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The Moderating Effects of Family Management Factors on the Relationship between Violence Exposure and Aggression

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THE MODERATING EFFECTS OF FAMILY MANAGEMENT FACTORS ON THE
RELATIONSHIP BETWEEN VIOLENCE EXPOSURE AND AGGRESSION

A Dissertation

Submitted to the Graduate Faculty of the
Louisiana State University and
Agricultural and Mechanical College
in partial fulfillment of the
requirements for the degree of
Doctor of Philosophy

in

The Department of Psychology

by
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ABSTRACT

Community violence, in the form of direct victimization or witnessing violent acts, is a prevalent public safety concern in many communities. Individuals who are exposed to community violence often exhibit a variety of associated mental health concerns, including anxiety, depression, and posttraumatic stress symptoms. One of the most common negative outcomes associated with violence exposure among adolescents is engaging in aggressive or violent behavior. In order to mitigate the health, safety, and legal consequences associated with this outcome, it is worth examining factors that may protect adolescents from exhibiting behavior problems subsequent to community violence exposure. In the present study, family management factors (i.e., family routines, disciplinary practices, and monitoring/supervision) were investigated as potential moderating factors in the relationship between violence exposure and adolescent aggression. Community violence exposure, along with two family management variables (i.e., poor parental monitoring and inconsistent discipline), significantly predicted aggressive behavior. Family management factors were insignificant as moderators of the relationship between community violence exposure and aggression. This pattern of results suggests that the specific parenting practices examined are general “protective” factors for adolescents, as they appear beneficial for reducing negative behavioral outcomes regardless of the context of risk.

CHAPTER 1 INTRODUCTION

Community Violence Exposure

Violence is a significant problem in many American communities. Estimates are that approximately 83% of individuals will be victims or intended targets of violent crimes during their lifetime, beginning at age 12 years (Koppel, 1987). Additionally, the rate of violence exposure among low-income urban adolescents is alarmingly high, with approximately 20-50% of adolescents reporting that they have been directly victimized (Singer, Anglin, Song, & Lunghofer, 1995; Stein, Jaycox, Kataoka, Rhodes, & Vestal, 2003).

Although there seem to be differences in rates of victimization across sociodemographic variables, the findings of published studies are often inconsistent. For example, some researchers report that rates of victimization are similar across males and females (White & Lauritsen, 2012), but other researchers report that males are much more likely than females to be victims of and witnesses to violence (Fitzpatrick & Boldizar, 1993). Significant differences in crime rates among racial and ethnic groups are also evident. Specifically, some researchers have found that black youth experience the highest rates of serious violent crime, compared to Hispanic and white youth (White & Lauritsen, 2012). For example, one study found that African-American male youth were exposed to higher community violence rates than similarly economically-disadvantaged Latino male youth in Chicago (Gorman-Smith, Henry, & Tolan, 2004). However, other researchers have documented that Hispanic youth are more likely to be victims of serious violence, such as being physically attacked, robbed, shot, or stabbed (Ozer & Weinstein, 2004). Given these observed discrepancies, it is important to consider demographic variables such as gender and race in subsequent studies investigating the rates of exposure, effects of violence, and protective factors for youth of various backgrounds.

Violence affects not only the victims of crimes. Individuals are also affected indirectly by witnessing or hearing about crimes within their communities. In fact, some researchers have suggested that witnessing severe violence may, in some instances, be as disturbing as being the victim (Saigh, 1991). Greater than 60% of youth under the age of 17 years report being exposed to violence in their communities directly or indirectly in any given year (Finkelhor, Turner, Ormrod, & Hamby, 2009). Similarly, in a study of middle school students from a metropolitan area, 76% reported that they had witnessed or been the victim of at least one violent act in the previous six months (Ozer & Weinstein, 2004). These acts included various offenses, such as witnessing assaults, being chased or physically assaulted, and being a victim or witness to shootings or stabbings.

Unfortunately, adolescents are often exposed to multiple incidents of violence. Among high school students in Chicago, for instance, 45% of youth reported witnessing more than one violent event in their lifetimes, and nearly 70% who reported having witnessed a shooting had actually seen two or more (Bell & Jenkins, 1993). Those living in rural communities are not exempt from this risk, as Sullivan, Kung, and Farrell (2004) found. These authors reported that 61% of middle school students witnessed at least one violent act in their lifetimes, and almost half (45%) had witnessed multiple violent acts in their communities. Given the high rates of direct and indirect victimization in the United States, along with the chronic nature of this concern, community violence exposure represents a significant public health and safety issue, particularly for already at-risk adolescents living in low-income communities.

Negative Consequences of Violence Exposure

While many of the direct effects of victimization are obvious, the negative consequences of indirect violence exposure are often overlooked. Further, violence exposure outside of the

home may be just as harmful, if not more so, than domestic violence. Specifically, there is some evidence that exposure to community violence may be relatively more severe, in terms of negative internalizing and externalizing symptoms, than family violence exposure (Salzinger, Feldman, Rosario, & Ng-Mak, 2011). Among adolescents, community violence exposure can be associated with externalizing (e.g., subsequent behavior problems or violence perpetration) and/or internalizing symptoms, such as Post-Traumatic Stress Disorder and associated symptoms (PTSD; Cooley-Quille, Boyd, Frantz, & Walsh, 2001; Fowler, Toro, Tompsett, & Baltes, 2009). In one study of African-American youth aged 7 to 18 years, for instance, over 27% of violence-exposed individuals endorsed three specific diagnostic criteria for PTSD (Fitzpatrick & Boldizar, 1993). Violence exposure may also be associated with several additional outcomes, including anxiety (Cooley-Quille et al., 2001), depression (Foster, Kuperminc, & Price, 2004), social difficulties (Schwartz & Proctor, 2000), poor academic outcomes (Schwartz & Gorman, 2003), and school disengagement (Borofsky, Kellerman, Oliver, Baucom, & Margolin, 2013). The long-term consequences of violence exposure among adolescents can include an increase in illicit substance use (Kilpatrick et al., 2000), violence perpetration (Kimonis, Ray, Branch, & Cauffman, 2011), and criminal behavior (Eitle & Turner, 2002). Fortunately, there is some recent evidence that while violence exposure is often associated with negative outcomes in the short term, especially increased aggression and delinquent behavior, both victims of and witnesses to violence have relatively higher odds of behavioral adaptation or resilience over longer timeframes (Jain & Cohen, 2013).

Of note, most of the studies reviewed above considered both direct victimization and witnessing violence in their analyses of the effects of community violence exposure. Unless the authors were interested in a specific effect directly related to victimization (e.g., Schwartz &

Gorman, 2003), data collection and analyses were collapsed across these two categories. In two instances, the authors removed “less severe” violence witnessing from their analyses (Borofsky et al., 2013; Foster, Kuperminc, & Price, 2004). That is, while they considered direct victimization and severe (direct) witnessing acts, the authors eliminated items assessing incidents that adolescents had only heard about within their communities. Some researchers have retained separate scales for witnessing and victimization in data analyses (e.g., Hammack et al., 2004). Past studies suggest that primary violence exposure (i.e., victimization) and secondary violence exposure (i.e., witnessing) may affect youth in different ways (Buka et al., 2001; O’Donnell, Schwab-Stone, & Muyeed, 2002). The decision about whether to separate the effects of direct violence victimization and witnessing community violence thus appears to be based upon one’s specific research goals and varies widely within the field.

One of the most frequently observed consequences of community violence exposure is an increase in externalizing behavior problems. Specifically, many adolescents who directly or indirectly witness violent acts exhibit more frequent externalizing behaviors, aggression, and other conduct problems following exposure (Farrell & Bruce, 1997; Gorman-Smith, Henry, & Tolan, 2004). For instance, there was a strong association between engaging in aggressive and antisocial behavior and community violence exposure within the past year among urban adolescents, which persisted even after controlling for factors such as age, sex, ethnicity, and socioeconomic status (Schwab-Stone et al., 1995). The increase in violence and aggression subsequent to community violence exposure has also been observed even after controlling for earlier aggressive behavior (Gorman-Smith & Tolan, 1998). In attempting to explain this relationship, social cognition theorists have proposed that the association between community violence exposure and subsequent aggression may be due to the normalization of violence

among affected adolescents, who may perceive these techniques as appropriate and effective problem-solving strategies (Bandura, 1978; Cooley-Strickland et al., 2009; Lorion & Saltzman, 1993).

Although demographic variables such as age, sex, and socioeconomic status have been controlled for in the analyses of most studies, some researchers have identified significant differences in outcomes related to these factors. For instance, in one study, older adolescents exhibited more externalizing symptoms following violence exposure, while their younger counterparts were more likely to experience internalizing symptoms (Fowler et al., 2009). Further, underprivileged (i.e., impoverished) youth are at a much greater risk of experiencing psychological and behavioral problems related to community violence exposure because of the increased frequency and severity of these acts in their neighborhoods (Truman & Smith, 2012).

Protective Factors

Although the ideal way to protect youth from the negative consequences of community violence exposure would be to prevent exposure entirely, this goal is unattainable. Therefore, it is worthwhile to investigate protective or buffering factors that might help to mitigate the negative effects of violence exposure among children and adolescents. To reduce uncertainty and variability in the way that the term “protective” is used and understood in behavioral research, Luthar and colleagues (2000) have suggested the use of specific labels to more accurately describe the way in which factors interact with one another to affect change. Specifically, factors with direct effects in reducing negative outcomes in both high- and low-risk conditions may be called “protective,” which are distinct from interaction or moderation processes. When a factor provides stability in functioning despite high risk, it is referred to as “protective-stabilizing,” but when it confers advantage only at relatively lower levels of risk, it is referred to as “protective

but reactive.” Finally, variables that allow individuals to engage with risk or stress to improve functioning with increasing levels of risk are referred to as “protective-enhancing.” It is important to recognize that factors protective for one type of outcome (e.g., internalizing symptoms) may not operate in the same manner for another outcome (e.g., aggressive behaviors), a pattern which has been observed in several studies in this area (e.g., Kliewer et al., 2004; O’Neal, 2001). Luthar and colleagues (2000) have also noted that protective factors may not remain stable over time, so what is protective for young children may not remain a significant protective factor as youth age. This discussion underlies the importance of recognizing that various factors may operate in different ways across time, level of violence exposure, and sociodemographic variables. In the following discussion regarding protective factors within the context of violence exposure, and in the present study, the findings will be categorized as the specific types of protective factors described by Luthar and colleagues (2000) when possible.

A good place to begin the study of protective factors is within the family, described in Bronfenbrenner’s ecological systems theory (1986) as the most prominent developmental sphere in which children and adolescents are involved. Recent resilience research confirms this hypothesis, noting that the family is the earliest, most proximal, and most enduring of children’s social environments, rendering it the most powerful external influence on children’s functioning (Luthar & Zelazo, 2003). In fact, family characteristics have often been found to be stronger protective factors than individual characteristics in protecting youth from the negative effects of community violence (Kliewer et al., 2004; O’Neal, 2001). For instance, Kliewer and colleagues (2004) found that the quality of parent-child interactions and felt acceptance by one’s caregiver were more powerful protective factors against internalizing and externalizing symptoms than a

child's own emotion regulation skills. These findings are consistent with the ecological/transactional model proposed by Cicchetti and Lynch (1993). These authors developed a sophisticated model that helps to facilitate understanding of the moderating factors associated with community violence exposure. According to their framework, risk and protective factors exist and operate at individual, family, community, and societal levels. Although all of these factors are believed to interact with one another, Cicchetti and Lynch (1993) have placed an emphasis on understanding family factors as potential protective variables because of the powerful influence of this domain on child and adolescent development.

Family structure and home environment have already been evaluated as protective factors in multiple contexts, including prevention of adolescent alcohol and drug use (Cleveland, Feinberg, & Jones, 2012), for lowering the risk of depression (Costello, Swendsen, Rose, & Dierker, 2008), and for enhancing recovery following a parent's death (Haine, Ayers, Sandler, & Wolchik, 2008). Families may be particularly influential for minority youth, with researchers finding that compared to European American teenagers, African-American youth spend considerably more time, on average, with their families (Larson, Richards, Sims, & Dworkin, 2001). Based on this finding and observed discrepancies in the rates of violence exposure across ethnic groups (e.g., Gorman-Smith, Henry, & Tolan, 2004; White & Lauritsen, 2012), Luthar and Goldstein (2004) suggested that it would be helpful to examine the role of various risk and protective factors separately across ethnic groups to determine whether and how those variables might function differently.

Interestingly, there is already some evidence to suggest that family functioning may reduce the risk of exposure to violence in the first place. Specifically, Gorman-Smith, Henry, and Tolan (2004) observed that among African-American and Latino males living in poor, inner-city

neighborhoods, those from struggling families were more likely to be exposed to violence in their neighborhoods than were youth from families that employed more effective parenting practices and demonstrated higher levels of emotional cohesion. Similarly, researchers recently found that youth under hypervigilant levels of parental monitoring were likely to experience only moderate levels of community violence which declined over time based upon the amount of supervision provided by their parents (Spano, Rivera, & Bolland, 2011). Since it is not always possible to prevent violence exposure altogether, however, it is worth examining protective factors that may be beneficial in recovery after exposure occurs.

Regarding specific family protective factors, strong parental attachment has been shown to reduce the likelihood that violence-exposed youth would exhibit subsequent externalizing behavior problems (Salzinger, Feldman, Rosario, & Ng-Mak, 2011). Similarly, youth from more “cohesive” families, defined as having close and high quality parent-adolescent relationships, exhibit fewer externalizing conduct problems following violence exposure than youth from less cohesive families (Plybon & Kliwer, 2001). Family cohesion has also been identified as a protective factor in the relationship between community violence exposure and depressive symptoms among adolescent boys, suggesting that the influence of this protective factor extends to internalizing symptoms as well (Gorman-Smith & Tolan, 1998). Additional family factors that have been shown to reduce psychological distress following violence exposure are effective problem-solving and communication skills among parents and adolescents (LeBlanc, Self-Brown, Shepard, & Kelley, 2011). While communication and problem-solving skills moderated the relationship between violence exposure and psychological distress, these factors were not significant moderators of the relationship between violence exposure and positive outcomes, such as adaptive skills. Kliwer and colleagues (2004) also found that qualities of the parent-

child relationship, especially felt acceptance, are protective against internalizing and externalizing symptoms among 9 to 13 year-old inner-city participants. This evidence is promising and suggests that there are several ways in which family support and positive familial relationships can act as protective factors in the association between community violence exposure and subsequent negative outcomes.

Social support has shown inconsistent evidence as a protective factor, as parental social support does seem to decrease negative outcomes with regards to family violence, but not community violence, exposure (Muller, Goebel-Fabbri, Diamond, & Dinklage, 2000). Other researchers also found that family support did not moderate the relationship between violence exposure and severity of anxiety symptoms (White, Bruce, Farrell, & Klierer, 1998). Hammack and colleagues (2004) found that family social support was “promotive but not protective” (previously identified as “protective but reactive”), in that it was beneficial at low levels of violence exposure but not when witnessing or victimization levels were high. Of note, this study examined the effect of social support on internalizing outcomes (anxiety and depression), rather than externalizing behavior problems. A similar pattern of “protective but reactive” results was observed by Sullivan, Kung, and Farrell (2004), who found that family support and parental monitoring were related to lower rates of drug use initiation when witnessed levels of violence were low, but not when those levels were high.

Some initial evidence exists that family functioning variables, in general, buffer against negative externalizing outcomes following community violence exposure. For instance, Gorman-Smith and colleagues (2004) have found that family functioning moderates the relationship between violence exposure and later violence perpetration by affected youth. These authors used measures of family relationship characteristics and parenting practices to identify four family

types, and found that youth from exceptionally functioning families exposed to community violence were less likely to commit violent or aggressive acts than youth from the other three family types, even after controlling for ethnicity. However, as the family clusters were based on an assortment of at least seven different components, varying from beliefs and cohesion to monitoring and discipline, it is unclear which factors may have been the most influential in moderating the effects of violence exposure. While researchers have suggested that it may be more helpful to consider multiple dimensions of parenting rather than isolated parenting behaviors (Gorman-Smith, Tolan, & Henry, 2000), clearly defining the parenting dimension will be useful in providing clear findings related to specific factors that moderate the negative effects of violence exposure.

The present study will examine several related variables, collectively termed family management factors, which include family routines, parental monitoring and supervision, and discipline practices (Roche & Levanthal, 2009). This dimension is relatively narrow enough to allow for meaningful information to be collected regarding the effects of these parenting practices, while also following the suggestion outlined above related to investigating dimensions of parenting, rather than individual parenting behaviors. As described by Furstenberg and colleagues (1999), family management factors are distinct from broader parenting constructs because of their focus on organization and supervision, rather than on support, communication, and decision-making.

Family Routines

Family routines refer to the level of structure, consistency, and organization that parents provide for their children in the home (Sytsma, Kelley, & Wymer, 2001). In general, having a regular schedule for sharing meals, completing homework, and going to bed each night has been

shown to provide structure and increase family cohesion (Fiese & Kline, 1993). These effects seem to translate to other domains as well, as there is a significant positive association between consistent family routines and children and adolescents' overall academic and social adjustment (Taylor, 1996; Taylor & Lopez, 2005).

The positive effects of consistent family routines have been demonstrated across ethnic groups. For instance, among urban, low-income, African American adolescents, family routines are positively associated with school engagement (Seaton & Taylor, 2003) and have been linked to lower levels of externalizing behavior problems among children (Koblinsky, Kuvalanka, & Randolph, 2006) and adolescents (Taylor, 1996; Taylor & Lopez, 2005). However, some differences have also been noted among racial and ethnic minority groups. For instance, the National Longitudinal Study of Adolescent Health (Add Health) found that regularly shared dinner was associated with declines in the onset of sexual activity among white adolescents, but not among African-American or Latino/a youth (Pearson, Muller, & Frisco, 2006).

Further, types of routines, and their protective effects, often change over time based on the age and gender of children (Dubas & Gerris, 2002). For instance, while a lack of family routines seems to exacerbate the relationship between school disengagement and delinquency among children and young adolescents, this association is not significant among older adolescents (Lanza & Taylor, 2010). These authors hypothesized that as adolescents begin to seek autonomy from their parents, high levels of family routines may be perceived as restrictive and may actually harm parents' efforts to prevent behavior problems in adolescence (Lanza & Taylor, 2010). Therefore, moderate or flexible levels of family routines may be ideal for providing consistency while also reducing the frequency of behavior problems among older adolescents.

An early study that attempted to draw a connection between family routines and externalizing behavior problems in the context of violence exposure did so only indirectly (Martinez & Richters, 1993). These authors found that violence exposure was more strongly linked to negative outcomes, including distress, in children of mothers with lower attained education status. One interpretation of this finding was that a higher level of maternal education may have an “organizing influence on the family environment” (Cicchetti & Lynch, 1993, p. 100), which could in turn moderate the negative effects of violence exposure. It remains unclear whether this interpretation is accurate, and whether the association between routines and behavior problems following violence exposure will remain significant after accounting for demographic variables, including maternal education level. Similarly, Gorman-Smith and Tolan (1998) examined family structure, defined as the level of organization and support within the family, and found that this factor moderated the relationship between community violence exposure and both internalizing and externalizing symptoms. However, family structure was defined somewhat loosely by the authors, preserving the need to further investigate the specific moderating effect of family routines within the context of the present study.

Parental Monitoring/Supervision

Parental monitoring has been defined as “a set of correlated parenting behaviors involving attention to and tracking of the child’s whereabouts, activities, and adaptation” (Dishion & McMahon, 1998, p. 61), or the degree of caregivers’ knowledge about children’s associations, activities, and whereabouts (Brown, Mounts, Lamborn, & Steinberg, 1993). It has been conceptualized as a combination of parental knowledge and actions regarding their children’s activities, and the child or adolescent’s willingness to share information about those

activities (Oberlander et al., 2011), and thus relies on the use of effective, high-quality communication between youth and their parents (Stattin & Kerr, 2000).

Researchers have consistently found that a high degree of monitoring is associated with fewer internalizing problems, including anxiety and depression (Fröjd et al., 2007; Stattin & Kerr, 2000). It has also been noted that poor parental monitoring is a highly significant predictor of externalizing behavior problems and delinquency in adolescence (Eddy & Chamberlain, 2000; Loeber, Farrington, Stouthamer-Loeber, & van Kammen, 1998; Pettit, Laird, Dodge, Bates, & Criss, 2001). Parental monitoring has been shown to reduce the selection of delinquent peers among adolescents, but only when youth do not feel overly controlled by their parents (Tilton-Weaver, Burk, Kerr, & Stattin, 2013). When parents attempt to strictly control adolescents' activities, this often negatively impacts youths' willingness to share information openly with their parents (Duncan, 1996). Similar to family routines, then, a moderate amount of parental monitoring may be ideal for preventing externalizing behavior problems and delinquency among adolescents.

Within a context of risk, parental monitoring has been shown to act as a mediating or moderating factor in the relationship between various stressors and poor behavioral outcomes. For example, poor monitoring mediates the relationship between having a maternal caregiver with mental illness and adolescent sexual risk-taking (Hadley, Hunter, Tolou-Shams, Thompson, DiClemente, Lescano, et al., 2011). Similarly, in a study of youth exposed to community violence in rural areas, high levels of parental monitoring and social support led to decreased initiation of cigarette, liquor, and advanced alcohol use (Sullivan, Kung, & Farrell, 2004). These protective effects declined, however, as the level of exposure to community violence increased, indicating a “promotive but not protective” effect (previously identified as a “protective but

reactive” effect; Luthar et al., 2000). Thus, there is some initial evidence that parental monitoring may act as a buffering or protective factor for adolescents exposed to community violence exposure; however, it is unclear whether and how this may operate with aggression as the primary outcome variable of interest.

Specifically, there is contradictory evidence about the interaction of parental monitoring with community violence exposure and its effects on subsequent behavior problems. For instance, some researchers have found that high exposure to violence reduces or annuls the protective effects of parental monitoring against antisocial behavior (Miller, Wasserman, Neugebauer, Gorman-Smith, & Kamboukos, 1999). Among 14-year-old adolescents, others have found that parental monitoring continues to have a protective and stabilizing effect in the reduction of aggressive behavior even within the context of high levels of violence exposure (Mazefsky & Farrell, 2005). Researchers have also found that the protective effect of family monitoring may vary depending on whether individuals are witnesses or victims of violence, with one study finding that victims benefitted from the moderating effects of family monitoring but witnesses did not (Bacchini, Miranda, & Affuso, 2011). Finally, the effects of parental monitoring on externalizing behavior may vary with a child’s age. Specifically, poor monitoring seems to be more strongly associated with behavior problems in late childhood and adolescence, compared to early childhood (Frick, Christian, & Wootton, 1999).

Researchers have previously demonstrated that parents overestimate their knowledge of adolescents’ whereabouts, while adolescent self-reports reflect actual parental knowledge more accurately than parents’ perceptions (Laird, Pettit, Bates, & Dodge, 2003). Accordingly, as in other studies (Dishion & McMahon, 1998; Laird, Criss, Pettit, Dodge, & Bates, 2008), parental

monitoring will be measured in the current study as adolescents' reports of parental knowledge regarding their whereabouts.

Discipline Practices

Disciplinary practices can be defined as the typical parental response to undesirable or deviant behavior. Several researchers have identified two dimensions of parental discipline consistently associated with children's externalizing behavior problems (Arney, Rogers, Baghurt, Sawyer, & Prior, 2008; Arnold, O'Leary, Wolff, & Acker, 1993; Prinzie, Onghena, & Hellinckx, 2007). Specifically, the parenting responses often associated with oppositional behavior are overreactivity, the tendency to react with irritation or frustration to a child's behavior (e.g., yelling or applying more severe disciplinary methods than intended), and lax discipline, which may be represented by failing to follow through with threatened consequences of misbehavior (Passini, Favez, Pihet, & Schoebi, 2013). These disciplinary responses are consistently linked to both the development and maintenance of childhood behavior problems (Kendziora & O'Leary, 1993; O'Leary & Vidair, 2005). The use of physical discipline (e.g., spanking, hitting), a type of overreactive discipline, is often thought to lead to more externalizing problems due to the learning mechanisms of modeling and conditioning (Baumrind, 1993; Rothbaum & Weisz, 1994). Specifically, just as community violence exposure and subsequent aggression may be linked by the normalization of violence and its perception as an effective problem-solving response (Cooley-Strickland et al., 2009; Lorion & Saltzman, 1993), children who receive physical or corporal punishment are likely to perceive physical acts as acceptable ways to respond to provocation (Baumrind, 1993; Rothbaum & Weisz, 1994). Conversely, parental warmth and the use of consistent discipline techniques including reasoning, induction, and

autonomy-granting have been linked to the development of empathy and prosocial behavior (Clark & Ladd, 2000; Krevans & Gibbs, 1996).

Much of the existing research on the association between overreactive or coercive parenting and externalizing behavior problems has been conducted with white middle-class families. In one study of racial and ethnic differences in the use of harsh parenting techniques, Deater-Deckard, Bates, Dodge, and Pettit (1996) found that physical discipline was associated with a higher degree of externalizing behavior problems, but only among Caucasian children; African American families did not show this pattern. The harmful consequences of punitive discipline are also less evident among Latino youth of low socioeconomic status (Lansford, Deater-Deckard, Dodge, Bates, & Pettit, 2004; McLeod & Nonnemaker, 2000). Although much of the research on parental discipline has been conducted with younger children, punitive discipline has been linked to worse behavioral and emotional outcomes among adolescents (Grogan-Kaylor, 2005). Furthermore, inconsistent discipline, defined as the lack of follow-through in maintaining and adhering to consequences for behavior, has also been linked to increased risk of antisocial behaviors among adolescents (Edens, Skopp, & Cahill, 2008; Loeber, Green, Keenan, & Lahey, 1995; Stouthamer-Loeber & Loeber, 1986). Due to the paucity of research on the effects of parental discipline practices with older children and adolescents, it is important to further assess the role that inconsistent discipline plays in the behavioral outcomes of adolescents exposed to community violence across racial and ethnic groups.

CHAPTER 2 CURRENT STUDY

The current study investigated the protective role of three family management variables (i.e., family routines, parental supervision/monitoring, and disciplinary practices) in mitigating the negative effects of community violence exposure among adolescents.

Hypotheses

The following hypotheses were proposed:

1. Community violence exposure will be associated with increases in aggressive behavior among youth, consistent with findings of previous research (e.g., Farrell & Bruce, 1997; Fowler et al., 2009; Gorman-Smith, Henry, & Tolan, 2004).
2. Consistent family routines will moderate the relationship between community violence exposure and aggression, with more consistent routines leading to relatively lower levels of aggression. This would be consistent with and build upon previous findings indicating that the level of organization within the family moderates the relationship between violence exposure and aggression (Gorman-Smith & Tolan, 1998). This protective effect is expected to be relatively consistent across racial/ethnic groups, but may vary with adolescents' age. Specifically, for younger adolescents, the role of family routines is expected to be significantly stronger; this moderating effect is hypothesized to decline with age, consistent with previous findings (Dubas & Gerris, 2002; Lanza & Taylor, 2010). The moderating effect of family routines may also decline at high levels of violence exposure, consistent with a "protective but reactive" effect (Luthar et al., 2000).
3. High levels of parental monitoring and supervision will moderate the relationship between community violence exposure and aggression, with higher levels of

supervision resulting in a lower incidence of aggressive behaviors. Consistent with a “protective but reactive” effect (Luthar et al., 2000), this association is expected to be stronger and more significant in those exposed to a relatively lower level of community violence, and may decline at higher levels of violence exposure.

4. Parental disciplinary practices are also expected to moderate the relationship between community violence exposure and subsequent aggressive behaviors. Consistent discipline is expected to significantly lower the risk of engaging in aggressive behaviors following violence exposure. Due to the limited research conducted with regards to disciplinary practices used for adolescent behavior management, no specific hypotheses are made about the potentially differential effects of inconsistent discipline across racial/ethnic groups.

CHAPTER 3 METHODS

Participants

An a priori power analysis using G*Power 3.1.7 (Faul, Erdfelder, Buchner, & Lang, 2009) was conducted to determine the minimum sample size required to obtain a moderate effect size of approximately .15 with 80% power. A minimum sample size of 114 participants was a sufficiently large sample. Accordingly, participants included 159 adolescents between the ages of 11 and 18 years. Adolescents were recruited from middle and high schools, as well as community recreation centers, in both low- and high-crime neighborhoods (identified through an examination of crime statistics available through local police departments) in a large Midwestern city and surrounding suburban communities. Researchers have previously suggested that obtaining diverse community-based samples, rather than focusing solely on clinically referred or “high-risk” adolescents, improves the generalizability of research findings (Ozer & Weinstein, 2004). To be included in the study, adolescents were required to be fluent in English and able to read and respond to the questionnaires independently. All adolescent participants were entered into a drawing to win one of four \$25 gift cards.

Table 1 provides descriptive information related to the study participants. As shown, slightly more than half of the sample consisted of male participants. Over half of the participants identified as Caucasian/white (i.e., 52.5%), while 17% and 13.3% identified as African-American and Asian/Pacific Islander, respectively. A majority of the participants reported that their primary caregivers are married, and more than half of parents reported being employed full-time. Household income and parent educational background are also summarized below.

Table 1
Demographic Characteristics of the Sample

	<i>N</i>	%	<i>N</i> Missing
Adolescent Gender			
Male	87	54.7	
Female	72	45.3	
			0
Race/Ethnicity			
Caucasian/White	83	52.2	
African-American/Black	27	17.0	
Asian/Pacific Islander	22	13.8	
Hispanic/Latino	5	3.1	
Biracial	16	10.1	
Other	6	3.8	
			0
Parents' Marital Status			
Married	114	71.7	
Divorced	10	6.3	
Separated	6	3.8	
Living with partner	7	4.4	
Single	21	13.2	
Widowed	1	.6	
			0
Parent Educational Background			
Less than 12 th grade	6	3.8	
High school graduate/GED	11	6.9	
Some college	17	10.7	
Bachelors degree	53	33.3	
Masters degree	28	27.6	
Ph.D., doctorate, M.D., J.D.	7	4.4	
			37
Parent Employment Status			
Employed full-time	84	52.8	
Employed part-time	18	11.3	
Self-employed	5	3.1	
In school full-time	1	.6	
Homemaker	12	7.5	
Unemployed	7	4.4	
Retired or disabled	4	2.5	
			28

(Table 1 continued)

	<i>N</i>	%	<i>N</i> Missing
Household Income			
Under \$25,000	17	10.7	
\$25,001-\$49,999	14	8.8	
\$50,000-\$74,999	6	3.8	
\$75,000-\$99,999	23	14.5	
\$100,000-\$149,999	30	18.9	
\$150,000 and over	35	22.0	
			34

Procedure

Approval to conduct the present study was obtained from Louisiana State University's Institutional Review Board, and permission to access the schools and community recreation centers was obtained from the sites' administrators. Eligible adolescents and caregivers provided assent or consent (see Appendix A and B) prior to participating.

At each middle and high school recruited for participation, a random sample of classrooms was selected. Letters describing the study purpose and procedures, along with parent consent forms, were sent home with students in those classrooms. Approximately two weeks later, the researcher visited the classrooms and provided general information regarding the study to students whose parents had returned the consent forms. Adolescent assent forms were distributed and explained, and self-report questionnaires were completed individually by students who agreed to participate. Students who did not participate in the study, either by choice or because parent consent had not been obtained, engaged in independent study activities in another classroom. The researcher remained available to answer participants' questions during the group data collection sessions. Students were able to complete the forms within one approximately 50-minute class period. The response rate for returned consent forms was approximately 54.6% across four participating schools. This approaches the typical response rate in schools of around

60% (Ozer & Weinstein, 2004). The following analyses and results include the responses of 131 students recruited from three middle schools and one high school.

The researcher also contacted the directors of several community recreation centers to recruit adolescents from summer, afterschool, and evening programming. Adolescents and their families were recruited from community dinners, festivals, and evening activities to participate in the study. After obtaining informed consent, adolescents individually completed the questionnaires during those activities. The researcher remained available to answer questions throughout survey completion. The response rate for participation in these settings could not be determined, as the programs and activities were largely unstructured and overall attendance information was not available. The responses of 28 adolescents recruited from two urban community centers are included in subsequent analyses.

Measures

Demographic Questionnaire. Adolescents completed a questionnaire containing items regarding age, gender, race/ethnicity, parents' marital status, and household composition (i.e., number of adults and children who live in the home). Parents also completed a brief family background questionnaire to return with their consent forms, which consisted of the aforementioned information as well as yearly household income, parent educational background, and parent employment status (see Appendix C and D).

Screen for Adolescent Violence Exposure (SAVE). The SAVE is a 32-item measure of adolescents' exposure to violent events in their schools, homes, and neighborhoods (Hastings & Kelley, 1997). Within each of these three settings, there are three subscales: Traumatic Violence, Indirect Violence, and Physical/Verbal Abuse. Individuals responded to items such as "I have seen someone get badly hurt (at my school, in my home, in my neighborhood)" using a Likert

scale ranging from 1 (“never”) to 5 (“almost always”). For the purposes of the current study, the school and neighborhood scales were combined as a measure of overall community violence exposure. This method is consistent with methods used in previous research in this area (e.g., Harrison & Kelley, 2012). After summing these scales, total community violence exposure scores ranged from 64 to 320, with higher scores representing more frequent exposure to community violence. Home violence exposure scores ranged from 32 to 160, with higher scores again indicating more frequent home violence exposure (see Appendix E).

The SAVE was initially developed and validated using a predominantly African-American sample of individuals living in high-crime communities. The measure has good internal consistency (with scales and subscales ranging from .65 to .95) and acceptable test-retest reliability (Hastings & Kelley, 1997). It has also exhibited adequate convergent, divergent, and construct validity (Hastings & Kelley, 1997). Self-report data regarding violence exposure is likely to be the most valid source of this information, as parents often underestimate the degree to which their children have been exposed to acts of violence (Martinez & Richters, 1993).

Alabama Parenting Questionnaire – Child Form (APQ-Child). The APQ is a measure of parenting practices typically used in the home (Frick, 1991). The youth form contains 42 items (e.g., “Your parents reward or give something extra to you for behaving well”) to which individuals respond on a 5-point Likert scale (1 = “never” to 5 = “always”). There are six subscales of the APQ: Parental Involvement, Positive Parenting, Poor Monitoring/Supervision, Inconsistent Discipline, Corporal Punishment, and Other Discipline Practices. For the purposes of this study, the Poor Monitoring/Supervision scale was used as the measure of parental monitoring. The Inconsistent Discipline scale was used to measure parental disciplinary practices. Scores on the Poor Monitoring/Supervision scale range from 10 to 50, with higher

scores representing increasingly poor parental monitoring of adolescents' activities and behavior. Similarly, scores on the Inconsistent Discipline scale range from 6 to 30, and higher scores denote more frequent use of inconsistent disciplinary strategies, as perceived by the adolescent respondent (see Appendix F).

The APQ and its scales have demonstrated adequate internal consistency and convergent validity with similar parenting measures (Frick, Christian, & Wootton, 1999; Shelton, Frick, & Wootton, 1996). In a previous study that used the monitoring scale independently, the observed alpha was .71 (Sullivan, Kung, & Farrell, 2004).

Adolescent Routines Questionnaire (ARQ). The Adolescent Routines Questionnaire is a 33-item measure of daily routines among adolescents aged 12 to 17 years. There are both parent and adolescent self-report versions of this measure available. For the purposes of the current study, the adolescent self-report version was the primary measure of interest (see Appendix G). Items such as "I complete chores regularly" and "I attend after school activities" require responses on a 5-point Likert scale ranging from 0 ("almost never") to 4 ("nearly always"). The ARQ is composed of five factors (Daily Living, School & Discipline, Household, Social, and Extracurricular Routines), with each yielding a subscale score. There is also a total routines score created by summing the five subscale scores; this overall score was used in the current study. The score on the total routines scale ranges from zero to 132, with higher scores indicating a higher level of established household routines. In initial validation studies, the ARQ demonstrated good internal consistency, test-retest reliability, inter-rater reliability, and concurrent validity (Meyer & Kelley, 2010).

The Aggression Questionnaire. The Aggression Questionnaire is a self-report inventory assessing an adolescent's trait aggression (Buss & Perry, 1992). The 29 items (e.g., "I get into

fighters a little more than the average person”) are rated on a 7-point Likert scale ranging from 1 (“extremely uncharacteristic of me”) to 7 (“extremely characteristic of me”). The responses yield four subscale scores in the domains of Physical Aggression, Verbal Aggression, Anger, and Hostility. Consistent with the methods employed in previous research in this area (Harrison & Kelley, 2012), the Physical and Verbal Aggression scores were summed to create a total measure of overt aggressive behavior that was used as the criterion variable in the current study. Scores on this overall aggressive behavior scale range from 14 to 98, with higher scores representing more trait aggressive behavior (see Appendix H).

The Aggression Questionnaire demonstrated good internal consistency and test-retest reliability in initial validation studies (Buss & Perry, 1992). Furthermore, previous research has indicated that adolescents are generally forthcoming when completing self-report questionnaires regarding problem behaviors (Oetting & Beauvais, 1990).

CHAPTER 4 RESULTS

Missing Values

A total of seven participants were excluded from the analyses due to missing responses on critical variables of interest. Five of these participants failed to respond to questions regarding violence exposure, and two participants failed to respond to over half of the questions regarding aggressive behavior. The parents of 34 participants declined to provide information regarding annual household income; this represents approximately 21% of the total sample. Since removing these cases from the analyses would have significantly reduced statistical power, the missing values for household income were replaced by appropriate subgroup means (De Vaus, 2013). That is, for 25 students at the middle and high schools recruited for participation, the average household income of \$75,000-\$99,999 was used to replace the missing values. For nine participants recruited from community centers, missing values were replaced by the average income for this sample (i.e., under \$25,000).

Post-Hoc Power Analysis

A post-hoc power analysis was conducted using G*Power 3.1.7 (Faul, Erdfelder, Buchner, & Lang, 2009) to determine whether the obtained sample size was adequate to detect meaningful effects. Given a medium effect size and a sample size of $n = 159$, the power for the current study was 98.9% (see Table 2). This indicates that the sample size was adequate for detecting the moderating effects of family management factors on the relationship between community violence exposure and aggressive behavior.

Table 2
 Post-Hoc Power Analysis Output from G*Power 3.1.7

F tests - Linear multiple regression: Fixed model, R ² increase		
Analysis: Post hoc: Compute achieved power		
Input:	Effect size f ²	= 0.15
	α error probability	= 0.05
	Total sample size	= 159
	Number of tested predictors	= 3
	Total number of predictors	= 14
Output:	Noncentrality parameter λ	= 23.850
	Critical F	= 2.667
	Numerator df	= 3
	Denominator df	= 144
	Power (1-β err prob)	= 0.989

Preliminary Analyses

Before completing hierarchical regression analyses, the data were examined for potential errors or invalid entries. Upon completing this step of data cleaning, new variables were created as indicated. First, the categorical variable of ethnicity was recoded into a dummy variable with white/Caucasian as the reference group since this category represented the majority of participants (West, Aiken, & Krull, 1996). Given the low number of respondents who identified as Hispanic, biracial, or other, these categories were collapsed and renamed as Other Ethnicity. Two additional variables were created to represent African American/black respondents and those who identified as Asian/Pacific Islander. The creation of this dummy variable within the dataset allows ethnicity to be included as a control demographic variable in subsequent analyses.

The correlations among predictor variables were then examined to assess potential multicollinearity concerns within the sample. Based upon observed bivariate correlations and consistent with the suggestion of Tabachnick and Fidell (2007), each of the continuous predictor variables was centered around its mean. This was completed in order to minimize

multicollinearity concerns that might result from creating interaction terms that were highly correlated with the predictor variables of which they were composed. These high correlations would likely have resulted in difficulty estimating regression coefficients and significant competition in explaining the outcome variable (Aiken & West, 1991); centering predictors prior to creating interaction terms typically reduces multicollinearity and addresses these concerns. Using the centered predictors, moderator variables were created by forming interactions between community violence exposure and each of the three family management factors.

After centering the predictor variables, tolerance and the Variance Inflation Factor (VIF) were examined in preliminary regression analyses. All tolerance values were higher than the suggested threshold of 0.1, and VIF values were 7.46 or lower; values of 10 or less are generally considered to be acceptable (Field, 2009). The standard errors of the regression coefficients were also relatively small. All of these scores and observations suggest that centering the predictor variables and interaction terms was adequate for addressing multicollinearity concerns.

Descriptive Statistics

Table 3 provides descriptive information related to each of the continuous predictor variables. As shown, the average levels of home and community violence exposure were relatively low, although there was moderate variability within the sample. Still, approximately 50% of the sample scored at or below 74 on the community violence exposure scale; the minimum possible score on this measure is 64.

Table 3
Means, Standard Deviations, and Observed Range for Continuous Variables

Variable	Mean	SD	Observed Range	
			Minimum	Maximum
1. Adolescent Age	13.81	1.88	11.00	18.00
2. Home Violence Exposure	41.09	14.09	32.00	116.00
3. Community Violence Exposure	86.47	31.12	64.00	228.00
4. Aggression	40.73	13.98	18.00	81.00
5. Poor Monitoring and Supervision	20.56	6.18	10.00	37.00
6. Inconsistent Discipline	13.58	3.75	6.00	27.00
7. Adolescent Routines	98.04	17.09	53.00	132.00

Table 4 presents the correlations among the control, predictor, moderating, and outcome variables. Community violence exposure and home violence exposure were highly correlated ($r = .872, p < .01$). Community violence exposure was significantly and positively associated with the outcome variable, aggression ($r = .503, p < .01$), suggesting that frequent exposure to community violence is related to higher levels of aggressive behavior. There was also a significant correlation between home violence exposure and aggression ($r = .396, p < .01$), so home violence exposure was used as a control predictor in subsequent regression models. This is consistent with the recommendation of previous researchers, who note that it is essential to measure and account for both family and community violence exposure in order to ascertain the true protective role of family factors in the relationship between violence exposure and associated psychopathology (Horn & Trickett, 1998). By including home violence exposure in the current analyses, the relationships among community violence exposure and aggressive behavior can be examined above and beyond the contribution of home violence exposure to externalizing behavior.

Household income was significantly associated with two of the ethnicity variables (i.e., white and black ethnicity); income was positively associated with white ethnicity ($r = .395, p < .01$) and negatively associated with black ethnicity ($r = -.520, p < .01$), indicating that lower household income was related to ethnic minority status. Household income was also significantly negatively associated with home ($r = -.306, p < .01$) and community violence exposure ($r = -.453, p < .01$), poor monitoring ($r = -.341, p < .01$), inconsistent discipline ($r = -.221, p < .01$), and aggression ($r = -.396, p < .01$).

Regarding the main predictor variables of interest, poor monitoring/supervision was significantly correlated with inconsistent discipline ($r = .388, p < .01$) and adolescent routines ($r = -.356, p < .01$). Each of these predictors was also significantly correlated with aggressive behavior in the predicted direction; see Table 4 for directionality and significance.

Regression Analyses

Multiple regression analyses were conducted to evaluate the predictive effect of community violence exposure on aggressive behavior. The initial analysis fully confirmed the first hypothesis (see Table 5). Exposure to community violence, even after controlling for home violence exposure, age, gender, and ethnicity, significantly predicted aggressive behavior, $t = 3.277, p < .01$. Household income was also a significant predictor of aggression in the final model, $t = -2.422, p = .017$. This suggests that increased frequency of community violence exposure, along with lower household income, results in increased levels of aggressive behavior. Other ethnicity (i.e., Hispanic, biracial, or other) was a significant predictor of aggressive behavior at the first step of the analysis, $t = 2.012, p = .046$, but was not significant in the second step after accounting for home and community violence exposure.

Table 4
Correlation Matrix of Control Variables, Predictors, and Outcome Variables

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13
1. Adolescent Age	1.00												
2. Gender	-.171*	1.00											
3. White Ethnicity	.250**	.112	1.00										
4. Black Ethnicity	.322**	-.109	.473**	1.00									
5. Asian Ethnicity	.251**	-.035	.419**	-.181*	1.00								
6. Other Ethnicity	.242**	-.008	.473**	.205**	-.181*	1.00							
7. Household Income	.474**	.070	.395**	.520**	.147	-.141	1.00						
8. Home Violence Exposure	.201*	.160*	.272**	.297**	-.096	.153	.306**	1.00					
9. Community Violence Exposure	.282**	.196*	.308**	.438**	-.170*	.128	.453**	.872**	1.00				
10. Adolescent Routines	.236**	.146	.116	-.195*	.081	-.034	.119	-.191*	-.141	1.00			
11. Poor Monitoring	.322**	-.107	-.199*	.291**	.220**	.177*	.341**	.471**	.543**	.356**	1.00		
12. Inconsistent Discipline	.094	.052	-.084	.091	-.023	.042	.221**	.103	.170*	.069	.388**	1.00	
13. Aggression	.188*	-.094	.218**	.250**	-.157*	.184*	.396**	.396**	.503**	-.180*	.605**	.358**	1.00

**Correlation is significant at the 0.01 level

*Correlation is significant at the 0.05 level

Table 5
Multiple Regression Assessing the Predictive Ability of Community Violence Exposure on Aggression

	R ²	ΔR ²	β	B	Sr ²	F model
Step 1	.196					<i>F</i> (6,152) = 6.164
Age			-.080	-.591	.004	
Male Gender			.073	2.048	.005	
Asian Ethnicity			-.080	-3.221	.006	
Black Ethnicity			.113	4.196	.008	
Other Ethnicity			.17	6.10*	.021	
Household Income			-.34	-2.64**	.067	
Step 2	.309	.113**				<i>F</i> (8,150) = 8.384**
Age			-.073	-.544	.004	
Male Gender			.012	.350	.000	
Asian Ethnicity			-.050	-2.027	.002	
Black Ethnicity			-.017	-.649	.000	
Other Ethnicity			.111	4.126	.009	
Household Income			-.221	-1.738**	.027	
Home Violence Exposure			-.13	-.13	.004	
Community Violence Exposure			.517	.232**	.049	

**Significant at the 0.01 level

*Significant at the 0.05 level

Hierarchical multiple regression was then used to determine the moderating effects of family management factors on aggression (Aiken & West, 1991; Baron & Kenny, 1986; West, Aiken, & Krull, 1996). Three main predictive factors (poor monitoring/supervision, inconsistent discipline, and adolescent routines) and their interaction terms, described previously, were examined to determine their effects on the relationship between community violence exposure and aggression. The control demographic variables (i.e., age, gender, ethnicity, and household income) were entered into step 1. Step 2 consisted of the main predictor variables, family management factors and violence exposure, and step 3 was composed of the interaction terms.

The order of entry of predictor variables in Steps 2 and 3 was based upon the literature review and information gathered from preliminary analyses. Specifically, as parental monitoring has been consistently identified as a significant predictor of adolescent aggression (e.g., Eddy &

Chamberlain, 2000; Loeber, Farrington, Stouthamer-Loeber, & van Kammen, 1998; Pettit, Laird, Dodge, Bates, & Criss, 2001), this variable was entered first as a predictor and moderator variable in each step. Inconsistent discipline was entered next, based upon its relatively higher correlation with the outcome variable (i.e., aggression) than family routines; the latter variable was entered as the final predictor/moderator variable within Steps 2 and 3, respectively.

As outlined in Table 6, household income and other ethnicity (i.e., Hispanic, biracial, or other) were significantly related to aggression at step 1, $F(6, 152) = 6.164, p < .01$. In step 2, the predictor variables accounted for significantly more of the variance than demographic factors alone, $F_{\text{change}}(5, 147) = 14.818, p < .01, R^2 = .465$. This suggests that the addition of violence exposure (i.e., within the home and community) and family management qualities significantly predicted aggression, $F(11, 147) = 11.626, p < .01$. Together, these factors accounted for 27% more of the variance in aggressive behavior than demographic variables alone. Specifically, increased levels of poor monitoring, inconsistent discipline, and community violence exposure, along with lower household income, were significant predictors of increased aggression.

With the inclusion of the moderating effects of family management variables in step 3, the overall model was still significant for predicting aggression, $F(14, 144) = 9.517, p < .01$. While the inclusion of these moderating variables predicted 1.5% more variance in aggression, they were not significantly more predictive of aggression than the main predictors separately, $F_{\text{change}}(3, 144) = 1.418, p = .240$.

Table 6

Hierarchical Multiple Regression Assessing the Moderating Effects of Family Factors in the Relationship Between Community Violence Exposure (CVE) and Aggression

	R ²	ΔR ²	B	β	Sr ²	F model
Step 1	.020					<i>F</i> (6,152) = 6.164
Age			-.591	-.080	.004	
Male Gender			2.048	.073	.005	
Asian Ethnicity			-3.221	-.080	.006	
Black Ethnicity			4.196	.113	.008	
Other Ethnicity			6.097	.164*	.021	
Household Income			-2.638	-.335**	.067	
Step 2	.465	.270**				<i>F</i> (11,147) = 11.626**
Age			-.972	-.131	.011	
Male Gender			.658	.023	.000	
Asian Ethnicity			-.752	-.019	.000	
Black Ethnicity			-1.035	-.028	.000	
Other Ethnicity			3.113	.084	.005	
Household Income			-1.421	-.181*	.018	
Home Violence Exposure			-.137	-.138	.004	
Community Violence Exposure			.149	.332*	.018	
Poor Monitoring/Supervision			.881	.389**	.075	
Inconsistent Discipline			.552	.140*	.015	
Adolescent Routines			-.031	-.037	.001	
Step 3	.481	.015				<i>F</i> (14,144) = 9.517**
Age			-1.110	-.150	.014	
Male Gender			.878	.031	.009	
Asian Ethnicity			-.593	-.015	.000	
Black Ethnicity			-1.934	-.052	.001	
Other Ethnicity			3.250	.088	.006	
Household Income			-1.517	-.193*	.020	
Home Violence Exposure			-.157	-.158	.005	
Community Violence Exposure			.205	.456**	.028	
Poor Monitoring/Supervision			.863	.381**	.007	
Inconsistent Discipline			.533	.143*	.001	
Adolescent Routines			-.021	-.026	.000	
CVE × Poor Monitoring/Supervision			-.007	-.133	.007	
CVE × Inconsistent Discipline			-.004	-.041	.001	
CVE × Adolescent Routines			-.002	-.094	.007	

**Significant at the 0.01 level

*Significant at the 0.05 level

CHAPTER 5 DISCUSSION

Consistent with the literature, the results of this study indicated that community violence exposure significantly predicted aggressive behavior (Farrell & Bruce, 1997; Fowler et al., 2009; Gorman-Smith, Henry, & Tolan, 2004). Meager household income also was a significant predictor of aggressive behavior and was highly correlated with community violence exposure, suggesting that underprivileged adolescents may be particularly vulnerable to these risks within their neighborhoods. This is consistent with the results of a study by Truman and Smith (2012), who found that underprivileged youth are at greater risk for community violence exposure and subsequent psychological and behavioral problems. Furthermore, based upon the strong positive correlation between home and community violence exposure within this sample, it is apparent that many adolescents were exposed to violence across settings, which likely amplified their risk for negative outcomes.

Two independent variables, poor parental monitoring and inconsistent discipline, significantly predicted aggressive behavior. Poor parental monitoring, in particular, is well established as being highly correlated with externalizing behavior problems and delinquency in adolescence (Eddy & Chamberlain, 2000; Loeber, Farrington, Stouthamer-Loeber, & van Kammen, 1998; Pettit, Laird, Dodge, Bates, & Criss, 2001), and now these findings appear to be supported within the context of community violence exposure. Parental monitoring has also been identified as a protective factor against the development of externalizing behavior problems across genders and ethnic groups (Forehand, Miller, Dutra, & Watts Chance, 1997; Laird, Criss, Pettit, Dodge, & Bates, 2008). Although some researchers have found that levels of parental monitoring typically decrease across adolescence (Burke, Pardini, & Loeber, 2008), the results of

the present study suggest that parental monitoring/supervision remains a significant protective factor across mid- to late adolescence.

The findings of the current study also mirror the significant association previously found between inconsistent disciplinary practices and increased antisocial behaviors among adolescents (e.g., Edens, Skopp, & Cahill, 2008; Loeber, Green, Keenan, & Lahey, 1995). Interestingly, the directionality of this association has been supported by longitudinal studies. For instance, Loeber and colleagues (1995) found that parents' use of inconsistent discipline when boys were seven to twelve years old predicted behavior problems six years later. The cross-sectional nature of the present study limits the ability to confirm this directional finding, but suggests that current levels of inconsistent discipline may contribute to aggression among adolescents. Taken together with the significant effects of parental monitoring, these findings suggest that parent behavioral management strategies (i.e., monitoring and consistent discipline) significantly affect the frequency of aggressive behavior.

Consistent family routines were not found to be a significant protective factor for adolescents in the current study. It is possible that the nature of the criterion variable (i.e., aggression) contributed to the fact that daily routines failed to emerge as a significant protective factor in the context of community violence exposure. Specifically, previous research has consistently documented that family routines are associated with improved treatment adherence and long-term prognosis in the context of chronic medical conditions among children and adolescents (Markson & Fiese, 2000; Schreier & Chen, 2010), and with increased emotional well-being among children of parents diagnosed with cancer and HIV/AIDS (Buchbinder, Longhofer, & McCue, 2009; Murphy, Marelich, Herbeck, & Payne, 2009). While family routines have been linked to lower levels of externalizing behavior problems among adolescents

(Taylor, 1996; Taylor & Lopez, 2005), this association appears to be relatively less established in the literature compared to other outcomes and contexts of risk.

There was no significant change in predicting aggression when family management factors were added to the model as moderators within the context of community violence exposure. The presence of significant main effects but non-significant moderators suggests that the specific parenting practices examined in this study (i.e., monitoring/supervision and consistent discipline) are general “protective” factors for adolescents, as they appear to be beneficial for reducing negative behavior outcomes regardless of the context of risk (i.e., community violence exposure). The term “protective” is used here as outlined by Luthar and colleagues (2000) to identify factors that reduce negative outcomes in both high- and low-risk conditions.

Of note, researchers have acknowledged the difficulty of finding significant moderation effects in field studies, compared to more highly controlled experimental designs (McClelland & Judd, 1993). This finding has been attributed to the higher overall measurement error of field studies, in which conditions often cannot be controlled to a significant extent. The authors suggest that in the absence of selecting, oversampling, or controlling the levels of predictor variables observed within one’s sample, detecting significant interactions is likely to be difficult. In the present study, where the sample admittedly lacked variability in the predictor variables, the failure to observe significant moderating effects of family management factors, despite sufficient power, therefore does not seem unreasonable.

Implications

The results of this study can begin to inform public policies and treatment planning regarding appropriate and effective family-based prevention and intervention strategies. These

developments should mitigate the negative behavioral outcomes associated with community violence exposure. While the moderating effects of family management factors were not significant, parental monitoring/supervision and consistent discipline still emerged as general protective factors. Identifying ways to increase the use and effectiveness of these parenting strategies may enable community mental health agencies to capitalize on existing family strengths in treatment, while minimizing the likelihood of more significant negative outcomes. By empowering parents to positively influence their adolescents' development within various contexts (i.e., low- and high-crime communities), the interventions suggested by these findings will likely be met with high acceptability and will enhance clinical utility.

First, parents of adolescents should be encouraged to continue providing adequate supervision of youths' activities for preventative purposes, particularly related to the perpetration of aggressive behavior. It may be helpful for parents, teachers, clinicians, and government or community officials to work together to find an optimal balance between monitoring behavior and increasingly fostering independence during the teenage years. Previous studies have shown that parental monitoring and family routines are protective among adolescents, but only when youth do not feel overly controlled by their parents (Lanza & Taylor, 2010; Tilton-Weaver, Burk, Kerr, & Stattin, 2013). Determining how to effectively provide a moderate amount of parental monitoring, discipline, and support is therefore likely to be ideal for preventing externalizing behavior problems and delinquency among adolescents.

Parents should continue to enforce consistent limits and discipline strategies into youths' adolescence, according to these data. Adolescents appear to be very perceptive regarding their parents' ability to follow through (or not) with intended consequences; as such, increasing disciplinary consistency may be an effective way to facilitate behavior change. Parental

monitoring and consistent discipline may be particularly powerful prevention and intervention tools in impoverished communities, where the risk of home and community violence exposure may be particularly high.

Limitations

Some limitations exist relative to the findings and generalizability of the current study. First, although an adequate sample size was obtained, the sample was not representative of the intended population of interest. Specifically, most adolescents within the sample reported relatively low levels of community violence exposure. This was apparent during data collection and recruitment, as obtaining permission to recruit adolescents from high-risk, low-income communities was particularly difficult. As such, it is possible that differences related to the effectiveness of family management factors at various levels of violence exposure were not observed due to the lack of variability within the sample. Additionally, school-based samples are less likely to include students with poor school attendance and therefore also limit the representativeness of samples recruited from this setting (Sullivan et al., 2004)

The current sample was not sufficiently large and diverse to allow for further analyses related to potential three-way interactions amongst ethnicity, protective factors, and violence exposure. Several researchers have reported differences in rates of violence exposure and significant protective factors among ethnic groups (e.g., Deater-Deckard et al., 1996; Gorman-Smith, Henry, & Tolan, 2004; Pearson et al., 2006), but other investigators failed to find differences in the relationship between violence exposure and subsequent functioning among the various ethnic groups included in their school-based sample of young adolescents (Ozer & Weinstein, 2004). Based on these observed discrepancies, further research to examine the impact of violence exposure and family management factors across ethnic groups is indicated.

Understanding how protective factors might vary according to age and/or ethnic identity would also allow community agencies and clinicians to better tailor interventions to clients of diverse backgrounds.

The parents of greater than one-fifth of study participants failed to provide information related to annual household income. These values, not believed to be missing at random, were replaced by appropriate subgroup means based upon the settings from which participants were recruited. Of note, however, this method of imputing missing data has been criticized because it can introduce error into subsequent analyses by reducing variability, artificially increasing R^2 , and decreasing standard errors (Allison, 2002). While household income consistently emerged as a significant predictor of aggressive behavior in subsequent regression analyses, these results must be interpreted with caution based upon the high proportion of missing data for this variable.

As this study was cross-sectional in nature, the directionality of observed relationships among variables cannot be established. For example, some researchers have proposed that the relationship between parenting factors and adolescent aggressive behavior is bidirectional (Kiesner, Dishion, Poulin, & Pastore, 2009; Laird, Pettit, Bates, & Dodge, 2003). Specifically, while parenting practices are likely to influence adolescents' behaviors, adolescent behavior also generates certain parental responses and reactions. As such, youths' problem behaviors may lead to decreased parental knowledge or supervision, particularly if adolescents are the parents' primary informants or if parents become frustrated and reduce their attempts to monitor behavior (e.g., Stice & Barrera, 1995).

Finally, the findings of this study were based almost entirely on adolescents' self-reported behavior, violence exposure, and perceived parenting practices. While previous researchers have suggested that adolescents' reports of behavioral problems and violence

exposure are valid (Martinez & Richters, 1993; Oetting & Beauvais, 1990), data was not obtained to corroborate participants' reports of parenting practices. Furthermore, replacing missing data regarding household income with subgroup means may have inflated the observed relationships between income and other variables in the current study.

Directions for Future Research

Given the limitations of the current sample with a relatively low level of community violence exposure, a larger and increasingly diverse sample should be obtained to reevaluate the potential moderating effects of the identified family management factors on the relationship between community violence exposure and aggressive behavior. Researchers in this area should evaluate effective ways to recruit increasingly diverse samples, given the sensitivity of the research questions and the apparent reluctance of parents and community leaders to grant consent for adolescents to participate in these studies.

It may also be useful to examine the impact of family management factors on negative outcomes other than aggression. For instance, school attendance and responsibilities are primary tasks for adolescents (Cooley-Strickland et al., 2009; Schwartz & Gorman, 2003). As such, it may be helpful to determine the extent to which parental supervision, discipline, and household routines are related to academic achievement and task completion (e.g., homework).

Finally, a longitudinal study examining the long-term effects of violence exposure and protective family management factors would also be useful. This type of research might also allow for an exploration of the directionality of the relationships among violence exposure, negative behavioral outcomes, and protective factors. For instance, there is some evidence that there may be different short- and long-term effects of violence exposure on aggressive behavior, and that the effects of violence exposure may be cumulative over time (Farrell & Bruce, 1997).

Of course, adolescents and their families are also likely to change over time, so longitudinal studies would be useful to track and tease apart these differences. Additionally, at least one study has suggested the possibility that family cohesion and effective parenting practices may actually lower the risk of exposure to neighborhood violence (Gorman-Smith, Henry, & Tolan, 2004). If specific family management factors and parenting strategies are found to operate at this level of prevention, the implications for early intervention within high-risk families and communities would be truly significant.

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APPENDIX A CONSENT FORM

1. **Study Title:** Community Violence Exposure Among Adolescents: The Protective Role of Family Management Factors
2. **Performance Sites:** Schools and community centers
3. **Name and Telephone Numbers of Investigators:** The following investigators are available for questions about the study Monday through Friday, 9 AM-4 PM:

Mary Lou Kelley, Ph.D. (225) 578-8745 Chrissy Raines (225) 578-6731
4. **Purpose of the Study:** This study will explore family qualities that may protect adolescents from the negative effects of violence in their community. Regardless of the amount of violence in your community, we are still interested in any violence that occurs around your children.
5. **Participant Inclusion:** Adolescents aged 11-18
6. **Number of Participants:** 150
7. **Study Procedures:** Your child will spend less than one hour answering questions about himself or herself, your family, and violence he/she may have experienced or witnessed. An appropriate time to answer the questions, likely during a free period of the day, will be determined in collaboration with your child's school or community center.
8. **Benefits:** The outcome of this research study will provide counselors and government and community officials with information that will help parents know how to help their children cope with the effects of violence exposure. For his or her participation, your child's name will be entered into a raffle in which he/she will have a chance to win a \$25 gift card.
9. **Risks:** Although unlikely, if your child becomes upset after thinking about his or her feelings, experiences, or family while participating in this study, we will give him or her resources, such as phone numbers and addresses of clinics, which may be able to help.
10. **Right to Refuse:** Participation is voluntary, and an adolescent will become part of the study only if both adolescent and parent agree to the adolescent's participation. At any time, either the participant may withdraw from the study or the participant's parent may withdraw the participant from the study without any consequences.

11. **Right to Privacy:** This study may be published in a research journal, but you and your child's names will not be included in the publication. No information provided by you or your child will be linked back to you. Contact information will only be used in scheduling data collection appointments, if needed. Once all data is collected, all identifying information (e.g., all contact information) will be replaced by a code and deleted from the data file.

This study has been discussed with me and all of my questions have been answered. I may direct additional questions regarding study specifics to the investigators. If I have questions about participants' rights or other concerns, I can contact Dennis Landin, Chairman, LSU Institutional Review Board, (225) 578-8692, irb@lsu.edu, www.lsu.edu/irb. I will allow my child to participate in the study described above and acknowledge the researchers' obligation to provide me with a signed copy of this consent form.

Parent Signature

Date

Name of Adolescent Participant

**APPENDIX B
ASSENT FORM**

1. **Study Title:** Community Violence Exposure Among Adolescents: The Protective Role of Family Management Factors
2. **Purpose:** To find out how families help protect teenagers from the negative effects of seeing, hearing about, or experiencing violence. Even if you have not experienced violence, we are interested in your answers.
3. **What You Will Do:** You will spend less than one hour answering questions on paper about yourself, your family, and violence you may have seen, heard, or experienced.
4. **Benefits:** This study will help counselors, parents, and other community members understand how to help teenagers who have experienced violence. For your participation, your name will be entered into a raffle for a chance to win a \$25 gift card.
5. **Risks:** It is very unlikely that you will experience any negative effects. If you become upset after answering questions about your feelings, your experiences, or your family, please tell us and we will give you phone numbers of clinics that may help you.
6. **Right to Refuse:** You may choose not to answer questions or drop out of the study at any time without any problem.
7. **Right to Privacy:** This study may be published in a research journal. However, no information about you or your family will be included. No information provided by you or your caregiver will be linked back to you. Once we collect your answers, we will replace your name with a number so that your answers will be private and no one could trace them to you.

I agree to participate in the study described above.

Adolescent's Age: _____

Adolescent's Name

Adolescent's Signature

Date

Witness

If you would like to be entered into the drawing for a \$25 Wal-Mart gift card, please provide your contact information. This information will be kept separate from your responses to the questionnaires and will only be used if you win a prize in the drawing. Your responses will still be kept confidential and anonymous.

Name: _____

Home Phone #: _____ Cell Phone #: _____

Email Address: _____

**APPENDIX C
DEMOGRAPHIC QUESTIONNAIRE**

What is your age? _____ years

What is your gender? Male / Female

What is your racial heritage (select all that apply)?

_____ American Indian / Alaskan Native

_____ Asian / Pacific Islander

_____ Black / African American

_____ Caucasian / White

_____ Hispanic / Latino

_____ Other

_____ Decline to answer

What is your primary guardians' marital status?

_____ Married

_____ Living with partner

_____ Widowed

_____ Divorced

_____ Single

Including you, how many people currently live in your home? _____

How many adults? _____

How many children? _____

**APPENDIX D
FAMILY BACKGROUND QUESTIONNAIRE**

To be completed by parent/guardian

What is your racial heritage (select all that apply)?

- | | |
|---|--|
| <input type="checkbox"/> American Indian / Alaskan Native | <input type="checkbox"/> Caucasian / White |
| <input type="checkbox"/> Asian / Pacific Islander | <input type="checkbox"/> Hispanic / Latino |
| <input type="checkbox"/> Black / African American | <input type="checkbox"/> Other |
| <input type="checkbox"/> Decline to answer | |

What is your current marital status?

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Married | <input type="checkbox"/> In a committed relationship / living with partner |
| <input type="checkbox"/> Divorced | <input type="checkbox"/> Single |
| <input type="checkbox"/> Separated | <input type="checkbox"/> Widowed |

Including you, how many people currently live in your home? _____

- _____ # of adults
_____ # of children

How far did you go in school?

- | | |
|---|---|
| <input type="checkbox"/> Less than 9 th grade | <input type="checkbox"/> Bachelors degree |
| <input type="checkbox"/> Less than 12 th grade | <input type="checkbox"/> Masters degree |
| <input type="checkbox"/> High school graduate or GED | <input type="checkbox"/> Ph.D., doctorate, M.D., J.D. |
| <input type="checkbox"/> Some college, associate degree | <input type="checkbox"/> Other _____ |

Current employment status

- | | |
|--|--|
| <input type="checkbox"/> Employed full time or more | <input type="checkbox"/> In school full time |
| <input type="checkbox"/> Employed part-time
(less than 35 hours/week) | <input type="checkbox"/> Homemaker |
| <input type="checkbox"/> Self-employed | <input type="checkbox"/> Unemployed |
| | <input type="checkbox"/> Retired or disabled |

What is your approximate yearly household income before taxes?

- | | |
|--|--|
| <input type="checkbox"/> Under \$25,000 | <input type="checkbox"/> \$75,000 - \$99,999 |
| <input type="checkbox"/> \$25,001 - \$49,999 | <input type="checkbox"/> \$100,000 - \$149,999 |
| <input type="checkbox"/> \$50,000 - \$74,999 | <input type="checkbox"/> \$150,000 and over |

APPENDIX E
SCREEN FOR ADOLESCENT VIOLENCE EXPOSURE

Instructions: We are interested in hearing about your experiences of the bad things that you have seen, heard of, or that have happened to you. Please read and answer the following statements about violent things that have happened at home, at school, or in your neighborhood involving you. For each statement, please circle the number that describes how often these things have happened to you. For example, if you “have seen someone carry a gun..... at school” *sometimes*, you would circle the number that corresponds with sometimes.

	Never	Hardly Ever	Sometimes	Almost Always	Always
1. I have seen someone carry a gun...					
at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

2. Someone has pulled a gun on me...					
at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

3. Grownups beat me up...					
at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

4. Someone my age has threatened to beat me up...					
at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

5. I have been shot...					
at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

**Never Hardly
Ever Sometimes Almost
Always**

6. I have seen the police arrest someone...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

7. Someone my age hits me...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

8. I have seen someone get killed...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

9. I have seen a grownup hit a kid...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

10. I have heard about someone getting shot...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

11. Someone has pulled a knife on me...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

**Never Hardly
Ever Sometimes Almost
Always**

12. Grownups threaten to beat me up...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

13. I have had shots fired at me...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

14. I have seen someone carry a knife...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

15. I have seen someone get shot...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

16. I have been attacked with a knife...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

17. I have seen a kid hit a grownup...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

Never Hardly Ever Sometimes Almost Always Always

18. I have seen people scream at each other...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

19. I have seen someone pull a gun on someone else...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

20. I have seen someone get beaten up...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

21. I have heard about someone getting killed...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

22. I have heard about someone getting attacked with a knife...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

23. I have heard about someone getting beaten up...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

**Never Hardly
Ever Sometimes Almost
Always Always**

24. I have seen someone pull a knife on someone else...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

25. I have been badly hurt...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

26. I have seen someone get attacked with a knife...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

27. I hear gunshots...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

28. I have seen someone get badly hurt...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

29. I have run for cover when people started shooting...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

**Never Hardly
Ever Sometimes Almost
Always Always**

30. Grownups scream at me...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

31. I have heard of someone carrying a gun...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

32. Grownups hit me...

at my school	1	2	3	4	5
in my home	1	2	3	4	5
in my neighborhood	1	2	3	4	5

APPENDIX F
ALABAMA PARENTING QUESTIONNAIRE

Instructions: The following are a number of statements about your family. Please rate each item as to how often it TYPICALLY occurs in your home. The possible answers are Never (1), Almost Never (2), Sometimes (3), Often (4), Always (5).

	Never	Almost Never	Sometimes	Often	Always
1. You have a friendly talk with your mom.	1	2	3	4	5
A. How about with your dad?	1	2	3	4	5
2. Your parents tell you that you are doing a good job.	1	2	3	4	5
3. Your parents threaten to punish you and then do not do it.	1	2	3	4	5
4. Your mom helps with some of your special activities (such as sports, boy/girl scouts, church youth groups).	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
5. Your parents reward or give something extra to you for behaving well.	1	2	3	4	5
6. You fail to leave a note or let your parents know where you are going.	1	2	3	4	5
7. You play games or do other fun things with your mom.	1	2	3	4	5
A. How about with your dad?	1	2	3	4	5
8. You talk your parents out of punishing you after you have done something wrong.	1	2	3	4	5
9. Your mom asks you about your day in school.	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
10. You stay out in the evening past the time you are supposed to be home.	1	2	3	4	5
11. Your mom helps you with your homework.	1	2	3	4	5

	Never	Almost Never	Sometimes	Often	Always
A. How about your dad?	1	2	3	4	5
12. Your parents give up trying to get you to obey them because it's too much trouble.	1	2	3	4	5
13. Your parents compliment you when you have done something well.	1	2	3	4	5
14. Your mom asks you what your plans are for the coming day.	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
15. Your mom drives you to a special activity.	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
16. Your parents praise you for behaving well.	1	2	3	4	5
17. Your parents do not know the friends you are with.	1	2	3	4	5
18. Your parents hug or kiss you when you have done something well.	1	2	3	4	5
19. You go out without a set time to be home.	1	2	3	4	5
20. Your mom talks to you about your friends.	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
21. You go out after dark without an adult with you.	1	2	3	4	5
22. Your parent lets you out of a punishment early (like lift restrictions earlier than they originally said).	1	2	3	4	5
23. You help plan family activities.	1	2	3	4	5
24. Your parents get so busy that they forget where you are and what you are doing.	1	2	3	4	5

	Never	Almost Never	Sometimes	Often	Always
25. Your parents do not punish you when you have done something wrong.	1	2	3	4	5
26. Your mom goes to a meeting at school, like a PTA meeting or parent/teacher conference.	1	2	3	4	5
A. How about your dad?	1	2	3	4	5
27. Your parents tell you that they like it when you help around the house.	1	2	3	4	5
28. You stay out later than you're supposed to and your parents don't know it.	1	2	3	4	5
29. Your parents leave the house and don't tell you where they are going.	1	2	3	4	5
30. You come home from school more than an hour past the time your parents expect you to be home.	1	2	3	4	5
31. The punishment your parents give depends on their mood.	1	2	3	4	5
32. You are at home without an adult being with you.	1	2	3	4	5
33. Your parents spank you with their hand when you have done something wrong.	1	2	3	4	5
34. Your parents ignore you when you are misbehaving.	1	2	3	4	5
35. Your parents slap you when you have done something wrong.	1	2	3	4	5
36. Your parents take away a privilege or money from you as a punishment.	1	2	3	4	5
37. Your parents send you to your room as punishment.	1	2	3	4	5
38. Your parents hit you with a belt, switch, or other object when you have done something wrong.	1	2	3	4	5

	Never	Almost Never	Sometimes	Often	Always
39. Your parents yell or scream at you when you have done something wrong.	1	2	3	4	5
40. Your parents calmly explain to you why your behavior was wrong when you misbehave.	1	2	3	4	5
41. Your parents use time out (make you sit or stand in a corner) as punishment.	1	2	3	4	5
42. Your parents give you extra chores as punishment.	1	2	3	4	5

**APPENDIX G
ADOLESCENT ROUTINES QUESTIONNAIRE**

Routines are events that occur regularly: at about the same time, in the same order, or in the same way every time. **Please rate how often you engage in each routine by circling a rating ranging from 0 (never) to 4 (nearly always) of how often you engaged in this routine in the last month.** If an item does not apply to you, please mark “0”.

I...	How often does it occur? 0 = Never 1 = Rarely 2 = Sometimes 3 = Often 4 = Nearly Always
1. Wake up at the same time	0 1 2 3 4
2. Get dressed in a timely manner	0 1 2 3 4
3. Wash my face	0 1 2 3 4
4. Brush my teeth	0 1 2 3 4
5. Brush/fix my hair	0 1 2 3 4
6. Shower, bathe, and/or wash my hands and face daily	0 1 2 3 4
7. Use deodorant	0 1 2 3 4
8. Leave for school at the same time	0 1 2 3 4
9. Eat a snack after school	0 1 2 3 4
10. Spend time with friends on week days (i.e., at or after school)	0 1 2 3 4
11. Complete homework in the same place (such as the dinner table) & time	0 1 2 3 4
12. Study/review for tests	0 1 2 3 4
13. Organize my things for the next day	0 1 2 3 4
14. Use the computer	0 1 2 3 4
15. Spend time outside	0 1 2 3 4
16. Pray/say blessing before meals	0 1 2 3 4

17. Eat dinner with family at dinner table	0	1	2	3	4
18. Complete chores regularly (e.g., wash dishes, clean my room, mow the lawn)	0	1	2	3	4
19. Talk with my family about my day	0	1	2	3	4
20. Go to bed at the same time	0	1	2	3	4
21. Talk to my friends on the phone	0	1	2	3	4
22. Participate in sports	0	1	2	3	4
23. Participate in extracurricular activities	0	1	2	3	4
24. Attend after school activities (e.g., sporting events, dances, etc.)	0	1	2	3	4
25. Spend time with friends on the weekend (e.g., hang out, go to movies, etc.)	0	1	2	3	4
26. Spend time doing fun activities with my family	0	1	2	3	4
27. Exercise regularly	0	1	2	3	4
28. Attend church	0	1	2	3	4
29. Ask for permission before going somewhere	0	1	2	3	4
30. Get told by my parents what time to be home	0	1	2	3	4
31. Remind my parents before I leave home for school or other activities	0	1	2	3	4
32. Use good manners	0	1	2	3	4
33. Have specific and consistent consequences for misbehavior (e.g., remove computer, grounded)	0	1	2	3	4

APPENDIX H
AGGRESSION QUESTIONNAIRE

Instructions: Please rate each of the following items in terms of how characteristic they are of you. Use the following scale for answering each of these items:

1	2	3	4	5	6	7	
Extremely uncharacteristic of me						Extremely characteristic of me	
1. Once in a while I can't control the urge to strike another person.	1	2	3	4	5	6	7
2. Given enough provocation, I may hit another person.	1	2	3	4	5	6	7
3. If somebody hits me, I hit back.	1	2	3	4	5	6	7
4. I get into fights a little more than the average person.	1	2	3	4	5	6	7
5. If I have to resort to violence to protect my rights, I will.	1	2	3	4	5	6	7
6. There are people who pushed me so far that we came to blows.	1	2	3	4	5	6	7
7. I can think of no good reason for ever hitting a person.	1	2	3	4	5	6	7
8. I have threatened people I know.	1	2	3	4	5	6	7
9. I have become so mad that I have broken things.	1	2	3	4	5	6	7
10. I tell my friends openly when I disagree with them.	1	2	3	4	5	6	7
11. I often find myself disagreeing with people.	1	2	3	4	5	6	7
12. When people annoy me, I may tell them what I think of them.	1	2	3	4	5	6	7
13. I can't help getting into arguments when people disagree with me.	1	2	3	4	5	6	7

14. My friends say that I'm somewhat argumentative.	1	2	3	4	5	6	7
15. I flare up quickly but get over it quickly.	1	2	3	4	5	6	7
16. When frustrated, I let my irritation show.	1	2	3	4	5	6	7
17. I sometimes feel like a powder keg ready to explode.	1	2	3	4	5	6	7
18. I am an even-tempered person.	1	2	3	4	5	6	7
19. Some of my friends think I'm a hothead.	1	2	3	4	5	6	7
20. Sometimes I fly off the handle for no good reason.	1	2	3	4	5	6	7
21. I have trouble controlling my temper.	1	2	3	4	5	6	7
22. I am sometimes eaten up with jealousy.	1	2	3	4	5	6	7
23. At times I feel I have gotten a raw deal out of life.	1	2	3	4	5	6	7
24. Other people always seem to get the breaks.	1	2	3	4	5	6	7
25. I wonder why sometimes I feel so bitter about things.	1	2	3	4	5	6	7
26. I know that "friends" talk about me behind my back.	1	2	3	4	5	6	7
27. I am suspicious of overly friendly strangers.	1	2	3	4	5	6	7
28. I sometimes feel that people are laughing at me behind my back.	1	2	3	4	5	6	7
29. When people are especially nice, I wonder what they want.	1	2	3	4	5	6	7

VITA

Christine Marie Raines, a native of Charlotte, North Carolina, earned her Bachelor of Arts degree in psychology and sociology, with a minor in Spanish, from Duke University in 2008. She received her Master of Arts degree in psychology from Wake Forest University in 2010. Ms. Raines entered the child clinical psychology program at Louisiana State University in August 2010, from which she is a candidate to receive her Doctor of Philosophy degree in May 2016. She completed an APA-accredited pre-doctoral internship in child clinical psychology at Nationwide Children's Hospital in Columbus, Ohio, in August 2015. She is currently completing a clinical fellowship at Nationwide Children's Hospital and plans to pursue licensure as an independent psychologist following this additional training year.