

Understanding emotional teen dating violence perpetration through the Vulnerability-Stress-
Adaptation model among pregnant and parenting Latinx adolescents

by

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B.S., Kurukshetra University, 2016
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Abstract

Teen dating violence (TDV) is a significant public health concern, particularly among Latinx pregnant and parenting adolescents. Despite this elevated risk, limited research has examined the multiple factors contributing to emotional TDV perpetration in this specific population using an integrated theoretical framework. The current study utilized the Vulnerability-Stress-Adaptation (VSA) model to examine how enduring vulnerabilities (interparental conflict and depressive symptoms), a stressor (emotional TDV victimization), and an adaptive process (constructive communication and negotiation skills) are associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents.

Data were drawn from the Strengthening Relationships/Strengthening Families (SRSF), a relationship education program implemented across eight high schools in Central Texas during the 2014-2015 academic year. The analytic sample consisted of 124 Latinx pregnant and parenting adolescents (including those whose partner was pregnant) aged 14 to 19 years. Participants completed self-report measures assessing emotional TDV perpetration and victimization, interparental conflict, depressive symptoms, and constructive communication and negotiation skills. Little's MCAR test did not reject the assumption that missing data were missing completely at random, and Expectation-Maximization (EM) imputation was applied to retain the full sample of 124 participants. Hierarchical regression analyses were conducted to test the study hypotheses, with variables entered in three blocks aligned with the VSA framework: enduring vulnerabilities (Block 1), a stressor (Block 2), and an adaptive process (Block 3).

Results indicated that the final model accounted for 37.8% of the variance in emotional TDV perpetration. In Block 1, enduring vulnerabilities accounted for 11.0% of the variance, with depressive symptoms emerging as a significant predictor. In Block 2, the addition of emotional

TDV victimization significantly increased the explained variance by 25.9%, making it the strongest predictor of emotional TDV perpetration in the final model. In Block 3, constructive communication and negotiation skills did not significantly add to the model. In the final model, both depressive symptoms and emotional TDV victimization remained significant predictors of emotional TDV perpetration, while interparental conflict and constructive communication and negotiation skills did not. These findings provide partial support for the VSA model, showing a strong cross-sectional association between emotional TDV victimization and perpetration and underscoring the role of depressive symptoms as a key vulnerability factor.

The findings have important theoretical and practical implications. Theoretically, this study extends the VSA model to a novel population of Latinx pregnant and parenting adolescents, reflecting its applicability beyond traditional marital research. Practically, the results emphasize the need for relationship education programs and clinical interventions that address mental health, particularly depressive symptoms, alongside teen dating violence prevention efforts. Findings also point to the importance of culturally tailored interventions for Latinx pregnant and parenting adolescents that address the strong co-occurrence of victimization and perpetration and integrate trauma-informed approaches. Limitations of the study include the use of cross-sectional secondary data, self-report measures, and a regional sample, which limit causal inferences and generalizability. Future research should employ longitudinal designs, examine additional cultural and contextual factors, and explore protective factors that may buffer the effects of vulnerabilities and stressors on emotional TDV perpetration in this population.

Keywords: Latinx adolescents, perpetration, pregnant and parenting youth, teen dating violence, victimization, Vulnerability-Stress-Adaptation model

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Dedication

In loving memory of my grandmother, Sona Devi, and my uncle, Lecturer Balbir Singh, whose presence I carry with me still. To my parents, Raj Bala and Sultan Singh, my siblings, Devesh and Swati, and my boyfriend, Sajed, for their unwavering love and support. And to my friends, Anika, Diksha, Paul, Rehan, and Suyash, who walked this road beside me.

Chapter 1 - Introduction

During adolescence, teens initiate romantic relationships, testing emerging social-emotional skills in relationships that can be intense (Collins et al., 2009). Unfortunately, these romantic relationships are not always healthy and stable. In fact, teen dating violence (TDV) is a serious public-health concern that can impact normative development and set a trajectory toward adult intimate partner violence (Centers for Disease Control and Prevention [CDC], 2025). To illustrate, the 2021 Youth Risk Behavior Survey found that 8.5% of U.S. high-school adolescents who dated in the last year experienced physical TDV and 9.7% experienced sexual TDV (Clayton et al., 2023). These rates are even higher among pregnant and parenting adolescents, with studies finding a nearly three to five times greater likelihood of physical partner violence among pregnant adolescents compared to their non-pregnant peers (Groves et al., 2018; Tetteh et al., 2020).

Prior research has focused on physical and sexual aggression, yet up to 65% of adolescents report being psychologically abused, compared to 19% who experience physical or sexual dating violence (Abrams, 2023). These non-physical behaviors, including verbal insults, threats, controlling behavior, and monitoring (CDC, 2025), are subtle and even seem normal in adolescent romantic relationships. Even without physical harm, emotional dating violence is linked with mental-health issues such as later substance use (Basile et al., 2020), as well as anxiety, depression, and suicidal thoughts (CDC, 2025).

Despite these concerns, emotional TDV perpetration has remained underexplored compared to physical and sexual forms of TDV (Temple et al., 2016). This imbalance between prevalence and research attention represents a significant gap in the literature. Although

emotional TDV and psychological TDV are often used interchangeably in the literature, this dissertation consistently uses the term emotional TDV for conceptual clarity.

1.1 Theoretical Framework

This study is guided by the Vulnerability-Stress-Adaptation (VSA) model (Karney & Bradbury, 1995). The VSA model was developed to explain the longitudinal course of marital quality and marital stability. Since its introduction, it has been used to explore relationship outcomes across diverse populations and contexts, including IPV risk factors among women (Brunton & Dryer, 2024), relationship dissolution among unmarried parents (Duncan et al., 2024), physical aggression among newlywed couples (Langer et al., 2008), enduring vulnerabilities linked to IPV perpetration (Marshall et al., 2011), situational couple violence (Stith et al., 2011), and parental adaptation among Latino adolescent fathers (Cedeño et al., 2023). The VSA model was selected because it offers a framework in which enduring vulnerabilities, stressful events, and adaptive processes are considered jointly rather than separately, providing a useful framework for understand relationship outcomes (Karney & Bradbury, 1995). This integrated approach is well suited to examine the multiple factors that may contribute to emotional TDV perpetration.

The VSA model consists of three domains that determine relationship outcomes: enduring vulnerabilities, stressful events, and adaptive processes (Karney & Bradbury, 1995). *Enduring vulnerabilities* are the stable demographics and experiential, historical, and personality factors that individuals bring to romantic relationships, such as negative affect and factors like growing up in an unstable household and family-of-origin experiences (Karney & Bradbury, 1995). *Stressful events* are the developmental transitions, situations, and acute or chronic circumstances that partners face, placing demands on the relationship by challenging the

couple's ability to cope (Karney & Bradbury, 1995). *Adaptive processes* refer to the ways individuals and couples deal with conflicts and difficulties, including patterns of communication, conflict management, and problem-solving behaviors (Karney & Bradbury, 1995). The VSA model states that it is the combined influence of all three domains, not any one separately, that determines outcomes, primarily the quality and stability of the relationship.

Guided by this framework, the present study applies the VSA model to adolescent romantic relationships among Latinx pregnant and parenting adolescents. Although these adolescents are not married, the relational dynamics defined by the VSA model are relevant to their romantic relationships. Like adults, adolescents bring individual vulnerabilities into their relationships, face stressors within their families and romantic partnerships, and rely on adaptive processes like communication skills to navigate challenges, which could explain the mechanisms driving emotional violence perpetration. The current study uses cross-sectional data to examine the associations among vulnerabilities, stress, and adaptive processes rather than testing the full longitudinal process Karney and Bradbury (1995) described. Nonetheless, the conceptual structure of the model still provides a meaningful organized framework for understanding how these domains relate at a single point in time, consistent with other cross-sectional applications of the model (e.g., Brunton & Dryer, 2024; Marshall et al., 2011).

1.2 Statement of the Problem

The majority of TDV research has revolved around physical and sexual aggression (Basile et al., 2020; Temple et al., 2016). Emotional TDV perpetration, in particular, remains underexplored, despite evidence that psychological abuse is far more prevalent (Abrams, 2023). This gap is especially concerning given that emotional aggression can be a precursor to more

severe forms of dating violence, yet little is known about the factors that contribute to its perpetration among adolescents, particularly Latinx adolescent parents.

Latinx pregnant and parenting adolescents (i.e., adolescents who are pregnant, whose partner is pregnant, or who are currently parenting) are an important population for TDV, as they sit at the intersection of two elevated-risk groups. Pregnant and parenting adolescents experience higher rates of relationship violence than their non-parenting peers (Barber et al., 2018; Stoner et al., 2019; Tetteh et al., 2020), and Latinx adolescents experience higher rates of physical and sexual dating violence compared to their White peers (Basile et al., 2020; Fix et al., 2022; Sabina et al., 2016), suggesting a pattern of heightened exposure that likely extends to emotional forms as well. Among Latinx adolescents, family conflict has been found to be a key contributing factor to dating violence victimization (Reyes et al., 2016). For pregnant and parenting adolescents, higher rates of TDV have been related to the multiple stressors they face, including socioeconomic disadvantage, mental health challenges, and high exposure to victimization (Hodgkinson et al., 2014). Despite these risks, Latinx youth and pregnant and parenting adolescents remain underrepresented in TDV research.

Therefore, the purpose of the current study is to examine how enduring vulnerabilities (i.e., depressive symptoms and interparental conflict), stressors (i.e., emotional TDV victimization), and adaptive processes (i.e., constructive communication and negotiation skills) relate to emotional TDV perpetration among Latinx adolescents who are pregnant, whose partner is pregnant, or who are currently parenting. In the present study, interparental conflict is conceptualized as an enduring vulnerability, reflecting the family-of-origin nature of exposure to parental conflict and its role in shaping the relational schemas and conflict patterns adolescents carry into their romantic relationships (Capaldi et al., 2012; Kinsfogel & Grych, 2004). Although

it could alternatively be framed as a current stressor, the present study treats it as an enduring vulnerability.

1.3 Hypotheses

Based on the VSA framework and the existing literature reviewed above, the following hypotheses guide the study:

Hypothesis 1: Depressive symptoms (i.e., an enduring vulnerability) will be positively associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents.

Hypothesis 2: Interparental conflict (i.e., an enduring vulnerability) will be positively associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents.

Hypothesis 3: Emotional TDV victimization (i.e., a stressor) will be positively associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents.

Hypothesis 4: Constructive communication and negotiation skills (i.e., an adaptive process) will be negatively associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents.

By examining these domains within Latinx pregnant and parenting adolescents, this study seeks to address gaps in existing TDV research. Specifically, it examines enduring vulnerabilities, stressors, and adaptive processes (i.e., depressive symptoms, interparental conflict, emotional TDV victimization, and constructive communication and negotiation skills), and their association with emotional TDV perpetration. This approach has the potential to advance the theoretical understanding of emotional TDV perpetration pathways and to inform

prevention and intervention strategies aimed at fostering healthier romantic relationships for Latinx pregnant and parenting adolescents.

1.4 Significance of the Study

This study contributes to the TDV literature in four key ways. First, it centers on emotional TDV perpetration, a highly prevalent, but often unexplored, domain compared to physical TDV. Second, the study focuses on the Latinx adolescent population, an important group to examine because they face higher rates of dating violence compared to their peers (Basile et al., 2020; Fix et al., 2022; Sabina et al., 2016). Yet, despite these elevated risks, Latinx adolescents remain underrepresented in TDV research, limiting the ability to design culturally and contextually responsive prevention strategies. Third, it advances the theoretical understanding of TDV by applying the VSA model to emotional TDV perpetration among pregnant and parenting adolescents, a group that has been underrepresented in previous research. Fourth, the study offers clear translational relevance. By identifying the association between these domains and emotional TDV perpetration, the findings can inform prevention and intervention strategies tailored for young parents.

Chapter 2 - Literature Review

Teen dating violence (TDV) is a public health concern with lasting effects on adolescents' psychological and relational development (Basile et al., 2020; Exner-Cortens et al., 2021; Temple et al., 2016). Psychological aggression, such as manipulation, verbal abuse, and controlling behaviors, is common among U.S. teens, often preceding or co-occurring with physical violence, increasing the risks of relationship issues (Temple et al., 2016; Wincentak et al., 2017). Among middle school youth in high-risk urban communities, over three-quarters reported perpetrating verbal or emotional dating aggression, highlighting its widespread nature and harmful effects (Niolon et al., 2015). Importantly, prevalence rates vary significantly across adolescent populations. To illustrate, studies of pregnant and parenting Latinx adolescents demonstrate especially high rates of emotional TDV, ranging from 84–86% (Newman & Campbell, 2011; Toews & Yazedjian, 2014).

Recent studies further highlight that TDV is disproportionately high among Latinx adolescents, reinforcing the urgent need for culturally sensitive prevention efforts. Multiple national studies consistently show that Hispanic high school students reported some of the highest rates of physical and sexual TDV across racial/ethnic groups, with Latinx adolescents experiencing an increase in TDV prevalence over time (Basile et al., 2020; Fix et al., 2022; Sabina et al., 2016). At the family level, lower cohesion and higher conflict have been shown to predict dating violence victimization among Latinx youth (Reyes et al., 2016). Longitudinal findings reinforce these disparities. In the DAVILA study, nearly one in five Latinx adolescents experienced dating violence across two waves of data collection, a prevalence notably higher than nationally representative mixed-ethnicity samples (Sabina et al., 2016). Additional research confirms elevated rates of psychological TDV and overlaps with other victimization experiences

among Latino youth, suggesting that exposure to dating aggression in this population is both prevalent and multifaceted (Sabina et al., 2016).

Despite this consistent evidence of elevated risk, research on TDV among Latinx populations remains limited in both scope and focus. Prevention research has largely overlooked Latinx youth, and existing studies on dating violence in Latinx communities have primarily examined adult women rather than adolescents (Cuevas et al., 2012; Malhotra et al., 2015; Sabina et al., 2015a). Guided by the Vulnerability-Stress-Adaptation model (Karney & Bradbury, 1995), this literature review examines correlates of emotional TDV perpetration across three domains: enduring vulnerabilities (i.e., depressive symptoms and witnessing interparental conflict), stressors (i.e., emotional TDV victimization), and adaptive processes (i.e., constructive communication and negotiation skills).

2.1 Depressive Symptoms as Enduring Vulnerability

The literature clearly demonstrates a scholarly debate about the temporal ordering between depressive symptoms and TDV. Earlier studies indicated that TDV involvement contributes to later depressive symptoms, particularly among adolescents who experience dating violence victimization (Ackard et al., 2007; Exner-Cortens et al., 2013; Foshee et al., 2013; Roberts et al., 2003). More recent U.S. research has reinforced this association, with TDV victimization remaining significantly linked to depressive symptoms in contemporary adolescent samples (Thulin & Heinze, 2026). These studies suggest that TDV may operate as a stressor that increases vulnerability to internalizing symptoms over time. However, existing longitudinal evidence predominantly supports depressive symptoms as an antecedent to TDV rather than a consequence. Studies utilizing longitudinal designs consistently find that depressive symptoms predict subsequent dating violence perpetration, but dating violence does not reliably predict

later depressive symptoms (e.g., Foshee et al., 2010; Lawrence et al., 2025; Psychogiou et al., 2023; Yu et al., 2018). This pattern was further supported by McCloskey and Lichter (2003), who found that elevated depression among girls mediated the link between family violence exposure and dating aggression, showing that depressive symptoms play an important role in pathways to dating violence. The depression-perpetration link also extends beyond adolescence. Multiple meta-analyses and systematic reviews of the adult IPV literature consistently demonstrate that depression is associated with elevated IPV perpetration risk for both men and women (Oram et al., 2014; Saunders et al., 2023; Spencer et al., 2019), suggesting this vulnerability persists across developmental stages.

In addition to general adolescent populations, research has also examined specific subgroups such as pregnant and parenting teens, who experience unique vulnerabilities. Research consistently shows that pregnant and parenting adolescents experience disproportionately high rates of both depressive symptoms and dating violence (Hodgkinson et al., 2010; Wiemann et al., 2000). Across this population, the available research consistently indicates that depressive symptomatology tracks with dating violence involvement regardless of whether adolescents are the victim, perpetrator, or both (Lewis et al., 2017; Thomas, 2019; Wallace et al., 2025). These findings demonstrate the heightened vulnerability of adolescent parents, for whom depressive symptoms may function as an enduring vulnerability that contributes to dating violence. However, few studies differentiate emotional aggression from other forms of TDV, particularly in this population, limiting understanding of whether depressive symptoms uniquely predict emotional TDV perpetration among pregnant and parenting adolescents.

Similarly, Latinx adolescents represent another subgroup at elevated risk for both depressive symptoms and TDV. For instance, depression has been found among Latino teen

victims of dating violence, demonstrating the psychological toll of TDV in this group (Sabina et al., 2022). Yet evidence specific to Latinx youth remains limited. Although broader adolescent samples show that depressive symptoms are associated with TDV victimization and perpetration (e.g., Volpe et al., 2012), parallel work in Latinx samples is scarce, particularly for emotional aggression. Moreover, the available Latinx-focused studies focus on victimization rather than perpetration, with limited research establishing temporal ordering between depressive symptoms and TDV (Sabina et al., 2022).

It is also important to note that the majority of existing studies examining the association between depressive symptoms and TDV have focused on physical or sexual aggression, with considerably fewer investigations addressing emotional dating violence (Shorey et al., 2008; Wincentak et al., 2017). This limits current understanding of the relationship between depressive symptoms and emotional TDV perpetration, despite evidence that emotional aggression is highly prevalent and has significant developmental consequences (Exner-Cortens et al., 2021; Temple et al., 2016). Recognizing depressive symptoms as an enduring vulnerability provides a critical opportunity for targeted prevention efforts. Interventions addressing depressive symptoms among adolescents may help reduce subsequent emotional abuse in dating relationships, particularly given the need to extend prevention efforts beyond physical forms of TDV to emotional abuse. Guided by the VSA model (Karney & Bradbury, 1995), which identifies enduring vulnerabilities such as psychopathology as key influences on relationship outcomes, the present study examines whether depressive symptoms are associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents.

2.2 Interparental Conflict as an Enduring Vulnerability

Within the VSA framework (Karney & Bradbury, 1995), interparental conflict represents an enduring vulnerability, a stable characteristic rooted in the family-of-origin that adolescents carry into their own romantic relationships, shaping how they navigate relational dynamics. A consistent body of research demonstrates that exposure to interparental conflict, whether chronic, frequent, or characterized by hostility, creates developmental contexts that heighten risk for TDV (Kinsfogel & Grych, 2004; Morris et al., 2015; Temple et al., 2013). To illustrate, longitudinal studies have found strong evidence that interparental aggression in the family-of-origin is linked to both perpetration and victimization of TDV, with effects that extend from adolescence into adulthood (Cui et al., 2010; Espinoza et al., 2024; Morris et al., 2015; Temple et al., 2013). Moreover, cross-sectional studies reinforce this longitudinal evidence. Witnessing interparental violence has been associated with both psychological and physical TDV victimization (Karlsson et al., 2016), and boys exposed to high levels of interparental conflict appear particularly vulnerable to engaging in aggression with dating partners (Kinsfogel & Grych, 2004). It is important to note that these associations hold across ethnic groups, with multiple dimensions of interparental conflict, including verbal aggression, poor conflict resolution, and physical violence, predicting both dating violence perpetration and victimization among Latinx and White adolescents (Tschann et al., 2009).

Although interparental conflict is a robust predictor of TDV across diverse adolescent populations, its role among Latinx pregnant and parenting adolescents remains understudied, a critical gap given that both populations face elevated TDV rates (Basile et al., 2020; Fix et al., 2022; Hodgkinson et al., 2014; Sabina et al., 2016). Recent studies on Latinx adolescents have examined acculturation, discrimination, and cultural factors in relation to dating violence (Huerta

et al., 2025; Perez et al., 2025), but interparental conflict has not been included in these analyses. This omission is notable because pregnant and parenting Latinx adolescents report high rates of dating aggression perpetration (Toews & Yazedjian, 2014), and family conflict predicts dating violence victimization among Latino youth (Reyes et al., 2016). Further research is therefore needed to clarify whether interparental conflict, as an enduring vulnerability, contributes to emotional TDV perpetration in this population.

2.3 Emotional TDV Victimization as a Stressor

Emotional (or psychological) TDV comprises non-physical acts such as belittling, name-calling, humiliation, threats, social isolation, or coercive control that erode a partner's self-worth (Exner-Cortens et al., 2021). Across national surveys, emotional TDV consistently emerges as the most prevalent form of dating abuse among adolescents, far exceeding rates of physical and sexual violence (Exner-Cortens et al., 2021; Gabster et al., 2023; Taylor & Mumford, 2016). Lifetime prevalence estimates for emotional victimization exceed 60% among U.S. adolescents in dating relationships, with perpetration rates at similar levels, and Panamanian adolescents reporting comparable rates of 61.6% for girls and 73.4% for boys (Gabster et al., 2023; Taylor & Mumford, 2016). Past year estimates, while lower, remain substantial, with 27.8% of Canadian adolescents reporting emotional aggression victimization in the previous 12 months (Exner-Cortens et al., 2021). Across all samples, emotional abuse consistently surpasses physical aggression by a wide margin. Thus, emotional TDV is a widespread and distinct public-health concern.

Moreover, the literature robustly supports the reciprocal nature of emotional TDV, illustrating victimization as a critical stressor linked to subsequent perpetration. Cross-sectional studies consistently demonstrate that adolescents who are victimized are markedly more likely to

perpetrate the same behaviors, illustrating the cyclical nature of emotional aggression across diverse contexts (Fernández-Fuertes & Fuertes, 2010; Muñoz-Rivas et al., 2021; Paat et al., 2020; Taylor & Mumford, 2016). Strong correlations between psychological victimization and perpetration have also been documented across Spanish, Mexican, and U.S. adolescent samples, suggesting this pattern is not limited to a single cultural context (Fernández-Fuertes & Fuertes, 2010; Muñoz-Rivas et al., 2021; Paat et al., 2020). Therefore, the results consistently reveal strong, positive associations between being emotionally victimized and engaging in emotional TDV perpetration.

Longitudinal studies support temporal ordering consistent with victimization preceding perpetration. Across multi-wave designs spanning four to seven years in Spanish, Quebec, and U.S. samples, emotional TDV victimization consistently emerges as a significant predictor of subsequent emotional TDV perpetration (Fernández-González et al., 2020; Lapierre et al., 2019; Orpinas et al., 2012). Reciprocal influences between victimization and perpetration have been demonstrated over time, with victimization predicting subsequent perpetration across four annual measurement points in a sample of 991 Spanish high school adolescents and across three waves in a Quebec sample (Fernández-González et al., 2020; Lapierre et al., 2019). Similarly, trajectory analyses across U.S. and Canadian samples revealed that up to 40% of adolescents fell into increasing victimization/increasing perpetration groups over time, and victimization at baseline was the only factor that differentiated adolescents who perpetrated psychological violence from those who did not (Lapierre et al., 2019; Orpinas et al., 2012). Further, across six years of annual assessments among diverse high school students in Southeast Texas, both prior emotional perpetration and prior victimization were significant predictors of future TDV perpetration even when accounting for prior perpetration (Cohen et al., 2018).

Within the VSA model (Karney & Bradbury, 1995), emotional TDV victimization can be conceptualized as a stressful event within adolescent dating relationships. The cyclical pattern whereby emotional TDV victimization is associated with subsequent perpetration highlights the importance of understanding this association, and based on previous research, the present study positions victimization as a stressor that may be associated with perpetration of emotional TDV. Recognizing this cycle emphasizes the need for prevention programs that address both victimization and perpetration simultaneously given their deeply interconnected nature (Muñoz-Rivas et al., 2021; Paat et al., 2020). Guided by the VSA model (Karney & Bradbury, 1995), the present study examines whether emotional TDV victimization is associated with emotional TDV perpetration in a sample of Latinx pregnant and parenting adolescents.

2.4 Communication and Negotiation Skills as an Adaptive Process

In the VSA model, adaptive processes capture how individuals respond behaviorally to the challenges that arise within a relationship, such as disagreements, unmet expectations, and emotional demands (Karney & Bradbury, 1995). The present study treats constructive communication and negotiation skills as an adaptive process and tests whether these skills are directly associated with emotional TDV perpetration. Constructive communication and negotiation skills (e.g., actively listening, working together without hostility during disagreements) reflect adaptive responding because they allow partners to address disagreements without resorting to harm. However, hostile communication responses (e.g., personal attacks, criticism, coercive demands) reflects maladaptive processes that can lead to aggression. Within adolescent romantic relationships, destructive conflict styles (e.g., hostile responses to disagreement, negative escalation, or withdrawal) consistently distinguish adolescents who perpetrate dating violence from those who do not, whereas constructive problem-solving

approaches less reliably differentiate the groups (Bonache et al., 2016; Fernet et al., 2016).

Although destructive conflict behaviors and emotional TDV perpetration can overlap empirically, they are conceptually distinct: destructive conflict styles describe how adolescents respond during disagreement, while emotional TDV perpetration involves the use of behaviors that intentionally degrade, control, or harm a partner. This pattern suggests that the presence of destructive interaction strategies may be more predictive of TDV perpetration risk than the absence of constructive ones. In other words, when adolescents lack the strategies to resolve conflicts constructively, disagreements are more likely to escalate into emotional aggression.

Substantial evidence supports the protective role of constructive communication and negotiation skills against dating violence perpetration. Research examining communication dynamics in adolescent dating relationships consistently links destructive communication to greater aggression and constructive skills to lower perpetration (Cornelius et al., 2010; Fernet et al., 2016; Spencer et al., 2021). The clearest support comes from a meta-analysis by Spencer et al. (2021) that identified conflict resolution skills as a protective factor against physical TDV perpetration across 37 studies. In other words, adolescents who relied on constructive negotiation strategies, such as compromise, were significantly less likely to resort to violent responses during romantic conflict.

Evidence for the protective association extends beyond compromise to broader relational skills. Fortin et al. (2021) found that Quebec adolescents with higher relational skills (i.e., assertiveness, support, and individuality) reported lower levels of dating violence perpetration compared to those who reported using violence in their relationships. Claussen et al.'s (2022) systematic review of reviews underscored the centrality of conflict-related skills in this literature, identifying conflict resolution skills as one of the few individual-level protective factors for TDV

perpetration across prior reviews, while also emphasizing the scarcity of well-established individual-level protective factors relative to the much larger evidence base on risk factors. Importantly, however, both Fortin et al. (2021) and Claussen et al. (2022), like much of the broader TDV literature, examined undifferentiated or physical dating violence rather than emotional TDV perpetration specifically. Direct evidence for the protective role of constructive communication and negotiation skills against emotional TDV perpetration, therefore, remains comparatively limited, a gap the present study seeks to address.

Intervention research converges with correlational evidence but also raises questions about how long the protective effects of these skills persist over time. Skills-based programs that teach respectful communication and non-violent conflict resolution have produced significant reductions in both emotional and physical dating violence, with a cluster-randomized trial documenting a meaningful reduction in violence outcomes at 12-month follow-up (Levesque et al., 2016). Earlier program evaluations reveal a more complex picture in which improvements in conflict-related skills can persist well past the end of an intervention even as the short-term reductions in dating violence behaviors fade. This pattern suggests that learning the skills and continuing to use them under relationship stress are not the same thing (Foshee et al., 2000). These findings indicate that adolescents can learn and retain constructive communication and negotiation skills through structured programs, and that doing so produces measurable reductions in dating violence. However, they also suggest that the protective effects on behavior may not be self-sustaining. Strengthening adolescents' constructive communication and negotiation skills is therefore a practical, evidence-supported target for prevention, while the durability question highlights the value of booster components designed to translate skill retention into sustained behavior change.

Longitudinal and qualitative evidence further supports the protective role of these skills. Among adolescents in high-risk situations, including pregnant and parenting youth, stronger conflict resolution skills at one point in time predicted lower levels of verbally and physically abusive perpetration months later, reinforcing the idea that investing in these skills has long-term protective potential (Goodcase et al., 2020). Qualitative work with teen parents highlights the same pattern. In focus groups, participants frequently identified lack of communication skills as a central driver of ongoing relationship conflict in their dating relationships, characterizing their disagreements as patterns of escalation rather than resolution (Herrman et al., 2019). Quantitative evidence from a different sample mirrors this qualitative pattern, where positive conflict resolution (e.g., staying calm, discussing disagreements calmly, and compromising) was moderately and negatively associated with verbal-emotional abuse perpetration in adolescents (Antônio & Hokoda, 2009). This is the only study in the reviewed literature that directly tested constructive conflict resolution against emotional TDV perpetration in an adolescent sample, making it particularly consequential for the present study. Guided by the VSA model (Karney & Bradbury, 1995), the present study examines whether constructive communication and negotiation skills are associated with emotional TDV perpetration.

2.5 Current Study

The current study uses the VSA model (Karney & Bradbury, 1995) to examine emotional TDV perpetration among Latinx pregnant and parenting adolescents. Specifically, this study examines how enduring vulnerabilities (i.e., interparental conflict and depressive symptoms), stressors (i.e., emotional TDV victimization), and adaptive processes (i.e., constructive communication and negotiation skills) are associated with emotional TDV perpetration. Evidence consistently indicates associations between adolescent depressive symptoms and

increased involvement in dating violence, though research has mainly concentrated on physical and sexual aggression rather than emotional TDV (Psychogiou et al., 2023; Wincentak et al., 2017; Yu et al., 2018). Prior research demonstrates interparental conflict as both an enduring vulnerability, with historical exposure to interparental hostility shaping how adolescents navigate their romantic relationships, and as a stressor, with ongoing interparental conflict placing additional demands on adolescents' relational functioning. In both cases, adolescents exposed to high levels of interparental hostility are at increased risk of engaging in dating violence (Espinoza et al., 2024; Morris et al., 2015). As a stressful event within the VSA model, emotional TDV victimization places direct demands on the relationship and is considered a significant predictor of emotional perpetration (Cohen et al., 2018; Fernández-González et al., 2020). Constructive communication and negotiation skills, conceptualized as an adaptive process within the VSA model, represent protective strategies adolescents may draw upon during relationship conflict. Existing research has shown that adolescents who use positive communication and negotiation skills are significantly less likely to perpetrate dating violence (Spencer et al., 2021) and verbal aggression (Goodcase et al., 2020).

The study focuses on Latinx pregnant and parenting adolescents because they sit at the intersection of two elevated-risk populations. Pregnant and parenting adolescents experience higher rates of relationship violence than their non-parenting peers (Barber et al., 2018; Stoner et al., 2019; Tetteh et al., 2020), with emotional aggression particularly prevalent in this group (Newman & Campbell, 2011; Toews & Yazedjian, 2014). Latinx adolescents similarly experience elevated rates of TDV compared to peers from other racial/ethnic groups (Basile et al., 2020; Fix et al., 2022; Sabina et al., 2016). Examining these intersecting populations together

allows the present study to address a group at heightened risk that remains understudied in TDV research.

Although the reviewed literature identifies consistent predictors of TDV, important gaps remain that the present study addresses. First, emotional TDV is often measured in combination with physical and sexual aggression, which obscures the specific mechanisms related to emotional abuse; the present study isolates emotional TDV perpetration as the primary outcome to address this measurement gap. Second, relatively few studies examine these constructs in the context of pregnant and parenting adolescents, a population at elevated risk that remains underrepresented in TDV research. Third, Latinx adolescents have been historically underrepresented in TDV research despite experiencing elevated rates of dating violence (Basile et al., 2020; Fix et al., 2022; Sabina et al., 2016); centering a Latinx sample helps begin to address this gap. Addressing these three gaps simultaneously, the present study examines how enduring vulnerabilities (depressive symptoms and interparental conflict), a stressor (emotional TDV victimization), and an adaptive process (constructive communication and negotiation skills) are associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents. By examining all three VSA domains simultaneously in this understudied population, the present study aims to advance theoretical understanding of emotional TDV perpetration and inform culturally responsive prevention and intervention efforts tailored to Latinx adolescent parents.

Chapter 3 - Method

The current study used secondary data from the Strengthening Relationships/ Strengthening Families (SRSF) dataset, collected during the 2014 to 2015 academic year. The original study recruited adolescents who were pregnant, whose partner was pregnant, or who were currently parenting (ages 14 to 19) from eight high schools located in Central Texas. All participants were enrolled in a relationship education program at the time of data collection. Data were collected via pencil and paper questionnaires after parental consent and adolescent assent were obtained. No incentives were provided to participants at the baseline data collection.

Initially, 172 adolescents completed the baseline questionnaire. Participants were included in the current study if they reported having a current or recent dating partner and were 14 to 19 years old. This resulted in an initial analytic sample of 134 adolescents. Because this study focused on Latinx pregnant and parenting adolescents, participants who did not identify as Latinx ($n = 10$) were removed from the dataset, resulting in a final analytic sample of 124 Latinx adolescents. Demographically, participants ranged in age from 14 to 19 years old ($M = 16.59$, $SD = 1.06$). Of the 124 participants, 94 identified as female (75.8%) and 30 (24.2%) identified as male. Of those who reported pregnancy status, 40 (33.1%) were expecting a child (themselves or their partner) and 81 (66.9%) were already parenting (3 participants did not report pregnancy status). Descriptive statistics for the continuous study variables are presented in Table 3.1, and frequencies for the categorical demographic variables are presented in Table 3.2.

Table 3.1
Descriptive Statistics for Continuous Variables

Variable	N	M	SD	Range
Age (years)	124	16.59	1.06	14-19
Interparental conflict (CPICS)	124	33.07	8.44	19-52
Depressive symptoms (CES-D)	124	19.92	8.40	0-41
Emotional TDV victimization (CADRI)	124	7.47	6.83	0-25
Communication and negotiation skills (PCI)	124	44.76	10.61	15-63
Emotional TDV perpetration (CADRI)	124	7.19	5.71	0-22

Table 3.2
Frequencies of Categorical Variables

Variable	Category	n	%
Sex	Male	30	24.2
	Female	94	75.8
Pregnancy Status	Pregnant	40	33.1
	Parenting	81	66.9

Note. $N = 124$. Pregnancy status was not reported by 3 participants; percentages for pregnancy status are based on $n = 121$.

3.1 Measures

3.1.1 Depressive Symptoms

Depressive symptoms were assessed using the 20-item Center for Epidemiologic Studies Depression Scale (CES-D; Radloff, 1977). The CES-D was selected because it is ideal for capturing depressive symptomatology, demonstrating consistently strong psychometric support and reliable use in diverse populations, including adolescents (Radloff, 1977). Participants indicated how often they experienced symptoms such as “I felt depressed” over the past week, using a 4-point scale ranging from 0 (rarely, less than 1 day) to 3 (most of the time, 5 - 7 days). Four items were reverse-coded so that higher scores reflected greater depressive symptomatology. The final score was calculated as the sum of all items ($\alpha = .85$, $M = 19.92$, $SD = 8.40$). Reverse-coded items are detailed in Appendix A, Table A-1.

3.1.2 Interparental Conflict

Interparental conflict was assessed using the 19-item Conflict-Properties subscale of the Children’s Perception of Interparental Conflict Scale (CPICS; Grych et al., 1992). The CPICS has demonstrated strong psychometric properties, including excellent internal consistency and construct validity across diverse adolescent samples (Bickham & Fiese, 1997; Grych et al., 1992). Items such as “I often see my parents arguing” were rated on a 3-point scale: 1 (true) to 3 (false). Eleven items were reverse-coded so that higher total scores reflected higher interparental conflict ($\alpha = .91$, $M = 33.07$, $SD = 8.44$). Details of reverse-coded items are provided in Appendix A, Table A-2.

3.1.3 Emotional Teen Dating Violence Perpetration and Victimization

Adolescents’ emotional TDV perpetration and victimization were assessed using the Conflict in Adolescent Dating Relationships Inventory (CADRI; Wolfe et al., 2001), specifically

the Verbal/Emotional Perpetration and Victimization subscales. The CADRI was selected due to its strong psychometric properties, including high internal reliability and applicability across diverse cultural contexts and adolescent populations (Fernández-Fuertes & Fuertes, 2010; Shorey et al., 2019; Temple et al., 2016). Each subscale includes 10 parallel items addressing emotional and verbal violence.

For perpetration, participants reported how often they engaged in behaviors such as "I did something to make my partner feel jealous." For victimization, participants indicated how often they experienced emotionally violent behaviors from their partner, such as "My partner said things just to hurt my feelings." Items for both perpetration and victimization were rated using a 4-point scale from 0 (never) to 3 (often). Higher total scores indicated greater frequency of emotional TDV perpetration ($\alpha = .82$, $M = 7.19$, $SD = 5.71$) and victimization ($\alpha = .89$, $M = 7.47$, $SD = 6.83$). Detailed item content for perpetration and victimization can be found in Appendix A, Tables A-5 and A-3, respectively.

3.1.4 Constructive Communication and Negotiation Skills

Communication and negotiation skills were assessed using the 32-item Revised Premarital Communication Inventory (PCI; Bienvenu, 1975). The Revised PCI was utilized due to its strong psychometric validation in assessing communication patterns, conflict resolution, and negotiation skills within romantic relationships. Items such as "Do you and your partner discuss your differences?" were rated as 0 (no), 1 (sometimes), and 2 (yes). Eighteen items were reverse-coded so that higher total scores consistently reflected more constructive communication and negotiation abilities ($\alpha = .89$, $M = 44.76$, $SD = 10.61$). The list of reverse-coded items is provided in Appendix A, Table A-4.

3.1.5 Covariates

Three demographic variables were considered as potential covariates: age (continuous), sex (male or female), and pregnancy status (expecting or parenting). Each was examined for its bivariate association with emotional TDV perpetration prior to the primary analyses to determine whether it should be included in the regression model.

3.2 Data Analysis Plan

Initially, 134 adolescents met the study's inclusion criteria, meaning they were between the ages of 14 and 19 and reported having a current or recent dating partner. Non-Latinx participants ($n = 10$) were removed to focus particularly on Latinx adolescents, resulting in 124 participants. Scale scores were computed for participants who completed at least 80% of the items on a given scale, ensuring that each score was based on sufficient item-level data.

Given the minimal amount of missing data (approximately 3.2% on one variable), Little's MCAR test was performed to determine whether the data were missing completely at random. The test was non-significant, $\chi^2(4) = 0.362$, $p = .985$, indicating that the assumption that data were missing completely at random was not rejected. Because missingness was minimal and the MCAR assumption was not rejected, Expectation-Maximization (EM) imputation was used to fill in missing values, thereby restoring the full sample size ($N = 124$) for analysis. All subsequent descriptive statistics, correlation analyses, and regression analyses utilized this EM-imputed dataset.

The analytical process began with descriptive statistics to provide a general overview of the sample characteristics and distributions of key variables. Next, bivariate Pearson correlations were computed to examine preliminary relationships among the study variables. Finally, hierarchical regression analyses were conducted to test the primary study hypotheses, guided by

the VSA model (Karney & Bradbury, 1995). Emotional TDV perpetration was set as the dependent variable. In Block 1, enduring vulnerabilities (interparental conflict and depressive symptoms) were entered. In Block 2, stressful events (emotional TDV victimization) were added. In Block 3, the adaptive process (constructive communication and negotiation skills) was included. The hierarchical regression approach allowed for examining the contribution of each VSA domain to the prediction of emotional TDV.

Chapter 4 - Results

This chapter presents the results of the data analyses conducted to examine how enduring vulnerabilities, a stressor, and adaptive processes are associated with emotional teen dating violence (TDV) perpetration among Latinx pregnant and parenting adolescents. Guided by the VSA model (Karney & Bradbury, 1995), the analyses were organized into four sections: preliminary analyses, descriptive statistics, bivariate correlations, and hierarchical multiple regression.

4.1 Preliminary Analyses

Prior to conducting the preliminary analyses, data were screened for missing values. Out of the 134 participants who met the initial inclusion criteria (i.e., were 14 to 19 years old and reporting having a current or recent dating partner), 10 non-Latinx participants were removed to focus only on Latinx adolescents, yielding a final sample of 124 participants. Scale scores were computed for participants who completed at least 80% of the items on a given scale, ensuring that each score was based on sufficient item-level data.

Missing data were minimal, with only four cases (3.2%) missing on one variable (interparental conflict). All other primary analytic variables had complete data. Little's MCAR test was non-significant, $\chi^2(4) = 0.362$, $p = .985$, indicating that the assumption that data were missing completely at random was not rejected. Because missingness was minimal and the MCAR assumption was not rejected, Expectation-Maximization (EM) imputation was used to estimate the missing values, retaining the full sample of 124 participants for all subsequent analyses.

Multicollinearity among the predictor variables was assessed using variance inflation factor (VIF) and tolerance statistics. In the final regression model, all VIF values were below 2.0

(ranging from 1.061 to 1.605) and all tolerance values exceeded 0.60 (ranging from 0.623 to 0.942), indicating no multicollinearity concerns among the predictor variables.

Prior to preliminary analyses, three demographic variables (age, sex, and pregnancy status) were examined as potential covariates. As shown in Table 4.1, none was significantly correlated with emotional TDV perpetration (age, $r = -.15$, $p = .089$; sex, $r = .09$, $p = .330$; pregnancy status, $r = -.08$, $p = .415$). These variables were therefore not included in the hierarchical regression analyses.

Table 4.1
Correlations Between Demographic Covariates and Emotional TDV Perpetration

Covariate	<i>r</i> with perpetration	<i>p</i> value
Age	-.15	.089
Sex	.09	.330
Pregnancy status	-.08	.415

Note. $N = 124$; $n = 121$ for pregnancy status due to missing data. Coefficients for sex and pregnancy status are point-biserial.

4.2 Descriptive Statistics

The final sample consisted of 124 Latinx pregnant and parenting adolescents ranging in age from 14 to 19 years ($M = 16.59$, $SD = 1.06$). Approximately 76% of the participants identified as female ($n = 94$) and 24% as male ($n = 30$). The majority were parenting ($n = 81$, 66.9%); the remaining 33.1% ($n = 40$) were expecting a child (themselves or their partner). Detailed demographic frequencies are presented in Table 3.2.

Means, standard deviations, and observed ranges for all continuous variables are presented in Table 3.1. On average, participants reported emotional TDV perpetration ($M = 7.19$, $SD = 5.71$) and victimization ($M = 7.47$, $SD = 6.83$) as measured by the CADRI emotional/verbal

subscale. Participants also reported depressive symptoms on the CES-D ($M = 19.92$, $SD = 8.40$), perceived interparental conflict on the CPICS ($M = 33.07$, $SD = 8.44$), and constructive communication and negotiation skills on the Revised PCI ($M = 44.76$, $SD = 10.61$).

4.3 Bivariate Correlations

Pearson bivariate correlations were computed among all the study variables to examine preliminary associations before running the regression analysis (see Table 4.2). All four independent variables were significantly correlated with emotional TDV perpetration. Emotional TDV victimization demonstrated the strongest association with perpetration ($r = .58$, $p < .001$), followed by constructive communication and negotiation skills, which showed a negative association ($r = -.41$, $p < .001$). Depressive symptoms were also positively associated with perpetration ($r = .31$, $p < .001$), as was interparental conflict, which showed a statistically significant positive association ($r = .19$, $p = .03$).

Table 4.2
Bivariate Correlations Among Study Variables

Variable	1	2	3	4	5
Emotional TDV perpetration	—				
Interparental conflict	.19*	—			
Depressive symptoms	.31***	.23*	—		
Emotional TDV victimization	.58***	.13	.25**	—	
Communication and negotiation skills	-.41***	-.05	-.12	-.58***	—

Note. $N = 124$. * $p < .05$. ** $p < .01$. *** $p < .001$.

Among the independent variables, a strong negative correlation was observed between emotional TDV victimization and constructive communication and negotiation skills ($r = -.58$, $p < .001$), indicating that adolescents who experienced more victimization also reported weaker

communication skills. Depressive symptoms were positively correlated with both interparental conflict ($r = .23, p = .01$) and victimization ($r = .25, p = .005$). Moreover, interparental conflict was not significantly associated with either victimization ($r = .13, p = .15$) or constructive communication and negotiation skills ($r = -.05, p = .56$).

4.4 Hierarchical Regression

A three-step hierarchical multiple regression analysis was conducted to examine the contributions of enduring vulnerabilities, stressors, and adaptive processes to emotional TDV perpetration. The order of variable entry was guided by the VSA model (Karney & Bradbury, 1995), such that enduring vulnerabilities were entered first, followed by stressors, and finally adaptive processes. Emotional TDV perpetration served as the dependent variable. Results for each step are presented in Table 4.3.

Table 4.3
Hierarchical Regression Predicting Emotional TDV Perpetration

	<i>Block 1</i>		<i>Block 2</i>		<i>Block 3</i>	
Variable	<i>B (SE)</i>	<i>β</i>	<i>B (SE)</i>	<i>β</i>	<i>B (SE)</i>	<i>β</i>
Depressive symptoms	.188 (.060)**	.276**	.105 (.052)*	.155*	.107 (.052)*	.157*
Interparental conflict	.089 (.060)	.131	.061 (.051)	.090	.062 (.050)	.092
Emotional TDV victimization			.440 (.063)***	.527***	.382 (.077)***	.458***

	<i>Block 1</i>		<i>Block 2</i>		<i>Block 3</i>	
Variable	<i>B (SE)</i>	<i>β</i>	<i>B (SE)</i>	<i>β</i>	<i>B (SE)</i>	<i>β</i>
Communication and negotiation skills					-.063 (.048)	-.117
<i>R</i>²	.110		.369		.378	
<i>Adjusted R</i>²	.095		.353		.357	
<i>ΔR</i>²	.110***		.259***		.009	
<i>F</i>	7.464***		23.360***		18.056***	

Note. *N* = 124. Block 1 = Enduring vulnerabilities (depressive symptoms and interparental conflict). Block 2 = Stressor (emotional TDV victimization). Block 3 = Adaptive process (constructive communication and negotiation skills). *B* = unstandardized coefficient. *SE* = standard error. *β* = standardized coefficient. **p* < .05. ***p* < .01. ****p* < .001.

In the first block, depressive symptoms and interparental conflict were entered as enduring vulnerabilities. This block was statistically significant, *F* (2, 121) = 7.464, *p* < .001, and accounted for 11% of the variance in emotional TDV perpetration (*R*² = .110, adjusted *R*² = .095). Within this block, depressive symptoms emerged as a significant unique predictor (*β* = .276, *p* = .002), indicating that higher depressive symptoms were associated with greater emotional TDV perpetration. Interparental conflict did not emerge as a significant unique predictor (*β* = .131, *p* = .138) after controlling for depressive symptoms.

In the second block, emotional TDV victimization was added as a stressor variable. Emotional TDV victimization emerged as a strong and significant predictor of perpetration (*β* = .527, *p* < .001), indicating that experiencing emotional violence was strongly associated with

perpetrating emotional abuse. The addition of this variable produced a significant increase in the explained variance ($\Delta R^2 = .259$, $\Delta F(1, 120) = 49.203$, $p < .001$), raising the total variance explained to 36.9% ($R^2 = .369$, adjusted $R^2 = .353$). With victimization in the model, depressive symptoms remained statistically significant but with a diminished association ($\beta = .155$, $p = .045$), while interparental conflict continued to be non-significant ($\beta = .090$, $p = .232$).

In the last block, constructive communication and negotiation skills were entered as the adaptive process variable, but they did not lead to a statistically significant increase in the explained variance ($\Delta R^2 = .009$, $\Delta F(1, 119) = 1.724$, $p = .192$). The final model accounted for 37.8% of the total variance in emotional TDV perpetration ($R^2 = .378$, adjusted $R^2 = .357$; $F(4, 119) = 18.056$, $p < .001$). In the final model, two variables, emotional TDV victimization and depressive symptoms, emerged as significant predictors of emotional TDV perpetration. Emotional TDV victimization was the strongest predictor ($\beta = .458$, $p < .001$), followed by depressive symptoms ($\beta = .157$, $p = .041$). Interparental conflict ($\beta = .092$, $p = .218$) and constructive communication and negotiation skills ($\beta = -.117$, $p = .192$) were not significant predictors of emotional TDV perpetration in the final model.

4.5 Summary of Findings

The results of the hierarchical regression analysis provided support for two of the four study hypotheses. Specifically, Hypotheses 1 and 3 were fully supported. Hypothesis 1 predicted that higher levels of depressive symptoms (i.e., an enduring vulnerability) would be positively associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents. This hypothesis was fully supported. Depressive symptoms significantly predicted perpetration both at the bivariate level ($r = .31$, $p < .001$) and in the final regression model ($\beta = .157$, $p = .041$). Notably, depressive symptoms remained a significant predictor even after accounting for

the strong association with victimization, indicating that depressive symptomatology makes a unique contribution to the prediction of emotional TDV perpetration.

Hypothesis 3 predicted that higher levels of emotional TDV victimization (i.e., a stressor) would be positively associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents. This hypothesis was fully supported. Emotional TDV victimization was the strongest predictor of emotional TDV perpetration at both the bivariate level ($r = .58, p < .001$) and in the final regression model ($\beta = .458, p < .001$). The addition of emotional TDV victimization in Block 2 accounted for the largest increase in explained variance ($\Delta R^2 = .259$), underscoring its importance as a stressor in predicting emotional TDV perpetration.

Hypotheses 2 and 4 received partial support. Hypothesis 2 predicted that higher levels of interparental conflict (i.e., an enduring vulnerability) would be positively associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents. This hypothesis received partial support. Interparental conflict was significantly correlated with perpetration at the bivariate level ($r = .19, p = .03$); however, it did not emerge as a significant unique predictor in the hierarchical regression model after accounting for the other variables ($\beta = .092, p = .218$). This pattern suggests that the bivariate association between interparental conflict and emotional TDV perpetration may be accounted for by shared variance with other predictors in the model.

Hypothesis 4 predicted that higher levels of constructive communication and negotiation skills (i.e., an adaptive process) would be negatively associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents. This hypothesis received partial support. Constructive communication and negotiation skills were significantly and negatively correlated with emotional TDV perpetration at the bivariate level ($r = -.41, p < .001$); however, they did not remain a significant unique predictor after emotional TDV victimization was entered into the

model ($\beta = -.117, p = .192$). The attenuation of constructive communication and negotiation skills to non-significance in the presence of emotional TDV victimization is likely attributable to the strong negative correlation between these two variables ($r = -.58$), suggesting shared variance.

Chapter 5 - Discussion

The aim of the present study was to examine how enduring vulnerabilities, stressful events, and adaptive processes are associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents. Guided by the Vulnerability-Stress-Adaptation (VSA) model (Karney & Bradbury, 1995), a three-step hierarchical multiple regression was conducted with a sample of 124 Latinx adolescents enrolled in a relationship education program across eight high schools in Central Texas. The predictor variables included two enduring vulnerabilities (depressive symptoms and interparental conflict), one stressor (emotional TDV victimization), and one adaptive process (constructive communication and negotiation skills). The hierarchical regression of the VSA model provided a useful framework for organizing the predictor variables and examining their incremental contributions to emotional TDV perpetration.

The results revealed a clear pattern across the three VSA domains. Among the three domains, the stressor (i.e., emotional TDV victimization) contributed the largest share of explained variance in emotional TDV perpetration, followed by the enduring vulnerabilities. This substantial increase suggests that for Latinx pregnant and parenting adolescents, the experience of emotional victimization is closely linked to perpetration, consistent with prior research documenting the co-occurrence of victimization and perpetration. The adaptive process (i.e., constructive communication and negotiation skills) did not add meaningful explanatory power beyond the enduring vulnerabilities and stressor already in the model. Of the four variables, depressive symptoms and emotional TDV victimization emerged as significant predictors of emotional TDV perpetration in the final model. The remaining two variables (interparental conflict and constructive communication and negotiation skills) were significantly

associated with perpetration when examined independently but did not remain significant after accounting for the shared variance with other predictors.

This pattern is consistent with prior research applying the VSA framework to intimate partner violence, in which stressor variables have consistently been identified as the strongest predictors of negative relational outcomes (Brunton & Dryer, 2024; Stith et al., 2011). The present study's findings extend this pattern to an adolescent population: for Latinx pregnant and parenting adolescents, emotional TDV victimization showed the largest standardized coefficient in the model predicting emotional TDV perpetration. The dominance of the stressor also underscores a key proposition of the VSA model that while enduring vulnerabilities set the stage for negative relational outcomes, it is current stressors within the relationship that directly shape how those outcomes unfold (Karney & Bradbury, 1995).

Building on this pattern, depressive symptoms emerged as the only enduring vulnerability that uniquely predicted emotional TDV perpetration in the final model. This finding indicates that even after accounting for the substantial influence of current victimization within the relationship, depressive symptomatology continued to make a unique contribution to the prediction of emotional TDV perpetration. This finding is consistent with prior research linking depressive symptomatology to dating violence perpetration among adolescents (Foshee et al., 2010; McCloskey & Lichter, 2003; Psychogiou et al., 2023; Yu et al., 2018). One possible explanation for this finding is that depression may be related to perpetration through mechanisms such as feelings of hopelessness, irritability, and low self-worth, which may distort how adolescents perceive and respond to conflict within their relationships (Psychogiou et al., 2023; Yu et al., 2018).

This finding is particularly meaningful in the context of Latinx pregnant and parenting adolescents who may face compounded risk of depressive symptoms due to psychological stressors linked with adolescent pregnancy and parenting. Prior research has shown that Latinx adolescent mothers experience high rates of dating violence perpetration and victimization (Sabina et al., 2022; Thomas, 2019; Toews & Yazedjian, 2014) and face unique family-level stressors, including navigating coparenting relationships and parental stress (Hoss et al., 2021; Huang et al., 2014), which may compound the psychological stress on these adolescents. These compounding burdens may help explain why depressive symptoms emerged as a robust predictor of emotional TDV perpetration in the present sample. Adolescents managing multiple, intersecting stressors may have fewer cognitive and emotional resources available to regulate conflict behavior, increasing the likelihood that depressive symptomatology translates into emotionally aggressive responses during conflict.

Furthermore, cultural factors unique to Latinx communities such as familism values and traditional gender roles have been shown to shape romantic relationship outcomes and intimate partner violence among Latinx adolescent parents (Perez et al., 2025; Sabina et al., 2015b). Although cultural variables were not directly measured in the present study, they may further contextualize why depressive symptoms operated as a meaningful predictor of emotional TDV perpetration in this sample. Specifically, cultural expectations around relationship preservation and gender role conformity may intensify the psychological burden adolescents carry when relationships become conflictual, potentially heightening depressive symptomatology and influencing how that distress manifests during interactions with a dating partner (Perez et al., 2025; Piña-Watson et al., 2013). This connection between culture, depression, and emotional TDV perpetration warrants direct empirical examination in future research with this population.

Within the VSA model, depressive symptoms are conceptualized as an enduring vulnerability that adolescents bring into their romantic relationships (Karney & Bradbury, 1995). Aligned with Brunton and Dryer's (2024) observation that enduring vulnerability variables diminish in predictive power when current stressors are added, the present study found that the association of depressive symptoms diminished when the stressor of emotional TDV victimization was added. This attenuation likely reflects shared variance between depressive symptoms and emotional TDV victimization. Adolescents experiencing emotional TDV victimization within their relationships may also experience elevated depressive symptoms as a consequence of that ongoing relational stress, blurring the boundary between enduring vulnerabilities and current stressors (Ackard et al., 2007; Exner-Cortens et al., 2013). In other words, what initially appears to be the unique contribution of an enduring vulnerability partially overlaps with the influence of the current stressor, underscoring the VSA proposition that while enduring vulnerabilities set the stage for negative relational outcomes, current stressors operate as the more immediate influences on emotional TDV perpetration.

The significant bivariate association between interparental conflict and emotional TDV perpetration is consistent with a growing body of research showing that exposure to conflict between parents is associated with higher risk of violence in adolescents' own relationships (Capaldi et al., 2012; Narayan et al., 2013). However, interparental conflict was no longer a significant predictor once both enduring vulnerabilities were entered into the regression model together. This pattern suggests that interparental conflict and depressive symptoms share overlapping variance, such that interparental conflict did not account for additional, unique variance in emotional TDV perpetration beyond what was explained by depressive symptoms. This interpretation is consistent with the broader VSA proposition that enduring vulnerabilities

often operate as background factors whose influence on relational outcomes is shaped by other vulnerabilities and current relational stressors. It is consistent with previous research indicating that the relationship between interparental conflict and dating violence perpetration is often indirect, operating through other individual and relational factors (Clarey et al., 2010; Narayan et al., 2013; Temple et al., 2013). In the present study, depressive symptoms may represent one such factor that accounts for the overlap between interparental conflict and emotional TDV perpetration.

The broader literature treats family-of-origin conflict experiences as background factors that shape relationship schemas, attachment patterns, and conflict resolution skills that adolescents carry into their romantic relationships (Capaldi et al., 2012; Kinsfogel & Grych, 2004). Thus, within the VSA framework, interparental conflict was conceptualized as an enduring vulnerability or a background experience that shapes how adolescents learn to navigate interpersonal relationships (Karney & Bradbury, 1995). However, it is important to acknowledge an alternative interpretation. Although the Children's Perception of Interparental Conflict Scale (CPICS; Grych et al., 1992) instructs participants to report on their family experiences "growing up," its items are nonetheless worded in the present tense (e.g., 'I often see my parents arguing'), and the participants in this sample were between 14 and 19 years old and many were still living with their parents at the time of data collection. For these adolescents, the distinction between past and current family experiences may be minimal, as they were still actively growing up within their family environment. As such, their responses might reflect ongoing and retrospective perceptions of interparental conflict, which raises the question of whether interparental conflict functions more as a current stressor than an enduring vulnerability for this population. If interparental conflict functions more as a current stressor, its effects may overlap with the

influences of victimization and depressive symptoms already captured in the model, which would explain its attenuation to non-significance when other variables were controlled. The non-significance of interparental conflict in the regression model does not diminish its theoretical importance. The significant bivariate correlation with perpetration shows that it is meaningfully related to emotional TDV perpetration.

The strong association between victimization and perpetration is consistent with extensive research documenting the co-occurrence of these experiences in adolescent dating relationships, where youth both use and experience violence in romantic relationships (Capaldi et al., 2012; Fernández-Fuertes & Fuertes, 2010; Orpinas et al., 2012; Paat et al., 2020; Taylor & Mumford, 2016). This pattern is especially pronounced among Latinx pregnant and parenting adolescents (Hoss et al., 2021; Toews & Yazedjian, 2014). These findings are consistent with research describing violence in adolescent relationships as frequently co-occurring rather than unidirectional.

Within the VSA framework, emotional TDV victimization functions as a stressor within adolescents' relationships (Karney & Bradbury, 1995). The finding that victimization was the single strongest predictor of perpetration highlights the central role that current relational stressors play in shaping relationship outcomes within the VSA model. The dominance of victimization as a predictor also has important implications for understanding the mechanisms through which emotional TDV perpetration occurs. It is possible that experiencing emotional violence from a partner creates a cycle of retaliation, where adolescents respond to their partner's abusive behaviors with their own emotionally aggressive behaviors. Research supports this interpretation, as longitudinal trajectory analyses have shown that adolescents involved in psychological dating violence tend to be both perpetrators and victims in a reciprocal pattern,

rather than one exclusively being the perpetrator and the other the victim (Orpinas et al., 2012), and victimization has been found to predict subsequent perpetration across multiple measurement points (Fernández-González et al., 2020). Alternatively, the strong association may reflect a shared relational context in which both partners engage in unhealthy conflict patterns, consistent with the concept of mutual or bidirectional violence documented in the adolescent dating violence literature (Capaldi et al., 2012; Fernández-Fuertes & Fuertes, 2010; Hoss et al., 2021; Paat et al., 2020; Taylor & Mumford, 2016).

The significant bivariate association between communication skills and emotional TDV perpetration is consistent with prior research reporting that adolescents who lack communication and conflict resolution skills are more likely to engage in psychological dating violence perpetration (Antônio & Hokoda, 2009), including evidence specific to pregnant and parenting adolescents (Toews & Yazedjian, 2014). However, the attenuation of communication skills to non-significance in the presence of emotional TDV victimization is likely attributable to the strong negative correlation between these two variables, suggesting shared variance. In other words, adolescents who experienced more victimization also reported weaker communication skills, and victimization accounted for most of the variance that communication skills shared with perpetration. This interpretation aligns with the prior work on adolescent dating violence, in which experiencing abusive behaviors within a relationship is associated with perpetrating abusive behaviors (Toews & Yazedjian, 2014). Although the study focused on physical TDV, the present findings suggest a similar dynamic may operate for emotional TDV, such that the experience of emotional victimization is closely linked to perpetration.

Within the VSA model, constructive communication and negotiation skills were conceptualized as an adaptive process, or the skills couples use to navigate conflict and stressors

within their relationships (Karney & Bradbury, 1995). Within this framework, adaptive processes are theorized to shape relationship outcomes alongside enduring vulnerabilities and stressful events. However, in this sample, the adaptive process variable did not add significant explanatory power beyond the enduring vulnerabilities and stressors already in the model. This finding suggests that for Latinx pregnant and parenting adolescents, the association communication skills showed with lower perpetration at the bivariate level did not remain once emotional TDV victimization was accounted for, likely reflecting the substantial variance the two share. This does not mean that communication skills are unimportant; the bivariate association suggests they are related to lower perpetration, although this association may partly reflect overlap with victimization rather than an independent protective effect. At the same time, this pattern is consistent with the possibility that interventions focused solely on improving communication skills may not be sufficient to reduce perpetration if the experience of victimization is not simultaneously addressed.

5.1 Theoretical Implications

The present study applied the Vulnerability-Stress-Adaptation (VSA) model (Karney & Bradbury, 1995) to examine predictors of emotional TDV perpetration among Latinx pregnant and parenting adolescents. Originally developed to explain how pre-existing vulnerabilities and current stressors influence marital quality and marital stability, the VSA model has been increasingly applied to understand negative relational outcomes, including intimate partner violence (Brunton & Dryer, 2024). The present study extends this application in two important ways: first, by applying the VSA model to an understudied population and second, by focusing on an understudied form of dating violence (i.e., emotional TDV perpetration).

As described in the start of this chapter, the hierarchical regression of the VSA model revealed that current stressors, enduring vulnerabilities, and adaptive processes contributed unequally to emotional TDV perpetration in this sample. These findings have several implications for the theoretical understanding of the emotional TDV perpetration within the VSA framework. First, the results support the proposition that enduring vulnerabilities and current stressors operate at different levels of influence on relationship outcomes. This suggests that although pre-existing vulnerabilities set the stage for emotional TDV perpetration, the immediate relational stressor, particularly the experience of being victimized, plays a more dominant role in predicting perpetration.

Second, the non-significance of the adaptive process variables raises important questions about the role of communication skills within the VSA framework for this population. The VSA model theorizes that adaptive processes buffer the impact of vulnerabilities and stressors on relationship outcomes. However, the present findings suggest that for Latinx pregnant and parenting adolescents who are actively experiencing emotional victimization, communication skills alone may not be sufficient to prevent perpetration. Because the present study did not test whether communication skills moderate the effect of victimization, these findings cannot speak directly to a buffering process. One possibility is that adaptive processes buffer relationship outcomes only when stressor levels remain within an adolescent's capacity to cope; future research using moderation designs is needed to test this directly.

Third, the classification of interparental conflict within the VSA model highlights an important measurement consideration. Although interparental conflict is conceptualized as an enduring vulnerability, the use of a measure with present-tense items but retrospective instructions among adolescents still living with their parents raises the possibility that this

variable may function more as a current stressor in this population. This finding suggests that researchers applying the VSA model to adolescent populations should carefully consider how variables are classified within the model and whether the measurement tools used adequately capture the intended construct.

Hence, the VSA model is a useful framework for understanding emotional TDV perpetration among Latinx pregnant and parenting adolescents. The model successfully organized the predictor variables and revealed the meaningful patterns of incremental prediction. However, the non-significance of the adaptive process variable and the measurement ambiguity surrounding interparental conflict suggest that adaptations to the model may be needed when applied to this unique population. Future research should consider expanding the VSA model to include culturally specific variables such as familismo, acculturation stress, and gender role attitudes (Perez et al., 2025) that may be particularly relevant for understanding relationship outcomes among Latinx adolescent parents.

5.2 Clinical and Practical Implications

The findings of this study carry meaningful implications for practitioners working with Latinx pregnant and parenting adolescents. Perhaps the most direct takeaway concerns the relationships between victimization and perpetration. Given that emotional TDV victimization emerged as the strongest predictor of perpetration, relationship education and violence-prevention programs may benefit from treating these two experiences as interconnected rather than as separate problems. Adolescents who experience emotional TDV victimization may be at heightened risk of perpetrating emotional abuse, which points to the need for interventions that screen for experiences and acknowledge the co-occurrence of victimization and perpetration in this population (Capaldi et al., 2012; Muñoz-Rivas et al., 2021; Paat et al., 2020; Taylor &

Mumford, 2016). In practice, prior research on the co-occurrence of victimization and perpetration suggests moving away from program models that frame adolescents either as “victims” or “perpetrators” and toward approaches that recognize that adolescents may both experience and perpetrate emotional abuse. Screening tools used at program intake could assess both dimensions, and curricula could explicitly address the cyclical dynamic in which being hurt and hurting a partner reinforce one another.

Equally relevant is the significant association between depressive symptoms and emotional TDV perpetration, which points to the value of integrating mental health support into relationship education and prevention efforts (Oram et al., 2014; Saunders et al., 2023; Spencer et al., 2019). This is especially salient for pregnant and parenting adolescents, who must navigate relationship challenges alongside the demands of pregnancy and caregiving (Hodgkinson et al., 2014). Programs serving this population could incorporate routine depression screenings, establish referral pathways to mental health services, or embed coping and emotion-regulation components directly into relationship education. Because depressive symptoms were associated with greater perpetration in this sample, integrating mental health support may be a valuable component of prevention efforts, while also supporting the broader well-being of adolescent parents and their children. Given the high rates of victimization and co-occurring depressive symptoms in the population, prevention and clinical efforts may also benefit from trauma-informed approaches that account for adolescents’ prior and ongoing exposure to violence (Camacho Soto et al., 2024; Miller, 2019).

Although constructive communication and negotiation skills did not remain a significant predictor in the final model, their strong bivariate association with lower perpetration suggests they may still hold value as a protective target, one that works best when embedded within the

broader approach rather than treated as a standalone solution. Because this association did not remain once victimization was accounted for, and may partly reflect overlap with victimization, prior intervention research suggests that communication skills training may be most effective when it is not delivered on its own but paired with strategies that help adolescents recognize, respond to, and exit victimizing relationship dynamics, with booster sessions or ongoing support to help sustain these skills under real relationship stress (Foshee et al., 2000; Levesque et al., 2016).

Although the present study did not directly measure cultural variables, the findings are situated within a Latinx pregnant and parenting adolescent population for whom culturally responsive services may be especially important. Practitioners may benefit from designing and delivering services that account for the specific cultural context, stressors, and experiences of these youth (Perez et al., 2025; Malhotra et al., 2015; Sabina et al., 2016). This may include attending to culturally relevant values and family dynamics, addressing the stigma associated with adolescent pregnancy within some Latinx communities, and ensuring that programs are linguistically accessible and delivered by providers who understand the structural realities these adolescents navigate. Examining whether culturally grounded programming improves engagement and effectiveness for this historically underserved population is an important direction for future research.

5.3 Limitations and Future Directions

Despite the contributions of this study, several limitations should be acknowledged when interpreting the findings. These limitations also point to the important directions for future research. First, the study employed a cross-sectional design, which prevents the establishment of causal relationships among the study variables. For example, it is not possible to determine from

this study whether depressive symptoms precede and contribute to emotional TDV perpetration, or whether perpetrating emotional violence subsequently contributes to depressive symptoms. Similarly, the strong association between victimization and perpetration cannot be interpreted as evidence that being victimized causes perpetration or vice versa. Prior research has documented bidirectional associations between these variables (Fernández-González et al., 2020; Lapierre et al., 2019; Orpinas et al., 2012), and future longitudinal research is needed to clarify the temporal ordering of these relationships among Latinx pregnant and parenting adolescents.

Second, the data used in this study were collected during 2014-2015, which is approximately a decade prior to the completion of this dissertation. A number of broader changes over the intervening years may have shifted the social landscape in which Latinx pregnant and parenting adolescents form and navigate romantic relationships, which could affect how well these findings apply to the present context. Patterns of teen dating violence, cultural norms, technology use, and the broader social context of Latinx adolescents may have changed during this period. For example, the increasing role of social media and digital communication in adolescent relationships may have introduced new forms of emotional violence such as digital monitoring and online harassment that were not captured by the measures used in this study. In addition, the COVID-19 pandemic disproportionately affected Latinx communities and was associated with heightened family and economic stress and increased depression and anxiety among Latinx adolescents (Roche et al., 2022). Alongside broader pandemic disruptions such as social isolation and increased time confined with family, these changes may shape both the prevalence and the dynamics of emotional TDV in ways not reflected in data collected before 2020. The current sociopolitical climate may also be especially salient for this population. Intensified immigration enforcement, including the detention or deportation of family members,

has been associated with elevated risks of suicidal ideation, alcohol use, and externalizing problems among Latino and Latina adolescents (Roche et al., 2020). Such enforcement actions, along with broader anti-immigrant rhetoric, may heighten stress and instability for Latinx adolescents and their families, potentially altering the family and relational stressors of the kind examined in this study. Future research should examine whether the predictors of emotional TDV perpetration identified in this study remain relevant in the current social, technological, and sociopolitical context.

Third, all measures in this study relied on adolescent self-report, which introduces the potential for social desirability bias. Participants may have underreported their perpetration of emotionally abusive behaviors or overreported their communication skills due to concerns about how they would be perceived. Given the sensitive nature of dating violence and the stigma associated with adolescent pregnancy within Latinx communities (Perez et al., 2025), participants may have been particularly reluctant to disclose certain behaviors. Future research should consider incorporating multiple informants, observational measures, or partner reports to provide a more comprehensive assessment of dating violence dynamics.

Fourth, the measurement of interparental conflict in this study presented a conceptual challenge. Although the CPICS (Grych et al., 1992) instructs participants to report on their family experiences “growing up,” its items are nonetheless worded in the present tense (e.g., “I often see my parents arguing”). Because the participants were aged 14 to 19 years and many were still living with their parents at the time of data collection, their responses may have reflected interparental conflict that was still ongoing rather than solely historical. For these adolescents, the distinction between past and current family experiences may be minimal, which raises questions about whether interparental conflict functions as an enduring vulnerability or as

a current stressor for this population. Interparental conflict was non-significant as a unique predictor beginning in Block 1, after adjustment for depressive symptoms, and remained non-significant after victimization and communication skills were added. This temporal ambiguity therefore complicates the interpretation of the construct rather than explaining a specific point of attenuation; its non-significant unique association may reflect measurement timing, shared variance, sampling variability, or a small unique association, and the present study cannot distinguish among these explanations. Future research should consider using measures with consistent temporal framing or controlling for current living arrangements to more clearly differentiate between these constructs within the VSA framework.

Fifth, the generalizability of the findings is limited in several ways. The sample consisted of 124 Latinx pregnant and parenting adolescents enrolled in relationship education programs at eight high schools in Central Texas. These findings may not generalize to non-Latinx adolescents, non-pregnant or non-parenting adolescents, adolescents in other geographic regions, or those not enrolled in relationship education programs. The sample was also predominantly female (76%), which limits the ability to examine gender differences in the predictors of emotional TDV perpetration. Future research should examine these relationships with larger, more diverse samples and explore potential gender differences in how enduring vulnerabilities, stressors, and adaptive processes contribute to perpetration.

Sixth, the recruitment approach introduces the potential for selection bias that may limit the representativeness of the sample. Participants were not randomly sampled from the broader population of Latinx pregnant and parenting adolescents; instead, they had voluntarily enrolled in a relationship education program, and because they were minors, their parents had consented to their participation. Both conditions may have shaped the sample in systematic ways.

Adolescents who opt into a relationship education program may differ from those who do not in their motivation to improve their relationships, their awareness of relationship difficulties, or their openness to discussing sensitive experiences, and not all parents may be willing to permit their adolescents to participate in a study addressing dating relationships and violence.

Consequently, the most vulnerable or least engaged adolescents, including those whose parents declined consent, may be unrepresented, which could bias the observed associations in unknown directions and further limit generalizability. Future research should consider recruitment strategies that reach a broader and more representative range of this population.

Seventh, the sample size of 124 participants was modest, which may have limited the study's ability to detect small unique associations among study variables. A modest sample can increase the risk of Type II error, which occurs when an association that exists in the population is not detected as statistically significant in the study sample. This possibility is particularly relevant when interpreting the findings for interparental conflict and communication and negotiation skills. Both variables were significantly associated with emotional TDV perpetration at the bivariate level but did not emerge as significant unique predictors in the final model. Communication and negotiation skills were non-significant when entered in the final model after emotional TDV victimization. Interparental conflict was non-significant as a unique predictor beginning in Block 1 and remained non-significant in later blocks. These patterns may reflect shared variance with other predictors, relatively small unique associations, sampling variability, or a combination of these factors. Therefore, these findings should not be interpreted as definitive evidence that interparental conflict and communication and negotiation skills are unrelated to emotional TDV perpetration. Rather, the findings indicate that these variables did not explain statistically significant unique variance in perpetration within the present study.

Future research using larger samples could provide more precise estimates and a better opportunity to identify smaller unique associations. Larger samples would also allow researchers to examine complex pathways within the VSA framework, such as whether communication skills moderate the association between victimization and perpetration or whether depressive symptoms mediate the association between interparental conflict and emotional TDV perpetration.

Eighth, the study utilized secondary data, which limited the variables available for analysis. The VSA model includes adaptive processes as a key component, but only constructive communication and negotiation skills were available in the dataset. Other adaptive processes that may be central to how Latinx pregnant and parenting adolescents navigate relational stress could not be examined. Future research should therefore incorporate a broader range of adaptive processes, such as emotion regulation strategies, problem-solving skills, or help-seeking behaviors, that were not measured here. Emotion regulation and conflict-resolution behavior may be especially relevant during adolescence, when these capacities are still developing and may shape how relational stress is expressed within romantic relationships. Most importantly, future work should attend to culturally specific coping, like the ways Latinx adolescents draw on cultural resources such as familismo, strong family ties, and religious or spiritual practices to manage stress. Because the present study sample was Latinx, in adolescence, and navigating the demands of pregnancy or parenting, such culturally grounded and developmentally appropriate coping strategies may serve as protective adaptive processes in ways the communication-based measure could not capture. Examining whether these processes buffer the effect of vulnerabilities and stressors on emotional TDV perpetration would offer a more comprehensive and culturally responsive test of the VSA model among Latinx adolescent parents.

Finally, the study focused exclusively on emotional TDV perpetration and did not examine physical or sexual forms of dating violence. Although emotional violence is highly prevalent and has significant consequences for adolescent development, future research should examine whether the predictors identified in this study operate similarly across different forms of dating violence. Additionally, future studies should explore whether emotional TDV perpetration serves as a precursor to physical violence in this population.

5.4 Conclusion

Guided by the Vulnerability-Stress-Adaptation model (Karney & Bradbury, 1995), the present study examined how enduring vulnerabilities, stressors, and adaptive processes are associated with emotional TDV perpetration among Latinx pregnant and parenting adolescents. The findings carry implications for how prevention efforts for this population are conceptualized and delivered. Given that emotional TDV victimization emerged as the strongest predictor, followed by depressive symptoms, these findings are consistent with prevention approaches that address victimization experiences and mental health needs together rather than in isolation. This pattern aligns with integrated approaches that recognize how these experiences co-occur in adolescent dating relationships, rather than with prevention models that treat victims and perpetrators as separate groups.

These findings contribute to the growing literature on dating violence among Latinx pregnant and parenting adolescents, a population that experiences disproportionately high rates of dating violence yet remains understudied. The study identifies a specific pattern of predictors that can inform how clinicians, educators, and program developers structure their work, pointing to the value of integrated approaches that pair dating violence prevention with mental health support rather than treating these concerns as separate domains of practice. The VSA model

provides a useful framework for organizing these predictors, though the findings also revealed important measurement and conceptual considerations when applying this model to adolescent populations. The non-significance of communication skills as a unique predictor and the measurement ambiguity surrounding interparental conflict point to the need for theoretical and methodological adaptations when applying adult-derived relationship models to adolescents, whose developmental context and life circumstances differ from those of the adult couples for whom the VSA model was originally developed.

Building on these findings, future work should incorporate longitudinal designs, culturally specific variables, and interaction effects between victimization and adaptive processes. Such research has the potential to clarify how protective factors operate when adolescents are simultaneously experiencing violence. Ultimately, these longitudinal, culturally informed, and interaction-focused directions can inform how prevention efforts can be most effectively structured for a population that remains understudied in the dating violence literature.

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Appendix A – Measures

A.1. Center for Epidemiological Studies Depression Scale (CES-D)

Response scale from 0 (*Rarely*), 1 (*A little*), 2 (*Occasionally*), and 3 (*Most of the time*).

Item #	Item Description
1	I was bothered by things that usually don't bother me
2	I do not feel like eating; my appetite was poor
3	I felt that I could not shake off the blues even with help from my family and friends
4*	I felt I was just as good as other people
5	I had trouble keeping my mind on what I was doing
6	I felt depressed
7	I felt that everything I did was an effort
8*	I felt hopeful about the future
9	I thought my life had been a failure
10	I felt fearful
11	My sleep was restless
12*	I was happy
13	I talked less than usual
14	I felt lonely
15	People were unfriendly
16*	I enjoyed life

17	I had crying spells
18	I felt sad
19	I felt that people dislike me
20	I could not get “going”

Reverse-coded items are marked with an asterisk ()*

A.2. The Children's Perception of Interparental Conflict Scale (Conflict-Properties Items)

Scored from 1 (*True*), 2 (*Sort of True*), and 3 (*False*).

Item #	Item Description
1	I never see my parents arguing or disagreeing.
2*	When my parents have an argument they usually work it out.
3*	My parents get really mad when they argue.
4	They may not think I know it, but my parents argue or disagree a lot.
5*	Even after my parents stop arguing they stay mad at each other.
6*	When my parents have a disagreement they discuss it quietly.
7	My parents are often mean to each other even when I'm around.
8*	I often see my parents arguing.
9*	When my parents disagree about something, they usually come up with a solution.
10	When my parents have an argument they say mean things to each other.
11*	My parents hardly ever argue.
12*	When my parents argue they usually make up right away.
13*	When my parents have an argument they yell a lot.
14	My parents often nag and complain about each other around the house.
15	My parents hardly ever yell when they have a disagreement.
16*	My parents have broken or thrown things during an argument.

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- | | |
|-----|---|
| 17 | After my parents stop arguing, they are friendly toward each other. |
| 18* | My parents have pushed or shoved each other during an argument. |
| 19 | My parents still act mean after they have had an argument. |
-

Reverse-coded items are marked with an asterisk ().*

A.3. The Conflict in Adolescent Dating Relationships Inventory

(Victimization Subscale)

Participants responded from 0 (*Never*), 1 (*Seldom*), 2 (*Sometimes*), and 3 (*Often*).

Item #	Item Description
1	“My partner insulted me with put-downs.”
2	“My partner accused me of flirting.”
3	“My partner deliberately tried to make me angry.”
4	“My partner spoke to me in a hostile tone.”
5	“My partner brought up something from the past to hurt me.”
6	“My partner said things just to hurt my feelings.”
7	“My partner threatened to end our relationship.”
8	“My partner kept track of who I was with and where.”
9	“My partner blamed me for causing problems.”
10	“My partner did something to make me feel jealous.”

A.4. Revised Premarital Communication Inventory

Response scale 0 (*No*), 1 (*Sometimes*), and 2 (*Yes*).

Item #	Item Description
1	Do you and your partner discuss your differences?
2*	Do you have a tendency to keep your feelings to yourself?
3*	Do you and your partner argue very much?
4	Does your partner tell you when he/she is angry with you?
5*	Does he/she stop seeing you without telling you why?
6	Do the two of you settle your disagreements to your satisfaction?
7*	Do you find it difficult to talk with your partner?
8*	Do you find his/her tone of voice irritating (or annoying)?
9*	Does your partner NOT ask your opinion when making plans involving both of you?
10*	Does he/she have a tendency to say things which would be better left unsaid?
11*	Do you find it necessary to keep after your partner for his/her faults?
12	Do you communicate successfully with each other's families?
13*	Do you think your partner is too critical of you?
14	Does your partner wait until you are through talking before saying what he/she has to say?
15	Do you refrain from saying something when you know it will only hurt your partner or make matters worse?

16	When a problem arises that needs to be solved, are you and your partner able to discuss it together (in a calm manner)?
17*	Is your partner very jealous of you?
18*	Are you very jealous of him/her?
19	Does he/she try to make you feel better when you're depressed or discouraged?
20*	Do you avoid disagreeing with your partner because you're afraid he/she will get angry?
21	Are you and your partner able to disagree with one another without losing your tempers?
22	Do you and your partner discuss how you will manage your money in the future?
23*	Do you have disagreements over money now?
24*	Does he/she often say one thing but mean another?
25*	Does your partner complain that you don't understand him/her?
26	Do you help your partner understand you by telling him/her how you think and feel about things?
27	Do the two of you discuss what you expect of one another in terms of being a mother or a father?
28*	Does your partner often sulk and pout?
29	Do you feel that he/she knows what you are trying to say most of the time?
30	Do you discuss your views on raising children?

31* Do the two of you neglect discussing your religious attitudes and beliefs?

32* Is it easier to confide in a friend than in your partner?

Reverse-coded items are marked with an asterisk ()*

A.5. The Conflict in Adolescent Dating Relationships Inventory (Perpetration Subscale)

Participants responded from 0 (*Never*), 1 (*Seldom*), 2 (*Sometimes*), and 3 (*Often*).

Item #	Item Description
1	“I insulted my partner with put-downs.”
2	“I accused my partner of flirting.”
3	“I deliberately tried to make my partner angry.”
4	“I spoke to my partner in a hostile tone.”
5	“I brought up something from the past to hurt my partner.”
6	“I said things just to hurt my partner's feelings.”
7	“I threatened to end the relationship.”
8	“I kept track of who my partner was with and where.”
9	“I blamed my partner for causing problems.”
10	“I did something to make my partner feel jealous.”