the male students as allies in their bystander intervention training, placing equal responsibility on both males and females in preventing IPV (see Jana’s Campaign, 2019).

Limitations

As mentioned earlier, the findings of this study were limited to the LDH program and might not apply to other IPV prevention programs. Although LDH shared several similarities with other programs, the intricacy of how the different parts of a program worked together prevented this study’s findings from thoroughly describing other programs as well, as was seen in the diverse results from various meta-analyses (e.g., Jewkes, Flood, & Lang, 2015; O’Leary & Slep, 2012). The sample in this study limited the applicability of the findings to middle and high school students in Kansas. While programs exceedingly similar to LDH might exist in other states or countries, the reception, attitudes, and behaviors of the participants might vary because of the differing culture (see Jewkes et al., 2015).

I utilized a qualitative, open-ended interview method to minimize interviewer bias while gaining a deeper understanding on the subject; however, the findings were also

limited and could not be used as empirical data. The opinions of the study's participants could not be considered as factual effects of LDH. In line with this limitation, the LDH leaders' opinions might not reflect the students' opinions of LDH, as well. Considering these limitations, recommendations for future studies are discussed in the next section.

Recommendations

I utilized the qualitative method and interviewed the leaders of LDH to fill certain gaps in the literature, such as the lack of studies on LDH and professional viewpoints. That being said, several other gaps exist that need to be filled. The first of these include the lack of longitudinal, quantitative, and experimental studies that may establish causal effects of LDH on behavioral change. A more comprehensive study that involves numerous IPV prevention programs, including LDH, in school and community settings as well would be useful to observe which program works best. Although these kinds of studies may prove difficult because of the sensitive and vacillating nature of IPV, measures may be taken to ensure confidentiality and anonymity of participants. Mental health professionals, such as couples' therapists, may be consulted to assist in procuring and maintaining eligible participants.

In addition, the gender-specific aspect of IPV prevention programs should be considered due to the prevalent issues surrounding it (e.g., Kelley et al., 2015; Lundgren & Amin, 2015). Jewkes et al. (2015) warned about how the separation of males and females in IPV prevention programs might cause gender-inequality. As I found that male students perceived the gender-specific sessions as "male-bashing," deeper insights coming from male students themselves might be necessary to understand how they felt

about each part of the program, or whether it was a matter of context or content, to obtain suggestions from them on how to make it more suitable for them. A qualitative study utilizing interviews and focus group discussions with male students as participants might elicit these insights.

Other aspects that should also be considered include age, race, and presence of IPV in family history, as these may be some variables influencing IPV. Quantitative measures can be used to examine how these different variables mediate the effect of IPV prevention programs on IPV attitudes and behaviors. Several studies have also discussed how IPV prevention programs may increase awareness but not necessarily change behavior (De La Rue et al., 2016; Edwards & Hinsz, 2014; Fellmeth et al., 2013; O'Leary & Slep, 2012). Future researchers should consider investigating dependent variables that show actual behavior change. As self-reports may contain bias, additional instruments such as reports from partners and behavioral checklists may be utilized to show behavior change.

Implications

I explored professional viewpoints to provide a more objective perspective on LDH, imparting several implications for practice, theory, and social change. On a micro level, the findings imply that LDH helped students become more aware of IPV and the red flags associated with it. This increased awareness alerts them if they or someone they know is being victimized, and they are more equipped with knowledge on how to handle these situations or what resources are available around them, taking a step toward actual behavior change. The LDH leaders already noticed how students warned their friends

about IPV, which could be considered a changed behavior; with the students' increased awareness on the issue, IPV perpetration and victimization in these adolescents might lessen.

On a meso level, considering the interactions between students, their peers, and adults, LDH created a friendlier campus and community, as students were talking about IPV more openly within their peer groups and reporting inappropriate behaviors to authority figures more frequently. However, the fourth theme also implies that the gender-specific aspect of LDH may be creating an antagonizing impression on male students. LDH leaders should then take extra care to make the male students feel more like allies than villains regarding IPV prevention. Supported by the feminist framework, the empowering effect of the gender-specific aspect on the female students, and the finding that male students took the gender-specific sessions more seriously than general assemblies, imply that the gender-specific aspect itself brings positive effects to both genders. Teachers should consider the content of the program when examining the “male-bashing” perspective of the students. One of the LDH leaders mentioned how they mentioned that females could be perpetrators as well. A sharing of best practices between teachers and counselors could prove vital in obtaining strategies like this one. The gender of teachers and facilitators may also be considered, so students may relate more to teachers, as male students may feel less antagonized by male teachers and counselors (Gage et al., 2016).

On a macro level, the implications of these findings are critical for policy makers. As the LDH program was found to encourage open communication about IPV and

reporting IPV red flags or incidents to authorities, school policy makers may want to extend this program and integrate it more permanently into their academic curriculum, especially since longer sessions of IPV prevention programs seem to produce more long-term effects (O’Leary & Slep, 2012). I found promising results for LDH; however, other meta-analyses showed diverse and contrasting results for some other IPV prevention programs with similar aspects as LDH. This aspect shows the need for more scrutiny by school policy makers when choosing and designing their IPV prevention programs. This disparity in results also calls for standardization in implementing programs, as slight differences can produce some negative effects (Edwards & Hinsz, 2014; Jewkes et al., 2015).

Regarding the methodological implications of this study, the qualitative nature and the use of a specific case study created a deeper understanding of the factors and effects of LDH (see Yin, 2015). Utilizing unstructured interviews on professionals provided a degree of impartiality, which resulted in more objective findings unbiased by the interviewer, the proponents, or the students of the LDH program. The theoretical frameworks were also mostly supported by the results, as explained earlier, indicating the application of these frameworks in future research surrounding IPV prevention programs, as well.

As practitioners, IPV prevention program developers should consider the themes found in this current study to improve their programs further. As the gender-specific nature of LDH proved mostly successful, practitioners should consider applying this aspect to at least some sessions in their program. Practitioners should also encourage

open communication more and utilize role-playing, as these seemed effective ways for students to rehearse their IPV prevention skills. Lastly, practitioners should consider the “male-bashing” perspectives of some students to shape the content of their programs to promote males as allies in the struggle against IPV.

Conclusion

IPV is an emerging concern that involves not just physical but psychological health, as well (CDC, 2015; Temple et al., 2013). This concern was even more pronounced considering the contrasting findings surrounding different IPV prevention programs (De La Rue et al., 2016; Edwards & Hinsz, 2014; Jewkes et al., 2015; O’Leary & Slep, 2012). With that, an in-depth understanding of the specific factors of IPV prevention was essential to learn about the ways in which an IPV program worked or did not work. I delivered such findings that introduced key factors surrounding one IPV prevention program, the LDH. The four themes that emerged showed how LDH allowed students to be more aware and communicate more openly about IPV, and the gender-specific aspect of LDH empowered female students and allowed male students to be more serious but also produced a “male-bashing” perspective.

These findings, along with the social learning theory and feminist theory, call for more detailed evaluations of school-based IPV prevention programs to ensure that adolescent students are being thoroughly informed about ways to prevent, and protect themselves and their peers from IPV. Teachers and counselors should take extra care to empower all students, especially considering the “male-bashing” perspective of the male students. School policy makers should also consider the best practices of IPV prevention

programs and apply the most optimal program to their academic curriculum to enhance the effects of the program further. I showed the importance of promoting awareness and creating safe and comfortable environments for students regarding IPV.

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Appendix A: Interview Questions

1. How would you describe your experiences implementing or facilitating the Love Doesn't Hurt program?
2. What changes in terms of knowledge about IPV, if any, did you notice among the students who participated in the Love Doesn't Hurt program?
3. What changes in terms of attitudes about IPV, if any, did you notice among the students who participated in the Love Doesn't Hurt program?
4. What behavioral changes, if any, did you notice among the students who participated in the Love Doesn't Hurt program?
5. Based on your observations, how receptive were the female participants to the program?
6. Based on your observations, how receptive were the male participants to the program?
7. How different were the reactions of the participants to the program in terms of the gender lines? Were there differences between the male and female participants, if yes, what were the differences that you noticed?
8. What aspects/components of the program do you think are effective?
9. What aspects/components of the program do you think are not effective?
10. What challenges have you encountered in implementing the program?
11. What suggestions can you give to improve the Love Doesn't Hurt program?

12. Do you have any other comments to add that are relevant to the Love Doesn't Hurt program?