

# Dating Matters™: Strategies to Promote Healthy Teen Relationships

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## Abstract

Teen dating violence (TDV) is a preventable public health problem that has negative consequences for youth. Despite evidence that youth in urban communities with high crime and economic disadvantage may be at particularly high risk for TDV, little work has specifically addressed TDV in these communities. The Centers for Disease Control and Prevention (CDC) has developed a comprehensive approach to prevent TDV—Dating Matters™: Strategies to Promote Healthy Teen Relationships—that addresses gaps in research and practice. This Report from CDC describes the programmatic activities, implementation support, evaluation, and surveillance of the Dating Matters™ initiative, which will be implemented in four urban communities.

## Introduction

**T**EEN DATING VIOLENCE (TDV) is a preventable public health issue that requires a coordinated and comprehensive prevention approach. Findings from Centers for Disease Control and Prevention's (CDC) Youth Risk Behavior Survey indicate that 1 in 10 high school students experience physical violence from a dating partner each year, a finding that has remained unchanged over the past decade.<sup>1</sup> In studies that examine multiple forms of dating violence (e.g., psychologic, physical, and sexual), approximately 1 in 4 youth report experiencing dating violence and between 15% and 40% report perpetrating violence.<sup>2</sup> Dating violence is associated with negative emotional, physical, social, and academic consequences, such as depression, substance use, injury, and school failure. Dating violence emerges in middle school and peaks in high school,<sup>3</sup> making middle school a critical time to implement prevention strategies.

Although three evidence-based primary prevention programs for TDV exist,<sup>4-7</sup> significant gaps still remain in TDV prevention research and practice. No evidence-based program has been evaluated in high-risk urban environments despite evidence that youth in these settings may be at increased risk for dating violence.<sup>3</sup> Moreover, no community-wide TDV prevention program that includes multiple strategies to address a variety of risk factors has been rigorously and systematically evaluated. TDV prevention has traditionally been implemented by domestic

and sexual violence coalitions or community-based organizations but not as commonly through public health infrastructures, such as local public health departments. Additionally, no community level (vs. state level) indicators exist for TDV other than survey-based estimates. Therefore, CDC's new teen dating violence prevention initiative, Dating Matters™: Strategies to Promote Healthy Teen Relationships, aims to address these gaps by developing, implementing, and evaluating a comprehensive approach to TDV in high-risk urban communities; building the capacity of the local public health department to implement TDV prevention; and establishing community-level indicators of TDV.

Dating Matters employs two models of TDV prevention in order to determine the effectiveness, cost, and sustainability of a comprehensive approach compared to standard practice. The two approaches are described in Table 1. Safe Dates<sup>4</sup> constitutes the standard-of-care model because it is one of the most widely used evidence-based programs to prevent teen dating violence in the United States and because TDV prevention standard practice typically involves the implementation of a teacher-administered prevention curriculum during the school day. The current report discusses (1) the components of the comprehensive program, (2) strategies for supporting implementation of the program, and (3) evaluation and surveillance activities that will advance the evidence base of TDV prevention and assess the public health impact of Dating Matters.

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TABLE 1. TWO PREVENTION APPROACHES IN DATING MATTERS™ : STRATEGIES TO PROMOTE HEALTHY TEEN RELATIONSHIPS

Grade	Youth/peers	Parent/guardian	Educators	Communications	Policy
Standard practice					
8th	Safe Dates	—	—	—	
Comprehensive approach					
6th	Adapted Student Curriculum <sup>a</sup>	Adapted Parent's Matter! <sup>a</sup>	Dating Matters online training	Communications strategies <sup>a</sup>	Policy enhancement or development
7th	Adapted Student Curriculum <sup>a</sup>	Adapted Parent Curriculum <sup>a</sup>			
8th	Adapted Safe Dates	Adapted Families for Safe Dates			

<sup>a</sup>Centers for Disease Control and Prevention (CDC) has developed curriculum and communications strategies.

## Program Components

### *Communities and local health departments*

Evidence suggests that TDV is a significant problem in economically disadvantaged urban communities, where often, because of environmental factors, an accumulation of risk factors for violence exists. However, current research and practice have not addressed this gap. Local (i.e., city or county) public health departments in collaboration with CDC are uniquely primed and positioned to address these gaps. Local public health departments have direct contact with large numbers of people and well-established intervention channels, including direct services to high-risk urban communities and, often, a daily presence in schools.<sup>8</sup> They have experience working with local media, local government, and community organizations—all key partners in preventing TDV, and have a sustainable infrastructure that could be used to address TDV. Therefore, Dating Matters will build the capacity of urban, local public health departments to address this problem in their jurisdictions, with federal support. Through Dating Matters CDC will work with local health departments serving the cities of Baltimore, Ft. Lauderdale, Chicago, and Oakland to implement the standard and comprehensive approaches. Each health department has selected 10 to 12 neighborhoods that contain a middle school within their jurisdiction that have above average rates of crime and economic disadvantage. Half of these schools will implement the standard approach with basic technical assistance, and half will implement the comprehensive approach with intensive technical assistance.

### *Youth and parent curricula*

Middle schools assigned to the comprehensive program will implement TDV prevention programming in 6th, 7th, and 8th grades. Similarly, parents/guardians of students attending 6th, 7th, and 8th grades in middle schools assigned to the comprehensive program will receive family-based TDV prevention curricula. Although the curriculum delivered to each grade level is designed to be distinct and applicable to students and parents/guardians regardless of prior exposure or participation, each year of programming builds on the knowledge and skills learned in previous years. The student and parent/guardian programs are described below in turn.

Students in 8th grade classrooms will receive Safe Dates, an evidence-based program for the prevention of TDV.<sup>4</sup> Safe Dates was selected because of its demonstrated effects pre-

venting multiple forms of TDV for boys and girls. Students in 6th and 7th grade classrooms will receive evidence-informed, CDC-developed TDV prevention. These curricula were designed to be developmentally appropriate downward extensions of Safe Dates, with additional programming to address (1) healthy and unhealthy behaviors in all relationships, broadly defined (e.g., peers, family), (2) contemporary issues facing students (e.g., social media), and (3) a broad constellation of risk factors and problems often comorbid with TDV (e.g., substance use, risky sexual behavior).

Parents/guardians of students in the 8th grade will receive Families for Safe Dates,<sup>9</sup> a TDV prevention curriculum that is completed at home by parents and teens. Parents/guardians of students in the 6th grade will receive Parents Matter!, an evidence-based, group-format prevention program designed to enhance protective parenting practices and encourage parent/child communication about sexuality and sexual risk behaviors.<sup>10,11</sup> In consultation with the program developer, this curriculum has been adapted to include content on healthy dating relationships and TDV. Finally, parents/guardians of students in the 7th grade will receive an evidence-informed, CDC-developed curriculum that is best conceptualized as a hybrid of the 6th and 8th grade curricula, in both format and content; that is, it includes in-person sessions in addition to at-home assignments and focuses on both sexual risk reduction and TDV prevention.

### *Educator training and communications campaign*

CDC and Liz Claiborne Inc. created Dating Matters: Understanding Teen Dating Violence Prevention, an interactive, online TDV prevention course. This training provides educators with knowledge and resources regarding TDV and motivates them to implement prevention measures in their schools. The training has three learning modules that cover understanding TDV and its consequences, risk factors for TDV, and the importance of healthy relationships. All educators in the middle schools implementing the comprehensive approach will complete this training, which is available free of charge at [www.vetoviolence.org](http://www.vetoviolence.org).

The communication campaign for Dating Matters promotes healthy dating relationships among youth aged 11–14 within the selected communities. The key messages focus on changing the social environment and norms about TDV. The campaign includes innovative and creative products and marketing strategies geared toward youth in high-risk urban communities.

### *Policy development*

Awareness of TDV has been increasing in recent years, and several states have introduced (and some passed) bills that mandate school TDV prevention programs and policies. The bills vary greatly in comprehensiveness and specificity, and there is little to no evidence that the level of enforcement or quality of policy and program implementation is being monitored or assessed. CDC is working to address these gaps through the policy component of Dating Matters. Local health departments will assess existing policies related to TDV prevention in the community and determine how to best fill local (e.g., neighborhood, school) policy gaps and enhance relevant existing policies as part of the initiative. To assist health departments in this process, CDC is developing the Dating Matters: Policy Package, a collection of tools and information that will inform the process of TDV prevention policy assessment, enhancement, and development. The package will also provide information on how best to track aspects of the policy development, implementation, and, if appropriate, effectiveness. This is a crucial first step in learning more about which policies are effective at preventing TDV and promoting healthy teen relationships.

### **Implementation Support**

In addition to the programmatic components of Dating Matters described, CDC will provide extensive support for the implementation of Dating Matters through training, technical assistance, and tools. The goals of the implementation support are to facilitate implementation, enhance community buy-in for Dating Matters, increase community capacity to implement Dating Matters, and ensure program sustainability so that Dating Matters remains in the communities even after this initial funding has ended.

### *Capacity and readiness assessment*

CDC has a commitment to enhancing the capability of public health departments to support violence prevention. Through Dating Matters, CDC will work with local health departments to improve their capacity to support TDV prevention in the areas of curricula implementation, policy, communication, surveillance, and evaluation. CDC is developing a capacity and readiness assessment to assist grantees with addressing local gaps in capacity related to TDV prevention. The assessment includes general and TDV prevention-specific capacity areas. General capacity refers to a local health department's overall functioning and operations, such as organizational culture and climate and leadership effectiveness. TDV prevention-specific capacity refers to the local health department's ability to implement and support Dating Matters and other efforts intended to prevent TDV. The assessment also has components that can be administered in schools and community-based organizations that are implementing Dating Matters. It is anticipated that the assessment tool will be accessed online, and a tailored data report for each grantee will be generated through the online system. In addition to describing level of capacity in different areas (i.e., low to high), the report will identify resources to assist grantees with addressing capacity gaps and will link to an online action plan. This innovative approach to streamlining assessment and action planning in a single online tool is in-

tended to accelerate grantees' learning and their actions to improve their organizational capacity in preparation for implementing the initiative.

### *Adaptation package*

Implementing Dating Matters in urban communities may require adaptation of its evidence-based curricula, which have been evaluated in nonurban settings. Recognizing the balance between maintaining fidelity to the original curricula implementation and adaptations that may be needed to reflect the cultural context of urban youth and families,<sup>12,13</sup> CDC is developing a comprehensive adaptation package for Dating Matters grantees. The package includes detailed guidance and tools to assist grantees with identifying potential adaptations that will not compromise core components of the curricula. The adaptation package is organized in three stages: preparation, adaptation, and implementation. Preparation includes gathering key stakeholders (e.g., curricula facilitators, youth, and parents), implementing a capacity and readiness assessment, reviewing community indicators, and using collected information to inform potential adaptations and prepare for implementation. Adaptation includes working with key stakeholders to review and adapt curricula using a systematic process and documenting adaptations. This stage also includes revising curricula to integrate adaptations and testing adaptations with end-users. Examples of cultural adaptations are changing names and cultural references in scenarios, updating technology, and using local statistics to describe TDV. Implementation includes implementing the adapted curricula and documenting the process. This part of the adaptation package is a companion to the overall implementation guidance CDC will provide to Dating Matters grantees. CDC has worked with the curricula developers, adaptation experts, and practitioners who have implemented the curricula to design a package that reflects the foundational science behind the curricula and an accessible process for systematic adaptations. The amount of adaptation will be determined by each community and will vary by each curriculum, such that some communities may choose to do very little adaptation and some curricula may allow for little adaptation.

### *Technical assistance (TA)*

Each of the funded health departments will implement the comprehensive model of TDV prevention in five to six schools/neighborhoods and those neighborhoods will receive intensive implementation support. The five to six school/neighborhoods that will be implementing the standard model of TDV prevention will receive basic implementation support. Basic support includes such activities as conducting one-time trainings or workshops, providing tools and documents, and providing brief consultation via email or phone. Intensive support includes a stable, ongoing, and negotiated relationship between the TA provider and recipient that consists of a purposeful planned series of activities, frequent communication, on-site work, collaboration at multiple levels, and coaching.<sup>14,15</sup> All implementers will receive the requisite training necessary to implement the programs, and implementers in the comprehensive condition will also receive ongoing TA throughout implementation, which will include TA around the capacity and readiness assessment and adaptation process described above.

## Surveillance and Evaluation Components

### *Indicator development and validation*

Because surveillance systems for TDV among middle school-aged youth are unavailable or vary by community, many communities are unable to assess or monitor TDV without conducting self-report surveys of students. To address this gap, Dating Matters will aim to identify and validate indicators of TDV in each of the four communities. Indicators of TDV would be other behaviors that are regularly assessed in a community that are highly correlated with TDV, such that community leaders could have confidence that an increase or decrease in an indicator of TDV is associated with an increase or decrease in TDV perpetration or victimization. Indicator data will be compiled from education, law enforcement/judicial, and healthcare data systems that are available in each funded city. Indicator data will be collected at all sites during each year of data collection. Although it is expected that not all areas will have the same (or even similar) information that can be used as indicator data, the goal is to gather the best and most comparable data across sites. The sources of reliable indicator data identified in Dating Matters can then be used to obtain rough estimates of TDV within other high-risk urban communities.

### *Cross-site outcome evaluation*

The outcome evaluation for Dating Matters will employ a rigorous design in which we compare the effectiveness of the comprehensive and standard approaches. This design will allow us to determine if the additional benefits of a comprehensive initiative justify the additional time and resources necessary for a community to implement it. Within each community, 10 to 12 schools will be randomized to the comprehensive or standard approaches, with an anticipated 23 schools per condition (46 schools total). Data will be collected from students, parents, and educators. In all, six cohorts of students will be surveyed: those who are in 6th, 7th, and 8th grades during the first year of implementation plus each new cohort of 6th graders in the second, third, and fourth implementation years. It is anticipated that students will be surveyed regularly during each school year in middle school and when they matriculate into high school. To examine the outcomes targeted by the programmatic components, the outcome evaluation will assess students' self-reports of perpetration and victimization of physical, sexual, and psychologic dating violence and stalking, as well as additional outcomes, such as sexual risk taking, depression and anxiety, self-directed violence, and peer violence/bullying. Parent outcomes include communication with children, positive parenting skills, monitoring, and supervision and will be assessed via survey twice per year. Educator outcomes include school climate and increased awareness of TDV and will be assessed via anonymous survey once annually.

### *Process and implementation evaluation*

Given the critical roles that successful implementation and a thorough process evaluation play in prevention, CDC is interested in learning more about the context and fidelity of the Dating Matters implementation. The aspects of context that will be examined include an organizational climate that supports implementation (e.g., providing resources, organi-

zational actions, and incentives for implementation); the aspects of fidelity that will be examined include consistency and quality of implementation.<sup>16,17</sup> In addition, several tools and methods will be used to track and monitor what is being implemented and what dosage of Dating Matters students, parents, and educators receive.

### *Cost estimation and analysis*

To inform subsequent dissemination, CDC will conduct an economic evaluation of Dating Matters by applying a cost-effectiveness analysis to both the standard and comprehensive approaches. Cost-effectiveness analysis results are expressed in a cost-effectiveness ratio, which is interpreted as the cost per TDV case prevented and, therefore, can facilitate the comparison between standard and comprehensive approaches from an economic perspective. Costs in Dating Matters are classified by cost type into two broad categories: program costs and participant costs. Program costs comprise personnel costs, equipment and facility costs, office supply and software costs, curricula material and mailing costs, participation incentives, and adaptation costs (for the comprehensive approach only). Personnel costs consist of local health department personnel costs and school personnel costs. Multiple personnel involved in the implementation of Dating Matters will be included in the analysis. Participant costs mainly include the time required for students, parents, and brand ambassadors to participate in Dating Matters.

## Building Partnerships

CDC recognizes that there are several organizations working in TDV prevention and response. In an effort to leverage resources and information, CDC has been working with multiple governmental and nongovernmental entities, including (but not limited to) other agencies and offices within the U.S. Department of Health and Human Services, the U.S. Department of Justice, the U.S. Department of Education, Futures Without Violence, Robert Wood Johnson Foundation, Liz Claiborne, Break the Cycle, and the National Conference of State Legislatures. These partnerships have enabled Dating Matters to reflect the current state of science and practice in TDV prevention. CDC anticipates that we will continue to build partnerships in TDV prevention as the initiative develops and is implemented.

## Summary and Conclusions

The frequency of dating violence has remained unchanged over the past decade, despite multiple prevention and response activities across the United States. It is unacceptable to allow our young people to experience and perpetrate dating violence in middle and high school, as TDV is associated with a host of negative mental and physical health outcomes. Moreover, TDV experienced and perpetrated in adolescence increases the risk of violence in subsequent relationships.<sup>3</sup> These issues may be a particular threat to youth in high-risk urban environments. Dating Matters represents the first-ever public health approach to TDV prevention implemented and systematically evaluated in high-risk urban communities. It is a novel approach to TDV prevention that builds on the best available science in prevention and aims to increase healthy relationship behaviors and decrease dating violence. Before

being widely disseminated, Dating Matters will be implemented in demonstration communities in Baltimore, Ft. Lauderdale, Chicago, and Oakland from 2011 to 2016 (planning will take place in 2011–2012; full implementation will take place from 2012 to 2016). It is anticipated that products developed as part of Dating Matters (e.g., adaptation package, capacity and readiness assessment, indicators package, policy package) will be publicly available and free of charge at the conclusion of the demonstration phase. More information about Dating Matters can be found at [www.cdc.gov/violenceprevention](http://www.cdc.gov/violenceprevention).

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**Disclosure Statement**

No competing financial interests exist.

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