

DOMESTIC VIOLENCE AND BIRTH CONTROL SABOTAGE:

A REPORT FROM THE TEEN PARENT PROJECT¹

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Introduction

Although recent research has contributed greatly to our knowledge of teen pregnancy and the conditions under which girls become parents, the relationship between teen girls' ability to control their reproductive behavior and the prevalence of domestic violence in their sexual relationships has been little explored. Previous work with domestic violence victims seeking to move from welfare to work led us to suspect that domestic violence may be causally related to teen pregnancy, and that this situation would be particularly acute for low-income teens. Therefore, the Center for Impact Research set out to see to what extent pregnancy among low income teens was due to coerced and unprotected sexual relations, sabotage of birth control arrangements and the general pressure to choose between having children and the continuation of the relationship. Further, we thought that sabotage of birth control arrangements may in fact be one of the major reasons that many low-income girls are unable to complete high school education and leave welfare to work. The Teen Parent Project, then, was developed in order to

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investigate the relationships between domestic violence, birth control sabotage and the ability of teen mothers to leave welfare for work. The project, which began in July 1998, is a collaborative project of the Center for Impact Research, the Illinois Caucus on Adolescent Health, the Illinois Department of Human Services Bureau of Child and Adolescent Health, and the Chicago Department of Public Health.

The purpose of the project was to develop quantitative and qualitative data regarding the prevalence of current domestic violence in the lives of young mothers on welfare. The project further sought to determine if and how domestic violence worked to interfere with the girls' use of birth control and efforts to obtain education, job training and work. This research was undertaken to enhance understanding of this problem, to make informed recommendations for both welfare policy and service delivery design, and to better assist teen mothers on welfare who are struggling with issues of domestic violence.

Domestic Violence and Birth Control

Although most of the literature on teen pregnancy does not take domestic violence into account, emerging research is beginning to document the relationship between domestic violence and control of reproduction. Among the first published studies was one undertaken by researchers from the Johns Hopkins University and the University of Florida, who held two focus groups documenting the stratagems used by abusers to push their partners to have babies (Campbell et al. 1995). Newly published research from Cycle Five of the National Survey of Family Growth obtained information from a national probability sample of 10,817 women ages fifteen to forty-four and measured girls' wantedness of sex and of their first experience of sexual intercourse (Abma,

Driscoll and Moore 1998). They found that the wantedness score decreased as the difference between the woman's age and that of her partner increased. In addition, women who had first intercourse with a man more than seven years older were less than half as likely to use contraceptives as women whose partners had been the same age or younger. This finding supports the notion that lack of female power in a relationship, denoted by the large age differential, correlates with contraceptive use.

In addition, in an effort to determine how to encourage condom use to protect against HIV and other sexually transmitted diseases, a recent study examined the consequences of having a physically abusive primary partner on condom use and sexual negotiation among African-American women (Wingwood and DiClemente 1997). This study found that women who were abused were more likely than others to report that their partner never used condoms (71 percent of the abused women versus 43 percent of the nonabused). Abused women with a physically abusive partner stated that they were verbally abused, threatened with physical abuse, or threatened with abandonment when they asked their partner to use condoms at rates significantly higher than women whose partners were not abusive.

Our study builds on these findings. It is the first that we know of to survey teen mothers on welfare about domestic violence and birth control sabotage. Unlike the few extant studies, it collects more thorough information about the level and severity of the domestic violence so as to be able to make extensive correlations between the level of domestic violence and birth control sabotage and interference with education and work.

Data and Methods

In order to address the questions motivating our study, project staff determined to survey a representative sample of teen mothers on welfare in Chicago, Illinois. In addition to a brief written survey, girls experiencing domestic violence--identified from among those who indicated on the survey form that they were experiencing domestic violence--were interviewed one-on-one in order to better understand the dynamics of domestic violence and birth control sabotage.

The survey was conducted between October 1998 and June 1999. The written survey was conducted with 474 girls, and 16 girls participated in unstructured, one-on-one interviews. The data was collected at four facilities, including two Illinois Department of Human Services (IDHS) Teen Parent Services sites and two community-based health clinics. Teen Parent Services (TPS) provides mandatory case management services for teen mothers on welfare. The TPS sites where teen girls were surveyed included one on Chicago's west side, and another on the south side. The community based health clinics were located in neighborhoods corresponding to the locations of the TPS sites--one each in neighborhoods on Chicago's west side and south side. The inclusion of the community-based health clinics enabled us to include a small subsample (20%) of teen girls who did not have children. Although these girls were surveyed as a control group, we have limited information about these girls; for instance, we do not know their reasons for visiting the health clinic, which might include pregnancy or the procurement of birth control. Center for Impact Research staff were present at the four facilities on high volume days, and asked every girl who came to these centers for services to complete a survey. The girls were offered a small gift in return for the

completion of the survey, and the refusal rate was very low. Those participating in the one-on-one interviews were given \$20 in cash for their participation.

The written survey, which was fielded in two versions, contained between 50 and 60 questions. Demographic indicators obtained from the survey questions included information about the respondent and her current boyfriend (if any), encompassing background characteristics such as age, race, number of children, age of respondent and boyfriend at birth of first child, employment and educational attainment. Prevalence and severity of domestic violence were measured with twenty-five yes/no questions, modelled on the Conflict Tactics Scale, which asked about experientially coercive and violent behaviors from a boyfriend during the 12 month period prior to the survey. Prevalence and severity of birth control sabotage and education or work-related sabotage were measured with thirteen yes/no questions which asked about the experience of specific sabotage behaviors from a boyfriend during the same 12 month period.

Given the high response of teens at the sites, we believe our data to be of overall good quality and representative of teen welfare mothers in Chicago. A few variables have significant amounts of missing data. In the case of a few demographic questions the refusal rate was quite high; this is the case for variables which indicate whether the girl had moved in the last year (n=180) and girls' age at the birth of their oldest child (n=160). In addition, educational attainment and employment questions were asked about the girls only on the second, chronologically later version of the survey. It is possible in the case of missing data due to high refusal that bias was introduced into the sample; where we can conjecture its direction we have noted it in the results. In the case of the educational

attainment data, we do not believe that its chronological introduction into the survey resulted in any homogeneous source of sampling bias.

Results

1. Characteristics of the sample

Table 1 gives characteristics of the girls in the sample. As one can see from Table 1, although the girls surveyed range in age from 11 to 21, the girls are mostly older teens. Sixty-nine percent are between ages 18 and 21 and the mean age of girls in the sample is 18 years.

The girls' mean age at the birth of their oldest child is about one and one-half years younger than the mean of the girls' current age; it is 16.56 years. Most of the girls--70% of them--were between the ages of 15 and 17 at the time of the birth of their first child. This age distribution is similar to those found in other studies of teen mothers--the majority of teen mothers do not become pregnant at extremely young ages, but in their middle or later teen years.

The racial background of the girls in the survey is a reflection of the Chicago neighborhoods in which the survey sites are located. The girls surveyed are almost entirely African-American (95%), with only a small proportion of Hispanic girls (4%) and girls of other races (1%).

About half (51%) of the girls in the sample have only one child. About one-quarter (23%) of them have two children, and a small percentage of the girls--6%--have three, four or five children. As mentioned earlier, the remaining 20% of the girls in the sample do not have any children.

TABLE 1. CHARACTERISTICS OF SAMPLE (N=474)

Mean age		18 years
Age	11-14	2%
	15-17	29%
	18-19	55%
	20-21	14%
Mean age at birth of oldest child*		16.56 years
Age at birth of oldest child	11-14	6%
	15-17	70%
	18-19	22%
	20-21	2%
Race	African-American	95%
	Hispanic	4%
	White, non-hispanic	<1%
	Other	1%
Mean number of children		1.17
Children	No children	20%
	One	51%
	Two	23%
	Three or more	6%
Education**	9-12 grade	37%
	Working on/completed GED	60%
	Some college/trade school	2%
Currently in school**		64%
	Under 18	85%
	18 and older	59%
Currently employed**		20%
	Under 18	24%
	18 and older	19%
Moved in last 12 months*		34%

TABLE 1, continued

Living situation	With parent	44%
	With boyfriend	15%
	With friend/relative	20%
	Independently/with child	28%
Have a current boyfriend		81%
Mean duration of relationship with current boyfriend		2.74 years
Receiving financial support from boyfriend		76%
Mean age difference between girl and boyfriend		3.48 years
Age difference between girl and boyfriend	0 or less	17%
	1-3 years	40%
	4+ years	43%
Mean age of current boyfriend		21.84 years
Age of current boyfriend	16-17	5%
	18-20	37%
	21-25	47%
	26+	11%
Education of boyfriend	Less than HS diploma	52%
	HS diploma or GED	33%
	Some college/trade school	15%
Boyfriend currently in school		21%
Boyfriend currently employed		48%

* A significant proportion of the girls refused these questions. The number of girls answering these questions are as follows: age at birth of oldest child n=160; has moved in the last year n= 160.

** Education and employment questions were asked only on one of two versions of the survey. The number of those answering these questions are: n=177 for those currently employed; n=126 for educational attainment (asked only for those currently in school).

Sixty-four percent of the girls reported that they were currently attending school at the time of the survey. As one can see from Table 1, 85% of the young women under 18 were going to school, and 59% of those 18 and over reported that they were attending school. Despite these levels of reported school attendance, the educational levels of these girls is poor and the proportion of those with a high school diploma is apparently quite small. Only 2% have obtained any education beyond the high school level. Most of the girls (60%) report that either they are pursuing or have completed a GED. Given that almost three quarters of the girls in the survey are 18 or older, their reported educational attainment is quite low.

Only twenty percent of the girls report that they are currently employed. A greater percentage of younger girls are working: 24% of those under 18 (n=37), and 19% of those 18 and older (n=140), are employed. This difference does not reach statistical significance, but this could be due to the small number of girls surveyed about current employment.

The girls in the sample reside in a variety of household situations. Only 44% of the young women in the sample, and only 69% of those under 18, live with a parent. A relatively large proportion of the sample, 28%, live independently with their children. These are primarily girls of legal age: only 8% of those under 18 live independently with their children, while 37% of those 18 and older live on their own with their children. According to their self-reports, 15% of the girls in the sample live with their boyfriends, and 20% of the girls live with friends or other relatives as a part of their households.

Thirty-four percent of the girls report having moved in the last 12 months. Therefore, not only are these girls' living arrangements quite varied; they are frequently

unstable. The one-on-one interviews likewise reflected a great deal of instability in the girls' living situations. In some cases, pregnancy made living with parents untenable for the girls, but parents' instability due to drug use, violent relationships or other problems was at least as frequently cited in interviews as the reason for not living with parents. Interview data suggest that abused girls change residences frequently, moving between living with parents, living with boyfriends or on their own, and staying with friends or in shelters.

Table 1 also contains information about the girls' current boyfriends and about the girls' relationships with them. Eighty-one percent of the girls have current boyfriends. The girls' relationships with their boyfriends are of surprisingly long duration given the fact that most of these girls are still teens. The average length of relationships among young women currently involved with a partner is 2.74 years; 32% of these young women have been in their current relationships for four years or more. Seventy-two percent of the teen mothers report that their current boyfriends are the fathers of at least one of their children, and 76% of the girls receive some financial support from their boyfriends. However, data from the one-on-one interviews reveal that these relationships may not be monogamous on the males' parts.

The males with whom these young women are involved are, as a group, older than the teens we surveyed. The girls' boyfriends range in age from 16 to 44; the mean age of these males is 21.84 years. Further, these young women's boyfriends are, on average, 3.48 years older than the girls. Almost half of the girls (43%) are currently involved with males who are four or more years older than they are.

Although these young men are significantly older, on average, than the girls, their educational attainment and employment levels are very low. While 21% of the girls' boyfriends are currently in school, only 48% of the boyfriends have a high school diploma, GED or post-high school education. Furthermore, only about half (48%) of the boyfriends, 95% of whom are 18 or older, are currently employed.

2. Prevalence and demographic correlates of domestic violence

Prevalence of domestic violence. Respondents were asked if they had experienced several different kinds of domestic violence behaviors at the hands of their boyfriends in the last twelve months. In reporting these results, the domestic violence behaviors are grouped into three graduated levels of severity.

Level 1 behaviors include the experience of direct verbal and symbolic aggression, in which a young woman's boyfriend attempts to control, harass and/or threaten her and her family or friends. Level 2 domestic violence includes the experience of physically aggressive behaviors such as throwing objects, pushing, grabbing or slapping. Level 3 behaviors are severely aggressive; they include kicking, hitting, beating, injuring, raping, or threatening with or assaulting the young woman with a weapon.

Fifty-five percent of the young women in the sample report having experienced some level of domestic violence at the hands of their boyfriends in the last 12 months. Table 2 shows the frequencies at which abused teens experienced emotional and physical violence done to them by their boyfriends.

TABLE 2. INCIDENCE AND LEVELS OF DOMESTIC VIOLENCE (n=474)

Has experienced domestic violence from boyfriend in last 12 months		55%
Highest Level of DV Experienced in the Last Twelve Months	No domestic violence	
	Level 1: Verbal/Symbolic Aggression	27%
	Level 2: Physical Aggression	32%
	Level 3: Severe Aggression	41%

As one can see from Table 2, 73% of those who experienced domestic violence during the past 12 months--representing 40% of the entire sample--were victims of physical maltreatment (Level 2 or 3). Thirty-two percent of these young women reported Level 2 behaviors as the highest level of domestic violence they had experienced in the last twelve months, and 41% of these young women (about 30% of the entire sample) reported experiencing the most severe Level 3 behaviors during this period--they had been beaten, injured, raped or assaulted.

Demographic correlates of domestic violence. Previous studies have investigated the demographic correlates of domestic violence among various groups of women. In what follows, we examine associations between domestic violence and age, duration of relationships, educational attainment levels and number of children among the teens in our sample and evaluate our results in light of previous research.

One might expect to find more domestic violence in relationships among teen girls where their partners are much older than the girls themselves. In our sample, we

found no clear relationships between the age difference between the girls and their boyfriends and the occurrence or severity of domestic violence.

Department of Justice crime statistics show that rates of violent victimization of women in various stages of the life cycle are relatively low among younger teens (12-15) and highest among young women aged 16-24 (Greenfeld et al. 1998). Our results show that the girls in this sample experience higher prevalence of domestic violence at younger ages. We found that the prevalence of domestic violence among the youngest girls in the sample, aged 11-15, was 62%, that this rate was about 56% for girls between 16 and 19, and was 47% for young women aged 20 and 21. These results, though not statistically significant ($\chi^2=2.653$, 2 df, $p=.265$), indicate that the rate of domestic violence among the younger teens in this sample is at least as high as it is for older teens. The prevalence of domestic violence among the teens in our sample, therefore, appears higher among younger teens than among those in the general population.

The age of the girls' partners has a very clear association with the prevalence and severity of domestic violence; young women with older boyfriends were more likely to have experienced domestic violence. This result is shown in Table 3. As one can see in Table 3, girls with older boyfriends experience much higher levels of domestic violence: about half of those with boyfriends aged 18 to 25 are domestic violence victims, but three quarters of those with boyfriends 26 or older are domestic violence victims. And domestic violence among girls with older boyfriends is more severe than those with younger boyfriends.

TABLE 3. AGE OF BOYFRIEND BY LEVEL OF DOMESTIC VIOLENCE

	Highest Level of Domestic Violence Experienced (HDV)				N
	None	Low	Moderate	High	
Age of Boyfriend					
15-17	33%	33%	22%	11%	9
18-20	49%	6%	14%	31%	65
21-25	51%	20%	16%	12%	83
26 or older	25%	11%	23%	14%	20
chi-square	20.985				
df	9				
p	.013				

Knowing from previous studies that women often find it very difficult to leave violent relationships, we examined the data to see whether teens in long term relationships were more likely to experience domestic violence. Although we found no significant difference in the duration of relationships between those young women who experience domestic violence and those who don't, the interview data reflects the familiar pattern of difficulty the girls have in leaving violent relationships. Girls with domestic violence in their lives often stay in their relationships for long periods of time--up to several years--even while trying to leave. Those who discontinue their residential arrangements with a live-in boyfriend sometimes continue to see their boyfriends

afterward. Those who move out, break up or obtain an order of protection against their boyfriends are often forced to see their boyfriends against their will.

Let us look next at the relationship between educational attainment levels and the prevalence and severity of domestic violence. First of all, we found no relationship between the *girls'* level of education and the prevalence or severity of domestic violence.

However, we found a clear relationship between the educational levels of the girls' *boyfriends* and the prevalence and severity of domestic violence. As one can see in Table 4, girls whose boyfriends have higher levels of education are less likely, on average, to experience more severe levels of domestic violence. A high school diploma appears to be a particularly significant educational marker. Those whose boyfriends do not have a high school diploma are much more likely to experience high levels of domestic violence than others.

TABLE 4. BOYFRIEND'S EDUCATION BY LEVEL OF DOMESTIC VIOLENCE

Highest Level of Education Completed by Boyfriend	Highest Level of Domestic Violence Experienced (HDV)				N
	None	Low	Moderate	High	
8th - 11th grade	42%	9%	22%	27%	204
High school diploma/GED	47%	22%	13%	18%	135
Some college/trade school	48%	14%	21%	16%	56
chi-square	18.007				
df	6				
p	.006				

Finally, we tested the relationship between domestic violence and the number of children the teens had, hypothesizing that girls with more than one child may be more dependent and less powerful in relation to their boyfriends, and therefore may experience a higher prevalence and severity of domestic violence than those with only one child. The result is shown in Table 5, and is contrary to what we expected. Before the introduction of controls, girls with one child have a higher prevalence of domestic violence than those girls with two or more children. This result, however, is not sustained once controls are introduced. When age is controlled, the association disappears. In our sample, then, once other variables are controlled, there is no relationship between having more children and increased prevalence and severity of domestic violence.

TABLE 5. NUMBER OF CHILDREN BY OCCURRENCE OF DOMESTIC VIOLENCE (N=371)

	Percent of Girls		
	No DV	DV Victims	N
Number of Children			
1	43%	57%	236
2 or more	53%	48%	135
chi square	3.031		
df	1		
p	.082		

3. Domestic violence, birth control sabotage and sabotage of school and work

Birth control sabotage. Respondents were asked whether their boyfriends had attempted to sabotage their use of birth control, either verbally or behaviorally or both. Verbal sabotage of birth control was assessed by asking the respondent whether her boyfriend had said any of these things to her in the past 12 months:

1. “You want to use family planning so you can sleep around with other men.”
2. “If we have a baby you will always have a part of me and I will always have a part of you.”
3. “If you have a baby, you will never have to worry about me leaving you. I will always be around.”
4. “You would have my baby if your really loved me.”

Behavioral sabotage was identified through the use of these two yes-or-no items:

1. “My boyfriend won’t let me use family planning.”
2. “My boyfriend forces me to have sex when I am not protected.”

Fifty-one percent of the young women in the entire sample reported experiencing at least one form of birth control sabotage from their boyfriends. Forty-eight percent of the young women surveyed reported experiencing verbal sabotage of birth control and fourteen percent of the young women in the sample reported experiencing behavioral sabotage of birth control.

Domestic violence and birth control sabotage. As suggested by the few existing research studies, there is a strong association between domestic violence and birth control sabotage among the teens surveyed. Table 6 introduces the details of this relationship.

TABLE 6. DOMESTIC VIOLENCE AND BIRTH CONTROL SABOTAGE

	Percent of teens	
	Teens with no DV (n=215)	Teen DV victims (n=259)
Birth Control sabotage	34%*	66%
Verbal sabotage	31%*	62%
Behavioral sabotage	5%*	22%

* significant at $p < .01$ level.

As one can see in Table 6, of those young women reporting domestic violence at the hands of their boyfriends, 66% experience some form of birth control sabotage from them as well. This frequency of birth control sabotage is significantly higher than among those with no domestic violence--although the amount of birth control sabotage is substantial among this group, with one-third (34%) experiencing some form of sabotage from their boyfriends. As Table 6 shows, significantly higher levels of sabotage are also found among girls experiencing domestic violence when verbal and behavioral sabotage are considered separately.

Table 7 examines the relationship between the severity of domestic violence and the severity of birth control sabotage. Levels of birth control sabotage listed in Table 7 were obtained by counting the number of sabotage statements--out of the four items asked--that each girl reported having heard from her boyfriend. The case is defined as low sabotage if the girl said "yes" to having heard one of the items, moderate sabotage if

the girl said “yes” to having heard two of the four items, and high sabotage if the respondent said “yes” to having heard three or four of the items.

TABLE 7. LEVELS OF DOMESTIC VIOLENCE BY LEVELS OF VERBAL SABOTAGE OF BIRTH CONTROL (N=474)

Level of Verbal Birth Control Sabotage (BCSABW)	Highest Level of Domestic Violence Experienced (HDV)			
	None	Low	Moderate	High
No Sabotage	69%	50%	43%	27%
Moderate Sabotage	28%	46%	51%	50%
High Sabotage	3%	4%	6%	24%
	100%	100%	100%	100%
	(n=215)	(n=70)	(n=84)	(n=105)

chi-squared 77.909 r (HDV*BCSABW)=.382**
df 6 **significant at .01 level
p .000

Table 7 shows that, as the severity of domestic violence increases, so does the severity of verbal birth control sabotage. Girls who experience no domestic violence

report low levels of verbal sabotage: 69% report no verbal sabotage. But as domestic violence increases, so does verbal sabotage. Among girls who experience severe aggression, 50% report moderate levels and 24% report high levels of verbal sabotage. The chi-square test ($p=.000$) reveals a statistically significant relationship—that is, one unlikely to have occurred by chance alone—and the Pearson correlation ($r=.382$) shows a clear association between levels of domestic violence and verbal birth control sabotage.²

Level of domestic violence is also related to behavioral sabotage. As we saw in Table 6, the numbers of those experiencing physical coercion to have sex is not nearly as large as those experiencing verbal pressure to have children. But as was the case with verbal sabotage and domestic violence, the level of domestic violence and level of physical coercion to have unprotected sex are positively associated. The Pearson correlation behavioral sabotage of birth control and domestic violence ($r=.361^{**}$) indicates that the relationship between the two is clear and about as strong as the relationship between domestic violence and verbal sabotage.

The one-on-one interviews support the conclusion that abused girls frequently experience a range of violent sabotage behaviors--from threats to physical violence--from their boyfriends around the issue of use of birth control. One girl spoke about having had a fight with her boyfriend about her use of birth control. During the altercation, he flushed her birth control pills down the toilet in the bathroom of their apartment. Other

² Pearson correlations range between 1.00 and -1.00 , and display the strength and direction of the linear relationship between two variables. In this case, $r=.382$ means that the relationship between levels of domestic violence and verbal birth control sabotage is positive—that is, as one increases, so does the other—and the magnitude indicates a moderately strong relationship. For social science variables, $r=.500$ is considered a relatively strong degree of correlation.

girls stated that they do not use the Pill, but instead get depoprovera shots from clinics because the shot is easier to conceal from their boyfriends. Among the girls interviewed, however, those who were caught using birth control reported suffering physical abuse-- they spoke of being hit or beaten when their boyfriends learned that they were getting depoprovera shots. One girl interviewed had a bruised and swollen eye from a beating she had sustained from her boyfriend when he found her leaving the clinic where she had received a depoprovera shot.

Birth control sabotage, in its verbal and physical manifestations, is more prevalent and severe among younger girls, and among those with older boyfriends. Table 8 shows evidence of a relationship between the girl's age and the level of verbal birth control sabotage.

TABLE 8. GIRL'S AGE BY LEVEL OF VERBAL SABOTAGE

	Level of Verbal Sabotage of Birth Control			N
	None	Low	High	
Age of girl				
11-14	67%	22%	11%	9
15-17	50%	45%	5%	134
18-19	48%	41%	11%	258
20-21	66%	25%	9%	71
chi-square	13.319			
df	6			
p	.038			

One can see from Table 8 that verbal sabotage of birth control is most common among girls aged 15 through 19. Sabotage behaviors become much less frequent among older girls--those aged 20-21--and more intense sabotage behaviors are more common among older teens, compared with girls aged 15 to 17.

We also found a trend indicating an association between the male's age and intensity of verbal sabotage of birth control. Table 9 shows this. Although the results in Table 9 do not reach statistical significance, there is a trend in the data where girls with older boyfriends are more likely to experience sabotage behaviors from their boyfriends, and girls with much older boyfriends are more likely to experience more intense levels of birth control sabotage, corroborating the existing research on this subject.

TABLE 9. BOYFRIEND'S AGE BY LEVEL OF VERBAL SABOTAGE

	Level of Verbal Birth Control Sabotage			N
	None	Low	High	
Age of boyfriend				
15-17	78%	22%	0%	9
18-20	51%	46%	3%	65
21-25	58%	35%	7%	83
26 and older	45%	35%	20%	20
chi-square	10.604			
df	6			
p	.101			

Work and education related sabotage. Work and school sabotage were assessed by asking the respondent whether her boyfriend had done any of these things in the last twelve months:

1. Caused injuries that have kept her from going to school or work.
2. Torn up her books or homework papers.
3. Kept her up all night so that she can't go to school or concentrate at school.
4. Promised to babysit or drive her to school or work and hasn't shown up.
5. Has destroyed her clothes so that she can't go to work, trying to get her to quit.
6. Tries to guilt trip her by saying that she needs to stay at home with her child.
7. Comes up with emergencies which prevent her from going to school or work.

Twenty-one percent of women in the sample have experienced some form of work or school-related sabotage from their boyfriends. Of those young women who report having experienced some level of domestic violence from their boyfriends, 34% report some level of work or school-related sabotage, compared with 7% of those who have experienced no domestic violence but have experienced work or school-related sabotage. And as Table 10 shows, as the severity of domestic violence experienced increases, the amount of work or school-related sabotage increases.

Levels of work and school sabotage were obtained by counting the number of sabotage behaviors--out of the seven items asked--that each girl reported experiencing from her boyfriend. The case is defined as low sabotage if the girl said "yes" to having experienced one or two of the items, and moderate/high sabotage if the girl experienced three or more of the seven items. Girls who experienced moderate/high work and school

sabotage reported experiencing as many of six of the seven behaviors by their boyfriends in the twelve months prior to the survey.

TABLE 10. LEVEL OF DOMESTIC VIOLENCE BY LEVEL OF WORK AND/OR SCHOOL RELATED SABOTAGE

Level of Work or School Related Sabotage (WSSAB)	Highest Level of Domestic Violence Experienced (HDV)			
	None	Low	Moderate	High
No Sabotage	93%	84%	81%	43%
Low Sabotage	6%	16%	18%	35%
Moderate/High Sabotage	1%	0%	1%	22%
	100%	100%	100%	100%
	(n=215)	(n=70)	(n=84)	(n=105)

chi-squared 131.991 r (HDV*WSSAB)=.454**

df 6 **significant at .01 level

p .000

As one can see from Table 10, there is a clear relationship between the level of domestic violence experienced and the experience of work or school-related sabotage.

Among those young women experiencing no domestic violence, only 7% experience any work-related sabotage, and that sabotage is experienced primarily at low levels. But among girls experiencing severe aggression behaviors from their boyfriends, 57% experience some level of work or school-related sabotage. Of those who experience Level 3 domestic violence from their boyfriends, 35% experience low levels of work or school-related sabotage, and an additional 22% experience moderate or high levels of work or school-related sabotage. The chi-squared test ($p=.000$) indicates that this result is highly unlikely due to chance alone, and the Pearson correlation ($r=.454^{**}$) indicates that this is a strong relationship.

The one-on-one interviews reflected and fleshed out many of the sabotage behaviors asked about on the survey, and included reports of additional kinds of sabotage suffered by the girls at the hands of their boyfriends. Some girls stopped attending school and GED classes because they did not want others to see evidence of beatings, including bruises on their faces and other parts of their bodies. Others spoke about boyfriends' harassment of them when they tried to attend school, including forcing them to stay at home, threatening them, and stalking them at school and at work.

We also found that work and school sabotage are strongly related to behavioral birth control sabotage. The Pearson correlation between these two variables is $r(\text{BCSABA}*\text{WSSAB})=.581^{**}$. This correlation indicates that, the higher the level of behavioral birth control sabotage a young woman experiences, the higher the likelihood that she will also experience high levels of work and education related-sabotage from her boyfriend.

Conclusion

Our findings have shown that there is a strong relationship between domestic violence, birth control sabotage, and work and education-related sabotage among a fairly sizeable sample of teen mothers on welfare. For many low income teens, the intimate partners in their lives will effectively sabotage their efforts to complete school and control their own reproduction. As a result, all efforts to assist teen mothers with self-sufficiency and pregnancy prevention must take the issue of domestic violence into account. Inability or unwillingness to squarely confront the issue of domestic violence would appear to doom teen pregnancy prevention programs to failure.

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