

Parenting and Violence Toward Self, Partners, and Others Among Inner-City Young Adults

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Young adults in economically disadvantaged communities are more likely to be parents than age peers in middle- and high-income communities.¹ Reflecting broader patterns of poverty, the youngest parents in the United States are disproportionately African American and Hispanic. These parents face challenges related to living in highly stressful environments, including involvement in and exposure to multiple forms of violence.^{2–4} Low-income adolescents are 79% more likely than adolescents from medium- or high-income families to have a child by age 18, and they are 58% more likely to have given birth by age 20.¹ Parenting at a relatively early age, whether intentional or unintentional, can be extremely difficult, especially for those living in inner cities. Caregiver responsibilities, financial obligations, unstable and impermanent relationships with partners, and fewer opportunities to pursue educational goals are some of the impediments many inner-city dwellers face.^{5,6} For young mothers, the majority of whom are single, these stressors may be compounded by lack of economic and social support from partners, which helps keep women and children in poverty.⁷ Young fathers are confronted by the difficulties of fulfilling traditional male roles and responsibilities, including finding secure employment and achieving financial self-sufficiency. These difficulties have been correlated with feelings of hopelessness and risk of suicide.⁸

Patterns of perpetration of violence toward partners and toward those outside the home have been examined in tandem, notably in the criminology literature that includes longitudinal studies that have followed high-risk males from youth into adulthood.⁹ However, violence toward oneself, which encompasses suicidal feelings and behaviors, has been omitted from examinations of the correlations and consequences of different forms of violence perpetration. African Americans (especially females) have had relatively low rates of suicide, but studies have linked suicide and suicidality to low economic status, in which feelings of

Objectives. We examined relationships between parenting status and multiple forms of violence perpetration among young adults in high-poverty environments.

Methods. We analyzed data obtained from a survey of 990 young adults in New York City. Respondents reported on violence they had perpetrated toward themselves, intimate partners, and others. Associations between parenting and violence were examined in logistic regressions, controlling for sociodemographics.

Results. Fewer young men (33.0%) than young women (48.6%) reported that they were raising children. Among young men, parenting was associated with violence toward themselves (odds ratio [OR]=1.8; 95% confidence interval [CI]=1.03, 3.16) but not with violence toward partners or others. Among young women, violence perpetration did not differ by parenting status. Correlations among forms of violence were higher among young women than among young men, especially among mothers. Community violence was associated with violence toward others for both genders. For young men, community violence was associated with violence toward partners.

Conclusions. Parenting did not reduce inner-city young adults' perpetration of violence. Among fathers, parenting may be, along with unemployment, a risk for violence toward self. Understanding patterns of violence can inform interventions that support young adults, including those who are parenting, in creating nonviolent homes and communities. (*Am J Public Health.* 2009;99:2255–2260. doi:10.2105/AJPH.2008.156513)

hopelessness, untreated depression, and substance use may be elevated.¹⁰ The 3 forms of violence perpetration as defined by the victim—violence toward oneself, toward partners, and toward others—can have long-term effects on the well-being of children and families,¹¹ but the interconnections among these forms of violence in young adults' lives have received scant attention.

Violence is perpetrated at every socioeconomic level, but residents of communities with poor economic opportunities and outlooks continue to bear the burden of high rates of predatory violence and relationship violence.^{12,13} Research clearly shows that those who witness or are victimized by violence are also at increased risk for perpetrating violence.¹⁴ Although young women are the victims of serious and lethal physical harm more often than young men, both males and females growing up in violent environments may fall back on patterns

of settling disputes through aggressive acts. As children and adolescents, both males and females who come of age in poverty often engage in fighting, weapon carrying, and weapon use.¹⁵ For example, middle-school males in the Reach for Health longitudinal study reported about double the levels of aggression reported by middle-school females. Still, relatively high proportions of middle-school females also reported violence perpetration: more than 30% said they had been in a recent physical fight, and about 20% had carried a knife or gun.

In later adolescence, reports of violence perpetration toward partners are similar for males and females.¹⁶ Consistent with gender differences in national figures, females in high school and in their late teen years have demonstrated higher levels of suicidality than males, including both suicidal thoughts and behaviors, although gender differences decrease when only the most serious acts—actual suicide

attempts—are considered.¹⁷ Given these findings, perpetration of violence is a concern for both young men and women as they become parents.

Although there are associations between high levels of violence and economic disadvantage, there is also evidence that suggests that parenting may be a positive life transition for some young males and females, especially if they are supported by protective factors such as social and cultural capital.^{18–20} To learn more about the relationship between parenting and violence, we examined the interconnections of multiple forms of violence in young men's and women's lives and asked: Is parenting status associated with increased or decreased risk for perpetration of violence toward self, intimate partners, and others? Because parenting status varies substantially by gender, as do parenting roles and responsibilities, we examined these interconnections separately for young men and women.

We analyzed data obtained from surveys conducted for the Reach for Health study, which has followed a large, community-based sample of inner-city youth from middle school into adulthood. We examined the relationships between parenting status and multiple forms of violence perpetration at a critical developmental stage, when respondents were making the transition to both adulthood and parenthood and when, for many, stressors both inside and outside their homes may be at peak levels. Included in the sample were 2 groups that have been underrepresented in research: young mothers who have engaged in high levels of adolescent violence, and economically disadvantaged young fathers who are involved in raising children. The need to better understand these 2 groups is critical for informing prevention efforts, given potential differences in the trajectories and consequences of violence and how violence shapes the lives of parents, children, and communities.

METHODS

In 1994, the Reach for Health Study was initiated at 3 high-poverty middle schools in New York City. All youth attending seventh or eighth grade in 1995 and 1996 were eligible for the study. Written parental permission and youth assent were obtained before enrollment. Parental consent was provided for 89% of

eligible students; baseline surveys were obtained from more than 95% of those with parental permission. Of 1478 participants who completed an eighth-grade survey and were living in New York City when longitudinal tracking procedures were initiated, 87% have completed a high school survey, and 1176 (79.6%) have completed at least 1 of 2 young-adult survey rounds, the first when they were aged about 19 years and the second when they were aged about 23 years. All surveys have been administered as paper–pencil questionnaires. Young-adult surveys were administered in small groups or individually at locations where privacy could be assured, including former middle and high schools, as well as the Reach for Health study office.

These cross-sectional analyses include data from 990 respondents surveyed during the second wave of data collection in young adulthood (2005–2007). This sample represents 67% of eighth-graders eligible for follow-up and more than 84% of those who participated in high school surveys.

Because participants were originally recruited in middle school, it is important to consider attrition. The Reach for Health study was somewhat less successful in obtaining parental permissions for males at study recruitment during middle school (resulting in a sample that was 47.9% male) and when additional signed permissions were required during high school (resulting in a sample that was 44.9% male). Males also have been more difficult to locate and survey during young adulthood; 69.8% of males and 84.2% of females completed a young-adult survey. Gender is the main predictor of study attrition, consistent across survey waves; thus, these analyses are presented by gender. Reports of eighth-grade risk behaviors, including peer aggression, were not significantly related to attrition.

Items assessing reproductive histories and parenting status asked: Have you ever given birth (young women)/had a biological child (young men)? If yes, how many children have you had? Are you currently like a mother/father to a nonbiological child? Parenting (i.e., being a “mother” or a “father”) was defined in these analyses as currently “raising a child,” regardless of whether the child is the respondent's biological child.

Violence toward oneself was measured by 6 items pertaining to the past year: Have you seriously thought about suicide? Have you told someone you have thought about killing yourself? Have you thought suicide would be a solution to problems? Have you made a suicide plan? Have you made a suicide attempt? Were you hospitalized or under a doctor's care because of an attempt?

Violence toward partners in the last year was assessed by 9 items on physical perpetration, 1 item on sexual perpetration, and 4 items on emotional violence; these were drawn from the Conflict Tactics scale.²¹ Violence toward others was assessed by 5 items addressing fighting, knife or gun carrying, and weapon use.

Descriptive and bivariate analyses were conducted within gender by parenting status. For these and the logistic regression analyses, items within each form of violence perpetration were summed. The majority of respondents received scale scores of 0, indicating they had not engaged in violent behavior. Given the skewed distributions, scales were dichotomized into “none” or “any.” Sociodemographic characteristics that were entered into the regression equations as potential covariates and were shown for each outcome included ethnicity (non-Hispanic Black vs other), household income (5 categories ranging from <\$10 000 per year to more than \$50 000 per year), witnessing community violence (summative scale of 6 items asking whether the respondent had witnessed fights, arrests, drug deals, gunshots, homicide, or homicide of a friend), and church attendance.

RESULTS

One third of young men (33.5%) said they were the biological father of a child. Of these, 66.4% said they had 1 child, 26.0% had 2 children, and 7.7% had 3 or more. Of those who had fathered a child, just under a quarter (23.2%) were aged 18 years or younger when their first child was born. A majority of those (69.4%) who had fathered a child reported living with 1 or more biological children all or most of the time. In addition, a substantial proportion of young men reported that they were what has been termed “social” fathers: 21.8% said they had been a father or “like a father” to a nonbiological child. Of these,

12.9% (53) currently lived most or all of the time with this child. Some young men who may not be parenting their biological children may be fathering nonbiological children. Thus, one third of the male sample (33%), or 136 young men, reported that they were parenting; accordingly, they were defined as “fathers.”

A larger proportion of young women (49.7%) than young men had had a biological child; of these young women, 63.7% had had 1 biological child, and 46.3% gave birth when they were aged 18 years or younger. All but 10 who had given birth reported that they lived with a biological child all or most of the time. Just under a third (29.8%) had been a mother or like a mother to a nonbiological child, and 11.8% lived with a nonbiological child all or most of the time. Taking both biological children and nonbiological children into account, 48.6% of young women reported that they were parenting and were defined as “mothers” in these analyses.

Table 1 provides demographic characteristics of the sample by parenting status. The first 2 columns provide information on males. Fathers were slightly older than young men who were not fathers; they were also more likely to be married (14.0% versus 5.8%). Fathers were about twice as likely to be currently living with a partner (50.7% versus 23.2%, results not shown), though not necessarily in long-term relationships.

As with young men, mothers were slightly older than young women who were not mothers and were more likely to be married (16% versus 6.7%). Mothers were also more likely than young women who were not mothers to have a household income of less than \$20 000 per year (55.5% versus 40.8%) and to be unemployed (39.5% versus 26.9%). Reports of community violence and church attendance did not vary by parenting status for either gender, although larger proportions of young men reported witnessing community

violence, and fewer reported regular church attendance.

In terms of violence toward oneself, 9.2% of young men had seriously considered suicide in the past year, 8.7% had told someone they had thought about killing themselves, 9.7% thought that killing themselves would be a solution to their problems, and 4.6% had made a plan. Thirteen young men (3.2%) reported having made a suicide attempt, and 10 (2.4%) had been hospitalized or under a doctor’s care because of an attempt. Overall, 16.0% answered at least 1 question about suicidal ideation or attempts in the affirmative. In terms of violence toward partners, 19.2% of young men reported at least 1 type of physical or weapon-related physical violence perpetration. Comparatively few (3.2%) reported sexual perpetration; 12.9% reported emotional perpetration. Overall, 24.5% had perpetrated some form of partner violence. In terms of violence toward others, 15.0% reported having been in a physical fight in the past 3 months, and 28.2% had carried or used a weapon; overall, 35.0% reported recent violence toward others.

Among young women, 17.0% reported suicidal ideation, and 4.7% reported a suicide attempt. Taken together, 17.5% reported violence toward themselves. In terms of violence toward partners, 17.1% reported at least 1 type of physical or weapon-related perpetration, 1.2% (7) reported sexual violence perpetration, and 10.9% reported emotional violence perpetration. Overall, 20.8% reported some form of partner violence. In terms of violence toward others, 7.8% of young women had been in a recent physical fight, and 10.7% had carried or used a weapon; 17.1%, or about half the proportion of the same group of young men, had perpetrated violence toward others.

Table 2 presents percentages of respondents reporting forms of violence perpetration by parenting status. Among young men, figures for suicidal ideation and attempts, as well as any suicidal thoughts or actions, were slightly higher for fathers, but these differences do not reach significance ($P < .10$). At $P < .05$, fathers were more likely than were young men who had not been fathers to report at least 1 form of physical or weapon-related partner violence in the past year (25% versus 16.3%); differences are not significant by parenting status for

TABLE 1—Sociodemographic Characteristics of Participants, by Gender and Current Parenting Status: Reach for Health Study, Young Adult Survey Wave, 2005–2007

	Fathers (n = 136)	Nonfathers (n = 276)	Mothers (n = 281)	Nonmothers (n = 297)
Age, y, mean	23.4	23.1**	23.2	23.0*
Race, %				
Non-Hispanic Black	75.0	74.6	74.4	75.4
Hispanic	17.6	19.2	18.1	17.8
Other	7.4	6.2	7.5	6.7
Annual household income, %				
< \$10 000	21.3	22.5	32.0	25.3**
\$10 000–\$19 999	17.6	14.1	23.5	15.5
\$20 000–\$29 999	21.3	20.7	19.6	21.2
\$30 000–\$49 999	20.6	17.8	14.9	20.2
≥ \$50 000	19.1	25.0	10.0	17.8
Employment, %				
Full time	58.1	47.1	40.2	50.8**
Part time	15.4	22.5	20.3	22.2
Unemployed	26.5	30.4	39.5	26.9
Community violence, mean (SD)	17.6 (6.4)	16.6 (6.6)	15.9 (6.7)	15.0 (6.8)
Married, %	14.0	5.8**	16.0	6.7**
Church attendance, %				
≥ 1 time per mo	23.5	19.6	23.5	26.6
At least few times per y	22.8	24.3	34.9	27.6
Not at all	53.7	56.2	41.6	45.8

Note. Total sample size was N = 990.
* $P < .05$; ** $P < .01$.

TABLE 2—Perpetration of Violence Toward Oneself, Intimate Partners, and Others, by Gender and Parenting Status: Reach for Health Study, Young Adult Survey Wave, 2005–2007

	Fathers (n = 136)	Nonfathers (n = 276)	Mothers (n = 281)	Nonmothers (n = 297)
Violence toward oneself, %				
Suicidal ideation	19.9	13.4	16.0	17.8
Suicide attempt	5.9	3.6	5.7	3.7
Any suicidal thought or behavior	20.6	13.8	16.4	18.5
Violence toward partners, %				
Physical or weapon-related	25.0	16.3*	16.4	17.8
Sexual violence	5.1	2.2	1.4	1.0
Emotional abuse	15.4	11.6	9.3	12.5
Any violence toward partners	29.4	22.1	19.9	21.5
Violence toward nonpartners, %				
Fighting	19.9	12.7	7.8	7.7
Knife and gun carrying and use	28.7	27.9	10.7	10.8
Any violence toward nonpartners	37.5	33.7	17.1	17.2

Note. Total sample size was N = 990.

* $P < .05$.

sexual or emotional partner violence, or for violence toward others. Among young women, there were no differences by parenting status in the 3 types of violence perpetration.

Relationships among these forms of violence are displayed in Table 3. Among males, violence toward oneself was significantly related to partner violence. Men who reported violence toward themselves were more likely to report violence toward their partners (odds ratio [OR]=2.17; 95% confidence interval [CI]=1.24, 3.79); this relationship was apparent among fathers (OR=3.15; 95% CI=1.33, 7.47), but not among young men who had not been fathers. Among young men who had not been fathers, violence toward partners was associated with violence toward others (OR=2.34; 95% CI=1.20, 4.18). Among young women, there were significant associations among all 3 forms of violence: young women who had perpetrated any form of violence were 2 to 4 times as likely to perpetrate another type of violence. This was especially the case for mothers. Mothers who had perpetrated violence toward partners were almost 4 times as likely to be involved in violence toward others (OR=3.91; 95% CI=1.99, 7.68) and more likely to report

violence toward themselves (OR=2.60; 95% CI=1.30, 5.21). There also was a connection between violence toward self and violence toward others (OR=3.86; 95% CI=1.90, 7.83).

Table 4 presents logistic regressions of violence toward self, partners, and others on parenting status, controlling for sociodemographics. Among males, parenting status was associated with increased likelihood of violence toward oneself (OR=1.80; 95% CI=1.03, 3.16). Parenting status was not related to violence toward partners or others. Being employed was an independent protective factor for violence toward self (OR=0.41; 95% CI=0.24, 0.73). Violence toward partners was associated with higher levels of neighborhood violence (OR=1.04; 95% CI=1.00, 1.08) and lower church attendance (OR=0.75; 95% CI=0.58, 0.97). Neighborhood violence was the only factor related to acts of perpetration toward others (OR=1.08; 95% CI=1.04, 1.12).

Among females, parenting status was not related to any of the forms of violence assessed. Being married was a risk for violence toward partners (OR=1.92; 95% CI=1.04, 3.52), and church attendance was protective against partner violence (OR=0.80; 95% CI=0.65, 0.98). As with young men, high neighborhood

violence was a predictor of violence toward others among young women (OR=1.10; 95% CI=1.06, 1.14); church attendance was protective against violence toward others.

DISCUSSION

We examined interconnections among multiple forms of perpetration of violence, including both internally directed violence and externally directed violence, among inner-city young adults, many of whom were raising children. We also considered whether parenting status was associated with violence perpetration, either positively or negatively. Two of our findings stand out. First, bivariate analyses revealed stronger associations among the 3 forms of violence for young women than for young men. Even though levels of female perpetration of violence in such communities tend to be high throughout youth and adolescence, this finding may reflect the fact that perpetration remains less normative for young women; that is, young women who respond aggressively to situations—whether inside or outside the home, and whether to themselves or to others—may be a more distinct subgroup than their male counterparts who perpetrate violence.

Our finding that multiple forms of violence are related provides opportunities to identify those at greatest risk of perpetration and to address multiple forms of violence with programs that are more comprehensive. For example, a woman who perpetrates partner violence and also continues to engage in physical fighting and weapon carrying in young adulthood might benefit from programs that address both internally directed and externally directed violence. This is especially the case for young mothers, because of the strong connections among forms of violence and their potential to negatively affect children. Among young men, the associations among forms of violence are weaker, possibly because male responses are more situationally driven. This suggests that programs directed toward young men may need to be more targeted. However, our findings also underscore the importance of paying attention to violence toward self among fathers, as well as the relation in this group between violence toward self and violence toward partners.

TABLE 3—Bivariate Relationships of Violence Perpetration Toward Oneself, Intimate Partners, and Others, by Gender and Parenting Status: Reach for Health Study, Young Adult Survey Wave, 2005–2007

	Partners, OR (95% CI)	Others, OR (95% CI)
Men (n = 412)		
Violence toward oneself	2.17** (1.24, 3.79)	1.57 (0.92, 2.69)
Violence toward partners (Ref)	1.00	1.46 (0.92, 2.31)
Fathers (n = 136)		
Violence toward oneself	3.15** (1.33, 7.47)	1.33 (0.57, 3.09)
Violence toward partners (Ref)	1.00	0.63 (0.28, 1.38)
Nonfathers (n = 276)		
Violence toward oneself	1.53 (0.71, 3.30)	1.73 (0.86, 3.46)
Violence toward partners (Ref)	1.00	2.34** (1.30, 4.18)
Women (n = 578)		
Violence toward oneself	2.18** (1.35, 3.50)	2.84*** (1.74, 4.64)
Violence toward partners (Ref)	1.00	3.38*** (2.12, 5.40)
Mothers (n = 281)		
Violence toward oneself	2.60** (1.30, 5.21)	3.86*** (1.90, 7.83)
Violence toward partners (Ref)	1.00	3.91*** (1.99, 7.68)
Nonmothers (n = 297)		
Violence toward oneself	1.86 (0.96, 3.57)	2.15* (1.08, 4.28)
Violence toward partners (Ref)	1.00	2.96** (1.55, 5.67)

Note. CI = confidence interval; OR = odds ratio. Total sample size was N = 990.

* $P < .05$; ** $P < .01$; *** $P < .001$.

Second, consistent with bivariate results, our multivariate analyses indicated that parenting status was neither positively nor negatively associated with most forms of violence among either young men or women. The sole exception was the relationship between being a father and violence toward oneself. In addition to parenting status, structural factors such as unemployment may contribute to young men's suicidal thoughts and behaviors.²² This may be because young men in economically constrained environments are not able to consistently contribute to their family's economic capital. To the extent that this is the case, addressing suicidality among young men—especially among fathers—over the long term must involve the creation of social and economic opportunities in our nation's inner cities. Our data also showed that neighborhood violence was associated with increased partner violence among young men and violence toward others for both genders. Clearly, to address multiple forms of violence, interventions must not only target young men and women at the highest risk of perpetration but also the economic and social conditions that perpetuate

violence, especially as young adults become mothers and fathers.²³

Limitations and Future Considerations

This report focuses on a sample of young adults who reported high levels of violence perpetration from middle school onward. In focusing on the interconnections among different forms of violence, we addressed limitations of previous research; however, we did not examine links between perpetration and victimization. These are considered elsewhere, especially with regard to intimate partner relationships.²⁴ That literature shows, as does ours, that young men and women report similar levels of perpetration, but it also confirms that young women suffer greater harm time and again.

We were restricted to self-reported data, so generalizability may be limited, especially with respect to populations residing outside urban areas, or even in urban areas where community levels of violence and poverty are substantially lower. The narrow age range of parents restricted our ability to examine whether young men and women who become parents later in

life (in their mid- to late twenties and beyond) are more resilient and less violent than those who become parents earlier. Also, we did not aim to identify macrolevel causes of violence perpetration; such research would require more heterogeneous samples that are more nationally representative.

Although retention in the Reach for Health study has been good, especially among young women, differential attrition by gender may influence some results. Neither young men nor women surveyed in young adulthood differed on a measure of middle school aggression from those lost to follow-up, but selective attrition bias is still possible. Our greater success in retaining women, despite our substantial extra efforts to track and survey men, is testament to the fact that women are more “tied down” in their neighborhoods, often by the obligations of child rearing.

We focused on understanding the cross-sectional associations among parenting status and multiple forms of violence, but longitudinal analyses are also needed to shed light on pathways of violence over time; violence toward oneself, partners, and others may have distinct trajectories and temporal patterns that need to be better understood to inform early interventions.

Our definition of parenting status did not take into account intensity of child rearing, including differences in role responsibilities of mothers and fathers, whether parents live with children, and other factors, such as whether grandparents or others inside or outside the home provide support. Differences in family circumstances and the perceived stresses and rewards of parenting may also influence young adult engagement in violence; these areas also merit future research.

Conclusion

A better understanding of perpetration of violence at different life stages is critical for informing violence-prevention interventions at the individual, family, community, and structural levels. Mothers and fathers in high-poverty, high-violence communities must not only adjust to parenthood; they must also cope with environmental hurdles and their own patterns of violence. Our findings indicate that being a parent does not reduce perpetration of violence for young men or women. Indeed,

TABLE 4—Logistic Regressions of Violence Toward Oneself, Intimate Partners, and Others on Parenting Status, Controlling for Sociodemographic Characteristics: Reach for Health Study, Young Adult Survey Wave, 2005–2007

	Violence Toward Oneself, OR (95% CI)	Violence Toward Partners, OR (95% CI)	Violence Toward Others, OR (95% CI)
Men (n=412)			
Parenting vs not	1.80* (1.03, 3.16)	1.52 (0.94, 2.47)	1.16 (0.74, 1.81)
Non-Hispanic Black/other	1.16 (0.61, 2.23)	1.19 (0.69, 2.06)	0.74 (0.46, 1.20)
Employed vs not	0.41** (0.24, 0.73)	0.77 (0.46, 1.28)	1.12 (0.70, 1.79)
Income	0.99 (0.81, 1.20)	0.97 (0.82, 1.14)	1.04 (0.90, 1.21)
Perceived community violence	1.03 (0.98, 1.07)	1.04* (1.00, 1.08)	1.08*** (1.04, 1.12)
Married vs not	0.16 (0.02, 1.26)	0.59 (0.21, 1.61)	0.55 (0.23, 1.32)
Church attendance	0.87 (0.65, 1.16)	0.75* (0.58, 0.97)	0.92 (0.74, 1.14)
Women (n=578)			
Parenting vs not	0.82 (0.52, 1.28)	0.85 (0.56, 1.30)	0.96 (0.61, 1.53)
Non-Hispanic Black/other	0.63 (0.39, 1.01)	0.85 (0.54, 1.35)	0.81 (0.48, 1.36)
Employed vs not	0.77 (0.48, 1.23)	1.06 (0.67, 1.67)	1.04 (0.62, 1.72)
Income	1.01 (0.86, 1.19)	1.06 (0.91, 1.23)	1.05 (0.88, 1.25)
Perceived community violence	1.01 (0.98, 1.05)	1.02 (0.99, 1.05)	1.10*** (1.06, 1.14)
Married vs not	0.99 (0.48, 2.02)	1.92* (1.04, 3.52)	0.72 (0.31, 1.71)
Church attendance	0.90 (0.73, 1.12)	0.80* (0.65, 0.98)	0.76* (0.60, 0.96)

Note. CI = confidence interval; OR = odds ratio. Total sample size was N = 990.

* $P < .05$; ** $P < .01$; *** $P < .001$.

child rearing may be a risk for violence toward oneself among fathers. Addressing the connections among multiple forms of violence in the lives of young adults is critical for the health of families and communities. ■

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Contributors

L. O'Donnell and A. Stueve conceptualized the study and supervised all aspects of its implementation. A. Myint-U assisted with the study and instrument development. A. Stueve conducted analyses, and L. O'Donnell led the writing. A. Stueve and A. Myint-U contributed to the writing of the article.

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