

# Quarterly

WINTER 2013 VOL. 7, NO. 1

## OVERVIEW

Intimacy shouldn't  
lead to injury

## REVIEW

Helping youth build  
healthy relationships

## LETTERS

Teaching mindfulness:  
Does it help children?

# Promoting healthy dating relationships





## Children's Health Policy Centre

### ABOUT THE CHILDREN'S HEALTH POLICY CENTRE

As an interdisciplinary research group in the Faculty of Health Sciences at Simon Fraser University, we aim to connect research and policy to improve children's social and emotional well-being, or children's mental health. We advocate the following public health strategy for children's mental health: addressing the determinants of health; preventing disorders in children at risk; promoting effective treatments for children with disorders; and monitoring outcomes for all children. To learn more about our work, please see [www.childhealthpolicy.sfu.ca](http://www.childhealthpolicy.sfu.ca).

### ABOUT THE QUARTERLY

In the *Quarterly*, we present summaries of the best available research evidence on children's mental health topics, using systematic review methods adapted from the *Cochrane Collaboration* and *Evidence-Based Mental Health*. The BC Ministry of Children and Family Development funds the *Quarterly*.

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Dating should be something fun that also presents positive learning opportunities. Yet for some youth, dating comes with danger. We examine the prevalence of adolescent dating violence and reveal some intriguing findings about gender differences.



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### Re-examining attention problems in children

Many children find it challenging to sit quietly and pay attention. Some find these difficulties hold them back at school, at home and in the community. To help these children thrive, we discuss successful interventions for attention-deficit/hyperactivity disorder.

### How to Cite the *Quarterly*

We encourage you to share the *Quarterly* with others and we welcome its use as a reference (for example, in preparing educational materials for parents or community groups). Please cite this issue as follows:

Schwartz, C., Waddell, C., Barican, J., Gray-Grant, D., Gatto, S., & Nightingale, L. (2012). Promoting healthy dating relationships. *Children's Mental Health Research Quarterly*, 7(1), 1–16. Vancouver, BC: Children's Health Policy Centre, Faculty of Health Sciences, Simon Fraser University.

# Intimacy shouldn't lead to injury

*Sometimes people have dangerous tempers that you don't find out about until it's too late. You should be able to trust your boyfriend or girlfriend but sometimes you can't. You date to have fun, not to get beat up.*

— Thirteen-year-old student<sup>1</sup>

Adolescence brings many exciting firsts. First day of high school. First job. First time behind the wheel. And for most young people, a first date. This date and the ones that follow give adolescents many opportunities for developing their identity, their self-confidence and their self-esteem.<sup>2</sup> Dating also gives youth the chance to redefine their relationships with family and peers. The ability to form healthy intimate relationships is therefore one of the many positive skills that typically emerge during adolescence.

When it comes to forming intimate relationships, many youth can readily identify what they want in an ideal dating partner. Intelligence, attractiveness and strong social skills are usually at the top of the list.<sup>2</sup> Sadly, however, some young people date peers who are far from their ideal. They become involved in relationships that include manipulation, verbal abuse and assault.

## When there isn't safety in numbers

How widespread is adolescent dating violence? To answer this question, we examined four large prevalence surveys in which thousands of American adolescents revealed their experiences with dating violence.

Each of the four surveys investigated physical incidents. Three reported that approximately one in 10 adolescents (or roughly 10%) experienced events such as being slapped, pushed or shoved while dating.<sup>3-5</sup> The fourth survey focused on more extreme physical violence, including injuries or threats with a dangerous weapon. Nearly two in 100 youth (1.6%) reported experiencing these more extreme events.<sup>6</sup> Clearly the numbers don't add up to keeping youth safe. Table 1 provides more details on these surveys.



The ability to form healthy intimate relationships is one of the many positive skills that typically emerge during adolescence.

## What is dating violence?

"Dating violence" refers to three forms of aggression encountered in some intimate relationships: emotional, physical and sexual abuse.<sup>7</sup> Emotional abuse can range from insults to controlling behaviours, such as limiting contact with friends. Physical violence can range from a slap to a severe beating and even death. Sexual violence includes a continuum of behaviours ranging from verbal sexual harassment to rape. As well, youth can be exploited by being pressured into having sexual relationships with adults.

**Table 1: Youth Dating Violence**

Survey (Year)*	Participants	Time Frame	Victimization Rate
Youth Risk Behavior Survey (2010–11) <sup>4</sup>	15,425 youth grades 9–12	Past 12 months	9.4% (any physical abuse)**
National Longitudinal Study of Adolescent Health (1994–95) <sup>5</sup>	7,493 youth age 12–21	Past 18 months	12% (any physical abuse)**
Commonwealth Fund Survey (1996–97) <sup>3</sup>	3,533 youth grades 9–12	"Lifetime"	9.8% (any physical abuse)†
National Survey of Adolescents (2005) <sup>6</sup>	3,614 youth age 12–17	"Lifetime"	1.6% (extreme violence)‡

\* All surveys included representative samples of American youth.  
 \*\* Not including threats.  
 † Including threats.  
 ‡ Assaults where victim was badly injured or threatened with a dangerous weapon.

In addition, three of these surveys investigated sexual and emotional violence. Between approximately one and seven youth in 100 — 0.9% in the National Survey of Adolescents<sup>6</sup> and 6.5% in the Commonwealth Fund Survey<sup>3</sup> — reported experiencing forced sexual contact. Even more youth — nearly one in three or 29% in the National Longitudinal Study of Adolescent Health — reported experiencing emotional incidents such as being insulted, cursed or threatened with violence.<sup>5</sup> Taken together, these numbers suggest that dating is indeed dangerous for many youth.

## Are same-sex relationships any safer?

Data from the National Longitudinal Study of Adolescent Health also revealed some interesting findings about homosexual dating relationships. For youth exclusively involved in same-sex relationships, approximately one in 10 reported being the victim of physical dating violence, making the overall physical victimization rates for homosexual youth (11%) and heterosexual youth (12%) almost identical.<sup>5,9</sup>

In contrast, overall rates of emotional abuse were lower for homosexual youth (21%) than for heterosexual youth (29%).<sup>5,9</sup> Nevertheless, some important gender differences emerged. For lesbian teens, rates of emotional abuse were similar to those for heterosexual teen girls (26% versus 29%).<sup>5,9</sup> However, teen boys who were gay reported being emotionally abused approximately half as frequently as heterosexual teen boys (15% versus 28%).<sup>5,9</sup> So *are* same-sex relationships safer? Based on these data, the answer is “Sometimes, but not always.”

## Girls aren't the only victims

Say the words “dating violence” and most people will visualize female victims and male perpetrators. Yet the real picture is not so clear, particularly for physical and emotional violence. Several studies have found that teen girls perpetrate these forms of abuse at similar or higher rates than teen boys.<sup>2,10</sup> Reported rates for emotional and physical victimization are also inconsistent. While some studies have found more female victims,<sup>6,11</sup> others have found no gender differences.<sup>5,12,13</sup> However, data on sexual violence are far more consistent, with most studies finding that teen girls are much more likely to be victims and teen boys the perpetrators.<sup>10,13,14</sup>

In explaining these findings, some commentators have suggested that the data may overestimate teen girls' perpetration of physical violence and underestimate teen boys'. For example, teen girls' reported physical violence may include acts of self-defence against physically abusive dating partners.<sup>10</sup> Others have speculated that teen boys may under-report their own perpetrating because they're aware that male-on-female violence is particularly socially unacceptable.<sup>15</sup>

## What about BC youth?

Although nationally representative data on Canadian youth's experiences with dating violence are lacking, regional statistics are available. The Adolescent Health Survey asked more than 29,000 BC public school students between grades 7 and 12 about their dating experiences.<sup>8</sup> Nine percent of teen boys and 6% of teen girls acknowledged being hit, slapped and physically hurt by their boyfriend or girlfriend in the past year. These rates, which are quite similar to those for American adolescents, suggest that more can be done to help Canadian youth have healthy dating relationships.

Police data tell a different story about gender. The most recent Canadian police statistics identified victimization rates for teen girls far exceeding those for teen boys — nearly 10 to one.<sup>16</sup> Reported incidents ranged from harassment and uttering threats to forcible confinement and sexual assault.<sup>16</sup> Note, however, that these data tell us nothing about the many incidents of adolescent dating violence that are *not* reported to police.

## Consistency in consequences

While prevalence studies on teen dating violence have yielded mixed results on gender differences, outcome studies have produced more consistent findings. Among the few studies that have asked about physical consequences, most (but not all)<sup>17, 18</sup> found more teen girls than boys reported sustaining an injury,<sup>19–21</sup> along with a greater numbers of injuries<sup>20</sup> and more physical pain.<sup>21</sup>

Similarly, among the few studies that examined emotional outcomes, teen girls reported more negative consequences, including being more upset<sup>13</sup> and experiencing more fear than teen boys.<sup>19</sup> As well, when asked to describe their behavioural reactions to their worst incident of dating violence, significantly more teen girls recounted crying, running away and “obeying” their partner, while significantly more teen boys reported laughing.<sup>21</sup>

Even though teen girls may suffer more harm, intervening to help both teen girls *and* teen boys is still crucial. Consequently, our review article addresses effective approaches for helping all adolescents avoid dating violence. 🤝

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## Preventing compounding problems

For many young people who experience dating violence, their first encounter with aggression doesn't actually occur on a date. For some, home is the place where the violence begins. When a young person has been maltreated by a caregiver, including having experienced neglect or having witnessed intimate partner violence, their risk for involvement in dating violence substantially increases.<sup>22–25</sup> Consequently, effective efforts to prevent child maltreatment, such as the [Nurse-Family Partnership Program](#), may help prevent children's suffering in both the short and long term. But when efforts to prevent maltreatment have not succeeded, much can still be done to help children. (Please see previous issues of the *Quarterly* on helping children [exposed to intimate partner violence](#) and other forms of child [maltreatment](#).)

For some youth, the added challenges aren't just in the past. Youth involved in dating violence also tend to experience other problems more frequently, including substance misuse,<sup>12, 14, 15, 23, 26</sup> depression,<sup>14</sup> suicidal thoughts,<sup>12</sup> and exposure to other traumas.<sup>6, 24</sup> Whether these problems are a consequence of dating violence or a risk factor remains to be determined. What is abundantly clear, however, is that many of these problems can be prevented. In previous issues of the *Quarterly*, we've identified effective ways to prevent [substance misuse](#), [depression](#) and [suicide attempts](#) as well as interventions for treating [exposure to trauma](#).

## Helping youth build healthy relationships

Going on a date shouldn't hurt. And to help make sure it doesn't, many programs have been developed to prevent dating violence. Here we set out to determine how well they work.

To identify the relevant research, we conducted a systematic review using our usual methods (detailed in the [Appendix](#)). We accepted four randomized controlled trials (RCTs) evaluating four different programs: *Ending Violence*,<sup>27</sup> *Fourth R: Skills for Youth Relationships*,<sup>28</sup> *Safe Dates Project*<sup>29–34</sup> and the *Youth Relationships Project*.<sup>35</sup>

Three programs — *Safe Dates*, *Ending Violence* and *Fourth R* (with the “R” standing for “relationships”) — were universal, delivered in high schools to all Grade 8 and/or 9 students. Meanwhile, the one targeted program — *Youth Relationships* — was delivered in community venues to adolescents identified as being at risk based on a history of child abuse. Everyone in this latter program was also receiving child protection services, with most (60%) living outside their family homes.

Two programs were delivered in Canada (*Fourth R* and *Youth Relationships*), and two were delivered in the US (*Ending Violence* and *Safe Dates*). Teen boys and girls were represented at near-equal rates in all the programs. Regarding ethnicity, in *Fourth R*, *Youth Relationships* and *Safe Dates*, participants were mainly Caucasian, although youth of African, Asian and Aboriginal descent were also represented. In comparison, 92% of *Ending Violence* participants were Hispanic.<sup>27</sup> While socio-economic status was not generally reported, most participants in *Youth Relationships* came from families with lower incomes.<sup>35</sup> As well, for *Safe Dates*, participating schools were located in regions where 40% of households had low annual incomes (below \$10,000 US in 1994).<sup>31</sup>

### Teaching more than the three Rs

All programs included educational sessions focused on teaching youth about preventing dating violence. These sessions also covered additional topics such as how to counteract negative gender stereotyping and media influences. Most programs also taught positive relationship skills, including communication and conflict-resolution techniques. Teen boys and girls typically participated in these educational sessions together. The exception was *Fourth R*, where teachers delivered the sessions to teen boys and girls separately.



Most programs taught positive relationship skills, including communication and conflict-resolution techniques.

Three programs provided additional interventions. In *Safe Dates*, students viewed a play about dating violence and participated in a contest, creating posters based on the educational sessions. In *Youth Relationships*, adolescents interviewed staff such as counsellors and police at local community organizations. They also held fundraisers for agencies serving victims of intimate partner violence. Meanwhile, *Fourth R* provided extra resources to parents and schools: parents were given an overview of the program content and schools were given a manual describing ways to involve students in preventing violence. Table 2 provides more details about these programs and their participants.

Program (Type)	Age	Delivery Location	Program Content	Comparison Condition
	Gender			
	Predominant Ethnicity			
<b>Ending Violence</b> <sup>27</sup> (Universal)	Mean: 14.4 Range: NR	Grade 9 classrooms in Los Angeles	<b>Youth</b> given three 60-minute classes on dating violence, common warning signs of abusive relationships, safety issues + legal protection for victims (taught by a lawyer)	Standard health curriculum
	48% male			
	Hispanic			
<b>Fourth R</b> <sup>28</sup> (Universal)	Mean: NR Range: 13–14	Grade 9 classrooms in rural + urban Ontario	<b>Youth</b> given 21 75-minute classes on dating violence, violence + sexuality in the media, substance use, healthy relationships + conflict resolution skills (taught by a teacher)	Standard health + physical education curriculum
	47% male		<b>Parents</b> given orientation session + four newsletters	
	Caucasian		<b>Schools</b> given manual detailing violence prevention activities	
<b>Safe Dates</b> <sup>29–31, 33, 34</sup> (Universal)	Mean: 13.9 Range: 12–17	Grade 8 + 9 grade classrooms in rural North Carolina	<b>Youth</b> given 10 45-minute classes on dating violence, gender stereotyping, healthy relationships, conflict resolution + communications skills (taught by a teacher)*	Access to domestic violence + rape crisis line + weekly support group for violence victims**
	50% male		<b>Youth</b> viewed 45-minute play on teens in a violent relationship who seek help for it	
	Caucasian		<b>Youth</b> designed posters for contest based on program content	
<b>Youth Relationships</b> <sup>35</sup> (Targeted)	Mean: 15.2 Range: 14–16	Community venues in urban, rural + semi-rural Ontario	<b>Youth</b> given 18 120-minute sessions on dating violence, violence + sexuality in the media, problem-solving + communication skills (taught by social workers [female + male])	Standard child protection services + information on community services
	48% male		<b>Youth</b> interviewed staff at community agencies	
	Caucasian		<b>Youth</b> organized a fundraiser + donated proceeds to community agencies	

NR Not reported  
 \* Three years after program was implemented, 52% of eighth-grade intervention youth were randomly chosen to receive a booster consisting of a newsletter mailout with worksheets.  
 \*\* Intervention youth also had access to these resources.

## Can dating violence be prevented?

All four evaluations assessed whether fewer youth perpetrated dating violence, a crucial primary outcome indicator for these prevention programs. Three succeeded: *Fourth R*, *Safe Dates* and *Youth Relationships* led to significantly less dating violence perpetration. All three significantly reduced physical violence, while *Safe Dates* also significantly reduced sexual violence and emotional abuse. Only *Ending Violence* failed to reduce dating violence perpetration. Table 3 provides more information about these and other outcomes.

<b>Table 3: Program Outcomes</b>		
<b>Program</b>	<b>Statistically Significant Findings</b>	<b>Non-significant Findings</b>
<b>Follow-Up</b>		
<b>Number*</b>		
<b>Ending Violence</b> <sup>27</sup>	<ul style="list-style-type: none"> <li>↑ Knowledge of laws related to dating violence</li> <li>↑ Belief in helpfulness of seeking legal advice</li> </ul>	<ul style="list-style-type: none"> <li>• Dating violence perpetration</li> <li>• Dating violence victimization</li> <li>• Fear-provoking experiences by dating partner**</li> <li>• Beliefs supporting use of dating violence</li> <li>• Belief in helpfulness of seeking support</li> <li>• Likelihood of disclosing dating violence</li> </ul>
6 months		
2,540		
<b>Fourth R</b> <sup>28</sup>	<ul style="list-style-type: none"> <li>↓ Physical violence perpetration (including threats) (7.4% intervention vs. 9.8% control)</li> </ul>	<ul style="list-style-type: none"> <li>• Perpetration of physical violence against peers</li> <li>• Problematic substance use</li> <li>• Condom use</li> </ul>
24 months		
1,722		
<b>Safe Dates</b> <sup>30, 34</sup> †	<ul style="list-style-type: none"> <li>↓ Moderate + severe physical violence perpetration‡</li> <li>↓ Sexual violence perpetration‡</li> <li>↓ Emotional abuse perpetration‡</li> <li>↓ Moderate physical violence victimization‡</li> <li>↓ Beliefs supporting use of dating violence</li> <li>↑ Belief in need for help for victims + perpetrators</li> <li>↓ Beliefs supporting stereotyped gender roles</li> <li>↑ Knowledge of community resources</li> </ul>	<ul style="list-style-type: none"> <li>• Severe physical violence victimization</li> <li>• Sexual violence victimization</li> <li>• Emotional abuse victimization</li> <li>• Conflict management skills</li> </ul>
36 months		
1,566		
<b>Youth Relationships</b> <sup>35</sup>	<ul style="list-style-type: none"> <li>↓ Physical violence perpetration (16.3% intervention vs. 29.4% control)</li> <li>↓ Emotional abuse victimization (15.7% intervention vs. 30.5% control)</li> <li>↓ Threatening behaviour victimization (15.8% treatment vs. 35.5% control)</li> <li>↓ Trauma symptoms (6.5% treatment vs. 30.3% control)</li> </ul>	<ul style="list-style-type: none"> <li>• Physical violence victimization</li> <li>• Emotional abuse perpetration</li> <li>• Threatening behaviour perpetration</li> </ul>
16 months		
158		
<p>* Number of participants included in the analyses. † Excluded youth who received booster from analyses.                      ** Including fear of physical assault, sexual coercion + sexual force. ‡ Percentages of youth with such experiences were not reported.</p>		

Victimization due to dating violence was also assessed in three of the four studies. *Safe Dates* led to significantly less “moderate” physical victimization, such as being pushed, kicked or forced out of a car. In comparison, *Youth Relationships* led to significantly less emotional abuse and threatening behaviour, such as trying to make a date jealous or frightening them; adolescents in this program also had fewer trauma symptoms related to earlier child maltreatment experiences compared to controls. In contrast, *Ending Violence* was not effective in preventing victimization. (*Fourth R* did not assess dating violence victimization.)

Two of the programs also altered adolescents’ beliefs and knowledge about dating violence. *Ending Violence* led to significantly greater knowledge of laws related to dating violence and stronger beliefs in the helpfulness of speaking to lawyers about dating violence. (There was no mention of how students would be able to pay for the services of a lawyer.) Similarly, *Safe Dates* increased students’ knowledge about community resources and strengthened their beliefs in the need for both victims and perpetrators to get help. *Safe Dates* also reduced harmful beliefs about dating violence and gender stereotypes.

## Successful programs and their common characteristics

Our review indicates that prevention programs can significantly reduce teen dating violence. However, not all programs are equally effective at changing behaviour. The three successful programs we identified — *Fourth R*, *Safe Dates* and *Youth Relationships* — were particularly intense and comprehensive, providing at least 10 wide-ranging educational sessions, including specifically teaching skills for healthy relationships. These programs also included supplemental interventions such as participating in a poster contest, watching a play on dating violence, and holding fundraisers for agencies serving victims of violence. In contrast, the one unsuccessful program — *Ending Violence* — provided only three sessions and didn’t teach relationship skills or provide supplemental interventions.

## Applying the findings

It’s particularly compelling that two of the successful programs — *Fourth R* and *Youth Relationships* — were delivered in this country, given that rigorous Canadian program evaluations are so often lacking. Their long-term success with diverse groups was also notable. *Fourth R* effectively prevented dating violence in typical high-school students. Meanwhile, *Youth Relationships* effectively did the same, but for economically disadvantaged high-risk youth who had experienced maltreatment and were in protective care. These findings suggest that prevention programs can be successfully delivered to diverse groups of Canadian youth and can also be tailored to differing levels of risk.

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*Our review indicates that prevention programs can significantly reduce teen dating violence.*

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Cost is a separate matter about which one program provided helpful information. Accounting for both materials and teacher training, *Fourth R* was provided for an estimated \$16 per student (\$19 in 2012 CDN\$) — inexpensive when compared to the costs of allowing teen dating violence to continue.<sup>28, 36</sup> 🖐

### When boosters don't bolster outcomes

The evaluators of *Safe Dates* set out to determine whether a booster, consisting of a newsletter with worksheets, could improve outcomes. To do so, they randomly provided half of their original Grade 8 sample with the booster package by mail, roughly two years after the regular program ended.

Not only did the booster fail to improve *Safe Date's* effectiveness, it actually *worsened* outcomes for youth with high levels of dating violence in two ways.<sup>35</sup> First, for students perpetrating high levels of emotional abuse, those receiving the booster reported perpetrating significantly *more* emotional abuse than those who received only *Safe Dates*. Second, for students with high levels of dating violence victimization (including emotional, physical and sexual violence), those receiving the booster reported *more* serious physical and sexual victimization than those who received only *Safe Dates*.

The program evaluators speculated that this “low intensity” booster may have prompted some students to leave abusive relationships without providing them with sufficient supports to be safe. These findings offer a worthwhile reminder that boosters should always be evaluated as they can sometimes lead to unintended negative outcomes.

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*Prevention programs can  
be successfully delivered  
to diverse groups of  
Canadian youth.*

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## Teaching mindfulness: Does it help children?

To the Editors:

The use of mindfulness techniques to treat children's mental disorders is becoming increasingly frequent. What does the research evidence tell us about the effectiveness of such techniques?

Shirley Graham  
Victoria, BC

Mindfulness typically involves being aware of one's sensations, thoughts and emotions and accepting them without judgment.<sup>37</sup> To determine whether teaching mindfulness can improve children's social and emotional well-being — or mental health — two researchers recently conducted a systematic review of the effectiveness of these techniques.<sup>37</sup>

Of 24 studies included in the review, nine used a strong research design — the randomized controlled trial (RCT). In these RCTs, mindfulness techniques were used to try to enhance a number of children's outcomes, including academic performance, self-regulation, attention, mood, anxiety and cardiovascular health. The programs were delivered in both schools and clinics. School-based programs typically had a preventative aim, while clinic-based programs generally focused on treating an existing psychological condition or reducing the risk for a stress-related physical disorder. Participants were highly diverse, ranging from children in Sri Lankan refugee camps to disadvantaged elementary-school students to families with parents in a methadone maintenance program.

Most RCTs found mixed results, with gains in some but not all outcomes. An example of a beneficial outcome was reducing attention problems. Mindfulness techniques, however, were not effective in clearly improving many other important mental health outcomes, such as anxiety (including posttraumatic stress symptoms) or behavioural problems.

The review authors cautioned that the positive findings must be tempered in view of notable limitations in most of the studies. Even the stronger RCTs had small sample sizes (ranging from 18 to 166), and most conducted only short-term assessments (with many only at post-test). The authors concluded that



The authors concluded that greater methodological rigour was needed in future studies to better evaluate the effectiveness of teaching mindfulness to children.

greater methodological rigour was needed in future studies to better evaluate the effectiveness of teaching mindfulness to children. They also strongly advised practitioners to consider mindfulness as one potential strategy among many within comprehensive and integrated evidence-based approaches. 🙌

### First, focus on root causes

When new strategies for advancing children’s mental health are introduced, they’re often met with considerable enthusiasm and attention. Sometimes the attention even captures headlines. This was the case with a mindfulness program incorporated in a Vancouver elementary school. The *Tyee* recently described how this program was being used to try to help Grade 2 and 3 students cope with “stressors” – which included living in a neighbourhood plagued with violence and poverty. As the article’s author noted, a program teaching mindful breathing and a greater awareness of the senses can only go so far when children are facing problems with basic safety, homelessness and hunger. It’s always laudable to support children who are forced to deal with tremendous adversities. However, comprehensive public health strategies must first be ensured – so that programs dealing with symptoms are not offered at the expense of interventions addressing the root causes of adversities for children.

### Contact Us

We hope you enjoy this issue.  
We welcome your letters and suggestions for future topics. Please email them to [chpc\\_quarterly@sfu.ca](mailto:chpc_quarterly@sfu.ca) or write to  
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## Research methods

For this review, we used systematic methods adapted from the *Cochrane Collaboration*<sup>38</sup> and from *Evidence-Based Mental Health*.<sup>39</sup> To identify high-quality evaluations, we first applied the following search strategy:

Table 4: Search Strategy	
<b>Sources</b>	<ul style="list-style-type: none"> <li>Campbell Collaboration Library, CINAHL, Cochrane Database of Systematic Reviews, ERIC, Medline and PsycINFO</li> </ul>
<b>Search Terms</b>	<ul style="list-style-type: none"> <li>Intimate partner violence, partner abuse, partner violence, teen dating violence, dating violence or domestic violence and prevention</li> </ul>
<b>Limits</b>	<ul style="list-style-type: none"> <li>Peer-reviewed articles published in English</li> <li>Child participants 18 years or younger</li> <li>Systematic review or randomized controlled trial (RCT) methods used</li> </ul>

Articles describing systematic reviews and RCTs were first identified and retrieved. Reference lists of systematic reviews were then scanned to identify further articles of relevance. Next we assessed all potentially relevant articles using the following inclusion criteria:

- Interventions aimed at preventing adolescent dating violence
- Clear descriptions of participant characteristics, settings and interventions
- Random assignment of participants to intervention and comparison groups at study outset
- Follow-up of three months or more (from the end of intervention)
- Maximum attrition rates of 25% at follow-up or use of intention-to-treat analysis
- One or more outcome measures assessed dating violence behaviours
- Reliability and validity of all primary outcome measures were documented
- Levels of statistical significance were reported for all primary outcome measures

Two different team members then assessed each retrieved article to ensure relevance and accuracy, reaching consensus regarding decisions about final inclusion in the review. Data were then extracted and summarized by the team. 

### For more information on our research methods, please contact

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BC government staff can access original articles from [BC's Health and Human Services Library](#).

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