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Dating Anxiety and Sexual Intimacy Anxiety in Young People Who Harm Sexually: A Comparative Study.

by

Deborah Eagle

A Doctoral Thesis
Submitted in partial fulfilment of the requirements for the award of
Doctor of Philosophy of Loughborough University

Date (December 2012)

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Acknowledgements

WARNING: after 12 years of ups and down there are so many people I need to thank this may read like an Oscar speech, but the people mentioned here deserve to know how much their advice and support has meant. The force is with them all!

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Abstract

The present research aimed to address two questions. First, is dating anxiety associated with sexual intimacy anxiety? Second, do young people who report harmful sexual behaviour, as an offence or harmful dating behaviour, have higher levels of dating and sexual intimacy anxiety than young people who report no harm, non-sexual harm or sexual and non-sexual harm (generalists)? The Dating Anxiety Scale for Adolescents (DAS-A) was used to measure overall dating anxiety. Questions relating DAS-A sub-factors fear of negative evaluation and social distress - dating were amended to measure sexual intimacy anxiety. A scale to measure partnership anxiety and sexual behaviour anxiety were designed. Participants were 77 young people aged 13 to 18 years ($M = 15.4$, $SD = 1.41$). Forty-five (58%) of participants were female and 32 (42%) participants were male.

Results found a strong, significant association between higher levels of dating anxiety and higher levels of sexual intimacy anxiety $r(75) = .80$, $p < .001$. Young people who reported a sexual offence had significantly higher sexual behaviour anxiety than non-sexual offence ($M = 15.82$, $SD = 6.23$, $p = .005$) and generalist offence groups ($M = 21.77$, $SD = 6.53$, $p = .044$). Despite no other significant differences, a pattern emerged that suggests young people who report harmful sexual or generalist dating behaviour may have higher dating and sexual intimacy anxieties. Furthermore, young people who report harmful dating behaviour may have higher anxieties than young people who report an offence. The implications of the findings for future harmful sexual behaviour and harmful dating behaviour research and practice are discussed.
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Introduction

The significance of dating (Collins, 2003) and sexual intimacy (Bancroft, 2006) for adolescents should not be underestimated. Healthy romantic relationships (e.g. feeling secure, cared for, mutual trust) and healthy sexually intimate relationships (e.g. mutually consensual sexual activity, without coercion or pressure) bring with them a whole range of psychosocial benefits (e.g. confidence to interact with the social world) and psychosexual benefits (e.g. positive emotional attitudes and behaviour about sexual intimacy) (Collins, 2003; Miller & Benson, 1999). However, the risks of failure may involve loss of social status, social isolation, being bullied, low self-esteem and depression (Furman, 2002; Lauresen, Finkelstrain & Betts, 2001; Miller & Benson, 1999). It is no wonder therefore, that some anxiety about potential dating relationships is normal for young people (Chorney & Morris, 2008; Glickman & La Greca, 2004).

Chorney and Morris (2008) suggest that dating anxiety is mistakenly subsumed into research on social anxiety. They argue that social anxiety encompasses a broad range of social situations of which dating anxiety is just one part. Hence, Chorney and Morris suggest that the importance of establishing and maintaining healthy dating relationships across the lifespan, dating anxiety is an important area for research in its own right. Therefore, they suggest that the inconsistent research, focused mainly on college-aged heterosexual unmarried American men, needs to be expanded to include special populations, especially adolescents. Chorney and Morris also suggest
that research is required to identify the impact of dating anxiety on the
development of sexual relationships. In addition, Glickman and La Greca
(2004) suggest that more research is required to establish how other factors,
in particular low levels of positive interactions, may contribute to or interact
with dating anxiety.

Research suggests that dating anxiety may have a role in the
development of harmful sexual behaviour (Ward & Gannon, 2006) and
harmful behaviour in dating relationships (Chorney & Morris, 2008; Collins,
2003; Glickman & La Greca, 2004; La Greca & Mackey, 2007). Chorney and
Morris (2008) suggest that dating anxiety may have a negative impact on the
development of sexual relationships and increase risk of dysfunctional sexual
relationships. Furthermore, levels of (heterosexual) dating anxiety may vary
according to whether the ‘victim’ is a child, peer or adult (Graves, cited in
Erooga & Masson, 1999 p. 5). Graves found that young people who reported
harming a peer or adult were half as likely to be rated as lacking in
heterosexual dating confidence, experience and skills than a young person
who reported harming a child.

Research into dating and anxiety and sexual intimacy anxiety may
benefit young people who harm sexually and young people who harm in
dating relationships, in particular young people who harm a partner sexually,
by bringing together theory and research from both fields together. At present,
the majority of harmful sexual behaviour research and practice has been
conducted from a clinical psychology perspective (e.g. cognitive behavioural
development, clinical assessment, intervention and treatment). The majority of research and practice about harmful dating behaviour has been conducted from a welfare perspective (e.g. education, social work and social development). However, harmful sexual behaviour research and practice acknowledges that the field would benefit from a multi-theoretical and interdisciplinary approach (Rich, 2003; Ward & Beech, 2006).

In addition, the current multi-theoretical, holistic and strengths based approach applied in harmful sexual behaviour practice such as The Good Lives Model (Ward & Gannon, 2006) supports research that may enhance the well-being of a young person to develop a more fulfilling and socially integrated lifestyle. Ward and Gannon suggest that developing the skills and confidence to develop intimate and romantic relationships is one of 12 essential areas to work towards with young people. Therefore, understanding the skills and capabilities that the young person may need to develop in order to achieve intimate and romantic relationships, where they come from and how they may break down may make a significant contribution to practice.

Whilst adolescent harmful sexual behaviour treatment aims to support young people to develop and maintain a healthy dating and sexually intimate relationship, there is a lack of knowledge about ‘normal’ dating and sexual intimacy development within the field (Bancroft, 2006; Barbaree & Marshall, 2006; Carson & the AIM Project, 2000). However, established research into dating and sexual intimacy development (e.g. Collins, 2003; Furman, 2002; Lauresen, Finkelstrain & Betts, 2001; Miller & Benson, 1999), dating anxiety
(e.g. Chorney & Morris, 2008; Glickman & La Greca, 2004, La Greca & Mackey, 2007) does exist. Harmful dating behaviour research has been using this knowledge for over 10 years to inform an understanding of why young people may harm their dating partners. However, there remains a lack of research within both harmful dating behaviour and harmful sexual behaviour fields into whether dating and sexual intimacy anxiety may contribute to the development of harmful sexual behaviour, in or out of dating relationships.

This thesis therefore aims to bring together theory, research and practice from clinical and welfare fields to create an integrated approach to dating and sexual intimacy development, to inform and benefit each other. Using the integrated approach, this research explores the relationship between dating anxiety (i.e. anxieties about developing a romantic dating relationship), partnership anxiety (i.e. anxieties about being in an actual romantic relationship, sexual intimacy anxiety (i.e. anxieties about developing a sexually intimate relationship) and sexual behaviour anxiety (i.e. anxieties about actual sexual contact in a dating relationship). The research also explores whether young people who self-report harming sexually have higher dating, partnership, sexual intimacy and sexual behaviour anxieties than young people who self-report harming non-sexually, sexually and non-sexually (generalists), or do not report any harmful behaviour.

The remainder of this introduction begins by providing clear definitions for terms used throughout this research, more information on the integrated approach to dating and sexual intimacy and why a comparative study of
dating and sexual intimacy anxiety in young people who harm sexually is required. The introduction concludes with a summary of each chapter in the thesis.

Definitions

For the purposes of this research the terms “young person”, “adolescent” and “juvenile” are used interchangeably to describe someone 13 to 18 years inclusive. Unless otherwise stated, “child” or “children” refers to someone under the age of 12.

There has been extensive debate about appropriate terminology for young people and children “engaging in abusive sexual acts” (Hackett, 2006, p. 3). Hackett notes the recent shift away from terms such as “adolescent sex offenders” and “young people who sexually abuse” towards the use of the term “sexually harmful behaviour”. Hackett, however, highlights a number of relevant concerns about the formulation of the term sexually harmful behaviour. First, that the term suggests the harm caused is sexual even though evidence from both research and practice support that this is not always the case. The primary harm associated with the sexual behaviour of the young person may be its emotional impact. In addition, Hackett argues “it is possible to harm someone sexually through non-sexual means” (Hackett, 2006, p. 4). He uses the example of how “physical abuse” may impact upon emotional health, relationships with peers and sexual behaviour. All three of these issues are also important for healthy dating and sexual intimacy
Hackett (2006) suggests the term “harmful sexual behaviour” as an alternative. This term, he argues allows for the specification of the behaviours which are of concern, acknowledges the wider impact of the sexual behaviour, especially towards others, and also the context and consequences of the sexual behaviours for the young person displaying them. Therefore, the term harmful sexual behaviour (HSB) may involve one or more young people engaging in contact or non-contact sexual behaviours, including those that are inappropriate for their age or stage of development. The behaviours may range from using sexually explicit words and phrases, viewing or creating hard-core pornography or digital images to inappropriate touching and full penetrative sex. The behaviour may involve incidents of threats, coercion and violence, alone or in combination with each other. A checklist of sexual behaviours increasing in seriousness, as proposed by Carson and the AIM Project (2002), is discussed in chapter 1, section 1.3. Young people may demonstrate harmful sexual behaviour with children, peers and adults. However, it is acknowledged that in some cases where a sexual act is of concern to others as harmful sexual behaviour, a ‘victim’ and/or the young person instigating the act may not perceive the sexual behaviour as harmful.

Young people may also harm sexually and non-sexually (e.g. damage to property, kicking, punching), (Butler & Seto, 2002; Hunter et al., 2004). Young people who instigate this type of behaviour are commonly referred to in
research as “generalists”. Therefore, for the purposes of this research such behaviour will be referred to as harmful generalist behaviour.

Ryan (1997) argues that in addition to sexual act itself, the definition of harmful sexual behaviour must also assess the relationship dynamic and the impact of the behaviour. Therefore Ryan proposes that assessment of harmful sexual behaviour must consider the following:

- Equality: differences in physical, cognitive and emotional development;

- Consent: an agreement which must include a full understanding of what is being proposed, knowledge of societal standards for what it is being proposed, an awareness of the potential consequences and alternatives, an assumption that differences of opinion will be equally respected by both partners and the mental competence to provide consent;

- Coercion: the pressures that deny the victim free choice.

Ryan’s definition of harmful sexual behaviour offers clarity by breaking down levels of harm and coercion within the developmental age of the young person alongside the context of the act itself and identifiable sexual acts. This can prove extremely useful when working with children and adolescents across a wide range of ages, intellectual abilities and cultures. As such it is considered one of the most appropriate definitions of harmful sexual behaviour when working with children and young people. Ryan’s argument is fully supported by the researcher. However, it is acknowledged that the self-report method used in this research meant information about relationship dynamic and impact of the behaviour could not be obtained.
The term harmful non-sexual behaviour is used to refer to harmful behaviours (e.g. punching, kicking, criminal damage) that are instigated by a young person and unrelated to instigation of harmful sexual behaviour. For example, punching and kicking used to physically control another person in an attempt to rape them is harmful sexual behaviour. Kicking and punching used to physically steal a mobile phone where no harmful sexual behaviour is involved is harmful non-sexual behaviour.

The terms “sexual offence” and “non-sexual offence” are used to describe a sexual or non-sexual behaviour defined as illegal within the remit of the country being discussed (e.g. England, Wales, Scotland, Northern Ireland, United States of America). Following consultation with young people who participated in the research, their preferred terms for use in the self-report questionnaire were sexual offence and non-sexual offence. A range of contact and non-contact sexual behaviours ranging from the instigator flashing or exposing their body for sexual pleasure to forced sex, as listed on the Sexual Offences Act 2003 (covering England, Wales, Scotland and Northern Ireland) were used as guidance for young people. The Useful Definitions sheet (see Appendix 6) lists examples taken from Legislation (covering England, Wales, Scotland and Northern Ireland) relating to non-sexual offences, ranging from stealing to grievous bodily harm, were used as examples of harmful non-sexual behaviour. Further information on the 2003 Sexual Offences Act, including types of sexual offences, abuse of position of trust, mental health, sexual consent and protective law can be found in chapter 1, section 1.2.3.
There is no uniform definition or agreed terminology for young people who engage in harmful behaviours towards their partner (Offenhauer & Buchalter, 2011). Previous terms have included “intimate partner violence”, “domestic violence” and “dating violence”. The type of harm usually precedes the term “violence”, for example “sexual violence”. However, Hackett’s (2006) concerns about the reasoning behind the formulation of the term sexually harmful behaviour may be equally applicable here. That is, the harm caused by the acts often extends to beyond the dating relationship in a way that may affect others (e.g. isolation from friends and family). Furthermore, although a young person may experience harmful sexual dating behaviour, the impact (harm caused) may be emotional (e.g. low self-esteem, depression) or physical (e.g. cuts, bruising, unwanted pregnancy). Moreover, research suggests that young people may normalise harmful dating behaviour or accept it as part of sexual play (Barter et al., 2009; Offenhauer & Buchalter, 2011; Sears & Byers, 2007; Wood et al., 2011). They may even perceive it as a show of love (Sanders, 2007). Therefore, throughout this research the term “harmful sexual dating behaviour” refers specifically to harmful sexual behaviour that takes place within a dating relationship. As with harmful sexual behaviour, it must be acknowledged that in some cases where an act is of concern to others as harmful dating behaviour, the ‘victim’ or young person instigating the harm may not perceive it in the same way.

Research does show consistency about context and the behaviours concerned (Barter, 2009; Sanders, 2007). Thus, there is general agreement that harmful dating behaviour involves two young people in a close romantic
relationship that may or may not include sexual intimacy. It (the harmful dating
behaviour) may occur regardless of gender. Harmful acts may involve one or
more incidents on a range of contact and non-contact behaviours, threats or
coercion that occur alone or in combination with each other. The range of
behaviours may be emotional, psychological or verbal (e.g. constant insults,
name calling, put downs), physical (e.g. punching, kicking, stabbing), sexual
(e.g. creating and sharing sexually explicit digital images using mobile phones
or the internet, use of force or coercion to engage in sexual contact, including
sexual intercourse, pressure not to use contraception) or financial (e.g. taking
or controlling money). A full checklist of harmful dating behaviours can be
found in chapter 1, section 1.3.

The term “harmful non-sexual dating behaviour” refers to harmful
behaviour in a dating relationship that does not involve a sexual act. Data on
pressure not to use contraception and harmful financial dating behaviour were
not collected in the questionnaire. Full reasons are provided in chapter 4.
Therefore, the terms harmful sexual behaviour and non-sexual harmful dating
behaviour excludes each of these acts respectively. The term “harmful
generalist dating behaviour” refers to dating behaviour that involves sexual
and non-sexual acts.

Ryan’s (1997) assessment of equality, consent and coercion harmful
sexual behaviour is equally applicable to harmful dating behaviour. Hence, as
Bowen (2012) proposes, harmful sexual dating behaviour includes an
attempted or completed sexual act involving a young person who lacks the
capacity to understand the nature or condition of the behaviour, to refuse to participate or to be unable to communicate any unwillingness to engage in the sexual act. Bowen provides examples of illness, disability, being under the influence of alcohol or drugs or the use of intimidation or pressure. However, as with the definition of harmful sexual behaviour, unfortunately the self-report method used in this research could not assess for equality, consent and coercion.

For the purposes of this research the term dating as defined by Collins (2003) is used:

...on-going voluntary interactions that are mutually acknowledged, rather than identified by only one member of a pair. Romantic relationships, however, also have a peculiar intensity and the intensity can be marked by expressions of affection - including physical ones and, perhaps, the expectation of sexual relations, eventually if not now. (p. 2)

The term “sexual intimacy” refers to engaging in one or more sexual behaviours, alone or combination with each other. These sexual behaviours include kissing, touching and fondling over clothes, touching and fondling under clothes, dry sex (simulating sexual intercourse over clothes), being seen naked, masturbating each other, oral sex (stimulating genitals with mouth or tongue) and sexual intercourse. These acts may vary in terms of closeness and duration. Partners were not included in the research. However, both definitions were fully explained to the participants prior to completing the questionnaire.
For the purposes of this study the same definition of “dating anxiety” used by Glickman and La Greca (2004) is used, with one amendment. The authors use the term “opposite sex”. Young people who “either reported involvement in homosexual relationships or expressed interest in dating a member of the same sex” (Glickman & La Greca, 2004, p. 569) during the development of the dating anxiety scale for adolescents (DAS-A) were excluded from the study. Hence, Glickman and La Greca define dating anxiety as

A concept related to social anxiety but one that is conceptualized as worry, distress and inhibition experienced during interactions with dating partners or members of the opposite sex (i.e., potential dating partners). (p. 567).

Glickman and La Greca argue that dating anxiety consists of three contributory sub-factors:

- Fear of negative evaluation: ‘concern or worry that a date or member of the opposite sex would judge the adolescent in a negative manner’. (p. 568).
- Social distress-date: ‘inhibition and distress while interacting with a single member of the opposite sex’. (p. 568).

However, for the purposes of this study dating anxiety and the three sub-factors (fear of negative evaluation, social distress-date and social distress-group) are related to a potential partner regardless of sexual orientation rather than just the opposite sex. In addition, the definition of dating provided by
Glickman and La Greca excludes anxiety about actual partnership situations. Therefore, the term “partnership anxiety” defines anxieties about actually being in a dating relationship. Partnership anxiety may be associated with fears of rejection and levels of trust in a dating relationship.

There is not, to my knowledge, any definition of anxieties about being sexually intimate with a partner. Therefore, for the purposes of this study “sexual intimacy anxiety” shall be defined as a factor related but separate to dating anxiety. It (sexual intimacy anxiety) may involve similar emotional variables as dating anxiety. That is, fear of negative evaluation and social distress about sexual intimacy with potential partners. However, the focus is potential sexual intimacy rather than dating alone. Sexual intimacy anxiety may be related to fear of negative evaluation or social distress about the potential of engaging in sexually intimate behaviours. The term “sexual behaviour anxiety” refers to actually being sexually active with a partner including kissing, touching and fondling over clothes, touching and fondling under clothes, dry sex (simulating sexual intercourse over clothes), being seen naked, masturbating each other, oral sex (stimulating genitals with mouth or tongue) and sexual intercourse.

**An Integrated Approach to Dating and Sexual Intimacy**

In order to understand the potential relationship between dating anxiety and sexual intimacy anxiety in young people and the potential impact on dating and sexual intimacy behaviours, it is important to understand their role in dating and sexual intimacy development. In addition, as this thesis
examines the role of dating and sexual intimacy anxiety for young people who harm sexually, it is important to understand how the factors may contribute towards harmful sexual behaviour theory and practice. The foundation of this research brings together research theory, knowledge and practice from the clinical psychology field of harmful sexual behaviour, welfare field of harmful dating behaviour and current dating and sexual intimacy research to inform and benefit each other for future development. This is referred to as the integrated approach to dating and sexual intimacy. For the purposes of this research, the Integrated Theory of Sexual Offending (Ward & Beech, 2006), The Good Lives Model-Comprehensive (Ward & Gannon, 2006) and Collins (2003) five feature dating framework have been brought together to form the foundations of the integrated approach.

According to the Integrated Theory of Sexual Offending (ITSO) (Ward & Beech, 2006), the onset of harmful sexual behaviour occurs as a consequence of three primary interacting causal variables. As presented in Figure 1, the causal variables include factors that affect brain development (i.e. evolution, genetic variations and neurobiology), proximal and distal ecological niche factors (i.e. social and cultural environment, personal experience, physical environment) and how together they impact on neuropsychological functioning factors. Factors include emotional problems, social difficulties, cognitive distortions and sexual arousal. The ITSO acknowledges that there is no one single causal factor for the development of harmful sexual behaviour. Not all young people who display harmful sexual behaviour have the same characteristics. Each young person is an individual
with individual needs and therefore a holistic approach is required during assessment, intervention and treatment.

Figure 1: Unified Theory of Sexual Offending. Source: Ward and Beech (2006)

Whilst harmful dating behaviour research has not (to my knowledge) explored factors that affect brain development, the proximal and distal ecological niche factors and the impact on neuropsychological functioning factors presented here have. Hence, a previous experience of physical and sexual abuse, attachment deficits, witnessing domestic or peer violence, lack of parental boundaries, substance misuse, low self-esteem and mental health problems have all been associated with harmful sexual dating behaviour (Connolly, Friedlander, Pepler, Craig & Laporte, 2010; Feiring, Simon & Cleland, 2009; Offenhauer & Buchalter, 2011; Sears, Byers & Price, 2007).
The Good Lives Model-Comprehensive (GLM-C) (Ward & Gannon, 2006) is a comprehensive model of treatment that has been successfully used with young people who harm sexually. Conceptually informed by the ITSO, Ward and Gannon propose that all human beings seek ten “primary goods”, one of which includes developing and maintaining intimate romantic relationships. If achieved, the consequence may be positive psychological wellbeing and happiness. ‘Secondary goods’ provide ways and means of achieving primary goods. For example, possessing the skills and competencies to develop a dating relationship may help achieve the primary of an intimate romantic relationship. The GLM-C has been highly influential in the development of strengths based risk assessment (e.g. AIM and ASSET) and treatment models (e.g. Lucy Faith Foundation and G-MAP).

Ward and Gannon (2006) suggest that some young people may not have the skills, abilities or opportunities to achieve primary goods, of which one result may be harmful sexual behaviour. One example they provide is that, amongst other contributory factors, a young person may lack social skills or opportunities to meet and develop a healthy dating relationship. This may result in the young person avoiding dating. The young person may then choose to seek non-consensual sexual intimacy elsewhere, possibly with a child. Indeed, dating research has found that close friendship groups are important for meeting potential partners (Connolly, Craig, Goldberg & Pepler, 1999). However, social isolation has been associated with harmful sexual behaviour (Ryan, 1997; Rich, 2003). There is however, a lack of knowledge
about ‘normal’ dating and sexual intimacy development and behaviours within the harmful sexual behaviour field to expand upon (Bancroft, 2006).

From a harmful dating behaviour perspective, it (the GLM-C), may contribute to understanding harmful sexual dating behaviour. For example, a young person may possess the skills and competencies to form a dating relationship but multiple factors, (e.g. a lack of sexual knowledge, conflict resolution skills, friends who instigate harmful dating behaviour, previous negative relationship experience), may increase a vulnerability to instigate harmful sexual dating behaviour. Hence, theory and practice currently developed in the harmful sexual behaviour field may be integrated with harmful dating behaviour research to inform each other and expand the possibilities for future development.

The five feature dating framework proposed by Collins (2003) may help to understand the complexities of dating and sexual intimacy development, and how and under what conditions romantic experiences impact on individual development and vice versa. Thus, Collins proposes that the five features of involvement, partner selection, relationship content, quality and cognitive and emotional processes may be essential to understand the developmental significance of dating for young people. Furthermore, these five features help clarify the environmental context of the dating relationship, variations in age and individual differences of the young person upon relationship development. These multiple factors, Collins argues, provide a greater understanding of
how and why there are distinct variations in the development and maintenance of adolescent romantic relationships.

Involvement refers to issues such as age, consistency and frequency of dating. Also considered are the negative cognitive, emotional and social consequences of not being involved in a dating relationship. Partner selection examines the type of person a young person may be in a relationship with, gender and age differences and how this may impact upon positive and negative patterns of behaviour. Content refers to shared activities, what they do and where they do or don’t choose to go together and how this may impact on the quality and length of the relationship. Quality refers to the number of beneficial experiences that come from the relationships. That is high quality relationships may experience intimacy affection, and nurturance. In contrast low quality relationships may have high levels of irritation, stress, conflict and controlling behaviour. Collins maintains that supportiveness and intimacy during relationships are also associated with individual functioning and wellbeing whilst negative qualities are associated with poor self-attributes. Finally, Collins considers cognitive and emotional processes. That is, how an individual regards their self, their partner and relationship when considering emotional responses, perceptions, expectations structure and good or bad attributes. Of special interest, he suggests, is how romantic relationships are linked with peer and parent relationships, how other interpersonal relations are similar or different in terms of support and control.
In addition, Collins argues that context (e.g. culture and community norms and ideals), age related variations (e.g. changes in expectations according to age), and individual differences (e.g. timing of romantic and sexual involvement, peer and familial dysfunctions and mental health), significantly impact upon the developmental trajectory of both romantic and other close friendships from childhood to early adulthood. These factors, Collins argues, provide a greater understanding of how and why there are distinct variations in the development and maintenance of adolescent romantic relationships. A higher number of negative factors may contribute to the development of dysfunctional romantic relationships. However, he suggests that more research is required to identify negative factors and understand their impact on the development of harmful dating relationships.

Hence, Collins’ five feature framework provides a multi-factorial approach to dating development in a similar way that the Integrated Theory of Sexual Offending (Ward & Beech, 2006) provides a multi-factorial approach to harmful sexual behaviour development. For example, Collins proposes that a higher rate of negative factors may lead to the disruption and potential breakdown of a relationship. This may contribute to an understanding of harmful dating behaviour. In addition, the framework may contribute to knowledge about dating and sexual intimacy anxieties. For example, higher than normal levels of adolescent dating anxiety have been associated with more negative interactions with best friends (La Greca & Mackey, 2007), being less likely to be dating and to date less frequently (Glickman & La Greca, 2004; La Greca & Mackey, 2007), and with less positive and more
negative interpersonal relationships with partners (Chorney & Morris, 2008; La Greca & Mackey, 2007).

Collins’ framework focuses on romantic dating development with the expectation of sexual intimacy. However, it may be argued that Collins’ framework could be expanded to include sexual intimacy. Whilst Collins includes expectations of sexual intimacy as part of his definition of dating, sexual intimacy may also occur out of a dating relationship. The context of the relationship may be consensual or non-consensual. Also, sexual intimacy may occur prior to the development of a romantic relationship. For example, meeting at a party, being sexually intimate with a potential partner and then deciding to meet up again and develop a relationship. Alternatively sexual intimacy may occur between two young people who do not meet up again or develop a romantic relationship. Therefore, a sexual intimacy framework may also be able to explore the similar developmental factors, impact of context, age related variations, and individual differences upon sexual intimacy behaviour. It may contain the same five features as: involvement, partner selection, relationship content, quality, and cognitive and emotional processes but the focus is sexual intimacy development and behaviour.

A five feature framework of dating and sexual intimacy (see Figure 2) enables dating and sexual intimacy to be explored alone or in combination with each other, within a dating relationship. The framework reflects the multi-factorial development of dating and sexual intimacy. It acknowledges how romantic dating and sexual intimacy can operate separately or interact with
each other. Hence, a romantic dating relationship may occur without sexual intimacy, a sexually intimate relationship may occur without romantic dating or a romantic dating and sexually intimate partnership may develop. The same multiple factors may contribute to the romantic dating and sexual intimacy development, attitudes, partnership choices and behaviours. Therefore, sexual intimacy anxiety and sexual behaviour anxiety may be explored in or out of a dating relationship.

Hence, the ability of a sexual intimacy framework to interact with a dating framework may contribute to understanding motivators and triggers, and choice of victim may depend upon association with a range of primary and secondary goods, proximal, distal and state factors (Ward & Beech, 2006). For example, Ward and Gannon (2006), suggest multiple factors may result in a young person avoiding dating. They may choose to seek non-consensual sexual intimacy elsewhere, possibly with a child. From a harmful dating behaviour perspective, it may contribute to understanding harmful dating behaviour. For example, a young person may possess the skills and abilities to form a dating relationship but multiple negative factors may increase a vulnerability to instigate harmful sexual dating behaviour. Research on harmful sexual behaviour and harmful dating behaviour fields have both identified negative factors such as lack of sexual boundaries, witnessing domestic violence, inappropriate conflict resolution, skills, and lack of self-regulation as contributory factors.
Work already being done in the harmful sexual behaviour field may contribute to the framework. For example, Vizard (2004) argues that whilst adolescent psychosexual development is influenced by physiological changes, it is largely related to cognitive, interpersonal and social interactions. Therefore individual perceptions of sexually appropriate behaviours are
informed by age, cultural norms and expectations. They are learnt through developmental interactions and interpersonal experiences with others close to them, family and peers for example (Bancroft, 2006; Gil, 1993; Vizard, 2004).

Hence, the integrated approach to dating and sexual intimacy explores dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety as dynamic factors that impact on healthy dating and sexual intimacy development and behaviour. Within the five feature framework, levels of dating and sexual intimacy anxiety may be influenced by other negative or positive factors. Dating anxiety, partnership anxiety, sexual intimacy anxiety and sexual behaviour anxiety may play a role in cognitive and emotional processes within both romantic and sexual intimacy frameworks. These anxieties may interact with and impact on each other.

However, the strength of the relationship between dating and sexual intimacy, and how they may influence and impact upon each other is currently unknown. In addition, it is unknown if young people who harm sexually, in or out of a dating relationship, may have higher dating and sexual intimacy anxieties than young people who do not harm sexually. The research discussed here suggests that young people who harm sexually may be associated with negative factors that may impact on opportunities, skills, (e.g. social isolation, lack of attachment to friends or family, experience of witnessing domestic violence, lack of appropriate dating and sexual knowledge and lack of conflict resolution skills, low self-esteem) to develop a dating or sexually intimate relationship.
**Aims of this Research**

First, this study aims to explore whether higher dating and sexual intimacy anxieties and related sub-factors may be positively correlated. For example, higher levels of dating anxiety are associated with higher levels of sexual intimacy anxiety. The results may contribute to knowledge about the strength of any association between dating and sexual intimacy anxieties. Consequently the results may inform how dating and sexual intimacy impact on each other within the five feature dating and sexual intimacy framework.

Second, this study aims to identify whether young people who harm sexually have higher levels of dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety than young people who do not harm, young people who harm non-sexually and young people who harm both sexually and non-sexually (generalists). Offence and harmful dating behaviour are measured separately for two reasons. First, young people who instigate harmful dating behaviour may perceive it as a normal part of dating development (Barter, 2009; Offenhauer & Buchalter, 2011; Wood, Barter & Berridge, 2011). Second, harmful sexual dating behaviour is a subgroup of young people who harm sexually outside of a dating relationship. Hence, the contextual dynamics of harmful sexual dating behaviour may be different in a relationship, influencing levels of anxiety.

Therefore the outcomes of a comparative study of dating and sexual intimacy anxiety in young people who harm sexually may contribute to future research, practice and theory. Hence, the knowledge that if young people who
report harming sexually have higher dating and sexual intimacy anxiety than young people who report no harm, non-sexual harm or generalist harm may:

- Expand current research on dating anxiety to include associations between sexual intimacy anxiety, sexual behaviour anxiety and partnership;
- Inform how Collins’ (2003) five feature dating framework and the sexual intimacy framework may interact with each other;
- Explore suggestions by Chorney and Morris (2008) that such anxieties may impact on the development of sexual relationships and increase risk of dysfunctional sexual relationships;
- Explore suggestions by Glickman and La Greca (2004) that dating anxiety may impact on the development of harmful dating behaviour;
- Explore whether young people who report generalist harmful behaviour report levels of dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety more similar to young people who report harmful sexual behaviour or non-sexual harmful behaviour;
- Contribute to the Good Lives Model - Comprehensive (GLM-C) (Ward & Gannon, 2006). For example, understanding more about how normal dating and sexual intimacy development may contribute to supporting a young person to develop a healthy dating and sexually intimate relationship.

It should be made clear that this research does not suggest that dating anxiety, partnership anxiety, sexual intimacy anxiety and sexual behaviour
anxiety may be causal factors for the development of harmful sexual behaviour.

Why This Research Needs to Take Place

There is a clear lack of knowledge about what is ‘normal’ adolescent dating anxiety. In particular, there is a lack of knowledge about associations between dating anxiety and previously unexplored anxieties such as sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety. Also, as Glickman and La Greca (2004) suggest, more research is required to examine how dating anxiety may impact on the onset and maintenance of harmful dating relationships. This is equally relevant to sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety. Provided with a wealth of research that suggests dating and sexual intimacy play an important role in healthy adolescent development, indeed across their lifespan, more research that may help to understand and support young people is urgently required.

Ward and Gannon (2006) acknowledge the importance of developing and maintaining healthy dating and sexually intimate relationships for young people who harm sexually during treatment. In addition, since 2004 the Department of Education and Skills (2004) encourages schools to educate beyond biological information about sex and provide knowledge on the emotional consequences associated with dating and sexual intimacy. The DfEE (2000) states that, “effective sex and relationship education is essential if young people are to make responsible and well informed decisions about their lives” (p. 3). The objective is to teach and support young people through
their physical, social and moral development. The guidelines provide a long list of issues to be challenged covering attitudes and values, personal and social skills and knowledge and understanding. All are issues that may be associated with the development of dating and sexual intimacy anxiety, sexually harmful behaviour and intimate partner violence.

Prevention programmes in schools (e.g. the Fourth R) are also being introduced into England and Wales (Wolfe, 2010). Both acknowledge the importance of providing accurate information and assurances about normal dating and sexual intimacy development that may reduce anxiety. Therefore, understanding the role of dating and sexual intimacy anxieties as part of normal dating and sexual intimacy development may contribute to research and practice in both fields. As young people increasingly seek to access Internet websites such as ChildLine for confidential information and advice (Brook, 2005) the knowledge may be used to provide support and reassurance for young people on-line.

In September 2012 the government changed the definition of domestic violence to include 16-17 year olds (Home Office, 2012). The definition and behaviours that are included within the law are discussed in more in chapter 1, section 1.5.1. The change in domestic violence law may impact upon the harmful sexual behaviour as well as harmful dating behaviour. For example, if a young person was reported for harmful sexual dating behaviour for a sexual act that was listed as a sexual offence under the 2003 Sexual Offences act, it is currently unclear through which route they will be referred, if at all. In
addition, television and Internet publicity about government backed awareness campaigns (e.g. “This is Abuse”) and prevention programmes in schools may increase reporting by young people. Therefore, if the young person were under the age of 16 years old, legally they would have to be referred through the sexual offence route. Hence, it is urgent that research and practice in both fields are prepared with knowledge that may enable the most effective support for the young person.

Chorney and Morris (2008) have also identified factors associated with dating anxiety (e.g. depression, substance misuse, social isolation, low social skills and lack of knowledge about appropriate dating behaviour) that have also been associated with harmful sexual behaviour involving children, partners, peers and adults. As research suggests that young people who harm sexually may also be associated with negative factors within the five feature framework and dating anxiety, it is possible that they may have higher anxieties than young people who do not harm sexually. It may be surprising then, that there is no knowledge of whether young people who harm sexually have higher levels of dating and sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety than young people who harm non-sexually, young people who harm sexually and non-sexually or young people who do not report harmful behaviour. There is however clearly an urgent demand for this knowledge.

Participants in the study by Glickman and La Greca (2004) were 757 high school students, primarily from middle class socio-economic
backgrounds. This excludes vulnerable young people with experience of being in care, having disrupted childhoods, being involved in criminal activity or not in mainstream education. Therefore research that includes young people who are not in mainstream education, including young people in a secure children’s unit and community projects for young people at risk of instigating or being a victim of harm may expand knowledge of dating and sexual intimacy anxiety into other populations.

By including reports of harmful dating behaviour separate to young people who report harmful behaviour outside of dating relationships, it may be possible to identify, as Collins (2003) and Glickman and La Greca (2004) suggest, whether higher than normal levels of dating anxiety are associated with dysfunctional dating relationships. Expanding to explore levels of adolescent partnership anxiety, sexual intimacy anxiety and sexual behaviour anxiety, something that has not been explored before, may also help to identify a potential association between potential and actual dating and sexual intimacy anxieties, in and out of dating relationships.

Comparative research between young people who report harmful sexual behaviour, harmful non-sexual behaviour, harmful generalist behaviour and no harmful behaviour may contribute towards understanding more about normal adolescent dating anxiety and sexual intimacy anxieties. In addition, comparative research may contribute to research that suggests young people who harm both sexually and non-sexually (generalists) may be associated with factors more similar to young people who report harmful non-sexual
behaviour only rather harmful sexual behaviour alone (Hunter, Figueredo, Malamuth & Becker, 2004; Pullman & Seto, 2012).

Summary of Chapters

Chapter one examines international and UK research and legal concerns surrounding adolescent harmful sexual behaviour and adolescent harmful sexual dating behaviour. The chapter begins by outlining the legal definitions of a child, a young person, the age of criminal responsibility and how they are applied in the criminal justice system. The chapter then examines how the legal system defines whether a sexual offence has taken place, the legal age of sexual consent, informed consent (the age at which a child is considered to be able to understand what is happening, the implications and consequences of engaging in sexual intercourse), and a list of sexual offences, as defined by the 2003 Sexual Offences Act, (covering England, Wales, Scotland and Northern Ireland). Potential problems with using the legal age of consent as a guideline for harmful sexual behaviour, in particular harmful sexual dating behaviour, are discussed. The chapter also examines a research and practice perspective on sexual behaviours that may be considered ‘normal’, require monitoring or a legal response within a continuum of harmful sexual behaviour.

The prevalence of harmful sexual behaviour and harmful sexual dating behaviour are also explored, with consideration given to under-reporting, adolescent females, young people with learning disabilities, pre-adolescent children and ethnic minority groups. The chapter then explores the same
issues, similarities and differences between the development of the clinical field of harmful sexual behaviour and the welfare field of harmful sexual dating behaviour and coercive control. The chapter concludes by highlighting the similarities and differences, in research knowledge and in practice, between the fields and how they may inform and benefit each other for examining dating sexual intimacy anxieties in young people who harm sexually for this research.

Chapter two explores the current knowledge of normal, healthy dating and sexual intimacy development, from childhood sexualisation, sexual play, and puberty to adolescence. The review explores how both romantic dating and sexual intimacy may develop along an age trajectory amidst physiological changes, individual, social and legal pressures, to fulfil personal expectations and the expectations of others. The chapter examines how positive and negative outcomes may have a significant short-term and long-term impact on psychosocial and psychosexual development, individual well-being, social status and other interpersonal relationships. The chapter also explores the impact of a range of distinctive historical, situational, affective, cognitive and behavioural factors, in particular how poor family and peer attachment, dysfunctional family environment, victimisation, substance misuse, social anxiety and poor mental health may contribute to maladaptive dating and sexual intimacy development and anxieties.

The final part of the chapter highlights how many factors associated with the development of harmful sexual behaviour and harmful dating
behaviour have also been associated with dating anxiety and/or may have a negative impact upon the development of normal dating and sexual intimacy development. The advantages of researching dating anxiety alongside partnership anxiety, sexual intimacy anxiety and sexual behaviour anxiety and the strength of association between them are examined. In addition, a case is made that comparative research may fill in gaps in research for normal levels of sexual intimacy anxieties, similarities and differences between young people who harm sexually, young people who harm non-sexually, young people who harm sexually and non-sexually (generalists) and young people who report no harmful behaviours. The chapter concludes with the hypotheses of the thesis and how the results may inform future research and practice.

Chapter three examines how a pilot project conducting semi-structured interviews contributed to the final design, procedure and materials for the final study. The participants were six young people from a children’s secure unit, \( n = 1 \) female, \( n = 5 \) male) aged 14-16 years \( (M = 14.83, SD = .75) \). Four participants were known to have instigated a non-sexual offence \( (n = 1 \) female, \( n = 3 \) male), and two male participants known to have previously instigated a sexual offence. Both participants known to have instigated a sexual offence also had a history of instigating a non-sexual offence. A semi-structured interview lasting between 30 minutes to one hour explored dating and sexual intimacy development alongside dating and sexual intimacy experience. Data files from the secure unit were used to record demographic data and history of offending. The results identified a range of experiences
that increased anxiety (e.g. instigation or being a victim of harmful dating behaviour, fear of negative evaluation by partners and peers, lack of dating and intimacy experience) and experiences that increased confidence (e.g. commitment, emotional attachment and sexual intimacy).

Ethical issues, child protection, data protection, confidentiality, participant and parental consent requirements for the pilot project are also addressed. The chapter concludes with a review of the limitations of the pilot project including subjective interpretation, confidentiality and data collection where individual files were not available, and how these could be amended in the methodology for the main research data collection.

Chapter four discusses the methodology used in the design, development and implementation of the self-report Not So Scary Dating Questionnaire Pack for the main research. The pack was designed using the results from the pilot project, ethical considerations (including confidentiality, safeguarding children, consent and data protection), an updated literature review and consulting with young people and youth workers. The recruitment procedure and delivery of the questionnaire is discussed in detail.

Seventy-seven young people aged 13 to 18 years ($M = 15.4$, $SD = 1.41$) volunteered to take part in the research. Participants were from three treatment projects for young people referred for harmful sexual behaviour, two children’s Secure Units, three support projects for young people at risk of
school exclusion, one school lunch club and six community youth clubs. Forty-five (58%) of participants were female and 32 (42%) participants were male.

The chapter also explains how the self-report method was used to collect data on history of offending and harmful dating behaviour to assign participants into no harm, sexual harm, non-sexual harm and generalist harm (both sexual and non-sexual harm) groups for comparative analysis within and between harmful dating behaviour and offence groups. Data was also collected for personal history (e.g. history of sexual or physical abuse), dating and sexual intimacy experience and relationships with friends and family).

The Measures section explains how the dating anxiety scale for adolescents (DAS-A), (Glickman & La Greca, 2004) was used to collect data on dating anxiety. Also, how questions in the DAS-A relating to fear of negative evaluation and social distress about dating were amended to gather data on potential sexual intimacy. Information about the design of the sexual behaviour anxiety scale, (used to gather information on anxiety about sexual contact), and the partnership anxiety scale (to gather self-reports on anxiety about actually being in a relationship) are also provided. The limitations of methodology are also discussed.

Chapter five presents the results of the research. The introduction provides a brief review of the reasons behind the study and the hypotheses. The results of each hypothesis are provided sequentially.
The results supported the hypotheses that higher levels of dating anxiety are associated with higher levels of sexual intimacy anxiety. A strong and significant association was found between higher scores of overall dating anxiety and higher scores of overall sexual intimacy. Higher levels of fear of negative evaluation and social distress about potential dating relationships were also associated with fear of negative evaluation and social distress about sexual intimacy. However, the association was stronger for fear of negative evaluation than for social distress.

The association between potential dating and sexual intimacy anxieties and anxieties about actually being in a relationship and actual sexual contact were less clear. A strong significant positive association was found between sexual behaviour anxiety and sexual intimacy anxiety. A weaker medium significant association was found between sexual behaviour anxiety and dating anxiety. Results for partnership anxiety found only a small positive association with dating anxiety and no association with sexual intimacy anxiety.

The mean score for overall dating anxiety was above the results from the Glickman and La Greca study, although still below midpoint. A comparison of other factors with the percentage of young people above midpoint for overall dating anxiety (35%, n = 27), found a higher percentage above midpoint for fear of negative evaluation - dating (44%, n = 34), social distress - dating (39%, n = 30), overall sexual intimacy anxiety (45%, n = 35), fear of negative evaluation - intimacy (43%, n = 33) and social distress - intimacy
A slightly lower percentage was above midpoint for sexual behaviour anxiety (30%, n = 23). A much lower percentage was above midpoint for social distress-group (9%, n = 12) and partnership anxiety (18%, n = 14).

The hypothesis that young people who harm sexually have higher sexual behaviour anxiety was the only factor with significant differences when all participants were included in the analysis. Young people who reported a sexual offence had significantly higher sexual behaviour anxiety than young people who reported a generalist offence and young people who reported a non-sexual offence. However, no significant difference was found between young people who reported a sexual offence and young people who reported no offence or between the harmful dating behaviour groups. Despite non-significant results, a pattern emerged when all participants were included in the analysis and during specific behaviour analyses (when each participant was put in one group according to one or a combination of behaviours), that suggests young people who report harmful sexual dating or generalist dating behaviour may have higher dating and sexual intimacy anxieties than young people who do not. Also, young people who report harmful dating behaviour may have higher dating and sexual intimacy anxieties than young people who do not. Females reported significantly higher overall dating anxiety and social distress about dating, overall sexual intimacy anxiety, fear of negative evaluation about sexual intimacy and social distress about sexual intimacy than males.
Although analysis for differences between groups for young people who reported an anxiety score above midpoint did not find any significant differences, significant differences were found below midpoint. All differences involved young people who reported harmful sexual or generalist dating behaviour or the sexual harm group (all participants who reported any form of harmful sexual behaviour), having higher dating or sexual intimacy anxieties than other groups.

Chapter six discusses the findings. Informed by the significant and non-significant associations between dating anxiety, sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety, young people who report higher overall dating anxiety may also report higher sexual intimacy anxiety. In addition, there may be a stronger association for worries or concerns about being evaluated negatively than avoidance, distress and discomfort in potential dating and potential sexually intimate situations. Young people who report higher anxieties about sexual contact behaviour may also report higher anxieties about potential dating and potential sexual intimacy. Not surprisingly the association may be stronger for sexual intimacy anxiety than for dating anxiety. However, levels of sexual experience may impact upon the strength of association for dating anxiety only.

The discussion proposes that the significance and the strength of the relationship between dating and intimacy anxiety supports an increasing body of research that contradicts previous notions of adolescent dating as a low ranking transitory period into adulthood (Collins, 2003; Furman, 2002). It also
supports proposals that dating and sexual intimacy development may be meaningfully inter-related during adolescence (Bancroft, 2006; Coleman & Hendry, 1999; Collins, 2003; Miller & Benson, 1999). Furthermore, that the differences in the significance and strength of association between potential dating and sexual intimacy anxieties and actual dating and sexual intimacy anxieties coupled with the potential impact of sexual experience suggest that dating anxiety scales and sexual intimacy anxiety scales may not be measuring the same thing.

The findings support those by Glickman and La Greca (2004) that some dating anxiety may be normal. In addition, some sexual intimacy anxiety, fear of negative evaluation, social distress and sexual behaviour anxiety may also be normal. Furthermore, more young people may have higher anxieties about potential sexual intimacy than potential dating, actual sexual contact and being in a relationship. However, as this is the first study to research sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety and the participant group was very different to that in the Glickman and La Greca study, the need for more research to establish an agreement on what may be ‘high’ or ‘low’ anxiety and what normal levels of adolescent dating anxiety, sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety may be is discussed.

The findings that suggest young people who report a sexual offence may have higher anxiety about engaging in sexual contact behaviours than young people who report a non-sexual offence or young people who report
generalist offence, but not young people who report no offence are also discussed. Also, the implications of increases and decreases in mean scores after specific behaviour analysis. Despite not being statistically significant, the pattern of results suggests young people who reported sexual specific and generalist harmful dating behaviour may have higher dating and sexual intimacy anxieties than young people who report no harm and non-sexual harm, in and out of dating relationships. In addition, higher mean scores were consistently found for young people who reported harmful dating behaviour than for the offence group match. For example, young people who reported harmful generalist dating behaviour had a higher mean anxiety score than young people who reported a generalist offence.

The significant and non-significant differences between males and females, the prevalence of females in the harmful dating behaviour and no harm groups and the impact that may have had on the results are discussed. It is also suggested that future research may examine the impact of the developmental experiences of males and females on differences in strength of association and level of dating anxiety, sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety.

The limitations of small participant numbers, using a quantitative self-report method and suitability of the DAS-A are acknowledged and discussed. Suggestions are made for engaging a larger participant group with the ability to develop age and language appropriate adolescent dating anxiety, sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety scales
using factor analysis. This may allow the further exploration of dating and sexual intimacy development separate to but potentially interacting with each other.

Throughout the discussion, a case is made for how the findings from this research may contribute to an Integrated approach to dating and sexual intimacy development which may be understood within the five feature dating and sexual intimacy framework. In addition, how the study achieved its aims by successfully bringing together the fields of harmful sexual behaviour and harmful dating behaviour to benefit and inform each other, paving the way for future research and practice development that may have a positive impact on dating and sexual intimacy development for young people.
Chapter 1

Adolescent Harmful Sexual Behaviour:

Legal and Research Concerns
1.1 Introduction

Over the past 30 years there has been a surge of international concern about policy, practice and the developmental characteristics of young people who harm sexually (Barbaree & Marshall, 2006; Masson & Hackett, 2003; NCH, 1992; Pullman & Seto, 2012; Ryan, Lane, Davis & Isaac, 1987; Ryan, Leversee & Lane, 2010). It is now firmly recognised that children and adolescents who harm sexually are very different from adults who do so. Ongoing research (predominantly from a clinical perspective), the development of assessment, intervention and treatment programmes, changes in the law, policy and practice all reflect the significance of the issue. Adolescent harmful sexual behaviour research acknowledges that young people under the age of 18 years old do harm partners sexually in dating relationships (White, Kadlec & Sechrist, 2006). However, little knowledge on the subject exists (Barbaree & Marshall, 2006; Bowen, 2012).

Over the past fifteen years welfare research and practice (e.g. in education, social work and social development) has raised significant international concerns about harmful dating behaviour, including harmful sexual dating behaviour (Wolfe et al., 2001; Barter, 2009). As with the harmful sexual behaviour field, research and practice acknowledge that young people who instigate harmful dating behaviour are very different from adults who engage in similar behaviours. In the UK, there has been government and national charity backed research (e.g. NSPCC, ChildLine), and Internet and television media campaigns (e.g. This is Abuse) to increase awareness and
provide advice and support to young people. Furthermore, in 2012 the UK Domestic Violence law changed to include young people aged 16 to 18 years.

When discussing the field of adolescent harmful sexual behaviour and sub-groups (e.g. young people who harm children, peers, partners, generalists), it is impossible to ignore the complexities or context of international laws, guidance, and terminology and how this changes over time. On-going debate has serious implications for statistics, and developmental research, policy and practice internationally. Ultimately this has a significant impact on the welfare of the child or young person concerned (e.g. emotional support, mental health, education, accommodation, medical services). In order to discuss young people who harm sexually in detail we must first define what this means.

This chapter will begin by providing an outline of legal and research definitions, terminologies and known prevalence rates in the field of adolescent harmful behaviour. It will go on to discuss similar issues of harmful sexual behaviour in dating relationships and coercive control from a welfare perspective. The chapter will conclude by highlighting similarities and differences between the two fields, how they may inform and benefit each other.

1.2 Legal Definitions

In order for a young person to be referred to the criminal justice system for a sexual offence, three things must exist within the legal jurisdiction of the
young person’s country (e.g. England and Wales). First, they must fall within the legal definition of a child or young person. Second, they must be considered a child over the age of criminal responsibility. Third, the individual must have allegedly committed a legally documented sexual offence.

1.2.1 Definition of a Child. In the UK there is no single law that defines the age of a child. Article 1 of the United Nations Convention on the Rights of a Child (1989) states that “a child means every human being below the age of eighteen years unless under the law applicable to the child” (p. 2). The majority of American states and European countries have also adopted the UN definition of a child and apply it to their criminal justice systems (Barbaree & Marshall, 2006).

1.2.2 Age of Criminal Responsibility. There is less international agreement about the age of criminal responsibility. The United Nations [UN] (1985), standard minimum rules for the administration of juvenile justice, also known as The Beijing Rules state that:

In those legal systems recognizing the concept of criminal responsibility for juveniles, the beginning of that age shall not be fixed at too low an age level, bearing in mind the facts of emotional, mental and intellectual maturity. (Rule 4.1, p. 3).

Related commentary in the same document also states that the notion of responsibility should be closely related to “other social rights and responsibilities” (UN, p. 3), marriage and voting age for example.
Whilst the UK ratified the UN Convention definition of a child in 1991, it did not apply the recommendations of the Beijing Rules on criminal responsibility. Section 34 of the Crime and Disorder Act 1998 (covering England and Wales) legislates that any child aged 10 years or more who commits a criminal act will understand their actions as wrong and the consequences of them. They (the child or young person) is therefore liable to face criminal charges and if convicted will be sentenced accordingly. The age of criminal responsibility for Northern Ireland is also 10 years, under section 3 of the Criminal Justice (Northern Ireland) Order 1998. Under section 52 of the Criminal Justice and Licensing (Scotland) Act 2010 the age for criminal prosecution is 12 years. However, the age of criminal responsibility is 8 years, and section 42 of the Criminal Procedure (Scotland) Act 1995 states that nobody except the Lord Advocate can give instruction for the prosecution of a child under the age of 16 years. Although the age of criminal responsibility is 12 years in Ireland, there is an exception for more serious crimes, including sexual assault and rape, where children may be charged from age 10 years. However, no young person under the age of 14 can be proceeded against without the permission of the Director of Public Prosecutions.

Other European jurisdictions for criminal responsibility range from 12 to 18 years. Most states in the USA do not state a legal age for prosecution, although those that do range from 6 to 12 years (Barbaree & Marshall, 2006). Like England and Wales, Australia’s age of criminal responsibility is 10 years, however they have *doli incapax* set at age 10 to fewer than 14 years in law (Australian Institute of Criminology, 2005). That is, a young person cannot be
convicted of a criminal offence unless the prosecution can prove that the young person knew the difference between right and wrong.

In England and Wales the legal age at which a child or young person is considered responsible enough to give sexual consent is 16 years, the age at which they may be considered mature enough to provide informed consent (that is grant permission to sexual intercourse in full knowledge of the possible consequences) is 13 years. In addition, a young person cannot get married until 16 years or vote until 18 years. However, the age of criminal responsibility laws in England, Wales and Northern Ireland render that a child of 10 years, still in primary school, is considered emotionally, mentally and intellectually mature enough to commit a sexual offence. Youth Statistics reports for England and Wales do distinguish between a ‘child’ as a ‘person under the age of 14’ and a ‘young person’ as ‘a person over the age of 14 but under 18’ years old, (Youth Justice Board & Ministry of Justice, 2010). However, the age of criminal responsibility in England, Wales and Northern Ireland do not comply with notions of “emotional, mental and intellectual maturity” or “social rights and responsibilities” as suggested by the UN and therefore clearly contravenes the guidelines provided by The Beijing Rules. In addition, critics in the UK (e.g. Jacobson et al., 2010) and Europe (e.g. United Nations, 2002) suggest that the age set is misinformed and highly inappropriate for use with children.

1.2.3 Types of Sexual Offence. Criminal laws against sexual assault are enshrined to protect adults and children from sexual abuse and
exploitation internationally. In legal terms it follows that a sexual act that is also considered to be a criminal offence also requires a legal definition of sexual consent. If consent is not given, the individual who has forced the sexual act has, under the law, committed a sexual offence and the non-consenting individual is a victim. However the issue of sexual consent, if, how and when it can be given has caused contentious debate across legal, clinical and research fields.

Most countries, including the UK, have criminal laws in place that identify a legal definition of sexual consent, informed consent, a legal age for sexual intercourse and a list of contact and non-contact sexual offences. Breaking these laws may lead to prosecution as a sexual offender. All western jurisdictions prohibit non-consensual sexual behaviour of any kind, including kissing, touching, fondling and penetration (Barbaree & Marshall, 2006). Other laws distinguish between sexual offences that use force and sexual offences in which a child engages in sexual activity willingly but is exploited or unable to give informed consent. That is, the child has a clear understanding of what is happening, and the implications and consequences of engaging in sexual intercourse.

The legal age and definitions of sexual consent in the UK are as follows:

- England and Wales: a person consents if s/he “agrees by choice and has the freedom to make that choice”, (Sexual Offences Act 2003, Part
1, Section 74). The age of sexual consent is 16. The age of informed consent is 13 years;

- Scotland: consent means “free agreement”, (Sexual Offences (Scotland) Act 2009 Part 2, Section 12). The age of sexual consent is 16. However, the age of informed consent is 12 for girls and 14 for boys;

- Northern Ireland: sexual consent is someone who “agrees by choice, and has the freedom and capacity to make that choice” (The Sexual Offences (Northern Ireland Order 2008), Part 1 Article 3). The age for sexual consent is 16. The age of informed consent is 13.

The Sexual Offences Act 2003 (which covers England, Wales, Scotland and Northern Ireland) provided a major overhaul of sexual offence legislation to protect adults, children, and people with mental disorders from abuse. Statement sexual offences included:

- Contact (e.g. rape, sexual assault, frotteurism and penetration);
- Non-contact (e.g. coercion to watch others perform sexual acts; exhibitionism, voyeurism; making or watching pornographic material);
- Abuse of position of trust, (e.g. someone responsible for the well-being of a child causes or incites a person into consensual sexual activity);
- Adults and young people with mental disorders are now protected in situations whereby they may be forced, coerced or willingly take part in sexual activity in which their choice is impeded;
- Protective laws, which cover children, were put in place for 16-18 year old young people who may be considered old enough to give sexual
consent but are still vulnerable to exploitation. These include indecent
photography, prostitution, pornography, abuses of trust, sexting,
(sending sexually explicit and exploitative photographs of people by
mobile phone), and deception.

International laws relating to the legal age of sexual consent are
diverse. In a review of international laws about sexual consent and sexual
offences, Barbaree & Marshall, (2006) found that the age of sexual consent in
the majority of countries was 16-18 years. In addition, international laws had
similar legislation in place regarding sexual offences, especially for rape,
penetrative sex and pornographic material.

1.2.4 Problems with Legal Consent. When considering working
with young people who harm sexually there are a number of potentially
problematic issues to be aware of when using the legal age of consent as a
guideline for harmful sexual behaviour. This is especially the case when
examining international research, statistics, policy and practice. For example,
the legality of the same sexual activity varies across legal jurisdictions. Thus,
whilst consensual sexual contact is legal at 14 in some states of the US (Rich,
2009) it would be illegal in the UK.

An additional problem with using the definition of legal consent is that it
can criminalise consensual sexual activity between young people. Whilst it
may be illegal, a significant minority of young people do engage in sexual
intercourse and a range of sexually intimate behaviours under 16 (Ghate &
Spencer, 1995; Mercer et al., 2006; Wellings, Johnson & Wadsworth, 1995). The results from a study of teenage sexual activity in the United Kingdom by The Brook Centre (2005) found that since the 1950’s the age at which the majority of young people may have their first sexual experience has dropped from 16 to 14 for girls and from 15 to 13 for boys. The majority of young people who took part in the study reported first sexual intercourse at the legal age of 16. However 30% of boys and 26% of girls reported having consensual intercourse before their sixteenth birthday. Furthermore, the social and moral climate, culture and religion all influence perceptions of the fine line between deviancy and criminality (Coleman & Hendry, 1999; Larsson, 2001; Ryan, 1993). For example, criminal law and tolerance of homosexual behaviour has been much slower to change owing to discrimination, and moral and religious condemnation.

There is a strong need therefore, to acknowledge that whilst young people who engage in mutually consensual sexual intercourse may be considered deviant in that sexual intercourse under the legal age is not the norm, their behaviour may not be viewed as harmful sexual behaviour under the research definition discussed in the Introduction. This perspective is supported by a wealth of research and policy recommendations (e.g. Barbaree & Marshall, 2006; Erooga & Masson, 1999; Morrison, 1999; NCH, 1992; Rich, 2003; Scottish Government, 2011; Vizard, Hickey, French & McCrory, 2007; Vizard, Monck & Misch, 1995).
In such cases it may be useful to consider harmful sexual behaviour as “a subset of deviant sexual behaviour; not all deviant sexual behaviours are abusive, but all abusive sexual behaviours are considered to be deviant” (Barbaree & Marshall, 2006, p. 10). There is a general agreement amongst researchers and practitioners that there are a range of sexual behaviours displayed by children and young people that may be perceived as unusual, inappropriate, unhealthy, abnormal, perverse or deviant but do not constitute a sexual offence (Arai, 1997; Bancroft, 2006; Barbaree & Marshall, 2006; Cavanagh Johnson & Feldmuth, 1993; Gil, 1993; Print, Morrison & Henniker, 2000; Rich 2003). In some cases such behaviours may be illegal, in others they are non-offending or personal to the individual. Nevertheless, negative motivators and consequences of underage sexual intercourse should not be overlooked (Mercer et al., 2006; Raab, Abraham, Buston, Hart & Scott, 2002). Therefore, the child or young person may need to receive some form of intervention or treatment, but not necessarily one developed especially for young people who harm sexually.

These issues are reflected in the guidelines of the 2003 Sexual Offences Act. The guidelines suggest that children between the ages of 13 and 16 years (of similar age) should not be prosecuted so long as consent from both parties has been given and does not involve abuse or exploitation. Thus, if a 15 and 16 year engage in mutually consensual sexual intercourse it may be considered illegal and unhealthy but criminal charges are unlikely to be made. However, if a young person of 14 years has consensual sexual intercourse with a child of 12 years that would be considered statutory rape.
Although they are of similar age and the child may have been engaged in sexual activity willingly, in the eyes of the law the child is unable to give informed consent and therefore has been exploited and a sexual offence committed. Recognition of these guidelines and law is useful to avoid young people unnecessarily entering the criminal justice system or ending up with a criminal record that may affect the rest of their lives.

Harmful sexual behaviour may also involve incidents of threatening and non-threatening coercion to gain sexual compliance (Marshall & Barbaree, 2006; Rich, 2006; Ryan, 1997). For example, a 14 year old brother may coerce a nine year old sibling to willingly engage in sexual activity by declaring it a display of how much they are loved. Whilst the sexual activity does not involve force and compliance is gained, the age of the sibling and nature of the relationship with the brother dictate that under the law, a sexual offence has been committed. Other examples of coercion include threats of violence against the victim, friends or family. The extent and nature of coercion involved may be less apparent with an older victim whereby they are legally able to give informed consent but may still be vulnerable to exploitation. In some cases the previously discussed UK protective laws concerning abuses of positions of trust and consideration of mental health will aid identification. However, the fine line that exists between consent and coercion may be considerably more blurred if two young people are in a dating relationship. This subject will be discussed in more detail later in the chapter.
1.3 Research and Clinical Definitions

The Report of the Committee of Enquiry into Children and Young People who Sexually Abuse Other Children (NCH, 1992) provided a turning point for research and practice for young people whom harm sexually in the UK. Amongst its working recommendations for the identification of harmful sexual behaviour was that informed consent, power imbalance coupled with the use of exploitation and coercion all need to be taken into account. The report subsequently identified a checklist of questions related to definitions, terminology, policy and practice that should be considered during assessment, intervention and treatment. The follow up review of practice and service delivery (Masson & Hackett, 2003) identified publications by O’Callaghan and Print (1994) and Ryan and Lane (1997) that supported this perspective.

As discussed in the Introduction, Ryan (1997), referred to previous definitions of harmful sexual behaviour that describe “any sexual interaction with person(s) of any age perpetrated (1) against the victim will (2) without consent, or (3) in an aggressive, exploitative, manipulative or threatening manner” (p. 3). This definition continues with a list of identifiable contact sexual offences: penetration, oral, anal or vaginal and digital, penile or objectile rape and non-contact offences such as exhibitionism, peeping or voyeurism, frottage, fetish, obscene communication, verbal or written harassment. Ryan argues that in addition this definition of harmful sexual behaviour and the sexual act itself, relationship dynamic and the impact of the
abuse require serious consideration. Thus, assessment must also consider the context of equality, consent and coercion.

Ryan’s definition formed the basis for the development of the UK framework project for sexually harmful behaviour Assessment, Intervention and Moving On [AIM] (Print, Morrison & Henniker, 2000) that is in turn supported by the Youth Justice Board, G-Map and the National Society for the Protection of Children [NSPCC]. The definition provided in the NSPCC policy summary ‘Children and Young People who Perpetrate Sexually Harmful Behaviour’ states that “sexually harmful behaviour is a sexual behaviour which is perpetrated against the other person’s will in an aggressive, manipulative, and exploitative or threatening way.” (p. 2). Based on work by Ryan and Lane (1991), AIM expands upon a checklist of normal and abusive sexual behaviours increasing in seriousness and proposed action as presented in Table 1.1.
Table 1.1
Checklist of sexual behaviours increasing in seriousness

<table>
<thead>
<tr>
<th>Normal behaviours</th>
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<tbody>
<tr>
<td>Explicit sexual discussion among peers, use of sexual swear words, obscene jokes</td>
</tr>
<tr>
<td>Interest in erotic material and its use in masturbation</td>
</tr>
<tr>
<td>Expression through sexual innuendo, flirtations and courtship behaviours</td>
</tr>
<tr>
<td>Mutual, consenting non-coital sexual behaviour (kissing, fondling, etc.)</td>
</tr>
<tr>
<td>Mutual, consenting masturbation</td>
</tr>
<tr>
<td>Mutual, consenting sexual intercourse</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Behaviours that suggest monitoring, limited responses or assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual preoccupation/anxiety</td>
</tr>
<tr>
<td>Use of hard-core pornography</td>
</tr>
<tr>
<td>Indiscriminate sexual activity/intercourse</td>
</tr>
<tr>
<td>Twinning of sexuality and aggression</td>
</tr>
<tr>
<td>Sexual graffiti relating to individuals or having disturbing content</td>
</tr>
<tr>
<td>Single occurrences of exposure, peeping, frottage or obscene telephone calls</td>
</tr>
<tr>
<td>Behaviours that suggest assessment/intervention</td>
</tr>
<tr>
<td>Compulsive masturbation if chronic or public</td>
</tr>
<tr>
<td>Persistent or aggressive attempts to expose other’s genitals</td>
</tr>
<tr>
<td>Chronic use of pornography with sadistic or violent themes</td>
</tr>
<tr>
<td>Sexually explicit conversations with significantly younger children</td>
</tr>
<tr>
<td>Touching another’s genitals without permission</td>
</tr>
<tr>
<td>Sexually explicit threats</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Behaviours that require a legal response, assessment and treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persistent obscene telephone calls, voyeurism, exhibitionism and frottage</td>
</tr>
<tr>
<td>Sexual contact with significantly younger children</td>
</tr>
<tr>
<td>Forced sexual assault or rape</td>
</tr>
<tr>
<td>Inflicting genital injury</td>
</tr>
<tr>
<td>Sexual contact with animals</td>
</tr>
</tbody>
</table>


Ryan’s definition and the continuum of sexual behaviours proposed by AIM are comparable with Rich (2006). He argues that an alternative method
may be assessing elements of inequality in the relationship such as age, physical size, position of power or mental capacity, the nature and context of consent or coercion. One end is a boundary violation with little risk of harm and the other end is where consent is neither sought nor given and results in extreme fear and harm for the victim, Rich argues that this is best represented by the definition provided by the National Task Force on Juvenile Sexual Offending (1993). That is, “sexual abuse is any sexual behaviour which occurs (a) without consent, (b) without equality or (c) as a result of coercion” (National Task Force, 1993, p. 11 cited in Rich, 2003, p. 16). Each of these three elements must consider interacting and overlapping issues within the dynamics of the relationship including “the presence and nature of consent, the equality of participants, and the use of force, deception, manipulation, or coercion in inducing participants to engage and remain engaged in sexual behaviour” (Rich, 2009, p. 158).
Rich subsequently presents a range of contact, non-contact and other forms of sexual behaviours that exist along a continuum of aggression, as presented in Figure 1.1:

<table>
<thead>
<tr>
<th>Sexual Act</th>
<th>Threats, Force or Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obscene phone calls</td>
<td>None</td>
</tr>
<tr>
<td>Theft of clothing for sexual purposes</td>
<td>Slight</td>
</tr>
<tr>
<td>Voyeurism</td>
<td>Moderate</td>
</tr>
<tr>
<td>Threats of sexual harm</td>
<td>Strong</td>
</tr>
<tr>
<td>Exhibitionism</td>
<td>Extreme</td>
</tr>
<tr>
<td>Public masturbation</td>
<td></td>
</tr>
<tr>
<td>Distribution or depiction of sexually obscene material</td>
<td></td>
</tr>
<tr>
<td>Frottage</td>
<td></td>
</tr>
<tr>
<td>Fondling and molestation</td>
<td></td>
</tr>
<tr>
<td>Oral sex</td>
<td></td>
</tr>
<tr>
<td>Digital penetration</td>
<td></td>
</tr>
<tr>
<td>Object penetration</td>
<td></td>
</tr>
<tr>
<td>Penile penetration</td>
<td></td>
</tr>
<tr>
<td>Sexual torture and homicide</td>
<td></td>
</tr>
<tr>
<td>Creation of child pornography</td>
<td></td>
</tr>
<tr>
<td>Possession and distribution of child pornography</td>
<td></td>
</tr>
<tr>
<td>Bestiality</td>
<td></td>
</tr>
</tbody>
</table>

*Figure 1.1* The range of sexual offenses: Nonassaultive, assaultive, and other, and the presence of aggression. Source: Rich, 2003, p. 19

This concept of a continuum alongside the contextual issues of equality, consent and coercion is extremely useful when considering evidence that most harmful sexual behaviours instigated by young people are coercive as opposed to the use of extreme aggression and violence (Ryan, Miyoshi, Metzner, Krugman & Fryer, 1996; Weinrott, 1996), but that the amount of coercion used may increase with the age of the victim, (Becker, Cunningham-Rathner & Kaplan, 1996). If, as Ward and Gannon (2006) suggest, they are
applied together using a holistic working practice, an assessment of young people who have been reported for harmful sexual behaviour can provide recommendations of intervention and treatment that are most appropriate and likely to be most successful for each young person as an individual. It is this ability to recognise individual needs which is so essential for the future development of the young person, those around them and ultimately to prevent recidivism.

1.4 Prevalence of Young People who Harm Sexually

In 2009/10 police forces in England and Wales recorded 9,636 child and adult suspects of sexual offences. Of these 23% (nearly a quarter) were under the age of 18 years old (NSPCC, 2011). A review of Youth Justice annual workload data reports between 02/03 to 09/10 show that annually a minimum of 1,664 and a maximum of 2,088 children and young person’s received a disposal for at least one sexual offence (Youth Justice Board 2004; 2005; 2006; 2007; 2008; 2009; Ministry of Justice /Youth Justice Board 2010; 2011). The majority (approximately 98%) were young males. The most common age was 14-15 years (40.5%). However, the arrest rate for adolescent females is increasing at a faster rate than for males. This is possibly due to a greater awareness rather than increased activity (Kubik, Hecker & Righthand, 2002).

International reports are very similar. Using data from the National Incident-Based Reporting System (NIBRS), in the United States, Snyder (2000) produced a statistical report on the sexual assault of young children.
Collating data reported in twelve US states from 1991 to 1996, he found that 23.2% of all sexual assaults were committed by adolescents under 18 years, of which 16% of perpetrators were under the age of twelve. Using NIBRS 2004 data from 29 states, Finkelhor, Ormrod and Chaffin (2009) identified 14,000 incidents involving a juvenile aged between 6 and 17 years that were alleged or known to have committed a sexual offence. That accounted for more than one third (35.6%) of those known to the police to have perpetrated a sexual offence against a child during this period. Of those known to the police, 16% were under the age of 12 and 5% were under 9 years. As with recorded data in the UK, males constituted the majority of perpetrators, 93% compared to 7% of females. However, in contrast to UK statistics young girls represented a greater number of children under the age of 12 years than boys, 31% as opposed to 14%. This may be due to the inclusion of jurisdictions that have a lower age of criminal responsibility than the UK. Analysis of recorded data across Australia, Canada and Europe has identified results consistent with those from the United States and UK (Boyd, 2006; Hopper, 2005; Lowenstein, 2006).

However, recorded crime statistics underestimate the true extent of adolescent harmful sexual behaviour. First, crime reports only represent sexual crimes by young people who are over the age of criminal responsibility within their jurisdiction, have been recognised and reported as perpetrators and, in conviction statistics, had sufficient evidence to proceed forward to prosecution. Second, the law within the jurisdiction in which the offence has occurred and recommendations for an appropriate response define what is
and what is not perceived as harmful sexual behaviour. Finally, only a minority of sexual offences ever enter the criminal justice system (Morrison, 2000). A significant amount of harmful sexual behaviour is unreported, misconceived, misinterpreted, or goes unchallenged (Cawson, Wattam, Brooker & Kelly, 2000; Erooga & Masson, 2006; Grubin, 1998; Hopper, 2010; May-Chahal & Cawson, 2005).

There is a prevalence of unrecorded sexual offences perpetrated by known sex and non-sex offenders in the criminal justice system and services. Knight and Prentky (1993) for example, found that 33% of known adult sex offenders without convictions for a sexual offence under the age of 18 years old admitted to perpetrating harmful sexual behaviour during adolescence. Drawing on statistics from the US National Adolescent Perpetrator network, Grubin (1998) also identified approximately one quarter of sexual offenders over the age of 12 years who had perpetrated harmful sexual behaviour before the age of criminal responsibility within their jurisdiction. However, only 10% of that sample had previously been charged with a sexual offence.

The co-occurrence of harmful sexual and non-sexual (generalist offenders) is also prevalent. In a study of 471 young people in residential and community facilities treating male sex and non-sex offenders, Burton (2000) found nearly one third of participants referred for a non-sexual offence admitted perpetrating a sexual offence. A similar study of 258 young females referred to a specialist forensic treatment service by Mairead, McCartan, Law, Murphy and Bailey (2011) identified 31 cases (12%) of harmful sexual
behaviour, only five of which had been referred for a sexual offence. Data from the first published Scottish study of young people referred to specialist harmful sexual behaviour services reflected similar data (Hutton & Whyte, 2004). Males represented the majority of young people (94% compared to 6% females), with over half being referred between the ages of 13 to 15 years. However, at the time of referral 45% were engaging with services voluntarily with no legal status. Only 4% were referred as part of a court disposal.

The under-reporting by victims is also a significant issue for identifying young people who harm sexually. Children who have been harmed sexually over a long period of time (Bacon & Richardson, 2000) and by another child or young person (Lamb & Newberger, 1989 cited in Lamb & Coakley, 1993) are significantly less likely to report it to an adult. Reasons for not disclosing abuse include fears of not being believed, shame, fear of causing trouble in the family, ignorance of protective agencies, lack of awareness of being abused, mistrust of adults and professionals and fear of the consequences of disclosure (Crisma, Bascelli, Paci & Romito, 2004; Kelly, Regan & Burton, 1991). Even if they do share victimisation experiences with another person, most likely a female friend or close relative, and are believed, the majority are not reported to an agency (Kelly et al., 1991). Disclosure may also be inhibited as it is misconceived as playful behaviour and ignored, often due to the age of both the perpetrator and the victim. For example, in a retrospective study of childhood maltreatment and abuse only 6% of young people aged 18 to 24 years who fell within the research definition of sexual abuse assessed
themselves as being a victim, (Cawson, et al., 2000). Subsequently neither the victim nor the perpetrator comes to the attention of a professional agency.

More recent studies suggest that despite greater awareness of childhood sexual abuse and public campaigns to report it, under-reporting is still a significant issue. Of 2,864 young adults aged 18-24, May-Chahal and Cawson (2005) found that before the age of 16 years 7% of boys and 16% of girls reported being a recipient of behaviour that fell within the study’s definition of sexual abuse. However, only 28% told someone at the time, 27% told someone later and 31% never told anyone. Very few told professionals, the most likely being the police or a teacher. Furthermore, a review of the 16,094 children who spoke to ChildLine about sexual abuse during the 2008/2009 period found 46% had not confided in anyone else about it, 16% had confided in a friend and 14% in their mother. Although ChildLine offers confidentiality to callers, in a minority of cases they will refer to other agencies. In 2008/2009 only 9% of calls regarding sexual abuse were referred on. Of those 159 referrals the majority were made to the police (47%), followed by Social Services (43%), an ambulance (3.1%) or other agency (6.9%).

Children and young people who harm sexually display a wide range of non-contact (e.g. voyeurism, exhibitionism, obscene communication) and contact (e.g. touching, oral, anal or vaginal penetration) sexual behaviours with children, peers, partners and adults (Ryan, 1997). Ryan et al., (1996) also found that between 35% to 50% of young people who had committed a
non-contact sexual offence had also harmed a child. Although very rare, a small minority who abduct, murder and engage in zoophilia and have masochistic and/or sadist tendencies do exist (Dent & Jowitt, 2003; Vizard, 2004; Zolondek, Abel, Northey & Jordan, 2001).

The majority of contact harm by young people involves verbal coercion with the use of only as much force as is required (Metzner & Ryan, 1995). However a number of studies (e.g. Araji, 1997; Finkelhor, Ormrod & Chaffin, 2009; Lowenstein, 2006; Righthand & Welch, 2001) suggest that adolescent boys are more likely to use physical force and that females are more likely to use coercion to achieve their aims. Also the extent of physical violence used by both sexes increases over time and with the age of the victim.

Research (e.g. Awad & Saunders 1989; Davis & Leitenberg, 1987; Kelly et al., 1991) suggests that victims of children and young people who harm sexually are most likely known to them as siblings, members of extended family, friends or neighbours, Adolescents who harm sexually are most likely to target children under the age of six years, followed by children aged 7 - 11 years and then 12 - 17 years. Adults are rarely targeted (Rich, 2003).

Female victims are most common in every age group, although boys and both sexes are targeted, especially by learning disabled young people (Epps, 1999). However, whereas research has consistently identified that adolescent males are most likely to target female victims (Marshall &
Barbaree, 2006; Rich, 2003), there has been some debate over the choice of victim for adolescent females. A review of adolescent female sexual offence behaviour by Hunter, Becker and Lexier (2006) found a number of studies over the past twenty years which identified male only, female only and both sexes as the most likely victim of a hands-on offence by young females. However, females may be more likely than males to target young children, usually in their care, and significantly may be less likely than males to assault peers or adults (Cavanagh Johnson, 1993; Ford, 2006).

Approximately one half of all harmful sexual behaviour instigated by an adolescent involves a sibling victim (Latzman, Viljoen, Scalora & Ullman, 2011). Sibling incest has been identified as the most common form of incest, up to five times more prevalent than parent-child sexual abuse (Adler & Shutz, 1995). In a study of sibling incest Smith and Israel (1987), found that 80% of harmful sexual behaviour was instigated by a male and 20% by a female. However, recorded statistics significantly underestimate the extent of sibling incest. It is less likely to be reported, more likely to be ignored and thus never come to the attention of the criminal justice system or professionals (Araji, 1997).

A minority of young people target strangers. Both male and female victims of a wide age range are targeted although adolescent females in their early teens are most common (Woodhams, 2004). A study of adolescent males referred to services for harmful sexual behaviour found adult females are most likely to be abducted whilst young females are often lured into a
secluded place on the pretence of a date (Woodhams, Gillett & Grant, 2007). The latter study also found that the extent of physical injury increased with the age of the victim, although penetration was more likely with younger victims. Penetration was also more likely when a group of young people targeted a lone victim.

1.4.1 Internet, Social Networking and Mobile Harm. Over the past ten years children and young people have had increasing access to advanced information, communication and technology such as the internet, wireless, Bluetooth and mobile phones at home, school and on the streets (Gillespie, 2008). It has changed the way in which people are able to communicate with each other. Unfortunately, it has also provided additional ways in which to exploit and harm vulnerable adults and children, strangers and acquaintances and form contacts with others who perpetrate harmful sexual behaviour (Hilton, 2011). The international availability of cyberspace, social networking websites and chat rooms means that young people can not only view but also easily upload sexual images of themselves and others. Studies have identified sexual images of semi-naked and naked males and females which have been shared innocently and are then used for sexual bullying, abuse, exploitation and bribery, uploaded onto social networking sites and onto internet porn sites (Flood, 2007; Wolak, Finkelhor, Kimberly & Mitchell, 2011).

Studies in both the USA and UK have identified young people as perpetrators of sexual cyber-bullying on the Internet (Beatbullying, 2009;
The producing and circulating of sexual images via mobile phones, (also known as sexting), e-mail and uploading onto self-created or social networking Internet websites, has become an increasingly popular method of sexual bullying by young people. The 2009 Beatbullying survey of over 2000 young people found that one third (36% male, 39% female) had received an unwanted or 'nasty' message and one quarter an unwanted or 'nasty' image about sex. The majority, (45%) were sent by peers, followed by a current girlfriend or boyfriend (23%). Adults sent only 2% of sexts. Common sexts included boys exposing themselves or masturbating and girls removing clothing and sexually provocative images that could be classified as pornographic.

However, due to the way in which such offences are recorded and a paucity of research on the subject, it is difficult to identify the true prevalence of such behaviour by adolescents. Also, as with harmful sexual behaviour involving contact, the reasons for taking and distributing sexual images vary from individual to individual and boundaries between curiosity, experimentation, harmful sexual behaviour and exploitation are often blurred. Some young people may normalise the sharing of sexual images as a way of seeking attention, to appear more physically or romantically attractive or just a bit of fun without considering the potentially harmful consequences (Beatbullying, 2009; Hilton, 2011; Ybarra et al., 2006).

The Association of Chief Police Officers for England, Wales and Northern Ireland [ACPO] has suggested guidelines for the prosecution of
young people who post self-taken indecent images. Following the 2010 strategic overview from the Child Exploitation and Online Protection centre [CEOP], recognises that there is often difficulty when distinguishing between self-taken indecent images which are a result of grooming, someone with a sexual interest in children and young people, engaging in risky behaviour or pushing boundaries. Thus, the ACPO suggest that each case be examined on individual merit and motivation within a wider safeguarding framework. The criminalisation of children and young people for taking and distributing self-taken images should be avoided at all costs. Alternatives to prosecution including educational programmes, and in more persistent cases the use of reprimands, is more likely to be recommended.

Research suggests that police in the US are also less likely to make an arrest in sexting incidents where no adult is involved. Wolak, Finkelhor, Kimberly and Mitchell (2012) used a mail survey followed telephone interviews with 2,712 law enforcement agencies to gather information on police responses to youth sexting behaviour. Each agency was presented with 675 images that would be classified as child pornography within their remit. Two thirds of an estimated 3.477 cases involved aggravated incidents where additional malicious non-consensual activity or abuse was involved. An adult was involved in 36% of cases and a young person in 31% of cases. However, arrests were made for 62% of cases where an adult was involved in comparison to 36% of youth-only cases. Where sexual images were classified as ‘experimental’, (youth-only with no aggravating circumstances) only 18% of cases resulted in an arrest.
The availability of the Internet has also provided new ways of accessing pornography. Moultrie (2006) examined a small group of seven young males who had been referred to the Taith Project for downloading images of child porn. All stated that prior to viewing indecent images of children online that children did not sexually arouse them. Only two of the young people had previous histories of a contact sexual offence. Approximately half said they had initially used the Internet to access adult pornography or use chat rooms to explore issues about their sexual orientation. Over time conversations had turned to the sexual exploitation of peers and young children. In one case the young person arranged to meet with an adult with the intent to abduct and harm a child sexually. Moultrie argues that the role of adults in online relationships and abuse should not be underestimated as they offer encouragement, knowledge and advice on how to fulfil harmful sexual fantasies. In such cases it is often difficult to identify whether the young person is a victim or a perpetrator. Thus, he proposes that until more information and knowledge of the subject is available neither term is appropriate.

1.4.2 Adolescent Females Who Harm Sexually. In addition to a lack of research knowledge about young females who harm sexually, the prevalence of harm may be underestimated. The risk of denial and minimisation of harmful sexual behaviours by females is increased by reluctance by both professionals and communities, mainly in western societies, to acknowledge that girls can commit such offences (Cavanagh Johnson, 1993; Travin, Cullen & Protter, 1990). Harmful sexual behaviour by
young females is more likely to be minimised or ignored, as they are perceived as caring, sexually passive and a victim (Blues, Moffat & Telford, 1999). In cases where they have been sexually abused themselves they are more likely to been seen as a victim rather than the victimiser, thus referred to counselling for their own abuse not to the criminal justice system (Ford, 2006; Lovell, 2002; Slotboom, Hendriks & Verbruggen, 2011). Ford also claims that young females who do enter the criminal justice system are more likely than males to have their sexual offence reduced to a lesser crime such as common assault and receive lesser sentences than males who have perpetrated similar offences.

1.4.3 Adolescents With Learning Disabilities Who Harm Sexually. Children and young people with learning disabilities are over represented within the criminal justice system and services provided for young people who harm sexually (O’Callaghan, 1998; Vizard, Monk & Misch, 1995). It is estimated that between one third and one half of adolescents who are known to have harmed sexually have some form of learning disability (Hickey, Vizard, McCrory & French; Larsson, 2011; Lovell, 2002). In a review of services for young people who harm sexually, Hackett and Masson (2003) found that adolescents with learning disabilities made up 25% of the workload for 53% of youth offending teams. Fyson, (2007) found 88% of special schools had identified pupils with inappropriate sexual behaviour ranging from public masturbation (58%), inappropriate touch (85%) and actual or attempted penetration (15%). Whilst over half sought advice and support from Social Services, only 23% of cases were referred to the police and only 8% to a
Youth Offending Team. In the largest UK study of young people who have been referred to 4th tier specialist NHS service for young people who harm sexually, 34% of young people were judged to be functioning below average level, (IQ < 84) and 24% identified as learning disabled (IQ <70) (Vizard, Hickey, French & McCrory, 2007). It has been suggested that young people with below average intelligence are more likely to harm others who are unknown to them (Gilby, Wolf & Goldberg, 1989).

It is not clear why so many adolescents who harm sexually have a learning disability. It may be that parents of children with learning disabilities are often overly protective thus restricting any discussion and access to knowledge of normal sexual development. This encourages an indifference to social taboos and a reduced ability to understand why their behaviour is harmful, often justifying it as normal (Leeson, 2011; Stermac & Sheridan, 1993). However, this group are more habitual, repetitive impulsive and childlike in their sexual behaviour and thus may be more likely to get caught (Bladon, et al., 2005). This is reflected by the increased likelihood of sexual behaviours such as public masturbation, exhibitionism and voyeurism (Stermac & Sheridan, 1993).

Whittle, Bailey and Kurtz (2006) argue that the reluctance to acknowledge sexual development in young people who are learning disabled may also lead to under-reporting by parents, carers and professionals. Indeed, Brown (1994) argues that western societies often view sexual relationships and activity by young people with learning disabilities as
abnormal. This attitude may also inhibit their (young people with learning
disabilities) knowledge of appropriate dating development and intimacy.

1.4.4 Pre-adolescent Children Who Display Inappropriate

Sexual Behaviour. Whilst the majority of research focuses on young
people who harm sexually, there is a significant minority of very young
children who will not be referred to the criminal justice system yet require
treatment for sexually inappropriate behaviours. Services are seeing an
increasing number of children under the age of 10 years, with some referrals
as young as four and five years (Carson & The AIM Project 2002; Gibbs,
2004; Whittle et al., 2006). NSPCC projects in the UK, for example, are
accepting a growing number of referrals for children under the age of 10 years
with the average age of referral decreasing from 17 to 12 years (Lovell, 2002).
Lovell cites NSPCC projects in Coventry and Lincolnshire in which 30% to
31% of referrals were under the age of 10 years.

Research also suggests that although the average age of onset for
harmful sexual behaviour may be 10-12 years (Zolondek, Abel, Northey &
Jordon, 2001) a significant number of adolescents who harm sexually display
inappropriate sexual behaviours as very young children (Burton, 2000).
Studies of pre-adolescent children suggest that, as with adolescent and
learning disabled groups, males account for the majority of those referred
(Burton, Nesmith & Badten, 1997; Hawkes, 2011; Lane and Lobanov-
Rostovsky, 1997). Research, (e.g. Bancroft, 2006; Cavanagh Johnson &
Feldmuth, 1993; Gil, 1993; Silovsky & Niec, 2002) suggests that sexual
behaviours amongst this age group may range from touching and fondling to penetration.

**1.4.5 Ethnic Minority Groups.** Despite the acknowledgment for a need to consider ethnicity during assessment, intervention and treatment of young people who harm sexually (Mir & Okotie, 2002; Whittle et al., 2006) there is a paucity of research on the subject. Statistical knowledge is restricted by the way in which data are analysed in criminal justice statistics and prevalence studies. Indeed, Mir and Okotie found that the way in which data had been collated and inconsistencies in monitoring by the police prevented them from providing a true picture of convictions for sexual offences by Black and Asian groups. In seven of eight cases they studied the victim was White British. One quarter reported that they had chosen their victim because of stereotypical beliefs that white girls were more available for sex. In the case where the victim was non-white it was a sibling. Half of the cases reported victim choice was primarily related to opportunity, accessibility and attractiveness.

**1.5 Harmful Sexual Dating Behaviour and Coercive Control**

Young people who harm sexually in dating relationships are one of the most under researched subgroups of harmful sexual behaviour in the clinical field. However, over the past ten years research and practice of adolescent harmful dating behaviour from a welfare perspective has expanded. In
comparison to the clinical field of harmful sexual behaviour, knowledge regarding the characteristics of young people who harm sexually in dating relationships, motivation and maintenance are in the early stages of development. Nevertheless, examining the research from both fields together highlights a range of similarities and differences between young people who may harm sexually in dating relationships and young people who may harm sexually outside of a dating relationship. Therefore, the welfare and clinical fields of harmful sexual behaviour have much to benefit from each other.

As with the clinical field of harmful sexual behaviour, there is a wealth of research (e.g. Barter, 2009; Furman, Ho & Lo, 2007; Hickman, Jaycox & Runoff, 2004; Hird, 2000; James, West, Deters & Armijo, 2000; Wekerle & Tanaka, 2010; Wolfe et al., 2001; Wood, Barter & Berridge, 2011) which identifies a strong need to respond to the use of emotional, physical, sexual harm and exploitation by young people towards their partners separately from adults. A range of differences between adults and young people are known to exist, all of which demand that adolescent harmful dating behaviour needs to be treated as a separate subject in its own right (Sanders, 2007; Wolfe et al., 2001). For example, adolescent dating relationships frequently differ in duration of the relationship, the levels of emotional commitment and engagement in sexual intimacy from adults. Young people are also likely to have less previous dating experience than adults. Hence the contributory factors, motivation and conflict resolution methods may differ. Also, peer status plays a much greater role for young people when seeking potential dates, partnership development and behaviour.
1.5.1 Legal Definitions. The legal definition is a complicated one. In September 2012 the government changed the definition of domestic violence to include 16-17 year olds (Home Office, 2012). A review of whether that age should be reduced further will not take place for another two years. The current cross government definition of domestic violence and abuse provided the Home Office (2012) is as follows:

“All incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. The abuse can encompass but is not limited to:

- Psychological
- Physical
- Sexual
- Financial
- Emotional (p. 19)”

Included in the term ‘controlling behaviour’ is any act that causes subordination, humiliation or intimidation, social isolation and the exploitation of resources for personal gain, cutting the victim off from independence or escape. Included in the term ‘coercive behaviour’ is “an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim” (Home Office, 2012, p. 19). This new definition will be implemented in March 2013.

Using this definition, an individual over the age of criminal responsibility and under the age of 16 who instigates harmful sexual behaviour or coercion
in a dating relationship cannot be convicted under domestic violence law. If a young person was between the ages of 10 - 18 years and the behaviour was a sexual offence however, they can legally be convicted under the Sexual Offences Act 2003. In this situation they would, as discussed earlier in this chapter, be defined as a ‘child’ or ‘young person’.

From a sexual offence perspective, the problematic issues surrounding the legal definition of sexual consent discussed earlier in the chapter arise. Developmentally, adolescence is a time of great change and experimentation with new challenges, pressures, anxieties all of which can happen at different rates for different people (Coleman & Hendry, 2000). Immaturity and lack of experience may make negotiating sexual intimacy and obtaining consent confusing (Wolfe et al., 2001). In addition, males and females have different perceptions of the dynamics for healthy dating experiences (Barter, 2009; Moore & Rosenthal, 1992; Sharpe & Thompson, 2005). There is also evidence that during the development of romantic and sexually intimate relationships some element of force, in particular as a part of a consensual play fighting role, may be perceived as normal (Foshee, Bauman, Linder, Rice & Wilcher, 2007; Lavoie, Robitaille & Herbert, 2000). All of these issues highlight the complexities surrounding the notion of sexual experimentation, something that clinicians have identified as a reason for why adolescent harmful sexual behaviour is often overlooked.

Of greater concern is that young people normalise or may not perceive unwanted sexual harm in dating relationships as harmful (Barter et al., 2009;
Offenhauer & Buchalter, 2011; Sears & Byers, 2007; Wood et al., 2011).

Young people may even perceive harmful dating behaviour as a show of love (Sanders, 2007). In addition, interpretations of whether the behaviour is harmful and the extent of harm caused is strongly influenced by other contextual factors (Foshee et al., 2007). Examples of contextual factors include gender, age, and previous victimisation, witnessing parental violence, substance and alcohol misuse. Thus, individual perception of appropriate sexual behaviour dynamics may influence the nature and consequences of coercion during intimacy. Individual perception may also influence the extent to which a young person perceives the act as harmful, either to themselves or to partners. Such circumstances warrant the reasoning by Hackett (2006) for the research definition term of harmful sexual behaviour.

In consideration of the importance of developmental age, the context of harmful sexual behaviour and relationship dynamics it could be advantageous to consider the potential of a similar definition to that used by Ryan (1997) within a continuum of sexually abusive behaviours. This would fit in with consistencies in the range of sexual acts pertaining to harmful sexual behaviour, sexual coercion and sexual exploitation within the field.

Bowen (2012) for example describes the nature of sexual violence in adolescence relationship as:

1. The use of physical force to compel a person to engage in a sexual act against his or her will, whether or not the act is completed;
2. An attempted or completed sex act involving a person who lacks the capacity to understand the nature or condition of the act, to decline participation, or to communicate unwillingness to engage in the sexual act.

   - This diminished capacity may occur due to illness, disability, the influence of alcohol or other drugs, or through intimidation or pressure;

3. Abusive sexual contact, defined as intentional, unwanted sexual touching or intentional touching of a person of diminished capacity.

This definition supports examples of harmful sexual behaviours from the UK and US literature over the past fifteen years (e.g. Barter, 2009; de-Brujin, Burrie & van Wel, 2006; Espelage & Holt, 2007; Halpern, Spriggs, Martin & Kupper, 2009; Hickman, Jaycox & Aronoff, 2004; James et al., 2000; Foshee, 1996; Offenhauer & Buchalter, 2011; White et al., 2006; Wolfe et al., 2001; Wood et al., 2011):

   - Forced contact (e.g. rape, attempted rape, kissing, touching, rubbing, penetration with an object);

   - Forced non-contact (e.g. involvement with pornographic media, acting out sexual scenarios, taking and sharing of sexual images);

   - Coercion to engage in any sexual activity or more than is wanted (e.g. threats to physically hit, break something of value, finish a dating relationship, not be a friend, spread bad rumours about them, hurt
friends or family, to give gifts in return for sexual activities, threats or bribery, destroying birth control);

- The victim is especially vulnerable, with limited experience or understanding of appropriate dating behaviour.

How these behaviours would fit into a continuum that could be applied to assessment, intervention and treatment requires further investigation. Many of the behaviours described above are identifiable sexual offences that are included in the continuum used by AIM, forced sexual assault or rape for example. However others, deliberately preventing a partner from using contraception for example, are not. Also the relational dynamics of harmful sexual dating behaviour has different implications to that of harm against other peers, adults, strangers and children. Therefore, the continuum would need to be amended to account for these differences. How a continuum could be developed and implemented then, requires a great deal more knowledge of the characteristics associated with the onset, motivation and maintenance of adolescent harmful dating behaviour.

1.5.2 Prevalence of Harmful Dating Behaviour.

Unfortunately, as with the challenges of adult domestic violence, adolescent harmful dating behaviour is also often justified by the victim, initiator and others because the couple are in a dating relationship. It is often therefore regrettably overlooked (Barter, et al., 2009; Hird, 2000; Sanders, 2007).
Harmful sexual dating behaviour is one of the most under-reported forms of harmful sexual behaviour. Research suggests a number of legitimate reasons for under-reporting, many of which are similar to the reluctance of other harmful sexual behaviour victims. Examples include young people feeling that they are to blame, fear of the consequences from their partner, stigmatisation, perceiving the harm as experimental behaviour and less harmful than adult domestic violence (Barter, 2006; Moore & Rosenthal, 1993; Sears et al., 2007). Furthermore, young people may have become socially isolated and separated from the friends they might otherwise have confided in (Raphael, 2000). Indeed, friends are the most common confidantes for young people who are victims of harmful dating behaviour (Bergman, 1992; Cawson et al., 2000). Teenage mothers are especially vulnerable as they may already be socially isolated and may also be emotionally and financially dependent on their partners (Wood et al., 2011). Homosexual and bisexual partners, especially those who have not yet ‘come out’ are even less likely to report violence in a dating relationship due to fears of homophobic bullying and questions about the validity of their relationship (Barter, 2009; Freedner, Freed, Yang & Austin, 2002).

The literature suggests that the prevalence and severity of harmful dating behaviour increases with age between 13 years and 16 years and then decreases (Foshee et al., 2009; Offenhauer & Buchalter, 2011). Approximately 40% of young people are a recipient of one or more forms of harmful dating behaviour (Carlson, 1987; Offenhauer & Buchalter, 2011; Sears et al., 2007) and over a third of young people report initiating an act that
may be defined by researchers and professionals as harmful dating behaviour towards their partner (Foshee et al., 2009). Some young people, as young as 12-13 years, engage in one or more harmful acts toward a dating partner in a given year (Malik, Sorenson & Aneshensel, 1997; Sears et al., 2007). Moreover, adolescents in mutually violent relationships are more likely to perpetrate or be a victim of harmful dating behaviour more frequently than other young people (Gray & Foshee, 1997). The risk of instigating or being a recipient of harmful dating behaviour and coercive control also increases with a range of developmental, contextual and interpersonal factors including depression, substance misuse, anxiety and family violence (Foshee et al., 2010).

A gendered breakdown of prevalence rates bears similarities with other forms of harmful sexual behaviour. That is, males are the main instigators and females the main recipients of harmful sexual dating behaviour. Females do instigate harmful sexual dating behaviour, but at a much lower rate (Barter et al., 2009; Brook, 2005; Carlson, 1987; Foshee, 1996; Foshee et al., 2009; Hickman et al, 2004; Sears et al., 2007; Wood et al., 2011). The results of previous US studies are borne out in one of the most comprehensive UK studies of harmful dating behaviour. Barter, McCary, Berridge and Evans (2009) found that of 1,353 young people ages 13 - 17 years, 31% of females and 16% of males reported being a recipient of one or more form of harmful sexual dating behaviour. Whilst the majority were single incidents, for a minority it was a regular on-going occurrence. Seventy five per cent of females who had a partner more than two years older than them reporting
being a victim of harmful sexual dating behaviour in that relationship. In some cases the boyfriend was a much older male making the relationship illegal.

In comparison, 12% of males and 3% of females reported instigating harmful sexual dating behaviour. The most common form of harmful sexual dating behaviour instigated by both males (11%) and females (2%) involved pressuring partners into sexual behaviour which included ‘kissing, touching or something else’. A further 4% of males and 1% of females reported forcing their partner into a sexual behaviour. A similar percentage (5% males and 1% females) reported pressuring their partner into sexual intercourse whilst only twelve boys and four girls reported using physical force to make their partner have intercourse with them.

Little is known about the co-occurrence of harmful sexual dating behaviour alongside other forms of harmful dating behaviour, but recent research suggests it is something that requires further investigation. A US study of 309 females and 324 males’ ages 12 - 17 years by Sears, Byers and Price (2007) found that harmful sexual dating behaviour was used alongside psychological violence (6% males, 1% females), physical violence (2% males) and both psychological and physical violence (5% males, 2% females). An additional 4% of males and 1% of females reported using harmful sexual dating behaviour only. Although the numbers are small, it is important to note that in the case of boys, co-occurrence rates are higher than the use of harmful sexual dating behaviour alone.
Participant results were also analysed by grade level. Grade 7 was age 12 - 13 years, grade 9 was age 14 - 15 years and grade 11 was 16 - 17 years. The use of harmful sexual dating behaviour alone or with one or more other forms of harmful dating behaviour was prevalent for both girls and boys in all grade levels. This suggests that harmful sexual dating behaviour may be experienced from as early as 12-13 years. Whilst further investigation is urgently required these results have serious implications for our understanding of the use of harmful sexual dating behaviour, generalist subtypes (i.e. young people who instigate sexual and non-sexual harmful dating behaviour), the development of prevention, intervention and treatment programmes and service practice.

Only recently have studies examined the possibility of a developmental age trajectory for dating violence. With a participant age range of 13 -19 years, Foshee et al. (2009) identified a curvilinear trajectory of reported harmful sexual dating behaviour, peaking at 16.3 years. The trajectory did not differ between males and females. As with previous studies, girls were significantly less likely to report instigating harmful sexual dating behaviour than boys in every age group.

Studies that have included age in the analysis have found similar results. In the previously discussed study by Barter et al. (2009) for example, age for males was found to be significantly associated with the instigation of harmful sexual dating behaviour ranging from 7% at age 13 to 21% at age 16. The numbers for females were too small to analyse. Sears et al. (2007) also
found the number of young people reporting the use of harmful sexual dating behaviour increased with age. However, for males the use of harmful sexual dating behaviour decreased from 7% in grade 7 (age 12 - 13 years) to 2% in grade 11 (age 16 - 17 years). In contrast there was an increase in the co-occurring use of harmful sexual dating behaviour, the largest of which was with the use of psychological harm, from 1% to 10%.

Although limited, some studies have found that young people with a same sex partner are significantly more likely to report harmful sexual dating behaviour than young people in a heterosexual relationship (Barter et al. 2009; Cawson, Wattam, Brooker & Graham, 2000). Freedner et al. (2002) found no significant difference in reports of harmful sexual dating behaviour between young males and females who reported being in a heterosexual, bisexual, or homosexual dating relationship. However, compared to young people who reported being heterosexual, young females who reported being bisexual reported greater experience of being a recipient of harmful sexual dating behaviour.

As with research of harmful sexual behaviour outside of dating relationships, there is a paucity of knowledge about ethnic minority groups who may instigate harmful sexual dating behaviour. The age trajectory study by Foshee et al. (2009) found no significant difference between minority group and white participants. However, Barter et al. (2009) found that males from ethnic minority groups were over three times more likely to report using harmful sexual dating behaviour than white participants. Offenhauer and
Buchalter (2011) acknowledge that the research into the influence of ethnicity on harmful dating behaviour has so far been inconclusive.

One of the major problems with dating research is that the majority of it has targeted easy access school or college based participants (Offenhauer & Buchalter, 2011; Wood et al., 2011). This excludes vulnerable young people with experience of being in care, having disrupted childhoods, being a teenage parent, being involved in criminal activity or not in mainstream education, all of which have been associated with factors associated with harmful dating behaviour. Studies that have targeted at risk groups have identified a higher rate of harmful sexual dating behaviour than school based studies (Wood et al. 2011).

Wood, Barter and Berridge (2011) examined the prevalence of harmful dating behaviour and coercion in disadvantaged teenagers using a sample of 82 young people from agencies and organisations working with disadvantaged young people. In comparison to the 2009 school based study, females were significantly more likely to be a victim of harmful sexual dating behaviour. Only a minority of males reported harmful sexual dating behaviour. Four male participants reported being unsure if they had had pressured their girlfriends into sex. However, no females reported instigating harmful sexual dating behaviour. Teenage mothers reported experiencing more sexual pressure and forced sexual intercourse than females who were not mothers. Similar studies in the US have also shown higher prevalence of sexual victimisation amongst disadvantaged girls. The prevalence of male
victimisation and instigation rates has been inconclusive (Offenhauer & Buchalter, 2011).

1.6 Summary and Conclusions

The review of literature presented here highlights the significance of legal definitions, offence types and social policy guidelines and how they may be in conflict with current research and service provision for young people who harm sexually, in and out of dating relationships. Legal definitions for identifying young people who harm sexually are complex and often controversial. On the one hand they offer clarity for who can be prosecuted and for what. On the other hand they can blur contextual differences between harmful sexual behaviour, sexual deviance and coercive behaviours. Legal guidelines may aid the decision making process for the most appropriate response for prosecution and referral purposes.

However, what is clear is that the prevalence of harmful sexual behaviour and harmful sexual dating behaviour by males and females continues to require an urgent response, whether that be legal, preventative, assessment or treatment. In the UK the clinical field of harmful sexual behaviour has been working with the criminal justice system, challenging social policy, developing research and new ways to provide the most effective assessment, intervention and treatment programmes for young people who harm sexually for over 20 years. In contrast, harmful sexual dating behaviour is in early stages of development. Despite changes in the law, there is little guidance on how best to respond to young people who harm sexually in
dating relationships in order that they may receive the most effective support
to meet their individual needs for physical and emotional well-being. However, the welfare field is more informed about the prevalence of harmful sexual dating behaviour the types of sexual behaviours involved, and characteristics associated with young people who instigate them. Therefore, research knowledge and experience in clinical and welfare fields may be able to inform each other in order to develop appropriate responses to law and social policy.

In addition, from whichever perspective you examine adolescent harmful sexual behaviour it is, as suggested by Ryan and Lane (1997), essential to clarify the nature and context of equality, consent and coercion. If this is evaluated alongside the definition of harmful sexual behaviour as ‘any sexual interaction with person(s) of any age perpetrated (1) against the victim will (2) without consent, or (3) in an aggressive, exploitative, manipulative or threatening manner.’ (p.3), then it may be equally transferable to harmful sexual dating behaviour. Together they form the base of a working definition for all subtypes of sexually harmful behaviours and all forms of sexual harm whether that is contact, non-contact, coercive or pressure.

There is potential to develop a similar continuum for harmful sexual dating behaviour, some which may be incorporated into a harmful sexual behaviour continuum such as AIM. However, as pointed out earlier in this chapter, the relational dynamics between young people in a romantic and sexually intimate relationship may be different in context, emotionally and physically. Thus, there may be a need to differentiate between harmful sexual
dating behaviour and other forms of harmful sexual behaviour. How this is borne out will most likely depend on perspective and type of service provision. It must be remembered that each young person is an individual with individual needs and must have those needs met.

The Introduction discussed concerns that young people who harm sexually, in or out of dating relationships, may experience relational interpersonal, emotional and environmental factors that may contribute to dating anxiety, partnership anxiety, sexual intimacy anxiety and sexual behaviour anxiety. To what level these multiple factors may influence such anxieties is unknown. Furthermore, there is a gap in the knowledge of how much dating and sexual intimacy anxieties may influence the development of harmful sexual behaviour and harmful sexual dating behaviour. This is exacerbated by gaps in knowledge of normal dating and sexual development and a paucity of comparative research between young people who report no harm, young people who report sexual harm and young people who report sexual and non-sexual harm (Bancroft, 2006; Barbaree & Marshall, 2006; Katz, 1990; Moore & Rosenthal, 1993; Vosmer et al., 2009; Vizard, 2004).

All of these issues are relevant not just to furthering research in dating anxiety, but to informing responses in particular, prevention, assessment and treatment (e.g. AIM, ASSET, the Good Lives Model and Fourth R) to young people who harm sexually. Therefore, in order to develop an understanding of how dating anxiety, partnership anxiety, sexual intimacy anxiety and sexual
behaviour anxiety may fit in, it is first necessary to examine existing dating and sexual intimacy research.
Chapter 2

‘Normal’ and ‘Healthy’ Dating and Sexual Intimacy Development
2.1 Introduction

In order to understand harmful dating and sexual intimacy development and behaviours, it is essential to understand what may be perceived as ‘normal’ and ‘healthy’. ‘Normal’ is something that the majority of young people may experience. For example, Glickman and la Greca (2004) found that it might be normal for young people to experience dating anxiety. ‘Healthy’ is something that something that is more likely than something unhealthy to have positive outcomes. For example, mutually consensual sexual activity in a dating relationship (healthy) is more likely to positive outcomes (e.g. feeling safe, secure and cared for) than non-consensual sexual activity (e.g. feeling scared, poor physical and mental health).

However, there is a need to be aware that what may be perceived as normal and healthy by some young people may not be perceived as normal and healthy by others. For example, Wood, Barter and Berridge (2011) found that many young people reported harmful sexual dating behaviour as normal, even though there were negative consequences for them (e.g. low self-confidence, social isolation). In addition, female recipients of harmful dating behaviour were more likely to normalise harmful sexual dating behaviour than males. Male recipients of harmful dating behaviour reported less negative consequences than females, even when they did not perceive harmful dating behaviour as normal. Therefore, to understand if harmful dating and sexual intimacy development and behaviours may be associated with higher than normal dating and sexual intimacy anxieties it is necessary to review literature on normal dating and sexual intimacy development and behaviours.
The aim of this chapter is threefold. The first aim is to review the available knowledge of normal dating and sexual intimacy development and behaviours from early childhood through to late adolescence. The second is to examine how that knowledge may contribute to a greater understanding of dating and sexual intimacy anxieties. The third is to propose why that understanding makes the need for research into dating and sexual intimacy anxieties in young people who sexually harm so essential.

Hence, this chapter begins by examining the problems researching normal and healthy dating and sexual intimacy development. It continues with an examination of what may be the normal pathway to dating and sexual intimacy development from early childhood, through puberty and into late adolescence and how some young people may be more vulnerable to a deviation from that pathway, potentially leading to harmful sexual behaviour. The chapter concludes with a case for this research, the hypotheses and reasons for a comparative study between four groups. They are adolescents who do not harm, adolescents who instigate non-sexual harm, adolescents who instigate sexual harm and adolescents who instigate sexual and non-sexual harm (generalists).

2.2 What is ‘Normal’ and ‘Healthy’?

Dating and sexual intimacy development is a normal biological and social process that occurs within the context of adult attitudes and behaviour (Coleman & Hendry, 1999). Adolescent psychosexual development is influenced by physiological changes but is more related to cognitive,
interpersonal and social interactions (Vizard, 2004). Therefore, individual perceptions of normal and healthy dating and sexual intimacy behaviours are informed by age, cultural norms and expectations. They are learnt through developmental interactions and interpersonal experiences with others close to them, family and peers for example (Bancroft, 2006; Gil, 1993; Vizard, 2004).

However, from a harmful sexual behaviour perspective there continues to be limited knowledge and understanding about what the pathway of normal developmental dating and sexual intimacy development is, (Bancroft, 2006; Barbaree & Marshall, 2006; Carson & the AIM Project, 2000), what behaviours exists within that pathway, or how it may fit into a developmental dating framework (Collins, 2003). Furthermore, whilst there is greater understanding about a trajectory for normal dating development, there is little knowledge or understanding about the context and development of sexual intimacy within it (Bancroft, 2006; Coleman & Hendry, 1999).

A number of reasons have been cited for a lack of research and knowledge. First, there are challenges from the interchanging and inconsistent use of definitions and concepts, including any agreement about what is ‘healthy’ as opposed to ‘harmful’ sexual behaviour (Carson & the AIM Project, 2002; Lamb & Coakley, 1993; Lovell, 2002). Second, there are methodological and ethical issues involved with the research of children and young people (Araji, 1993; Bancroft, 2006; Brilleslijper-Kater, Friedrich & Corwin, 2004; Lamb & Coakley, 1993). Third, there is confusion and contradictions about normal adolescent sexual and dating behaviour between
the law, across multi-disciplinary professional practice, community, peer and familial groups (Araji, 1993; Barbaree & Marshall, 2006; Heisman, Leiblum, Esquihin & Pallito, 1998; Rich, 2009). Finally, in western societies where the majority of research has been conducted, there is an overwhelming need to see children as asexual beings and that any display of overt sexual behaviour is deviant or suggestive of sexual victimisation (Araji, 1993; Bancroft, 2006; Gil, 1993).

The overwhelming ‘fear factor’ which exists in society towards adolescent sexual behaviour coupled with a lack of understanding and the desire to ‘out’ anybody who harms sexually, adult or young person, may hinder the work of professionals further. Witch-hunting attitudes, for example, may encourage the dismissal of adolescent harmful sexual behaviour for fear of the life-changing consequences for the young person if the behaviour has been misinterpreted. Also, the majority of research on adolescent sexuality has focused on the negative consequences such as teenage pregnancy and sexually transmitted diseases (Coleman & Hendry, 1999; Lamb, 2007).

In addition, there is a paucity of comparative research between young people who harm sexually, young people who harm non-sexually, young people who harm sexually and non-sexually (generalists) and young people who have not harmed. This adds to the confusion about differences between normal and healthy adolescent dating and sexual intimacy and deviant and harmful dating and sexual intimacy (Hunter, Figueredo & Malamuth, 2003; Larsson, 2001; Katz, 1990). Subsequently, there is an emphasis to promote
sex as dangerous with the intention to restrict or even deny teenage sexual development (Bancroft, 2006; Lamb, 2007). This reinforces the socialised belief of young people that sexual activities must be concealed from others, especially adults.

Research in the UK and US has found that the social construction of adolescence may contribute to confusion about sexual boundaries for the young people themselves. Coleman and Hendry (1999) argue that adolescent development is bound by an ever increasing need to test the boundaries between childhood and adulthood. Subsequently, what may be considered normal adolescent behaviour is not necessarily acceptable (Barbaree & Marshall, 2006; Coleman & Hendry, 1999; Coleman & Lester, 2002; Moore & Rosenthal, 1993; Rodgers & Bard, 2003). For example, an adolescent may appear anti-social, rebellious, or experiment with alcohol and cigarettes, but this may be normal behaviour for their age.

The sexual boundaries between childhood, adolescence and adulthood are increasingly blurred for adolescents and adults alike. Research In the UK has noted gradual changes in sexual permissiveness since the mid twentieth century (Hawes, Wellings & Stephenson, 2010; Wellings, Field, Johnson & Wadsworth, 1994). Traditionally, marriage and the church provided the legitimisation of sexual intercourse. Economic independence from parents was a contributory factor to this. In recent decades however, further education and a higher cost of living has delayed marriage. Furthermore, contraception has become more easily available and sex has become more liberalised.
Subsequently, there has been a progressive fall in the age of sexual initiation coupled with an increase in the age of marriage and childbearing. In a review of literature over the previous 20 years, Brook (2005) found that less than 1% of people may be married at the time of first intercourse. In addition, the age at first intercourse did not differ significantly between developed countries. Therefore, normal dating and sexual intimacy pathways have changed over the past few generations and sexual boundaries may also appear more liberalised.

However, a number of ecological and contextual problems exist. First, for the reasons discussed earlier, the liberalisation of sexual intimacy conflicts with the socialised need to conceal adolescent sexual activity. The geographical, historical, social, and political setting in which the young person lives does play a significant role. Nevertheless, what a young person witnesses happening in wider society may not necessarily apply to their own dating and sexual intimacy behaviour at that point in time.

Second, dating and sexual intimacy boundaries may depend upon personal, peer and familial factors. Ideally, a young person may have developed positive attachments to peers and family, hence be in a position to receive positive guidance, support and openly discuss any concerns. However, in some social groups the expectations to establish dating relationships are greater (Lashbrook, 2000). For example, some young people perceive sexual activity as a normal initiation rite into a social group (Moser, Kleinplatz, Zucarini & Reiner, 2004). However, this type of sexual behaviour
is largely considered by adults and young people not involved in such a culture to be deviant, exploitative and if non-consensual an offence.

Factors such as previous experience of domestic violence, victimisation, negative relationships with peers and family isolation, low self-esteem, lack of social and interpersonal skills may blur boundaries between healthy and harmful dating and sexually intimate partnerships (Beitchman, Zucker, Hood, DaCosta & Akman, 1991; Espelage & Holt, 2007; Grey & Foshee, 1997; Linder, Crick & Collins, 2002; Mullen & Fleming, 1998; Simon & Furman, 2010). Collins (2003) and Ward and Gannon (2006) have both identified these as negative factors that may contribute to a breakdown of normal and healthy dating and sexual intimacy development. Potential consequences they argue may be the development of harmful sexual behaviour and/or harmful dating behaviour. The important role of these factors in normal dating and sexual intimacy development will be discussed further later in the chapter.

2.3 Normal Pre-Adolescent Sexual Behaviour Development

Coercive sexual behaviours displayed by a pre-pubertal child cannot be interpreted in the same way as an adolescent. Developmental differences in age, sexual knowledge, cognitions and an understanding of the serious consequences of such actions are vastly apart (Araji, 1997; Bancroft, 2006; Cavanagh Johnson & Feldmuth, 1993; Gil, 1993; Lamb & Coakley, 1993). Developmentally however, childhood is one of the most important periods of
life as it is here that the foundations for perceptions of the self and others, cognitive functioning, adjustment and appropriate behaviours are formed (Ryan, 1999; Rich, 2006). Therefore, any understanding of normal sexual and dating intimacy development must examine early childhood experiences.

Bancroft (2006) argues that in order to identify normal sexual development it is first necessary to comprehend the development of sexual meaning, sexual behaviour and sexual response. The first step he proposes is to distinguish between those physiological responses that operate as the basis for sexual experience and the sexual meaning attributed to them by the child. Bancroft suggests that the impact of a physiological response (e.g. an orgasm or erotic sensation) may be altered or intensified in a negative or positive way during childhood. The outcome is dependent on the sexual meaning attributed to it. Hence, a child may have an experience that involves a sexual response, seeks answers to it and then subsequently attributes a sexual meaning. Bancroft argues that during childhood it is necessary that these physiological responses may be disconnected from the sexual meaning and connotations for sexual activity that adults attribute to them. Attributing an adult sexual meaning may lead to displays of inappropriate sexual behaviour.

Bancroft provides a range of clinical and socio-cultural research evidence which suggests that the development of sexual meanings in pre-pubertal children first involves learning about gender differences, then about body parts, much later about procreation and finally sexual behaviour.
However, the age at which each stage occurs is dependent upon the sexual knowledge available to them from their culture and environment.

The importance of a child’s cultural environment is evidenced as determining the ‘crucial’ development of sexual taboos in the adult world. Bancroft argues that it is normal for a child to go through a period of ‘bathroom language’ where issues of sexual parts and toilet functions overlap. Eventually taboos usually result in the child learning to keep excretory functions private. However, sexual activities are different depending on the context of culture and how comfortable parents or primarily carers are about sexual acts. Thus, whilst it is normal for young children to touch or poke the sexual parts of themselves and others, recognition of sexual taboos results in the child being encouraged to keep sexual acts private or stop altogether. Bancroft argues that psychoanalysts have mistakenly interpreted this as the latency period.

Whilst Gil (1993) does refer to a latency period, the developmental context of normal sexual developmental remains very similar. Hence, Gil argues that normal sexual development takes place over time alongside emotional, psychological, cognitive and moral development. Also, it is influenced by a number of variables including cultural norms, familial interactions, values, experiences and cognitive capacities. Gil observes the dynamics of sexual development through three age groups: pre-schoolers (0 - 4 years), young school age children (5 - 7 years) and latency age children (8 - 12 years).
Gil suggests that pre-schoolers who have little interaction with similar age peers are more concerned with self-exploration or self-stimulation. Such behaviours are sporadic and without inhibitions. Sexualised behaviours may include touching and rubbing their genitals, watching or poking other bodies in a joyful playful way. The extent to which this behaviour continues depends on the reaction of the parent or carer. If the child is punished negative association will usually reduce or stop such behaviour. Alternatively if no punishment is rendered, self-exploration will continue.

Children in this age group may also exhibit their genitals to others or streak naked, especially if they wish to evoke a specific response such as flustering amongst adults. Again, the extent to which this continues is dependent on positive or negative reinforcement. Children’s interest in their genitals and other bodily functions increases further around the age of two years when they start using slang words. By the age of 3 - 4 years children may engage in sexual play such as playing house, mummies and daddies or doctors and nurses where they imitate behaviours and noises they have observed happening around them. Such behaviours may include laying dolls in bed on top of each other kissing and cuddling, saying they are making a baby. Greater knowledge of adult sexuality may lead to undressing the dolls and making sexual noises whilst rubbing them together. Pre-schoolers also experiment by poking fingers or other objects into open orifices such as ears, mouth, and although it may occur rarely, the vagina and rectum. This behaviour tends to stop if pain or discomfort is experienced. However, Gil
argues that excessive contact with the genitals may suggest that abuse has taken place and warrant professional help.

Young school age children between the ages of five to seven are influenced by increased peer contact. The outcome is a much wider range of experimental interactive behaviours. Gil maintains that it is at this stage, depending on cultural norms, where an awareness of social inhibitions regarding sexual activity develops. Subsequently, stages of inhibition and disinhibition about bodily parts and privacy fluctuate. Sharing information with peers leads to increased exposure to new sexual behaviours. This may lead to more creative ways of stimulation and masturbation. Gil gives the example of girls lifting their vagina over the water spot in the bath and boys rubbing their penis whilst climbing poles. It is also at this stage that children become curious about where they came from. Depending on cultural norms, some young school age children may begin to say they are dating, holding hands and kissing, although this is usually done in groups. However, at this age the dating or having a girlfriend or boyfriend does not have the same connotations or context as for teenagers and adults.

As puberty becomes imminent, latency aged children engage in a range of sexual interests and behaviours. They will usually discuss physiological changes, dating experiences and a range of new physical and emotional sensations associated with romance and sexually intimate behaviours. Experimental behaviours include ‘French’ kissing, touching and fondling under and over clothes, mutual masturbation, simulating sexual and
actual penetration. However, it has also been argued that advanced behaviours are rare for children of this age, and may suggest harmful sexual behaviour has taken place (Horner, 2004).

Hence, Gil argues that differences between children need to be readily observed for signs of inappropriate sexual behaviour and exploitation. Similar to Ryan and Lane’s (1997) definition of harmful sexual behaviour, Gil argues that checks for significant differences in age (gap of 3 years), developmental age, size, status, type of sexual activity and the dynamics involved in sexual play or problematic sexual behaviours need to be observed. Gil suggests that problematic sexual behaviours are characteristic of dominance, coercion threats and force together. A child who displays age inappropriate sexual behaviour may seem agitated, anxious, fearful or intense. Also, levels of arousal may appear higher than in most other children and the sexual activity may be habitual rather than random.

Although it is only intended for children under 12 years old without learning disabilities, Cavanagh Johnson and Feldmuth (1993), incorporate similar age appropriate sexual behaviours into a four group continuum: Normal Sexual Exploration; Sexually Reactive; Extensive Mutual Sexual Behaviours and Children Who Molest.

In the Normal Sexual Exploration group, sexual play is perceived as a process of gathering information, visually and tacitly, about bodily functions and sexual activity. Normal sexual exploration is perceived by the authors to
occur between children of the similar age and size, more likely between friends than siblings. As with Gil, Cavanagh Johnson and Feldmuth propose that normal exploration involves touching and looking with mutual consent, in a light-hearted spontaneous manner, without shame or guilt. Exploratory sexual behaviours are limited in type and frequency, although they will occur over several developmental stages. The different types of exploratory behaviours differ according to what is appropriate for any one particular age group. Thus, exhibiting behaviours outside of their age group may give cause for concern.

Sexually Reactive children (group II), engage in more sexual behaviours than others of the same age in group I. Their focus on sexuality is out of balance with other aspects of their developmental life. Cavanagh Johnson and Feldmuth propose that many of the children in this group will have been sexually abused, exposed to pornography or reside in homes where there is excessive sexual stimulation. In such cases children are unable to integrate sexual experiences in a meaningful way appropriate for their age. Consequently they may be confused, show interest in and act out sexual behaviours with knowledge beyond what would be expected for their age. As opposed to the Normal Sexual Exploration group however, Sexually Reactive children often feel shame, guilt and overwhelming anxiety about their sexuality. Cavanagh Johnson and Feldmuth suggest that the majority of group II only display inappropriate sexual behaviours using their own body. If Sexually Reactive children do engage in sexual activities with others they are usually of similar age, and it is done without force, coercion or threats.
Children who fall within the group Extensive Mutual Sexual Behaviours (group III) participate in a wide range of adult like sexual activities including oral, vaginal and anal intercourse with other children. Cavanagh Johnson and Feldmuth suggest that like groups I and II, children in group III do not use force or coercion. However, they may use persuasion and are well primed at concealing their behaviours. Furthermore, children who engage in extensive mutual sexual behaviours express a blasé attitude towards sex, as if it is just another way to relate to peers.

The authors argue that these attitudes and behaviours may be a coping mechanism to deal with significant emotional vulnerabilities, an inability to make friends with peers and feelings of isolation, loss and fear for example. Cavanagh Johnson and Feldmuth propose that the majority of children in this group would have been a victim of one or more forms of sexual, physical or emotional abuse, come from dysfunctional families with sexually charged environments and have little experience of academic or social success. It is not surprising then, they argue, that these children are generally distrustful of adults.

Cavanagh Johnson and Feldmuth argue that Children Who Molest, (group IV), display sexual behaviours the furthest away from developmentally normal, exploratory or sexual play. One aspect, they suggest which distinguishes them from group I children is a lack of fun, curiosity or the shared nature of sexual play. Instead they display anxiety, anger and confusion about sexual activity. Group IV children they argue, display
impulsive, compulsive and aggressive sexual acts that are often associated
with feelings of extreme anger, rage, fear or isolation. Sexual behaviours may
include oral, vaginal or anal sex, and penetration using fingers or other
objects. Such behaviours are likely to increase in a consistent manner over
time.

Cavanagh Johnson and Feldmuth suggest that Children Who Molest
seek out vulnerable victims, often those who are much younger than them,
intellectually impaired, suffering mental health problems or isolated from
peers. Although these children tend to use less physical violence there is
always some element of coercion alongside social or emotional threats to not
tell others. They show little empathy with their victim, to the extent that they
may not perceive their actions as wrong. Hence, Cavanagh Johnson and
Feldmuth argue, Children Who Molest are most unlikely to stop inappropriate
sexual behaviour without specialised treatment.

Cavanagh Johnson and Feldmuth also identify a wide range of factors
associated with pathways to sexually harmful behaviour in group IV children.
For example, they usually exhibit a range of problematic behaviours both at
school and at home which encompass both physical and sexual violence.
They also display a lack of problem solving, coping mechanisms and impulse
control. Children in this group tend to have few friends or other interests. Also,
the majority have been harmed sexually, usually prior to the onset of their own
inappropriate sexual behaviour with others. Nearly all have a history of
emotional or physical abuse, dysfunctional family environment, with few
sexual boundaries, violence and substance misuse. In many cases parents or primary caretakers may also have experience of sexual and physical abuse.

Whilst the review of pre-adolescent sexual development discussed here is brief, the content of the work of Bancroft (2006), Gil (1993) and Cavanagh Johnson and Feldmuth (1993) is well supported in the field (e.g. Cantwell, 1988; Carson & the AIM Project, 2002; Lane & Lobanov-Rostovsky, 1997). Their suggestions are also consistent with biological and ecological factors represented in the Integrated Theory of Sexual Offending presented by Ward and Beech (2006). That is, normal pre-adolescent sexual development is multi-factorial and progresses along an age trajectory heavily influenced by physiological changes, culture and interpersonal experiences. Age appropriate sexual behaviours, many of which are experimented with during sexual play, do not have the same meaning attributed to them as for adults. A lack of monitoring coupled with other negative factors may result in displays of different types of sexually inappropriate sexual behaviour towards them self or others.

2.3.1 Sexualisation of Children and Young People. As discussed in the previous section, pre-adolescent sexual play has a key role in the normal sexual development of children. Normal sexual play should be spontaneous, fun and enjoyable, may cause embarrassment and possesses various levels of inhibition and disinhibition. However, Lamb and Coakley (1993) argue that to perceive normal pre-adolescent sexual play as healthy may be misleading. Responses for their US survey of 128 undergraduate
females supported proposals made in the previous section that games such as playing doctor, exposure, and experiments in stimulation, kissing games and fantasy were normal. However, the study also found that some bullying and manipulation exists within the context of normal childhood sexual play.

Lamb and Coakley found that some games between males and females that were perceived as normal involved experiences of coercion, manipulation or bullying. Up to 43% of girls reported an experience in which they were coerced, manipulated or bullied by a boy to participate in sexual play. Some fantasy games involved commercialised sexual activity, the sale of sex though pornographic materials, strip shows and prostitutes. Extreme examples included role play, rape scenarios and sexual dominance with slave girls. However, the majority of women reported enjoying the games. Even those who felt some harm had resulted from the games still ranked the experiences as high on the normality scale. Only women who rated their experience as ‘highly coercive’ were less likely to perceive the sexual play as normal.

Lamb and Coakley argue that their findings suggest that, as with the continuum of adolescent harmful sexual behaviour discussed in chapter one, there may be a continuum of normal manipulative play to harmful sexual behaviour. In addition, the researchers suggest that children, especially girls, begin exploring their sexuality in childhood heavily influenced by stereotypical gendered sexual role models. The disturbing aspect is that young girls may
perceive the force, opposition and dominance of men as a part of normal adult female sexuality.

Furthermore, as O'Keefe (2000) suggests, children are provided with romantic gendered images of men and women in relationships. Fairy tales such as Snow White are a classic example of a pretty, virtuous and vulnerable young woman swept from her housekeeping role by a strong, assertive and masculine young man. Although less sexual and less coercive, such images still reinforce the culture of masculinity and provide gendered expectations for both males and females from an early age.

Hence, sexual play has a role in the sexualisation of children. Although attributed meanings are not necessarily the same as adults, sexual play helps shape how children perceive themselves and others as sexual. In addition, by acting out of stereotypical sexual roles during childhood, young people may believe them to be examples of normal sexual behaviour, dating and sexually intimate relationships. However, if not challenged, stereotypes are endorsed in real life (e.g. witnessing domestic violence) and if sexual equality is not encouraged, there may be negative consequences for young people as they begin to date and become more sexually active. Hence, in the context of issues discussed here, sexual play may shape the same stereotypical sex roles that, if interacting with other negative factors, may increase risk for the development of harmful sexual behaviour, in or out of a dating relationship.
Premature sexualisation of children may also have a range of negative consequences for the sexual development of children and young people. Papadopoulos (2010) suggests a comprehensive definition of premature sexualisation may be “the imposition of adult sexuality on to children and young people before they are capable of dealing with it, mentally, emotionally or physically” (p. 23). It is, she argues, something that is not confined to a single race or class. Papadopoulos identified an increase in the prevalence of premature sexualisation since the 1990’s. The review found the media to be saturated with sexual images that portray children as adults and adult women as infants. Thus, lines between sexual maturity and immaturity are blurred potentially legitimising children as sexual objects. Sexualised toys (e.g. Bratz dolls), stationary (e.g. carrying Playboy bunny logo), clothing (e.g. push up bras, makeup, high heel shoes and sexual statements on tops) are all easily available in the high street and on the Internet. Such sexual images encourage girls to look hot and sexy, to be thin and have a big bust to show off to boys. Boys may not be exempt, as they have to meet expectations to look muscular and dominant. In addition, cultures in which violence is legitimised by sport, the mass media, music, and video games are more conducive to the sexual objectification of women (White, Kadlec & Sechrist, 2006).

Rice (2000) suggests that since the mid 1990’s adults in their 30’s and 40’s do not want to grow up, while 8 to 12 year-olds cannot wait. She argues that the concept of ‘the Tweenies’, little girls who want to wear make-up, dress in cropped tops, wear tattoos and play with sexualised dolls like Bratz is rife.
In contrast to the highly moralistic and romantic images provided by fairy tales, the media frequently report sexual antics and immorality by others, often famous role models, as entertaining. Businesses and corporations also readily use sexualised images of children and young people as a marketing tool. Rice argues that children should be protected from exposure to adult realities and responsibilities and encouraged to enjoy the innocence of childhood. Premature sexualisation, she argues may result in the sexual exploitation of children by adults and age inappropriate sexual behaviour between children and young people.

Due to cognitive and emotional developmental differences children may not perceive hyper-sexualised images in the same way as adults. However, it may have a ‘drip drip’ effect that normalises hyper-sexualised stereotypical roles of men and women. The polarised sexual objectification of boys and girls then serves to reinforce each other. Childhood sexualisation may also have a negative impact on future physical, emotional and sexual development during adolescence and adulthood. Failure to meet expectations can result in low self-esteem, depression and eating disorders, even in pre-pubertal children. It may also lead to sexual bullying, harassment, and violence and in extreme cases exploitation and abuse. Furthermore, McCarthy (2008) suggests that adults and young people may use examples of sexualised mainstream media images to normalise, groom and engage children in harmful sexual behaviours.
Healthy sexuality has an important role in physical and mental health and is rooted in childhood development (Papadopoulos, 2010). Physical and mental health contributes to healthy sexual activities based upon mutual respect, consent, intimacy and pleasure. However, there are clearly aspects of sexual play that may be a normal part of childhood sexual development yet encourage inequality and are not necessarily healthy. On the one hand children are perceived by adults as asexual, innocent, to be discouraged from adult like sexual behaviours and protected from abuse. On the other, adults endorse sexual behaviours that encourage the socialisation of stereotypical gender roles as normal. However, inequality is something to be discouraged and is not considered appropriate in adult attitudes or behaviour. Hence, the UK often contradicts itself by accepting stereotypical gendered play that would not be encouraged in adulthood.

Such early childhood sexualisation may have negative effects (e.g. the polarised sexual objectification of boys and girls) that may impact upon the development of future healthy romantic and intimate relationships. Therefore it is important that children also have positive influences, especially parental attachments, in order to develop appropriate boundaries, attitudes and behaviour (Wolfe, 2010). In early childhood, parents are the main source of sexual knowledge and role models for age appropriate dating and sexual intimacy development. Disruptions such as too much or too little sexual knowledge, lack of attachment, sexual abuse, domestic violence and access to violent sexual thematic media may encourage skewed perceptions and
beliefs that have a negative impact on adolescent dating and sexual intimacy development.

**2.4 Normal Pubertal Development**

Puberty brings with it a range of physiological and psychological changes (Coleman & Hendry, 1999). Coleman and Coleman (2002) found that measurements for the onset of puberty have included age of the development of breast buds, pubic hair or first menstruation for girls and emergence of pubic hair, genital development or spermarche in boys. Furthermore, growth spurts, an increase in height and weight occurs during early pubertal development for girls but may not begin until the later stages of maturation in boys. Currently it is believed that the average age on onset of male puberty is 11 - 12 years, with a range of 9 - 14 years. Females usually begin puberty earlier than males at an average age of 10 - 11 years.

Both males and females are deeply aware of physical changes in themselves and in each other during puberty (Bancroft, 2006; Coleman & Hendry, 2002; White, Kadlec & Sechrist, 2006). Observations of their own and peers physiological changes can affect cognitions, interpersonal and social interactions that consequentially influence psychosexual development. Indeed, there is a wealth of research which suggests adolescents seek to meet idealised norms about physical attractiveness, often based on images promoted in the media (Arnett, 1995; Larson, 1995; Thornborough & Lin, 2000). If young people feel that they do not meet these (often unrealistic) criteria, it may have negative effects on their sexual identity, self-esteem and
popularity among friends and peers and potential partners (Lanis & Covell, 1995; Sharpe & Thomson, 2005). Hence, fears of inadequacy and anxieties about anything that is perceived as physiologically abnormal may have a negative impact upon the dating and sexual intimacy features of involvement, partner selection, the quality and cognitive and emotional processes outlined in the Introduction. Potential consequences may be an increase in dating and sexual intimacy anxieties.

Females that mature early, for example, are confronted with biological drives to fulfil sexual needs. However they do not have the cognitive capacities or social maturity to deal with sexual contact (Chapin, 2000; Collins, 2003). Further disadvantages include bullying (especially from other girls), cognitive maladjustment, and low satisfaction with body image, psychosomatic symptoms and low academic success (Coleman & Hendry, 2002; Hunter, Becker & Lexier, 2006). Confronted with anxieties that they are unable to verbalise their feelings, females may exaggerate symptoms or internalise their feelings.

Negative experiences during pubertal development may make a female who matures early more vulnerable to engage in risky or harmful sexual behaviours, and experience psychosexual maladjustment than females who experience normal pubertal development. Negative consequences for dating and sexual intimacy development include early onset of dating and sexual intimacy behaviour, partners of more than five years older, sexual exploitation and harmful sexual dating relationships, especially for girls with low parental
attachment (Barter, McCarry, Berridge & Evans, 2009; Wood, Barter &
Berridge, 2011).

However, Coleman and Hendry (1999) found that in contrast to
females, early maturation in males could have a number of positive effects.
They are more likely to feel satisfied with their physical appearance, are more
likely to be popular and to succeed in school. Males who physically mature
late are more likely to be unpopular, to be perceived as unattractive by peers
or adults and to be less relaxed and less successful in school. The
psychosexual and psychosocial effects and negative consequences
associated with dating and sexual intimacy development may be similar to
females that mature early.

2.4.1 Sexual Arousal, Sexual Attraction and Sexual
Fantasy. Alongside physiological changes and the pre-existing childhood
sexual taboos develops a gradual shift to a more adult like interpretation of
sexual arousal, sexual fantasy and sexual attraction. Although they are
interrelated, there is evidence of a gendered developmental trajectory.
Bancroft (2006) observes that the onset of masturbation occurs close to the
age of puberty in boys but not in girls. Female children show a greater range
of individual variability. Girls that are more sensitive to the behavioural effects
of adrenal changes may show an increased sexual interest and may begin
masturbating earlier than other females. Boys who experience sexual arousal
and experience orgasm more than two years before puberty may also be
more sensitive to androgens.
Reynolds, Herbenick and Bancroft (2003) found that sexual arousal first occurs prior to puberty for both females and males at around 9 years old. However, first sexual attraction differed according to gender. Males were more likely to report it first occurring prior to puberty (average age of 11 years) and females post puberty (average age 13.7 years). The gender difference was even greater for sexual fantasy. The majority of females, 62% (average age 14.4 years) reporting it post puberty compared to 55% of males (average age 10.8 years) experiencing it pre-puberty. Bancroft (2006) argues that gender divisions may reflect a greater individual variability in the onset of sexual interest in females.

Gold and Gold (1991) found that males reported having shorter yet more explicit first sexual fantasies about which they reported more positive responses and had fewer negative feelings than women. Cues for first fantasy for women were more likely to involve a relationship (31% female v 6% male) whereas boys reported more visual cues. First sexual fantasies for both males (27%) and females (6%) involved sexual contact with movie stars or adults the young people knew, teachers for example.

The content of sexual fantasies for men and women may also be gendered. In a review of literature about the development of sexual fantasies Leitenberg and Henning (1995) identified three significant differences. First, men are more likely to report doing something sexual to their partner and women are more likely to report men doing something sexual to them. Second, men are more likely to fantasise using explicit sexual imagery
whereas women tend to fantasise using emotional and romantic imagery. Finally, dominance and force in sexual fantasies are more common amongst men, (almost one third), whereas being overpowered and forced into sexual activity are more common for women. Although very rare, a minority of males who had reported as never having committed a sexual offence reported sexual fantasies and sexual arousal involving children.

The content of adult like sexual fantasies appears to reflect the same dynamics as the sexualised gender stereotypes acted out in childhood sexual play. It is of note that adults of both genders continue to visualise stereotypical images of male dominance and female submission. This is especially interesting as the majority will hold beliefs contradictory to their sexual fantasies and outwardly express disgust at any stereotypical attitudes and behaviour that encourage inequality. Whether normal sexual fantasies that contain images of sexual objectification and force can be viewed as harmful or healthy is a matter of perspective. The difference between normal and harmful lies within overt behaviour. That is, whilst the majority of people keep their sexual fantasies private, only a minority physically act them out in a non-consensual harmful sexual manner.

It has been suggested that aggressive sexual fantasies and the association with arousal, pleasure or emotional release has a role in the development and maintenance of harmful sexual behaviour. For both males and females deviant sexual fantasies may develop prior to or following the harm that has been perpetrated (Brown, 1999; Hunter, Lexier, Goodwin,
Browne & Dennis, 1993; Leitenberg & Henning, 1995; Marshall & Marshall, 2000). Thus, a young person may have an unhealthy obsession with a sexual activity (whether with a peer, adult or child) that they act out and fantasise about or vice versa.

However, there is evidence presented here which indicates that the use of force or coercion in a sexual fantasy is not uncommon in the general population, especially amongst men. Daleiden, Kaufman, Hilliker and O'Neil (1998), for example, found both sex and non-sex offender groups reported more deviant sexual fantasies than non-offenders. However, Leitenberg and Henning (1995) found a number of studies that identified male sex offenders as having similar sexual fantasies as non-sex offenders and non-offenders.

It appears that an inner conflict exists between sexual learning experiences of appropriate male and female relationship behaviour developed in childhood sexual play, immediate sexual thoughts, feelings and fantasy. Further conflicts exist between contradictory images, information and advice coupled with competitive pressure to achieve an emotionally and sexually healthy dating relationship (Sharpe & Thomson, 2005). A desire to conform to idealised gendered images that may make them more sexually attractive as a prospective partner may contradict with healthy behaviours. This may lead to confusion surrounding the dynamics of appropriate and inappropriate relationship behaviour by both males and females. Confusion may increase and boundaries blurred if previous sexual experience has included violence.
and abuse. Subsequently young people may misread signals and are vulnerable to behave in a sexually inappropriate or harmful way.

Hence, although experienced almost universally as a normal part of human behaviour and development, thoughts and feelings about normal sexual arousal, and sexual fantasy may be confusing. This may increase if a number of other negative experiences are present. For example, witnessing domestic violence coupled with societal demands for equality may lead to confusion about the normality of male or female dominated sexual fantasies. This may increase anxieties about what is and what is not normal and healthy dating and sexual intimacy behaviour and how to share romantic and sexually intimate play or fantasies with a partner, especially if the young person does not have reassurance about healthy behaviours from friends and family.

2.5 Normal Dating Development

There is an increasing body of research that contradicts previous notions of adolescent dating as an unimportant transitory period into adulthood (Collins, 2003; Furman, 2002). Normal adolescent dating development occurs along an age trajectory influenced by physiological changes, (most notably puberty), and proximal and distal ecological niche factors (e.g. social and cultural environment, personal experience, physical environment). Adolescent dating relationships have a significant short and long term impact on psychosocial and psychosexual development, individual well-being, social status and other interpersonal relationships (Chorney & Morris, 2008; Collins, 2003; Glickman & La Greca, 2004; Ward & Gannon,
Positive benefits include opportunities to develop self-identity, self-worth, negotiation and conflict resolution skills, empathy, commitment, dating and sexual competence, sources of emotional support and to develop sexual intimacy, knowledge and skills (Furman, 2002; Lauresen, Finkelstein & Betts, 2001; Miller & Benson, 1999; Miller & Hoicowitz, 2004; Simon, Kobielski & Martin, 2008). There are, however, risks involved, such as breaking up with a partner, regret, depressive episodes and anxiety (Chorney & Morris, 2008; Collins, 2003; Furman, 2002; Glickman & La Greca, 2004). These experiences may be positive lessons to build resiliency, to help establish and maintain future dating and sexually intimate relationships (Collins, 2003; Furman, 2002; Moore & Rosenthal, 1993). However, combined with other negative factors (e.g. negative life experiences, inappropriate advice, lack of reassurance), the risks may contribute to the development of harmful sexual behaviour and harmful dating behaviour (Chorney & Morris, 2008; Glickman & La Greca, 2004; Ward & Gannon, 2006).

During early adolescence (11 - 12 years old) physiological changes, coupled with the development of sexual fantasies, arousal and attraction in an adult-like manner contribute to a new reasoning about why adults are in romantic and intimate relationships and a desire to satisfy these feelings (Bancroft, 2006; Miller & Benson, 1999). Opportunities arise as increased independence and mobility usually results in peer interaction developing from small same sex groups to larger mixed sex groups (Connolly, Craig, Goldberg & Pepler, 1999; Connolly, Furman & Konarski, 2000; Lashbrook, 2000). Romantic dating relationships and sexually intimate relationships may be
formed with peers within their own social network or by being introduced to potential partners by friends (Connolly, Furman & Konarski, 2000).

Gradually, the innocence of childhood sexual play disappears and is replaced by adult like perceptions of romance, dating and sexual activity (Bancroft, 2006). The correlational development of sexual thoughts, feelings, and behaviours, physical and emotional attractions to others within a romantic context then becomes more established (Connolly et al., 1999; Connolly, Furman & Konarski, 2000; Miller & Benson, 1999).

Connolly et al. (1999) found a number of changes, similarities and differences to adult perception of romantic relationships during early to mid-adolescence. Of 1755 participants ages 9 - 14, even the very youngest were differentiating between friendships between males and females and romantic relationships in a similar way to adults. The differentiations continued to develop and grow stronger with age and experience. Hence, by early adolescence male and female friendships were associated with affiliation whereas romantic relationships were characterised by passion and commitment. Over time, there was a decrease in referencing to affiliation and commitment and an increase in referencing to sexual intimacy. The main difference from adult perceptions of romantic relationships was that adolescents reported a lower frequency of referencing to emotional intimacy and the extent of any commitment.
Research suggests that establishing same sex and opposite sex friendships is more likely to be successful if a young person possesses high quality social skills, to interact with both males and females (Grover, Nangle & Zeff, 2005). Young people who have many male and female friends have a greater ability to interact comfortably. This enhances the likelihood of adolescents engaging in future successful dating relationships, negotiate anxiety, conflict and competently initiate and maintain deeper levels of romance and intimacy (Connolly, Furman & Konarski, 2003; Glickman & La Greca, 2004; La Greca & Mackey, 2007; Nangle & Zeff, 2005). Therefore, failure to possess or successfully negotiate the social skills necessary to develop friendships with males and females may lead to a deviation from normal dating development.

The importance of belonging to a peer group has a number of benefits for adolescent psychosocial development and should not be underestimated. Examples include negotiating a self-identity, higher self-esteem, increased sense of well-being and the availability of emotional support for social, cognitive and physical adjustments (Tarrant, 2002). Close high quality peer friendships are vital for a young person to discuss and share concerns about physical changes, self-image, sexual and relationship experience and the emotional consequences of them. Subsequently, peer influence is an important directive for sexual attitudes and behaviour.

Discussion with peers also provides the experience, knowledge, confidence and assurance necessary for the development of appropriate
dating skills. This becomes even more important as sexual experimentation begins, as fears surrounding what everyone else is doing, competition, peer pressure, love and labelling need to be allayed (Chapin, 2000; Tarrant, 2002). Furthermore, adolescents who identify highly with their peers are more likely to ask for and accept offers of advice and support from other peers, close friends, parents and other adults (Unger, 2000). Subsequently, they have more resources available to seek help, advice, and support and resolve many of the problems and risks they face during dating and sexual intimacy development.

The development of close friendships may be significantly related to strong child-parent attachment (Beinstein Miller & Hoicowitz, 2004; Schneider, Atkinson & Tardif, 2001). Although friends rather than parents are the most likely source of sexual and dating knowledge (Ungar, 2000), situations may arise where a young person is unable to discuss relationship matters with peers or is worried that peers have provided wrong advice. The importance of family members, especially parents, as a source of support during this time should not be underestimated.

In addition, early parental attachments play a powerful role in the development of close friendships and romantic relationships for adolescents, as it is with parents that young people first observe affection and interpersonal communication. Families are especially important role models for young people as a source of relationship knowledge and attitudes about dating and sexual behaviour as it is here they will first witness the contextual dynamics of
intimate relationships which shape their future (Beinstein Miller & Hoicowitz, 2004; Bowlby, 1979; Coleman & Hendry, 1999; Sanders & Mullis; 1988; Simon & Furman, 2010). Thus, when an adolescent begins dating they will use previous familial attachment and observational experience on which to develop romantic and intimate emotional bonds. Benefits are greatest if parents are available to encourage the exploration of new dating experiences yet also provide boundaries.

During later adolescence into early adulthood however, communication content between dating partners increases in emotional intimacy and support seeking (Berger, McMakin & Furman, 2005; Bouchey & Furman, 2003). At the same time, partners increasingly turn to each other for intimate disclosure and look toward each other as safe havens. By early adulthood romantic partners are the primary source of attachments for all types of relationships (Furman & Buhrmester, 1992).

Beinstein Miller and Hoicowitz (2004) found anxieties about avoidance of friendship and parental attachments might influence the quality of romantic attachment. They found that romantic attachment was the most reliable predictor of romantic outcome. However, avoidance of attachment with partners had negative effects for relationship length. Also, the quality of relationship was influenced by the interaction of avoidance and anxiety. Thus, relationship quality was higher when both avoidance and anxiety levels were low. The quality of parental attachment, especially with mothers, was found to influence the transfer of closeness and positive outcomes for romantic
relationships. Attachment to friends was found to be important but less significant. Therefore, it is evident that the role of both parents and friendships are important for the development of positive emotional bonds and experience of high quality dating relationships.

Although not necessarily perceived as a good experience, an increase in relationship conflict during dating development is normal. In addition, the experience may provide a number of positive benefits. For example, emotional maturation, negotiation skills and mutual understanding develop. Subsequently, relationships are more likely to grow stronger (Lauresen, Finkelstein & Betts, 2001; Simon, Kobielski & Martin, 2008). Simon, Kobielski and Martin (2008) suggest that the shift to more positive conflict resolution methods may also be related to a change in relationship goals, relationship maintenance and equality for example. Lauresen, Finkelstein and Betts (2001) argue the development of non-conflict peer discourse also helps to reconstruct changes in dating relationships. They propose this may be due to inexperience, the development of appropriate social and interpersonal skills and a greater desire to maintain close relationships.

In an American study of 754 school students, aged 15 - 18 years, the majority of who were from middle socio-economic backgrounds, Glickman and La Greca (2004) found that, within the context of emerging dating relationships, some level of dating anxiety or distress might be normal. Glickman and La Greca developed a 26 item self-report Likert scale, the Dating Anxiety Scale for Adolescents (DAS-A). Twenty-one of the items were
valid for scoring. The total DAS-A score ranged from a minimum of 21 (low anxiety) to a maximum of 105 (high anxiety), with a midpoint score of 63. Glickman and La Greca measured three contributory factors, fear of negative evaluation in dating situations (FNE-Dating), social distress when interacting with potential partners (SD-Date) and social distress when both males and females were present in a group (SD-Group). FNE-Dating consisted of 10 items, (midpoint score 30), SD-Date consisted of 7 items (midpoint score 21) and SD-Group consisted of 4 items (midpoint score 12). Glickman and La Greca reported the content of the DAS-A to be at fourth grade reading level (age 9-10 years).

The results found a mean score below midpoint for the total score ($M = 41, SD = 13.96$), FNE ($M = 20.46, SD = 7.65$), SD-Date ($M = 12.79, SD = 4.68$) and SD-Group ($M = 7.75, SD = 3.47$). The only significant difference between males and females was that males ($M = 8.05, SD = 3.55$) reported significantly higher levels of distress when males and females were present than females ($M = 7.53, SD = 3.47, p < .05$). Adolescents who reported higher levels of dating anxiety were also more likely to have higher levels of social anxiety and depressive symptoms. However, dating anxiety was significantly less related to depressive symptoms than to peer-related social anxiety.

Therefore, despite the positive benefits, the reality of dating and expectation of sexual intimacy during normal dating development may also result in dating anxiety (Chorney & Morris, 2008; Glickman & La Greca, 2004;
Grover, 2008; La Greca & Mackey, 2007). Many adolescents report distress and uncertainty regarding how they should behave in romantic relationships (Grover & Nangle, 2003; Neider & Seiffge-Krenke, 2001). However, adolescents also may find that their distress is reduced as they gain greater experience in dating situations (Glickman & La Greca, 2004; Neider & Seiffge-Krenke, 2001).

2.6 Normal Sexual Intimacy Development

The onset of sexual activities has great personal and social developmental significance for a young person’s identity and well-being (Ward & Gannon, 2006). Bancroft (2006) argues that within this context the pre-pubertal development of sexual meaning, sexual behaviour and sexual response alongside each other are essential to normal sexual development during the transition into adolescence. However, sexual interest (usually in the opposite sex) continues to be sanctioned by taboos, social and cultural boundaries developed during childhood. Thus, as Coleman and Hendry (1999) suggest, society in the UK acknowledges that dating relationships and sexual activity do not just happen overnight or at the legal age of sexual consent at 16. Nevertheless, any adolescent interactions that may have sexual connotations are still met with fear and anxiety. Hence, sexual intimacy is only deemed acceptable if it retains that childlike innocence which is still disconnected from adult like sexual behaviours. This may be because of denial or fears of the consequences such as emotional well-being, teenage pregnancy and sexually transmitted diseases (Coleman & Hendry, 2000).
Hence, for young people sexual intimacy development is fraught with a wide range of individual social and legal pressures.

Sexual behaviour research during adolescence has largely focused on sexual intercourse, harmful sexual behaviour, early debut and negative consequences (Bancroft, 2006; Barbaree & Marshall, 2006; Moore & Rosenthal, 1993). How and when sexual behaviours such as touching and fondling, mutual masturbation and oral sex, develop is less clear. However there is evidence of a developmental trajectory associated with age and sexual intimacy during dating development.

Writing about sexual development in the UK and America, Bancroft (2006) suggests that the onset of consensual sexual contact with adult-like sexual connotations begin at approximately the same age as first dates, 11 - 12 years. At this point kissing games are common, usually involving someone of similar age and of the opposite sex. That is, females usually first become involved in kissing games with males and males usually first become involved in kissing games with females. Miller and Benson (1999) also argue that the onset of adolescent sexual behaviour is motivated by romantic idealisations. They suggest that sexual activity begins with embracing followed by kissing, fondling sexual organs (e.g. the penis and vagina) over and then under clothes. More intimate behaviours and sexual intercourse usually develop as a romantic relationship becomes more intense and is perceived as a long-term commitment.
In a review of published literature specific to the context of the UK since the 1960’s, Hawes, Wellings and Stephenson (2010) found evidence that the mean age of first sexual intercourse had declined over that period. Results found that the most recent studies found a mean age for first sexual intercourse was approximately 16 years. In addition, the authors’ research suggests that approximately 70% of young people experienced sex at least once by age 17 years. A similar study by Brook (2005) found that most young people reported first sexual intercourse by the age of 20 years. Hawes et al. found that the majority of studies suggested that most young people first have sex with a person they regard as a boyfriend or a girlfriend. However, they identified a study by Schubotz et al. (2004) where only a minority of young people in Northern Ireland reported having been in a committed relationship with the person they had first sexual intercourse with.

There is some debate over the onset of oral sex. Following a review of American academic literature since the 1940’s, Bancroft (2006) found that literature before the late 1980’s suggests oral sex between males and females took place as a form of advanced sexual activity after vaginal intercourse. However, since then the literature suggests that oral sex between males and females is increasingly taking place before intercourse. Bancroft suggests these changes may be possibly be a form for young people to avoid full sexual intercourse.

Sexual activity, including sexual intercourse, may be initiated for many reasons including love, social status, because it feels good or because it just
happens, without planning or any emotional attachment. However, as with sexual arousal, sexual attraction and sexual fantasy, there is evidence for a number of gender differences. In a UK study of 3277 men and 4734 women aged 25 - 44 years, Mercer et al., (2006) found that men tend to have first sexual intercourse with someone of similar age whereas females are more likely to have first intercourse with a partner approximately two years older than them. Although reasons for sexual intercourse are becoming less gendered (Brook, 2005), males are more likely to say it was because of curiosity or physical drive whereas girls are more likely to say it was because they were in love, being romantic or for other relational reasons (Brook, 2005; Hawes, Wellings & Stephenson, 2010; Moore & Rosenthal, 1992; Sharpe & Thompson, 2005). Subsequently, it is not uncommon for females to report feeling misled or disillusioned about their first heterosexual experience or to believe that males are interested more in sex than emotional involvement (Sharpe & Thomson, 2005).

It is not surprising then, that, as with dating development, there are negative as well positive consequences for being involved in a sexually intimate partnership. Although close friendships may be a positive factor for dating development as a source of knowledge, advice and support that may reduce dating anxiety and the risk of harmful dating behaviour, peer pressure to become involved in sexual activity is not uncommon. Many of the risks involved during sexual intimacy development are similar to the risks of dating development. Hence, fears of social isolation, bullying, being perceived as
sexually unattractive or inadequate by peers and potential partners, often motivate compliance to peer pressure.

The NSPCC (2006) reported that more than 15% (288) of all calls to ChildLine 2004/2005 related to peer pressure to become involved in sexual activity or being mocked for their virginity. Pressure involved verbal bullying, physical threats and actual violence. Some young people reported not feeling ready for intimacy and so used alcohol as a coping mechanism to deal with their reluctance. Some calls were from girls as young as 12. Boyfriends or female peers were reported as the most common sources of pressure. In addition, females were twice as likely as boys to cite peer pressure as the main reason for losing their own virginity. The ChildLine report found that 82% of females, who reported peer pressure as the main reason for losing their own virginity, said the pressure came from their boyfriends. The report highlights the differences males and females face when dating. Hence, the struggle to maintain peer attachment, approval and fear of shame may lead some young people to express sexual attitudes and behaviour in order to conform rather than those they are comfortable with (Lashbrook, 2000).

The UK literature review by Hawes, Wellings and Stephenson (2010) identified studies suggesting that more females than males have sexual intercourse before the age of 16. Reasons for underage sexual intercourse included biological, psychological and social factors. For example, both males and females who have sex under the age of 16 are more likely to have entered puberty at an earlier age (Bancroft, 2006; Hawes, Wellings &
Stephenson, 2010). Low levels of parental monitoring are also a common factor, although maternal relationship is more important to males and paternal relationship to females (Hawes, Wellings & Stephenson, 2010). Low educational achievement, being a victim of abuse (especially sexual abuse) or maltreatment, trauma, lack of sex education, low socio-economic status, early first sexual experience, lack of communication skills, substance misuse are also commonly cited factors in research (e.g. Brook, 2005; Mercer et. al, 2006; Raab, Abraham, Buston, Hart & Scott, 2002; Henderson, Wight, Mitchell & Wellings, 2002). Adverse effects include increased risk of drug and alcohol misuse, sexually transmitted disease, not using contraception, teenage pregnancy, low relationship satisfaction, psychosexual maladjustment, victimisation, harmful dating behaviour, bullying, low self-esteem and depression (Coleman & Coleman, 1999; Hawes, Wellings & Stephenson, 2010; Moore & Rosenthal 1993; Wood, Barter & Berridge, 2011).

The age of a partner may also affect males and females differently (Collins, 2003). Mercer et al. (2010) found that having a relatively younger partner (-3 years for males and -1 year for females) did not have as many significant adverse effects as having a relatively older partner (+6 years for males and +10 years for females). However, males with significantly younger partners were more likely to regret the timing of their first sexual intercourse and to have unprotected sex. Having a much older partner for males and females was associated with a number of adverse circumstances including the partner being met recently, the partner being more willing to engage in sexual intercourse than them and being less likely to use contraception. For
females, a much older partner was usually their main source of sexual knowledge. Having a much older partner has also been associated with harmful sexual dating behaviour for both males and females, especially for young people from disadvantaged backgrounds (Wood, Barter & Berridge, 2011).

Sharpe and Thomson (2005) conducted a questionnaire, focus groups and in-depth interviews with young people ages 11 - 16 in five contrasting locations across Northern Ireland, inner-city London, a Home Counties commuter belt town, a rural village and a deprived estate in North England. Across all locations, attitudes toward sexual experimentation were perceived as much more acceptable for boys than girls regardless of age. The authors found that males and females had very gendered views on the availability of sexual partners. Males frequently exaggerated sexual experiences to comply with cultural ideals of the dominant male. However, sexual experience was perceived as a double-edged sword for young women. Influenced by sexual stereotypes young women were labelled as ‘frigid’ if they refuse sexual advances and ‘a slag’ if they comply. Sharpe and Thomson also found that males put females into one of two groups. ‘Clean girls’ suitable as girlfriends to be in a relationship with and ‘dirty girls’ suitable only for sex. Also, it was seen as acceptable for boys to openly brag about their sexual experiences whilst girls were expected to be much more secretive.

Such attitudes pose serious concerns for the development of harmful sexual behaviour and victimisation within teenage relationships during this
experimental period. The responsibility to gain consent is most often placed with males. Therefore they are more likely to be in a position to take advantage of an opportunity to engage in sexual intercourse with a female. Both genders that took part in Sharpe and Thomson’s (2005) study acknowledged the right to refuse sex. However, males frequently spoke of the confusing sexual signals given by females, particularly by the way they dressed. This led to a belief by some young people that non-consensual sex could be legitimised. Males were also more likely to justify or excuse harmful sexual dating behaviour and less likely to rate the seriousness of sexual aggression than females.

Evidence that hostile masculinity, the tendency to assume a stereotypically male role and to seek dominance in competition over other males, has been associated with both harmful sexual behaviour (Hunter, Figueredo, Malamuth & Becker, 2003) and harmful sexual dating behaviour (Barter et al., 2009; Offenhauer & Buchalter, 2011; Wood et al., 2011.) Exposure to high levels of child maltreatment, (especially harmful sexual behaviour), harm of females, anti-social behaviour by male role models, domestic violence, pornography, and low sexual boundaries may increase development of dysfunctional male-female sexual relationships further (Hunter et al., 2003; Krinsfogel & Grych, 2004; Miller & Benson, 1999; Wood et al., 2011). Individual factors such as psychosocial deficits, low self-esteem, lack of heterosocial skills, and lack of knowledge may increase the risk of perpetration even further. This may have more significance for some than others. It does however appear to give boys more opportunity to harm
sexually and to justify their behaviour. However, females may be just as aggressive, often using their own stereotypical femininity as the weaker sex to justify their behaviour (Wood et al., 2011).

For young people who are socially isolated, with few friends or have little parental support, the media can be their primary source information for sexual development. Television, film, music and Internet media can be sought without fear of embarrassment, anger, anxiety or causing concern (Gruber & Grube, 2000; Larson, 1995; Thornborough & Lin, 2000). Thus, solitary media use may be used to discover the private self, identify desires, fears and be used as a coping mechanism (Larson, 1995; Thornborough & Lin, 2000). However, young people who use the media as a main source of sexual knowledge are more likely to accept stereotypical gendered sex roles as normal (Arnet, 2007; Gruber & Grube, 2000) have less liberal attitudes, be dissatisfied with their appearance and with their first sexual experience (Thornborough & Lin, 2000).

In addition to the sexually charged images present in mainstream media (e.g. magazines, film, music, television), an increasing amount of children and adolescents are being exposed to pornography (Alexy, Burgess & Prentky, 2009; Flood, 2007; Gillespie, 2008; Righthand & Welch, 2005; Rich, 2002). The attitudes towards and consumption of pornography is gendered. It has been well documented that adolescent males may view pornography as a part of normal sexual development. Reasons include curiosity, seeking information and sexual stimulation (Gillespie, 2008;
McCarthy, 2008; Righthand & Welch, 2005). Not surprisingly, males are also more likely to have positive attitudes about pornography, and girls are more likely to express disgust (Righthand & Welch, 2005). However, a minority of girls do deliberately access pornography (Alexy, Burgess & Prentky, 2009; Flood, 2007).

The use of pornography has been identified as a risk factor for harmful sexual behaviour in both males and females, especially when it is viewed from an early age (Ford, 2006; Ford & Linney, 1995; Mathews, Hunter & Vuz, 1997; Wieckowski, Hartsoe, Mayer & Shortz, 1998). Flood (2007) argues that heterosexual pornography may confuse normal sexual development by reinforcing the need for masculine dominance and status and encouraging a double standard of male/female sexuality. Gillespie (2008) argues that pornography de-personalises the victim, (whether an adult or a child) may increase sexual objectification or encourage harmful sexual behaviour. Furthermore, pornography may serve to distort attitudes and beliefs about appropriate sexual behaviour (between peers and with children), consensual sexual experiences and children’s sexual development (McCarthy, 2008). It may also reinforce sexual arousal to abusive images and therefore act as a catalyst for future harmful sexual behaviours (Alexy, Burgess & Prentky, 2009).

The acceptance of hyper-masculine and hyper-feminine images present in pornography and media may have roots in the normalisation stereotypes present in cross gender childhood sexual play discussed earlier in
this chapter, or in factors such as witnessing domestic violence and being a victim of sexual abuse. Adolescent males may be more vulnerable than females to negative interpretations of hyper-masculine images suggesting male dominance because girls are more likely to be taught to avoid dangers and seek help from an early age. Also, many publicly available community treatment programmes exist for females, supporting a range of victimisations (e.g. sexual abuse, domestic violence). However, there are very few that jointly or solely support males. Thus, the victimisation of males and the impact this may have upon their own psychosocial and psychosexual development is often ignored. Hence, as Ryan and Lane (1991) suggest, the culture of masculinity in society may actually serve to protect females yet expect boys to be able to defend themselves.

Ryan and Lane (1991) argue these attitudes contribute to a sense of weakness, failure and self-blame in young boys who are victimised. Subsequently, if these issues are not resolved by puberty when a young male has to assert his male identity in relationships he may choose to establish his masculinity and control over others by taking the role of the perpetrator. In time, self-perceived feelings of power, control and physical satisfaction are more attractive than any negative consequences of perpetration. Nevertheless, the majority of young people do not justify harmful sexual behaviour (Sharpe & Thomson, 2005).
2.7 Dating and Sexual Intimacy Development in Sexual Minority Youth

In a review of literature from the UK and America, Coleman and Hendry (1999) suggest that there may be four stages of identity development that impact upon dating and sexual intimacy development. The first, ‘sensitisation’, is where the young person starts to become aware that they may be different from others of the same gender (e.g. different sexual feelings). The second, ‘identity confusion’, is where the young person experiences an altered awareness of the self, sexual arousal associated with others of the same gender and stigma surrounding gay and lesbian behaviour. During the third stage, ‘identity assumption’, adolescents begin to take on the identity of someone who is either gay or lesbian and begins to express the same gender identity to others close to them, usually close friends. The final stage, ‘commitment’, the young person commits to an intimate relationship with someone of the same gender and feels able to disclose their sexuality to family and others.

However, Coleman and Hendry (1999) acknowledge that a great variability in age exists for each of these four stages. For example, some may be aware of their sexuality from as young as 10 years, whereas for others confusion may continue throughout adolescence into early adulthood. Subsequently sexual experimentation with same sex and opposite sex peers may occur for both heterosexual and sexual minority youth (Coleman & Hendry, 1999; Eccles, Sayeh, Fortenberry & Zimet, 2004; Maguen, Floyd, Bakeman & Armistead, 2002).
Maguen et al. (2002) conducted a self-report study of developmental milestones for gay, lesbian and bisexual young people. Participants were 63 males and 54 females aged 14 - 27 with an average age of 20 years from a gay, lesbian and transgender conference and a gay and lesbian community services centre in the south-eastern United States. Results found the average age for awareness of same sex attraction was 11 years, first same sex contact was 16 years and disclosure 17 years. Both women and bi-sexual youth were more likely to have first sexual contact with someone of the opposite sex, and then disclose their sexual orientation shortly after first same sex contact. Maguen et al. suggest that the longer delay between same sex attraction, first same sex contact and disclosure for males may be due to entrenched traditional gender roles which restrict the expression of male same sex physical and emotional feelings. Therefore the risks of rejection and loss of social status may be greater for males than for females.

Maguen et al. highlight that the results of their study did not support previous research conducted in the late 1980's and early 1990's that suggested young people in the south-east US reported later age milestones. This, they suggest is due to a greater social acceptance of sexual minority youth. Indeed, research in the UK and the US (e.g. Bauermeister, Johns, Sandfort, Eisenberg, Grossman & D’Augelli, 2010; Coleman & Hendry, 1999) suggests that overall the age of disclosure has decreased significantly over the past thirty years as there has been an increase in the visibility of and demands for social acceptance of sexual minority youth. However, the age of disclosure is still dependent upon internalised anxieties about their sexual
orientation, feelings of acceptance by family, peers and the local community, ethnicity and ability to negotiate their sexual orientation with other normal developmental anxieties such as education.

### 2.8 Research Hypotheses

The review has established that developing a healthy romantic dating and sexually intimate relationship is of great significance to young people. The review highlights how both romantic dating and sexual intimacy may develop along an age trajectory amidst physiological changes, individual, social and legal pressures, to fulfil personal expectations and the expectations of others. Positive and negative outcomes may have a significant short-term and long-term impact on psychosocial and psychosexual development, individual well-being, social status and other interpersonal relationships.

Benefits include opportunities to develop self-identity, self-worth, negotiation and conflict resolution skills, empathy, commitment, dating and sexual competence, and sources of emotional support to develop sexual intimacy, knowledge and skills (Furman, 2002; Lauresen et al., 2001; Miller & Benson, 1999; Beinstein Miller & Hoicowitz, 2004; Simon, Kobielski & Martin, 2008). Furthermore, romantic and sexually intimate relationships are an opportunity to establish negotiation, sharing and intimacy skills (Simon et al., 2008). In addition, as Ward and Gannon (2006) argue, the development and maintenance of romantic and intimate relationships are one of the most important factors to achieve psychological well-being and happiness. Furthermore, supporting young people who harm sexually to develop the skills
and maintain their own healthy dating and sexually intimate relationship in the future is one of the most important challenges during treatment.

The review highlights how normal dating development plays an important role in the onset and maintenance of normal sexual intimacy development. Hence, sexual intimacy may develop within a romantic dating relationship, as partners grow emotionally closer and more committed to each other. In addition, the review highlights how multiple factors, not just one, may contribute to positive outcomes or negative outcomes for young people. As Collins (2003) suggests, a higher number of negative factors interacting with each other may result in a dysfunctional dating and sexually intimate relationship, including harmful dating behaviour.

Anxiety about developing a romantic dating relationship may be normal for males and females during adolescent dating development. Fear of negative evaluation by a potential partner, social distress when interacting with potential partners and social distress when both males and females are present in a group may all play a role. However, males may have higher levels of distress when in a group with males and females than with females. Glickman and La Greca (2004) suggest a number of avenues for future research into dating anxiety, two of which are especially relevant to this research. First, how may dating anxiety interfere with the onset and maintenance of healthy dating relationships? Second, whether problems in dating relationships (e.g. harmful dating behaviour) may contribute to the level of dating anxiety? Chorney and Morris (2008) have also identified a range of
factors associated with dating anxiety. The factors include depression, substance misuse, social isolation, poor social skills, less satisfaction with performance in dating relationships and lack of knowledge about appropriate dating behaviour. In addition, they suggest that dating anxiety may impact upon the development of sexually intimate relationships and increase the risk of sexual dysfunction. The authors propose that more research is required to establish associations between dating anxiety and the onset of sexual intimacy.

Provided with the knowledge of dating anxiety, confusion and anxieties that may occur between a need to satisfy curiosity, personal physiological and emotional needs, to conform to others expectations, and a desire to push boundaries, it would not be surprising if some adolescent sexual intimacy anxiety did not exist. Sexual intimacy anxiety may be a concept similar to but separate from dating anxiety. Similar to dating anxiety, fear of negative evaluation by a potential sexual partner and social distress when interacting with a potential sexual partner may play a role. Young people may also have anxieties about actually being in a romantic dating relationships, (partnership anxiety), and about actually being sexually active, (sexual behaviour anxiety). Sexual behaviour anxiety may involve performing a range of sexual behaviours including kissing, touching and fondling under and over clothes, dry sex, being seen naked, mutual masturbation, oral and vaginal sexual intercourse. Therefore, in addition to the suggestions made by Glickman and La Greca (2004) and Chorney and Morris (2008), future research would
benefit from exploring dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety alongside each other.

Young people, who harm sexually, in or out of a dating relationship, may be associated with higher levels of dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety than other young people. Research suggests that many of the factors associated with normal dating and sexual intimacy development discussed in this chapter are absent in young people who harm sexually, often resulting in psychosocial and psychosexual maladjustment and increased overall anxiety. This may disrupt normal dating and sexual intimacy development, potentially increasing levels of dating and sexual intimacy anxieties.

Ryan (1997) suggests that a child's development may become maladaptive when internal and external factors undermine the development of autonomy and successful relationships. Maladaptive behaviours develop as a consequence of personal imbalance and confusion coupled with a failure to fulfil normal developmental achievements. Subsequent perceptions of incompetence and negative self-image that make the individual increasingly vulnerable may follow. If the child is unable to identify personal well-being to develop a more fulfilling and socially integrated lifestyle via external means, harmful sexual behaviour may compensate. Patterns of inappropriate problem solving and coping methods may put the young person at risk of victimisation and perpetration of harmful sexual behaviour. Hence, as presented in Table 2.1, Ryan and Lane (1997) suggest a range of developmental contextual
characteristics associated with distinctive historical, situational, affective, cognitive and behavioural elements.

Table 2.1: Elements of Harmful Sexual Behaviour

<table>
<thead>
<tr>
<th>Behavioral Elements</th>
<th>Cognitive elements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impulsivity, compulsivity</td>
<td>View of the world, basic beliefs, and self-image</td>
</tr>
<tr>
<td>Aggression, passivity</td>
<td>Distortions, rationalisations, thinking errors</td>
</tr>
<tr>
<td>Control seeking, dominating</td>
<td>Denial, minimisation, over optimism</td>
</tr>
<tr>
<td>Violence, exploitation, manipulation</td>
<td>Blaming, projection, irresponsibility</td>
</tr>
<tr>
<td>Isolation, withdrawal, avoidance</td>
<td>Failure to consider consequences</td>
</tr>
<tr>
<td>Sexual arousal, sexual behaviours</td>
<td>Unempathic, depersonalisation, retaliatory</td>
</tr>
<tr>
<td>Self-destructive behaviours, abusive behaviours</td>
<td>Unrealistic, negative expectations</td>
</tr>
<tr>
<td>Risk taking, thrill seeking</td>
<td>Decision making, problem solving, choice</td>
</tr>
<tr>
<td>Interactions, social competencies, deficits</td>
<td>Fantasies, imagination</td>
</tr>
<tr>
<td>Addictive behaviours</td>
<td>Personalisation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Situational Elements</th>
<th>Historical Elements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home, family role models</td>
<td>Development history: early childhood</td>
</tr>
<tr>
<td>Peer expectations, acceptable</td>
<td>attachment; view of the world; basic beliefs</td>
</tr>
<tr>
<td>Structure contrail, predictability</td>
<td>Stressors: abuse, neglect, loss, trauma</td>
</tr>
<tr>
<td>Success, failure, expectation</td>
<td>Concomitancy of care</td>
</tr>
<tr>
<td>Relationships, events</td>
<td>Significant relationships</td>
</tr>
<tr>
<td>Supervision, opportunity</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Affective Elements</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Helplessness, powerlessness, lack of control</td>
<td></td>
</tr>
<tr>
<td>Degradation, humiliation, embarrassment</td>
<td></td>
</tr>
<tr>
<td>Abandonment, fear, distrust</td>
<td></td>
</tr>
<tr>
<td>Guilt, blame, shame</td>
<td></td>
</tr>
<tr>
<td>Victimisation, persecution</td>
<td></td>
</tr>
<tr>
<td>Lack of empathy, insecure attachment,</td>
<td></td>
</tr>
<tr>
<td>Affective memories, connectedness</td>
<td></td>
</tr>
</tbody>
</table>

Source: based on Ryan and Lane, 1997 p.272
Many of the elements that Ryan and Lane (1997) associate with the development of harmful sexual behaviour have also been associated with dating anxiety and/or may have a negative impact upon the development of normal dating and sexual intimacy development. For example, the young person may not have the opportunity to experience the benefits of having a peer group and close friendships, secure parental attachments or positive role models, have opportunities to meet new partners, develop necessary social, intimacy and conflict resolution skills, gain experience, or have sources of knowledge for appropriate behaviour, advice and support.

Factors including a history of victimisation, substance misuse, low self-esteem, social anxiety and mental health problems have been associated with young people who harm sexually in and out of dating relationships (Ryan & Lane, 1997). Being a victim of harmful dating behaviour, being accepting of harmful behaviour in a dating relationship, lack of conflict resolution skills in a dating relationship and having close friendships with other young people involved in harmful dating relationships have been associated with harmful dating behaviour (Connolly et al., 2010; Connolly, Furman & Konarski, 2000; Wood, Barter & Berridge, 2011). However, there is a lack of comparative research between males and females and between young people who harm sexually (in and out of dating relationships), young people who harm non-sexually, young people who harm sexually and non-sexually and young people who report no harm.
In a review of 89 studies published between 1990 and 2003 Whitaker et al. (2008) found large and significant effects between young people who harmed children sexually and young people who did not harm. Effects included a history of sexual abuse, antisocial personality, difficulty with intimate relationships, experiencing harsh discipline as a child, and loneliness. Also, young people who harmed adults had significantly more externalised anger and hostility than young people who harmed children. Whitaker et al. suggest that more research is required to identify differences between victim types. In addition, the studies included in the search did not identify harmful sexual behaviour against partners.

Young people who harm sexually, especially those who harm children, are more likely to be socially isolated and display higher levels of social distress than young people who do not harm and young people who harm non-sexually (Bladon, French, Tranah & Vizard, 2005; Griffin & Beech, 2004; Katz, 1990; Monto, Zqourides & Harris, 2005). Katz (1990) compared the levels of social competence and psychological adjustment between young males known to have harmed children sexually, young people known to have harmed non-sexually and a school control group. Results found that on most measures young people who harmed sexually and young people who harmed non-sexually had similar attributes. However, adolescents with child victims showed more evidence of global social and psychological maladjustment than other groups. In comparison to young people who harmed non-sexually, they reported more problems with loneliness, assertiveness, social anxiety, negative evaluation, self-consciousness, depression and self-esteem, social
distress and relationships. Katz suggests that anxieties and lack of confidence about male-female relationships and self-perceived feelings of inadequacy may lead to an inability to compete with peers for dating partners. Subsequently, they may turn to children to satisfy sexual and emotional needs.

In addition, as discussed in the Introduction, Ward and Gannon (2006) suggest, that a young person who does not have the skills and competencies to develop dating relationships in order to meet romantic and intimate needs, alongside the significance of dating for adolescents and other negative experiences may seek alternative non-consensual sexual relationships child, peer or adult. It may be suggested that a young person who has the skills and opportunities to form a dating relationship, is aware of the significance of dating and sexual intimacy and may have negative experiences associated, may instigate harmful sexual dating behaviour. Furthermore, Graves (as cited in Masson & Hackett, 1999, p. 5) found that young people who harmed children sexually had lower heterosexual dating confidence than young people who harmed peers or adults sexually. However, this study did not examine sexual intimacy or behaviour anxieties and was not comparative with non-offenders or non-sex offenders.

Research and practice literature (e.g. Bladon et al., 2005; Erooga & Masson, 2006; Hutton & Whyte, 2006; Rich, 2003; Ryan, 2010; Youth Justice Board, 2004) has consistently highlighted a range of dysfunctional familial factors associated with young people who harm sexually that may not only
disrupt normal childhood development, but potentially normal dating and
sexual intimacy development. For example, adolescent harmful sexual
behaviour has been associated with insecure family attachment. As early
parental attachment plays a powerful role in the development of close
friendships, and are a main source of dating and sexual knowledge, especially
when a young person feels under pressure from friends, this may restrict
knowledge of appropriate dating and sexual behaviour. The lack of
attachment may be associated with experience of maltreatment (including
emotional, physical and sexual harm), receiving overly strict discipline, access
to violent pornographic imagery, excessive sexual climate, family involved in
crime, alcohol and substance misuse, having experience in temporary care
placements or witnessing domestic violence.

Cawson, Wattam, Brooker and Kelly (2000) conducted confidential
computer assisted interviews in a study of 2869 participants aged 18 - 24 from
all parts of the UK. The participants were asked to respond to pre-coded
questions about their experiences during childhood and adolescence, with the
option to add further information. The authors found a significant number of
young people, who self-assessed as neglected, lacking in physical care and
were physically or sexually abused reported higher levels of problems making
friends. These young people were significantly more likely to report being a
victim of bullying or discrimination by other children, report unhappiness as a
child, and report negative personal, social and mental health issues than
young people who did not self-assess a history of maltreatment.
Being a victim of harmful sexual behaviour is also associated with a range of short and long-term factors that may have a negative impact on dating and sexual intimacy development. In a review of 42 articles about harmful sexual behaviour, Beitchman, Zucker, Hood and Akman (1991) found short term effects of childhood sexual abuse included sexual dissatisfaction, promiscuity, an increased risk of re-victimisation and suicidal tendencies. Higher frequency and longer duration of abuse, penetration and close relationships with the perpetrator were significantly related to an increased risk of negative outcomes.

Using archival data containing retrospective self-reports of childhood experiences, by 774 university participants, Sperry and Gilbert (2005) also identified short-term effects included nervousness, shame, guilt and fear of the perpetrator. In addition, the authors found that individuals harmed sexually by an adult or adolescent reported significantly more negative long-term effects on psychological functioning than individuals who reported being harmed sexually by a child peer. Factors included anxiety, fear, obsessive-compulsive symptoms, impulsivity, rebelliousness, identity problems, psychotic symptoms, poor interpersonal relationships, social alienation, substance misuse and sexual concerns. Therefore, not only may being a victim of childhood sexual abuse and other forms of maltreatment reduce the likelihood of making high quality friendships as a source of normal dating and sexual intimacy knowledge and to provide reassurance, but it may also be associated with a wide range of psychosocial deficits which may hinder normal dating and intimacy development, maintenance and therefore increase
anxieties.

Research and academic literature has consistently highlighted an association between witnessing domestic violence and children and adolescents (males and females) who harm sexually (Cavanagh Johnson, 1989; Cavanagh Johnson & Feldmuth, 1993; Rich, 2003; Ryan & Lane, 1997). Witnessing domestic violence has been associated with a lack of negotiation skills and the use of inappropriate coping methods, including aggression. Outcomes may include anxiety and stress that is ultimately expressed in harmful sexual behaviour toward a child, adult, peer or partner. A literature review of harmful dating behaviour by Offenhauer and Buchalter (2011) found that witnessing domestic violence and having peers involved in harmful dating relationships has also been associated with adolescent harmful dating behaviour. In addition, witnessing domestic violence may be associated with anxiety about being involved in a dating relationship, dating avoidance and a lack of communication skills in dating relationships (Wood, Barter & Berridge, 2011). However, whether it is more strongly associated with young people who instigate harmful sexual dating behaviour is unclear. Most research does not identify different types of harm, excludes harmful sexual dating behaviour or does not compare characteristics with young people who report instigating no harmful dating behaviour.

The review presented in this chapter suggests that healthy sexual intimacy experience is most likely to develop in dating relationships (Bancroft, 2006; Miller & Benson, 1999). However, as discussed earlier, young people who
harm sexually are less likely to become involved in healthy dating and
sexually intimate relationships. Therefore, anxieties about being sexually
intimate with a potential partner and engaging in contact sexual behaviours
may develop. The same distinctive historical, situational, affective, cognitive
and behavioural elements discussed here that may contribute to dating
anxiety are equally applicable to sexual intimacy anxiety. In addition, dating
anxiety may lead to delayed sexual intimacy development and lack of
experience within sexually intimate relationships. Fear of negative evaluation
and social distress about sexual intimacy may be related to fears of negative
evaluation and social distress about dating, especially if the young person is
concerned about their own lack of experience in comparison to a potential
partner. Furthermore, a lack of knowledge about initiating or developing
sexual intimacy in a healthy way, whether from lack of healthy sexual
experience or other negative life experience may increase anxiety about being
involved in contact sexual behaviours?

However, as with dating anxiety, some sexual intimacy anxiety and sexual
behaviour anxiety may be normal in young people. There is no knowledge
about levels of normal sexual intimacy and sexual anxieties to which to
compare to. Therefore, the strength of any association between levels of
dating anxiety and levels of sexual intimacy anxiety is also unknown.

The review acknowledges research that suggests young people who harm
sexually may be more strongly associated with some characteristics rather
than others depending on factors such as choice of victim (e.g. familial,
stranger, male, female, child, peer, partner, adult) or offence type (e.g. contact, non-contact, history of sexual and non-sexual offences) and gender differences (Pullman & Seto, 2012; Righthand & Welch, 2001; Van Wijk et. al., 2006). Furthermore, young people who instigate harmful sexual and non-sexual behaviour (generalists) rather than harmful sexual behaviour only (sexual specific) may be associated with characteristics more similar to young people who report harmful sexual behaviour (Hunter, Figueredo, Malamuth & Becker, 2004; Pullman & Seto, 2012). In addition, there is a lack of comparative research between young people who harm sexually, young people who harm non-sexually, young people who harm non-sexually and young people who report no harmful behaviour. Therefore, as Whitaker et al. (2008) suggest, more research is required in this area. There are similar gaps in research within the harmful dating behaviour field. Therefore, comparative research into levels of dating anxiety, partnership anxiety, sexual intimacy anxiety and sexual behaviour anxiety may benefit both fields, especially as it has suggested that some level of dating anxiety is normal.

With the points made here in mind, the present research aims to address two questions. First is dating anxiety associated with intimacy anxiety? Second, do young people who sexually harm have higher levels of dating and sexual intimacy anxiety than young people who do not? With consideration of the existing literature and current gaps in research reviewed here, this research addresses five hypotheses:

- Hypothesis 1: Higher levels of dating anxiety is associated with higher levels of sexual intimacy anxiety;
- Hypothesis 2: Young people who harm sexually have higher levels of dating anxiety than non-harmers, non-sexual harmers and generalists;
- Hypothesis 3: Young people who harm sexually have higher levels of partnership anxiety than non-harmers, non-sexual harmers and generalists;
- Hypothesis 4: Young people who harm sexually have higher levels of sexual intimacy anxiety than non-harmers, non-sexual harmers and generalists;
- Hypothesis 5: Young people who harm sexually have higher levels of sexual behaviour anxiety than non-harmers, non-sexual harmers and generalists.

In addition to the benefits for harmful sexual behaviour, harmful dating behaviour, normal dating and sexual intimacy development and dating and sexual intimacy anxiety research, the study may also contribute to practice. That is, the greater the knowledge of normal dating and sexual intimacy development, the more practitioners working with adolescents can be aware of the potential risks of negative outcomes for all young people. Provision may be made to educate, reassure and support young people to develop normal healthy dating and sexually intimate relationships, whether that may be in school personal, social and health education lessons, harmful dating behaviour prevention programmes, harmful sexual behaviour treatment models or Internet support advice and support networks. Thus, the more practitioners are aware of normal levels of dating and sexual intimacy anxiety, of factors associated with higher than normal levels of anxiety (e.g. substance
misuse, social isolation, poor social skills, less satisfaction with performance in dating relationships, lack of knowledge dating and sexual knowledge) and the potential association with other behaviours (e.g. harmful sexual behaviour, harmful sexual dating behaviour), the better challenges to develop positive psychological well-being and happiness for young people may be met.
Chapter 3

Method: Pilot Project
3.1 Participants

Ten participants from a Children’s Secure Unit volunteered to take part in this research. All were awaiting trial, had a known history of, or had been convicted of one or more criminal offences. Four participants were excluded from analysis due to lack of recorded data or withdrawal from the interview. Of the remaining six participants, one was female and five were male. Participants ranged from 14-16 years of age ($M = 14.83$, $SD = .75$). Four identified themselves as White British, one Irish and one Black Caribbean. One participant was identified as having ADHD. The primary offence identified four participants known to have instigated a non-sexual offence (one female, three male), and two male participants known to have previously instigated a sexual offence. Both participants known to have instigated a sexual offence also had a history of instigating a non-sexual offence.

The ethics agreement (see section 3.2) was applied at all times during the implementation of the research method. Informed consent was obtained from each participant and a parent or primary carer. All were made aware of the aims and objectives of the research, an outline of the procedure and obligations of the researcher prior to the interview being delivered. No interview took place without the joint agreement of the researcher and a member of staff at the Secure Unit that the participant was physically and emotionally ready to take part, fully understood what they were consenting to and would be able to understand and respond to questions. No incentives were given.
3.2 Ethical Considerations

Ethical issues related to this research were high priority as the majority of participants were expected to be both under the age of 18 years and/or considered to be vulnerable. Therefore, child protection, data protection and self-incrimination issues required urgent consideration. The researchers approach was to design a procedure that met all of these requirements. The design, recruitment and delivery would protect the participants, the participatory project and the researcher. Therefore, prior to the research proposal discussions took place with youth workers and managers of projects who had indicated a participatory interest.

The extensive work experience of the researcher with vulnerable adolescents together with a current CRB certificate was approved as evidence of the ability to successfully engage young people in a sensitive manner, one that was also appropriate for their age and learning ability. In addition to the signed consent of the participant, it was agreed that a signed parent/carer consent form would be received for all young people under the age of 18 years.

Potential participants would verbally be made aware of the purpose and the benefits of the research, the procedure and how the results from the interview would be used. Potential participants from Secure Units would verbally be made aware that information in their data files held at the Secure Unit would be accessed by the researcher. This would only be done with the permission of the Secure Unit manager responsible for the information.
contained in the files. Potential participants would also be made aware that
the reason for this was to reduce the time of the interview and avoid sensitive
questions about their personal history. Potential participants would be made
aware that the interview was confidential, not a test, there were no right or
wrong answers and that when the thesis was presented no information could
be traced back to them. Potential participants should be made aware that the
interview would take between 30 minutes to one hour to complete. Potential
participants would also have opportunities to ask questions about the
research before, during and after the interview.

Potential participants would be informed that they were free to refuse to
volunteer, take a break or withdraw from the interview at any point. Potential
participants would be made aware that no incentives would be given to take
part in the research. Also, that there would be no negative consequences if
they refused to volunteer, take a break or withdraw from the interview at any
point. The same information that was verbally provided prior to volunteering
would also be verbally provided directly before the interview began and the
opportunity to withdraw provided. This information would also be provided on
the participant consent form.

Prior to signing a consent form, parent/carers would be provided with
information about the researcher, the benefits of the research, the procedure,
and how the research would be disseminated in written format. They would
also be made aware that the research was being carried out with the support
of Loughborough University and the Secure Unit involved.
Staff working with the potential participants would be made aware of the purpose and the benefits of the research, the procedure and how the results from the interview would be used. They would also be provided with a copy of the interview guide and consent forms. No young person would be allowed to participate in the research without the permission of project manager and at least one staff member working closely with the potential participant prior to the interview. This condition would avoid the possibility of danger to the researcher and additional emotional trauma to the participant. The project manager and staff member would only give permission to potential participants who, in their professional opinion, fully understood what they were providing informed consent for and would be able to fully understand and respond to questions.

The interview would be delivered in a separate room by the researcher only. However, a member of staff would always be available for support if the participant became aggressive or distressed. In the Secure Unit that participated in the pilot project the researcher wore an emergency wrist buzzer that could send a green alert to a keyworker when the interview had been completed and the participant ready to escorted back to their unit. In the event that a participant became aggressive or distressed or wished to end the interview, the interview would be terminated immediately and a red alert sent for a staff member to escort the participant back to their unit urgently.

The project managers would agree that the researcher was responsible for the security of any written or recorded data and that it was not used for
anything other than that for which the participant had provided consent for. To reduce self-incrimination and increase child protection it was agreed that the information provided during the interview would remain confidential on the condition that the researcher would be briefed of any sensitive issues, concerns about the participant and unknown subjects which should be reported to staff (e.g. abuse) prior to interview. If the participant began sharing information that broke this agreement then the interview would be terminated immediately and a member of staff informed of what had taken place. However, information for further advice and support would be made available in paper format to take away from the interview. The contact details of the researcher would also be provided in the event that participants had any questions about the research after the interview had taken place. Participants would be informed that staff members would be available to offer further advice and support before and after the interview.

Information from participant data files held at the Secure Unit could be collected and used for analysis alongside data from the interview. The interview could be recorded and transcribed for analysis. All analysis could be presented in the thesis with the condition that no participant could be identified. Upon completion of the study all recorded data would be handed to Loughborough University to be held or destroyed as required in accordance with Loughborough University policy and the Data Protection Act 1998.

All information provided to the participants prior to volunteering to take part in the research would also be provided at the meeting before the
interview began. Loughborough University Ethics Committee agreed to this proposal on 1st July 2005 with the condition that a chaperone be present in all cases.

3.3 Recruitment

Secure Unit and Youth Project managers were contacted via phone or e-mail explaining the aims and objectives of the research. A research information pack was sent to institution and project managers responsible for potential participants. The pack contained:

- A brief literature review;
- Aims, objectives and benefits of the research;
- Methodology;
- Procedure for data collection from the participant, including a copy of the interview guide, consent and information forms;
- How the research would be analysed;
- Information about the researcher including experience working with young people, confirmation of CRB and Loughborough University Ethics Committee clearance.

If the organisation indicated an interest in taking part a meeting was arranged to discuss potential involvement further. During the meeting the project manager was made aware of:

- Current academic and practice based research which supported the need for the thesis;
- The aims, objectives and benefits of the research;
The methodology, procedure for data collection, a copy of the interview guide, the need for access to participant data files and how the results would be analysed;

Information about the researcher, including previous experience of working with vulnerable young people, confirmation of enhanced CRB clearance and clearance from Loughborough University Ethics committee.

Unavoidable time limitations and unexpected closure of projects resulted in only one Children's Secure Unit being able to participate in the pilot project.

All participants were recruited in accordance with the ethics agreement. The researcher visited the Secure Unit to informally meet and recruit potential participants informally prior to an interview. The Secure Unit manager introduced the researcher to potential participants during a lunch period. The potential participant was made aware of whom the researcher was and that the purpose of the visit was to recruit volunteers to take part in a research project. The potential participants were made aware of the aims, objectives and benefits of the research and the interview delivery procedure. They were also made aware that the information provided during the interview was confidential and of the obligations of the researcher. It was made clear that:

- The interview would be recorded and was expected to take between 30 minutes and one hour to complete;
- Signed consent would be required by the participant and a parent/primary carer;
• By consenting to take part in the interview they gave their consent to have their files held at the Secure Unit read with the permission of the Secure Unit manager who was responsible for the data being shared;

• All information provided in the interview was confidential;

• The interview was not a test;

• There were no right or wrong answers;

• All questions should be reported as honestly as possible;

• Participants would be provided with the research definition of dating verbally and in written format prior to beginning interview and would be asked to keep this definition in mind when answering all questions;

• The researcher would be available to answer questions about the research and interview questions at any time before, during and after the interview had taken place;

• Participants could take a break or withdraw from completing the interview at any time;

• No incentives would be given to take part in the research. Also, there would be no negative consequences if they refused to volunteer, take a break or withdraw from the interview at any point;

• If the participant began sharing information that was unrelated to the interview, or had not previously been shared with a member of staff at the unit (e.g. abuse) then the interview would be terminated immediately and a member of staff informed of what had taken place;

• The researcher would terminate the interview where appropriate. If the participant became overtly aggressive or distressed for example;
• The researcher was unable to provide any advice or support during or after the completion of the questionnaire. However, information for further support would be made available in paper format;

• Youth workers at the project would be available to offer advice and support before and after the interview;

• Once the interview was complete the data would be transcribed and analysed alongside data accessed from Secure Unit files;

• The researcher was responsible for the security of the recording to ensure that the data would not be used for anything other than that which the participant had provided consent for;

• Upon completion of the research all recorded data would be handed to Loughborough University to be held or destroyed as required.

If the Secure Unit manager and at least one keyworker working closely with the potential participant were in agreement that the participant fully understood what they were providing informed consent for and would be able to fully understand and respond to questions, consent forms were sent to a parent/primary carer (see Appendix 2). The letter provided information on the research and requested consent for the young person to be voluntarily involved in the research. The option to answer any queries was made available.

Once consent had been obtained from the parent/primary carer and the participant, a time and date for the delivery of the interview was agreed with Secure Unit staff and the participant. The interview was only delivered if staff responsible for the young person, the researcher and the participant were in
full agreement that the participant was physically and emotionally ready on the day of the interview. For example, if a participant volunteered to take part in the research but on the day of the interview, the participant had been behaving in an aggressive manner in which staff and researcher felt may put the researcher at risk, the interview was cancelled. If the participant still wished to volunteer and the staff and the researcher were in agreement another interview date was arranged.

3.4 Materials

3.4.1 Semi-Structured Interview. A semi-structured interview (see Appendix 4) was used to collect exploratory data for a broad range of contextual, emotional, sexual, cognitive and social subject areas related to dating and intimacy. The interview guide used open-ended questions to increase flexibility, allowed the participants to respond in their own words and imposed fewer restrictions on the data being collected. The flexibility of the interview guide also considered individual needs such as age, experience, previously identified risk factors and sensitive issues that may cause distress. The interview questions covered:

- Dating development: age aware of dating, confidence to approach a potential partner, expectations for appropriate behaviour prior to, during and after a date, fears and concerns, discussion of dating development concerns with partners, peers and family;

- Dating experience: dating history, successful and non-successful dating experience, use of drugs, alcohol or illegal behaviour in dating situations;
• Sexual development: sexual orientation, secure sexuality, sexual knowledge, fears and concerns, discussion of sexual development concerns with peers and family;

• Sexual experience: different types of sexual intimacy, sexual fantasy, pornography, confidence to initialize physical and sexual contact with a partner, confidence to respond to physical and sexual contact, responsibility for and use of contraception, harmful dating behaviour.

3.4.2 Participant Data Form. Once consent was obtained, a participant data form (see Appendix 3) was used to record data from unit files. Examples include age, gender, previous offending behaviour, maltreatment, any history of physical or mental health issues. The form was developed with the following advantages in mind:

• History of offending behaviour could be used to identify harmful sexual behaviour and non-sexual harmful behaviour groups. Participants who were known to have instigated a sexual offence under the 2003 Sexual Offence Act were assigned to the harmful sexual behaviour group. Participants who were known to have instigated a non-sexual offence (e.g. GBH, criminal damage, arson) were assigned to the non-sexual harmful behaviour group;

• The researcher was aware of any issues which may be particularly sensitive for the participant to discuss and how to best to deal with them;

• It reduced the time of the interview;
• It would identify treatment and/or training programmes that may have influenced changes in attitudes and behaviour.

The data was analysed alongside the data collected from the interview.

3.5 Procedure

3.5.1 Design. Howitt and Cramer (2005) argue that a post-positivist approach is equally applicable to quantitative and qualitative researchers as our knowledge of reality "can only ever be approximate and never exact" (p. 254). The researcher’s approach is that knowledge continues to grow and with the development of research, practice and experience. Therefore, a post-positivist approach was taken to the research design.

At this early stage in the research, the study was designed to explore a potential relationship between adolescent romantic dating relationships and sexual intimacy within a dating relationship. Areas of interest included anxieties about potentially being involved in a dating relationship, actually being in a dating relationship, the potential of sexual intimacy within a relationship and sexual contact within a dating relationship. Of particular interest was whether young people who harm sexually have higher levels of dating and sexual intimacy anxieties than young people who do not harm others (i.e. are known not to instigate criminal behaviour); instigate non-sexual harm (i.e. are known to have instigated non-sexual criminal behaviour); instigate harmful sexual behaviour (i.e. are known to have instigated sexual
crime) or are known to have instigated sexual and non-sexual harm (generalists). Therefore a comparative design was used.

The aim of the pilot project was to gather qualitative exploratory data on adolescent dating development, dating experience, sexual development and sexual experience that may contribute to dating and sexual intimacy anxiety. These subject areas were chosen based upon previous research in dating and sexual intimacy. Of particular interest was research that suggests childhood development and experience may contribute to the development of adolescent harmful sexual behaviour and dating and sexual intimacy anxieties. The design sought to identify the views of the young participants rather than make assumptions from previous research or impose the researcher’s current knowledge and experience on them.

The mixed data collection and mixed data analysis approach acknowledged the complexity of previous research. First, that there is no single causal factor of harmful dating behaviour (Ward & Beech, 2006). Second, that there is a lack of knowledge about normal dating and sexual intimacy development (Bancroft, 2006; Barbaree & Marshall, 2006; Carson & the AIM Project, 2000). Third, there is a lack of knowledge about adolescent dating and sexual intimacy anxiety (Chorney & Morris, 2008; Glickman & La Greca, 2004).

At this point in the study the aim was to design and deliver to approximately 30 young people a bespoke semi-structured interview to gather
the required data on adolescent dating development, dating experience, sexual development and sexual experience. It was intended that the results would be used to offer more clarity on the subject matter. This would contribute to the development of a shorter streamlined semi-structured interview on dating and sexual intimacy anxieties for a larger participant group of approximately 150 young people.

The design of the interview guide with open-ended questions allowed for flexibility, allowed the participants to respond in their own words and imposed fewer restrictions on the data being collected. The researcher was able to rephrase questions appropriately for the participant and to formulate new questions to explore responses further. This allowed for new subject areas to be introduced by the participant as well as the researcher. Hence, individual experiences could be explored in more depth, providing richer more informative data. The researcher was also able to respond to queries that the participant may have about the questions being asked. In addition, knowledge and previous experience of working closely with young people at risk enabled the researcher to maintain an informal, relaxed approach and communicate the questions more effectively. Therefore the qualitative data collected from the semi-structured interview provided far more detailed data for analysis.

The aim of the participant data form was to collect and quantify multiple demographic data, including a history of known offending behaviour, which could be analysed alongside qualitative interview data. The results contributed towards identifying similarities and differences between groups. As it became
clear that only one Secure Unit would be able to take part in the pilot project, the participant data form was modified to record data from the participant’s personal files held at the Secure Unit.

3.5.2 Interview Delivery. A member of staff escorted the participant to a private meeting room. The researcher wore an emergency wrist buzzer that could send a green alert to a keyworker when the interview had been completed and the participant was ready to be escorted back to their unit. In the event that a participant became aggressive or distressed or wished to end the interview, the interview would be terminated immediately and a red alert sent for a staff member escort the participant back to their unit.

Once the staff had left the room the researcher verbally repeated all the information provided to the participant prior to their agreement to volunteer (see section 3.3). The same information was also provided in written format. A definition of dating was provided verbally and in written format. The participant was then given the opportunity to withdraw from the interview. If the participant indicated they wished to continue then the interview commenced. The interview was recorded as agreed with the participant and Secure Unit staff. Once the interview was complete the participant was provided with a further advice and information sheet containing contact details for ChildLine, the Brook Centre and the researcher (see Appendix 8). The participant was reminded that Secure Unit staff members were also available for advice and support. The participant was given the opportunity to ask further questions. Once the interview was complete a member of staff was contacted to escort
the participant back to their unit. The researcher maintained an informal relaxed approach throughout the interview. All interviews took between 30 minutes and one hour to complete.

3.6 Pilot Project Results

All participants reported that it was never OK to call a partner worthless, put them down, flirt with others or force them to be intimate. However, two participants reported that they would expect to emotionally harm their partner, two they would expect to physically harm their partner in an argument, two that they had deliberately flirted with others to make their partner jealous. One participant known to have instigated harmful sexual behaviour stated:

“That’s a hard situation because like I used to see my dad beating my mum up and it’s a hard thing to do. I don’t know if I would lash out and hit them back or whether I’d leave it or whether I’d pin them down or something, or tell them to leave me alone. I don’t know what I would do.”

Although he reported never having used emotional, physical or intimate harmful behaviour in a dating relationship, data files for this participant identified a history of intimidation and coercive behaviour in relationships. Data files for the second participant known to have harmed sexually outside of a dating relationship also identified a history of instigating physical and sexual harm in a dating relationship, including rape. However, no charges had been made.
All participants reported feeling very sure or sure of their attraction to the opposite sex. The age for being aware of dating ranged from 6 to 14 years old ($M = 10.5$, $SD = 3.08$). All participants reported they enjoyed dating, had at least one dating experience, more casual rather than serious relationships and felt that they made good partners. Two (non-sexual harmers) were currently dating. In the context of a committed dating relationship, emotional closeness and being sexually intimate were both identified as the most important for young people. However, the role of confidence in relation to behaviour was unclear.

All participants expected to and had experience of meeting new partners through friends socially. The most common were parties and the park. One participant known to have harmed sexually reported using social networking sites to meet new partners stating “it was much easier” than asking someone out face to face.

The age range for being aware of sex was 8 to 15 years ($M = 10.83$, $SD = 2.32$). All participants reported they had gone further than kissing in at least one relationship but reported feeling too embarrassed to discuss personal experience or other types of intimacy. Similarly, all participants reported having regular sexual fantasies but did not want to discuss content.

All participants had a known history of a dysfunctional family environment, being in care, personal misuse of alcohol and/or drugs, at least one form of maltreatment, educational disruption and absconding. Only the
harmful sexual behaviour participants had a known history of sexual abuse, witnessing domestic violence, low self-esteem and being bullied.

Family, siblings, partners, friends, the media and pornography were all reported as sources of knowledge. Two male (one sexual, one non-sexual harmer) reported pornography was the one their highest sources of sexual knowledge. Two male non-sexual harm participants reported watching pornography to feel better about their self. Three participants reported not being sure of where their main dating and sexual knowledge had come from. Family and friends were reported as having the most influence on dating confidence and attitudes. Friends were reported as having the most influence on dating behaviour.

Five participants reported that their parents had set them dating and sexual boundaries that they believed were important. The most important were finding someone that ‘cares for you’ and ‘treats you right’. Four participants who had not stuck to these boundaries reported being emotionally hurt in the relationship and losing confidence as a consequence.

Four participants reported an increase in their overall confidence when they were dating. These were the only four participants who reported instigating or possessed fears of instigating sexual and/or physical harmful behaviour. All participants reported they had experienced fluctuating dating and intimacy anxieties, although felt confident or very confident about dating overall.
When asked what made them feel most confident about a committed dating relationship, four reported being made to feel cared for and two being intimate and cared for. Participants also reported less sexual anxiety in a committed rather than non-committed type of relationship. Five participants reported that a partner always had a right to be happy, cared for and respected in steady relationship. All also stated that the same rights never or only sometimes applied for a one night stand or fling. Participants stated that the same rights were not necessary applicable because flings were “meaningless” and “just about sex”. Four participants reported that a good sexual performance was always important for a relationship to work, two that it was sometimes important. The same responses were given when asked whether how confident they felt in a relationship depended on how intimate they were.

Due to the nature of how the interviews developed, it was difficult to measure fears of negative evaluation and distress in a precise manner. All participants reported they ‘sometimes’ felt they had a lot to offer potential dates but no one wanted to know. Four reported they felt isolated when they were not dating, two of whom reported this made them feel nervous. Both participants known to have sexually harmed reported the least confidence in their ability to deal with relationship issues. However, only the participant with a known history of sexual harm in relationships gave negative responses to all questions relating to dating isolation, dating distress and negative evaluation by potential and actual partners. He reported that this made him feel low in confidence about dating. All participants held expectations of future positive
and negative relationship experience and that their confidence would increase with that experience.

In summary, experiences of low confidence included:

- Being cheated on by a partner;
- Instigation and/or being a victim of harmful behaviour in a dating relationship;
- Fears of using aggressive conflict resolution behaviour;
- Not being in a dating relationship;
- Fears of negative evaluation by potential partners and friends;
- Distress about potential dating and intimacy situations;
- Distress about where a partner was and what they were doing;
- Doing something they regretted later (alcohol or drugs were related in all cases);
- Having a one night stand;
- Directly following the end of relationship;
- Lack of dating and/or intimacy experience.

Experiences of an increase in confidence included:

- Being in a committed long term relationship;
- Feeling emotionally close;
- Being sexually intimate.

These items were identified as potential areas for development when designing the questionnaire.
3.7 Limitations and Considerations for Method Development

Data from the pilot project supported the argument that adolescent dating and sexual behaviour was experienced along a developmental age trajectory and was at least part influenced by developmental contextual factors. The importance of childhood experience, cognitions, family, friends and social factors were apparent. However, a number of problems were encountered during data collection that required serious consideration for the main research.

Participants had frequently asked for clarification about different types of dating relationships and intimate behaviours. Therefore, to avoid subjective interpretation and maintain consistency for analysis, it was imperative that participants were provided with definitions verbally, written definitions to refer back to and the option to ask questions throughout.

The results had also highlighted that young people do not always perceive physical and harmful sexual behaviour in a dating relationship as a criminal offence. This required serious consideration so that participants who had instigated harmful behaviour in a dating relationship were not excluded from analysis.

Despite the few number of participants, results from the pilot project suggested dating and sexual intimacy anxieties were related to the type of
dating relationship, previous and current experience, short-term and long-term expectations. To measure all of these variables accurately within the same piece of research would take more time than was available. While participants had reported that their current experiences would influence future dating relationships, it was clear that the actual outcomes would be best measured in a longitudinal study. Responses suggested that the most important was a relationship in which partners were committed to each other, felt cared for and could be intimate. Therefore it was decided to focus on potential and actual dating relationships in the current timeline.

The relationship between emotional closeness and sexual intimacy was unclear. Also, participants had felt too embarrassed to discuss sexual aspects of their relationships. However, recording this information accurately was essential to measure intimacy anxieties. Therefore the design of materials for the larger participant group would have to consider a method that collected the necessary data without embarrassment to the participant.

Data files for participants were out of date or did not contain a large number of factors necessary for comparative subgroup analysis. Examples included additional offence history, maltreatment, witnessing domestic violence, self-esteem, substance misuse, isolation, self-harm, interpersonal relationships with family, friends and partners. Also, data files would not be available for participants from community-based projects during future data collection. Additionally, it was of prime importance was that data was collected
with minimum distress to the participant, with due consideration of self-incrimination, child and data protection issues

The results of the pilot project and limitations discussed here, coupled with pressure to meet deadlines meant that the Method for the main research must be reviewed. Chapter 4 discusses how the revision contributed positively to an updated literature review and new materials for data collection and data analysis.
Chapter 4

Method: The Not So Scary Dating Questionnaire
4.1 Participants

Eighty-seven participants voluntarily completed the Not So Scary Dating Questionnaire. Ten were excluded from the final analysis, as essential questions directly related to the hypotheses had not been completed. The remaining 77 participants were from three treatment projects for young people referred for harmful sexual behaviour, two children’s Secure Units, three support projects for young people at risk of school exclusion, one school lunch club and six community youth clubs.

Forty-five (58%) participants were female and 32 (42%) participants were male. Participant’s age ranged from 13 to 18 years ($M = 15.4$, $SD = 1.41$). The majority of participants ($n = 68$) identified themselves as White British, three as Black Caribbean, two as Irish, two as Mixed Race and one as Indian.

The ethics agreement (see section 4.2) was implemented at all times during the application of the research method. Informed consent was obtained from each participant and a parent or primary carer. All were made aware of the aims and objectives of the research, provided with an outline of the procedure and obligations of the researcher prior to the questionnaire being delivered. All project staff were provided with the same information and a copy of the Not So Scary Dating Questionnaire Pack. No interview took place without the joint agreement of the researcher and a member of staff at the that the participant was physically and emotionally ready to take part, fully
understood what they were consenting to and would be able to understand and respond to questions.

### 4.2 Ethical Considerations

As with the pilot project, the ethical issues related to this research were high priority as the participants were expected to be both under the age of 18 years and/or considered to be vulnerable. This involved child protection, data protection and self-incrimination issues. As with the pilot project, the researchers approach was to design a procedure that met all of these requirements, one that protected the participant, the project that had volunteered to take part in the research and the researcher. Therefore, as the research design developed following the pilot project results, further discussions to proceed with ethical considerations took place with youth workers and managers of projects who had indicated a participatory interest. All were made aware of the ethical considerations and the procedure involved in the design, delivery and analysis of the pilot project. They were also made aware of the Loughborough University Ethics Committee agreement on 1st July 2005.

As with the pilot project it was agreed that the extensive work experience of the researcher with vulnerable adolescents together with a current CRB certificate was evidence of an ability to successfully engage young people in a sensitive manner that was also appropriate for their age and learning ability. In addition to the signed consent of the participant, it was
agreed that a signed parent/primary carer consent form should be received for all young people under the age of 18 years.

As with the pilot project all potential participants would be made aware of the purpose and the benefits of the research, the procedure and how the results from the questionnaire would be used verbally. Potential participants would be made aware that it was not a test and that there were no right or wrong answers. Potential participants would also have opportunities to ask questions about the research before, during and after the questionnaire was delivered. Potential participants would be informed that the questionnaire would take between 15 to 30 minutes to complete.

To reduce self-incrimination, potential participants were made aware that the questionnaire would be presented in an A4 envelope. When the questionnaire had been the completed it would be placed back into the envelope and sealed. Data from the questionnaire would be entered into a statistical package (SPSS) for analysis. The information provided in the questionnaire was confidential and would not be shared. When the thesis was disseminated no information could be traced back to them.

The project managers were aware that under such circumstances any unknown information (e.g. abuse) could not be traced back to the participant. However as with the pilot project, it was agreed on the condition that the researcher would be informed of any sensitive issues, concerns about the participant and unknown subjects that should be reported prior to the one to
one meeting to complete the questionnaire with the participant. If the participant began verbally sharing information that broke this agreement then the interview should be terminated immediately and a member of staff informed of what had taken place. The participant was informed of this prior to volunteering and immediately prior to completing the questionnaire.

Prior to volunteering and immediately prior to completing the questionnaire the participants would be informed that the researcher would be unable to provide verbal advice and support for personal issues during and after the meeting to complete the questionnaire. However, information on the advice and support networks ChildLine and Brook Centre would be made available in paper format to the participant to take away from the meeting. The contact details of the researcher would also be provided should the participant have any questions about the research after the questionnaire had been completed. Participants would be informed that staff members would be available to offer further advice and support before and after the questionnaire was completed.

As with the pilot project, potential participants would be informed that they were free to refuse to volunteer, take a break or withdraw from completing the questionnaire at any point. Potential participants were made aware that no incentives would be given to take part in the research. Also, that there would be no negative consequences if they refused to volunteer, take a break or withdraw from the interview at point
As with the pilot project, prior to signing a consent form parent/primary carers would be provided with information about the researcher, the benefits of the research, the procedure, and how the research would be disseminated in written format. They would also be made aware that the research was being carried out with the support of Loughborough University and the project involved.

As with the pilot project, the project managers agreed that the researcher was responsible for the security of any information provided in the questionnaire and that it was not used for anything other than that which the participant had provided consent for. As with the pilot project, staff working with the potential participants would be made aware of the purpose and the benefits of the research, the procedure and how the results from the questionnaire would be used. They would also be provided with a copy of the questionnaire and consent forms. No young person would be allowed to participate in the research without the permission of the project manager and at least one keyworker, youth worker or social worker working closely with the potential participant prior to the interview. This condition would avoid the possibility of danger to the researcher and additional emotional trauma to the participant. The staff would only give permission to potential participants who, in their professional opinion, fully understood what they were providing informed consent for and would be able to fully understand and respond to the questions in the questionnaire.
As with the pilot project, the questionnaire would be delivered in a separate room by the researcher only. However, at least one member staff would always be available in the event that a participant became aggressive or distressed or wished to end the interview. In such circumstances completing the questionnaire would be terminated immediately. In Secure Units a member of staff would be available via phone or an emergency buzzer to escort the participant back to their unit.

All information provided to the participants prior to volunteering to take part in the research would also be provided at the meeting immediately prior to completing the questionnaire.

4.3 Participant Groups

4.3.1 Offence Groups. A full discussion of why the term ‘offence’ rather than the research definition ‘harmful sexual behaviour’ was used and coding can be found in the Materials section 4.6.1. The responses to offence history found on page 11 question 28 of the questionnaire were used to assign participants to four comparative group categories: ‘no offence’; ‘non-sexual offence’; ‘sexual offence’ and ‘generalist offence’ (young people who reported both a sexual and non-sexual offence). Participants were asked to report if they had committed, (regardless of whether or not they had been charged), with a non-violent offence (e.g. a crime where no-one was hurt), a violent offence (e.g. a crime where someone was physically hurt), a non-contact sexual offence (e.g. flashing your body) or a contact sexual offence (e.g. rape). Examples of additional offence types can be found on the Useful
Definitions sheet (Appendix 6). Participants who reported no offence were put into the no offence group. Participants who reported non-violent and/or violent offence were put in the non-sexual offence group. Participants who reported a contact and/or non-contact sexual offence were put in the sexual offence group. Participants who reported any combination of a sexual and non-sexual offence were put in the generalist offence group.

A total of 22 participants (29%, $n = 11$ female, $n = 11$ male) reported a non-violent offence. A total of 22 participants (29%, $n = 14$ male, $n = 8$ female) reported a violent offence. A total of 10 participants (13%, $n = 6$ male, $n = 4$ female) reported a non-contact sexual offence. A total of 12 (16%, $n = 11$ male, $n = 1$ female) reported a contact sexual offence.

Table 4.1 presents a cross-tabulation of offence group by gender. Just over one quarter of participants (26%, $n = 20$), the majority of whom were male, reported a sexual offence. Ten participants (13%, $n = 9$ male, $n = 1$ female) reported a sexual offence only. Ten participants (13%, $n = 6$ male, $n = 4$ female) reported a generalist offence. Twenty-two participants (29%, $n = 12$ male, $n = 10$ female) reported a non-sexual offence. Thirty-five participants (46%), the majority of who were female ($n = 30$ female, $n = 5$ male) reported no offence.
Table 4.1

Cross-tabulation of Offence Group by Gender

<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Count</th>
<th>% within offence group</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Offence</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Non-Sexual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Sexual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Generalist</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4.3.2 Harmful Dating Behaviour Groups. A full discussion of how participants were assigned to the harmful dating behaviour (HDB) group, why the term was used and coding can be found in the Materials section 4.6.1. Question 21 on page 9 of the questionnaire was used to assign participants to four comparative group categories: ‘no-HDB’; ‘non-sexual HDB’; ‘sexual HDB’ and ‘generalist HDB’ (sexual and non-sexual HDB).

Participants were asked to report current or previous experience of instigating verbal intimidation (e.g. spreading rumours), threatening behaviour (e.g. threatening to destroy something of worth), contact physical aggression (e.g. punching and kicking), unwanted sexual touching, forced sex, threats in an attempt to have sex and unwanted kissing. See questions 21 for the full range of harmful dating behaviours. Participants who reported no harmful dating behaviour were put into the ‘no HDB’ group. Participants who reported
verbal intimidation, threatening behaviour and contact physical aggression were put in the ‘non-sexual HDB’ group. Participants who reported unwanted sexual touching, forced sex, threats in an attempt to have sex and unwanted kissing were put in the ‘sexual HDB’ group. Participants who reported any combination of a non-sexual and sexual harmful dating behaviour were put in the ‘generalist HDB’ group.

In contrast to offence groups, more females than males reported instigating harmful dating behaviour. Just over one quarter of participants (27%, n = 14 female, n = 7 male) reported instigating verbal HDB. Ten participants (13%, n = 8 female, n = 2 male) reported instigating physical HDB. Kissing their partner when they didn’t want to be kissed was the most commonly reported form of harmful sexual dating behaviour (23%, n = 12 female, n = 6 male). Eight participants, (10%, n = 4 female, n = 4 male) reported touching their partner sexually when they didn’t want to be touched. Four participants, (5%, n = 3 female, n = 1 male), reported making threats in an attempt to have sex with their partner. Four participants, (5%, n = 3 female, n = 1 male), reporting forcing their partner to have sex.

Table 4.2 presents harmful dating behaviour (HDB) group allocation, including a breakdown by gender. Just under half of participants (46%, n = 21 female, n = 14 male) reported one or more type of HDB. Over one third of participants (31%, n = 14 female, n = 10 male) reported one or more form of harmful sexual dating behaviour. In contrast to the offence group the majority of participants who reported sexual HDB were female (58%, n = 14). More
males (58%, \(n = 7\)) reported sexual HDB only than females (42%, \(n = 5\)). However, more females (75%, \(n = 9\)) reported Generalist HDB than males (25%, \(n = 3\)). More females (64%, \(n = 7\)) than males (36%, \(n = 4\)) also reported non-sexual HBD. Within the HDB group more females (57%, \(n = 24\)) reported no HDB than males (43%, \(n = 18\)). However, within their gender a greater percentage of males (56%) reported no HDB than females (53%).

Table 4.2

<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Count</th>
<th>% within HBD group</th>
<th>% within Gender</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>18</td>
<td>4</td>
<td>7</td>
<td>3</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td>43</td>
<td>36</td>
<td>58</td>
<td>25</td>
<td>100</td>
</tr>
<tr>
<td>Female</td>
<td>24</td>
<td>5</td>
<td>9</td>
<td>4</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td>57</td>
<td>64</td>
<td>42</td>
<td>75</td>
<td>58</td>
</tr>
<tr>
<td></td>
<td>53</td>
<td>16</td>
<td>11</td>
<td>20</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>31</td>
<td>9</td>
<td>7</td>
<td>12</td>
<td>58</td>
</tr>
<tr>
<td>Total</td>
<td>42</td>
<td>11</td>
<td>12</td>
<td>12</td>
<td>77</td>
</tr>
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</tr>
<tr>
<td></td>
<td>54</td>
<td>14</td>
<td>16</td>
<td>16</td>
<td>100</td>
</tr>
</tbody>
</table>
4.3.3 Prevalence of Both Offence and Harmful Dating Behaviour.

The majority of the 22 participants who reported harmful sexual dating behaviour did not report a sexual offence (59%, \( n = 13 \)). This may suggest that these 13 participants did not perceive harmful sexual behaviour in a dating relationship as an offence. In addition, the results could not identify whether the participant reported the offence because of the harmful dating behaviour.

Further analysis found that all seven participants reported a contact harmful sexual behaviour in a dating relationship. However, two of those participants \( (n = 1 \text{ male}, \ n = 1 \text{ female}) \) reported a non-contact sexual offence. The male participant reported touching their partner sexually when they didn’t want to be touched. The female participant reported touching their partner sexually when they didn’t want to be touched, making threats in an attempt to have sex with their partner and forcing their partner to have sex with them.

The majority of participants \( (65\%, \ n = 9 \text{ female}, \ n = 2 \text{ male}) \) who did not report a sexual offence reported unwanted kissing as their only harmful sexual dating behaviour. However, all six participants who did not report a sexual offence reported touching their partner sexually when they didn’t want to be touched \( (35\%, \ n = 4 \text{ male}, \ n = 2 \text{ female}) \). Of those six participants two \( (33\%, \ n = 1 \text{ male}, \ n = 1 \text{ female}) \) reported unwanted touch with unwanted kissing, one female participant with forced sex and unwanted kissing, one male with forced sex and making threats in an attempt to have sex.
Table 4.3 displays a cross-tabulation of subgroup, with each participant in just one group, by gender. Fifty-six (73%, $n = 30$ male, $n = 26$ female) reported one or more form of offence and/or harmful dating behaviour. Seventeen of the 45 female participants (38%) reported an offence and harmful dating behaviour together. Eleven of the 32 male participants (34%) reported an offence and harmful dating behaviour together. Thirty-seven participants (48%, $n = 19$ male, $n = 18$ female) reported one or more forms of harmful sexual behaviour. A total of seven participants (9%, $n = 5$ male, $n = 2$ female) reported a sexual offence and sexual HDB together.
Table 4.3
Cross-tabulation of Subgroup by Gender

<table>
<thead>
<tr>
<th>Subgroup</th>
<th>Count</th>
<th>Male %</th>
<th>Female %</th>
<th>Total %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Offence</td>
<td>6</td>
<td>100</td>
<td>0</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>0</td>
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<td>0</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>100</td>
<td>8</td>
<td>100</td>
</tr>
<tr>
<td>Sexual HDB</td>
<td>2</td>
<td>4</td>
<td>6</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>33</td>
<td>67</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td></td>
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<td>3</td>
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<td>100</td>
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<td>100</td>
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<td>100</td>
</tr>
<tr>
<td>Generalist and Sexual HDB</td>
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<td>100</td>
<td>100</td>
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<td>45</td>
<td>77</td>
<td>100</td>
</tr>
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<td>42</td>
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</tbody>
</table>
4.4 Participant Characteristics

A total of 11 participants (14%, \( n = 9 \) male, \( n = 4 \) female) reported one or more illness/disability. Six participants (all male) reported ADHD, one male reported Asperger Syndrome, one male reported ADHD and Asperger Syndrome; two participants (both female) reported depression and two participants (both male) reported dyslexia.

Questions 29-30 on pages 11 and 12 asked participants to report historical factors which previous research suggests may contribute to harmful sexual behaviour. Given the diversity of projects that participated in the research included secure units, projects for young people who had harmed sexually and specialist projects for vulnerable young people, there was a high number of reporting for many of the factors. Over one half of participants (53%, \( n = 22 \) females, \( n = 19 \) males) reported previous experience of living with one parent. One quarter (25%, \( n = 13 \) males, \( n = 6 \) females) reported previous experience of being in care, the majority of whom reported experience within the 12 months (84%, \( n = 16 \)). Over one half of participants (29%, \( n = 15 \) male, \( n = 7 \) female) reported previous experience of living in a secure unit, the majority of whom had experience within the past 12 months (72%, \( n = 16 \)). Thirty-five participants (46%, \( n = 22 \) female, \( n = 13 \) male) reported previous experience of a family member involved in criminal activity, alcohol or drugs misuse. Thirty-one participants (40%, \( n = 15 \) female, \( n = 14 \) male) reported witnessing domestic violence.
Just over one half of participants (51%, n = 25 female, n = 14 male) reporting misusing alcohol or drugs themselves, the majority of whom had experience within the past 12 months (90%, n = 35). Twenty-eight participants (36%, n = 20 female, n = 8 male) reported a history of self-harm the majority of who reported self-harming within the past 12 months (79%, n = 22). Sixteen participants (21%, n = 10 female, n = 6 male) reported attempting suicide, 81% (n = 13) reported attempting suicide in the past 12 months. Over half of participants (60%, n = 29 females, n = 17 males) reported being bullied. The majority of males (59%, n = 10) reported being bullied within the past 12 months. However, the majority of females (69%, n = 20) reported being bullied more than 12 months ago.

A total of 14 participants (18%, n = 7 females, n = 7 males) reported experiencing neglect, 50% (n = 4 female, n = 3 male) within the past 12 months and 50% (n = 4 male, n = 3 female) more than 12 months ago. Over one third of participants (45%), over half of who were female (68%, n = 23) reported a history of emotional abuse. The majority of participants reported experiencing emotional abuse within the past 12 months (56%, n = 19). Just over one third of participants (35%, n = 15 males, n = 12 females) reported a history of physical abuse. The majority of participants (59%, n = 16) reported experiencing physical abuse more than 12 months ago. Fourteen participants (18%, n = 9 females, n = 5 males) reported a history of sexual abuse. The majority of participants (71%, n = 10) reported experiencing sexual abuse more than 12 months ago.
4.4.1 Friendship Characteristics. Question 31 on page 12 of the questionnaire asked participants to report friendship factors which previous research suggests may be related to harmful behaviour. Nearly two thirds of participants (64%, n = 29 female, n = 20 male) reported having friends who had been involved in crime, misused drugs and/or alcohol. Three quarters of participants (75%, n = 37) reported such an experience in the past 12 months. Forty-nine participants (64%, n = 29 females, n = 20 males) also reported a history of having a friend who bullied others. Nearly two thirds (63%, n = 31) of those experiences were reported to have occurred within the past 12 months. Over one half of participants (58%, n = 23 female, n = 22 male) reported having friends who were violent towards others. Nearly three quarters of participants (73%, n = 33) reported an experience of a friend being violent towards others within the past 12 months. Fourteen participants (18%, n = 11 female, n = 3 male) reported having a friend who had been violent towards a date. The majority of participants (71%, n = 10) reported such an experience within the past 12 months.

4.4.2 Dating Characteristics. The majority of participants (96%, n = 74) reported feeling most attracted to the opposite sex. One male participant reported feeling most attracted to other males and two male participants reported feeling attracted to both males and females. The majority of participants, (81%, n = 62), reported feeling very sure or sure of their sexuality. Three participants (4%) reported feeling neither sure nor unsure, four unsure (5%) and eight very unsure (10%).
Participants reported their age of being aware of dating ranging from 4 to 16 years ($N = 75$, $M = 9.72$, $SD = 2.69$). Age at first date ranged from 6 to 16 years ($N = 61$, $M = 11.10$, $SD = 2.41$). Over half of the participants (56%, $n = 43$) reported currently or usually dating. Twenty-nine (38%) participants reported rarely dating and five participants (7%) reported not yet dating. Forty-one participants (53%) reported that being cared for was the most important factor for them in a relationship. Six (8%) reported being intimate together was most important for them, 26 (34%) reported both being cared for and being intimate together was the most important factor. Four participants reported ‘something else’.

As presented in Table 4.4 the majority of participants (92%) reported one or more type of sexual behaviour experience. Within gender groups, a greater percentage of females than males reported yes for every type of sexual behaviour experience. Of the participants who reported no sexual behaviour experience four were male and two were female.
As presented in Table 4.5, thirty-one female participants (69%) and 21 male participants (66%) reported being a victim of harmful dating behaviour. More females (67%, \( n = 20 \)) than males (33%, \( n = 10 \)) reported a sexual or generalist victim experience. A total of 22 participants (29%, \( n = 11 \) females, \( n = 11 \) males) reported one or more type of non-sexual victim harmful dating behaviour. Twenty-five participants (35%, \( n = 14 \) female, \( n = 11 \) males) reported no victim harmful dating behaviour.
Table 4.5  
*Cross-tabulation of Victim Harmful Dating Behaviour (VHDB) Group by Gender*

<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Count</td>
<td>None</td>
</tr>
<tr>
<td>Male</td>
<td></td>
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<tr>
<td>Total</td>
<td>25</td>
<td>22</td>
</tr>
</tbody>
</table>

Of the thirty-five participants who reported instigating harmful dating behaviour, 31 (89%) also reported being a victim of HDB. Of the 12 young people who reported instigating sexual HDB, five (42%, \(n = 3\) male, \(n = 2\) female) reported being a victim of sexual HDB and five (42%, \(n = 2\) male, \(n = 3\) female) reported being a victim of generalist HDB. All 12 of the young people who reported instigating generalist HDB also reported being a victim of HDB. Eleven (92%, \(n = 8\) female, \(n = 3\) male) also reported being a victim of generalist HDB. One female participant reported being a victim of sexual HDB. Of the 11 participants who reported instigating non-sexual HDB, nine (82%) also reported being a victim of HDB. Eight (72%, \(n = 5\) female, \(n = 3\) male) reported being a victim of non-sexual HDB. One female reported being a victim of generalist HDB. Twenty-one (50%) of the 42 participants who reported not instigating any HDB reported being a victim of HDB. Fourteen
(67%, n = 8 male, n = 6 female) reported being a victim of non-sexual HDB, three females (14%) reported being a victim of sexual HDB and four participants (19%, n = 2 male, n = 2 female) reported being a victim of generalist HDB.

4.5 Recruitment

Secure Unit or Youth Project Managers were contacted via phone or e-mail explaining the aims and objectives of the research. If they indicated an interest in taking part, a meeting was arranged to discuss potential involvement further. During the meeting the Project Manager was made aware of:

- Current academic and practice based research which supported the need for the thesis;
- The aims, objectives and benefits of the research;
- The results of the pilot project;
- The methodology, procedure for data collection and how the results would be analysed;
- A copy of the questionnaire pack;
- Information about the researcher including previous experience of working with vulnerable young people, confirmation of enhanced CRB clearance and clearance from Loughborough University ethics committee.

If the Project Manager agreed to take part in the research, a time and date was arranged for the researcher to visit the project in order to informally meet
and recruit potential participants. The potential participant was made aware of
the aims, objectives and benefits of the research and the procedure for
delivering the questionnaire. It was made clear that:

- The questionnaire took between 15-30 minutes to complete;
- Signed consent would be required by the participant and a
  parent/primary carer;
- All information provided in the questionnaire was confidential;
- Each envelope, questionnaire and signed consent form had a matching
  ID code should they become separate. It was not to identify them or
  share information with others;
- The questionnaire was not a test;
- There were no right or wrong answers;
- All questions should be reported as honestly as possible;
- Participants would be provided with the research definition of dating
  verbally and in written format immediately prior to completing the
  questionnaire. They would be asked to keep this definition in mind or
  refer back to it when necessary when answering all questions;
- Definitions for words open to misinterpretation would be provided;
- The researcher was available would be available to answer questions
  about the research and questionnaire at any time before, during and
  after questionnaire completion had taken place;
- Participants could take a break or withdraw from completing the
  questionnaire at any time;
• Once the questionnaire was completed, it would be placed with the signed consent form in the envelope and sealed until it was scanned into a database for analysis;

• The researcher was responsible for the completed questionnaire. It would not be used for anything other than that which the participant had provided consent for;

• The researcher would terminate completion of the questionnaire where appropriate. For example, if the participant became overtly aggressive or distressed or began verbally sharing personal information unrelated to the questionnaire. This information would be shared with Project staff;

• The researcher was unable to provide any advice or support about personal matters before, during or after completing the questionnaire. However, the questionnaire pack contained a sheet with the contact details of ChildLine and the Brook Centre;

• Youth workers at the project would be available to offer advice and support at any time before, during and after the questionnaire was completed;

• No incentives were given. Also, there would be no negative consequences if they refused to volunteer, take a break or withdraw from the interview at any point.

If a participant volunteered to take part in the questionnaire, and permission from staff and a parent/career obtained, a time and date for the delivery was agreed between project staff, the researcher and participant.
Due to unavailable meeting opportunities, it was not possible to meet participants from either of the harmful sexual behaviour projects in advance of the questionnaire being delivered. In both cases the potential participant had been provided with the same information by their therapist and volunteered to take part in the research prior to the meeting with the researcher to complete the questionnaire. The researcher delivered the questionnaire under the same conditions as all other participants.

As with the pilot project, the questionnaire was only delivered on the agreed day if the researcher, a project worker responsible for the young person and the participant were all in full agreement that the participant was physically and emotionally ready to take part. For example, if the participant had been behaving in an aggressive manner that may put the researcher at risk or the participants was ill, the meeting was cancelled. If the participant still wanted to volunteer and the staff and researcher were in agreement, another meeting date was arranged.

4.6 Materials: The Not So Scary Dating Questionnaire Pack

A review of the results and limitations of the pilot project contributed to a re-consideration of appropriate materials. Participants were embarrassed about discussing sexual intimacy; more clarity on definitions was required; there was a perception of harmful physical and sexual dating behaviour as normal or not an offence and information about factors which may be related
to anxieties and behaviour, (e.g. history of harmful abuse, abuse, domestic violence) were not always available. Consideration was also given to time passed since the original research questions had been planned. Hence, a second literature review was also carried out. The review highlighted new research in both harmful sexual behaviour and harmful dating behaviour fields that was of direct relevance to the current study. Subsequently, both the materials and research design were amended.

The Contact Details and Further Information Sheet, (Appendix 8) provided in the questionnaire pack contained the researchers contact details should there be any future questions about the research only. Contact details for ChildLine and Brook Centre were provided as a confidential source of emotional and sexual support in the event that issues rose by participating in the research resulted in personal concerns and/or distress. The content of the Not So Scary Dating Questionnaire was reviewed and approved by four youth workers and 11 young people from a project for young people at risk and one therapist from an adolescent harmful sexual behaviour project prior to implementation.

4.6.1 Data Collection. Based on new knowledge, a requirement to collect data as sensitively, confidentially and as accurately as possible, the pressure of project closures and time limitations it was decided to develop a structured quantitative self-report questionnaire. Whilst this was not ideal it did resolve time limitations and many of the limitations highlighted in the pilot project. A full discussion is provided in the Design section 4.7.1. The Not So
Scary Dating Questionnaire (Appendix 1) was designed to collect the data required for the hypotheses. It was part of a Questionnaire pack presented in an A4 envelope. The pack also included the Young Persons Consent form (Appendix 7), a Useful Definitions sheet (Appendix 6) and a Contact Details and Further Information Sheet (Appendix 8).

To resolve ambiguous terminology or misinterpretation during completion of the questionnaire participants were provided with definitions verbally and in writing prior to completion. The researcher was available for further questions or clarifications throughout the questionnaire being completed. A definition of dating, intimacy and a date (Appendix 5) was provided verbally and on the front of the information pack as follows:

- **Dating:** Being in a long or short-term relationship, even a one off date with someone you are romantically and/or sexually attracted to. This person means more than just a friend. You may or may not be intimate together.
- **Intimate:** Doing one or more of the following things; kissing, touching each other sexually under or over clothes, sexual intercourse. You do not have to have done all of these to be intimate.
- **A date:** Meeting up with someone specifically because you are both thinking about starting or are already in a dating relationship. This may be just the two of you or you may be with friends.

It was decided not to put all forms of sexually intimate behaviours referred to in the questionnaire on the front of the questionnaire pack as it made the definition very long. Instead, participants were informed that more types of
sexually intimate behaviours were referred to on page 3 question 12 of the questionnaire. Definitions were provided and they could ask the researcher for further clarification if required.

The intimacy behaviours of kissing, touching and fondling over clothes, touching and fondling under clothes, dry sex, being seen naked by your partner, masturbating each other, oral sex and sexual intercourse were used to measure sexual experience. The question was directly prior to the sexual behaviour anxiety scale measure (section 4.6.7). This was so definitions were fresh in the mind of the participants and could easily be referred back to.

Instructions on how to complete the questionnaire were provided verbally and in writing on page 1 of the questionnaire. They included a reminder about what questionnaire was about, to answer the questions as honestly as possible, that their answers were confidential and to scribble in the circle of their answer provided so that the questionnaire could be scanned in. A reminder to refer to the Useful Definitions sheet when they saw * at the side of a word was made verbally prior to completing the questionnaire, on page 1 and immediately before the questions the definitions related to were asked (see page 11). Full details of definitions and examples can be found in Appendix 6.

The provision of definitions was included to reduce the risk of subjective interpretation that may impact on the results. The Useful Definitions sheet included definitions and examples for:
- Non-violent offence;
- Violent offence;
- Non-contact sexual offence;
- Contact sexual offence;
- Domestic Abuse;
- Bullying;
- Neglect;
- Emotional abuse;
- Physical abuse;
- Sexual abuse.

The decision not to use the research language terminology was made following discussion with young people, youth workers and a review of language used on the child support websites ChildLine and Brook Centre. The outcome was that even though they had the same meaning, potential participants would have a better understanding of the language eventually used in the questionnaire (e.g. sexual offence) than the research definition (e.g. harmful sexual behaviour).

The Useful Definitions sheet also contributed to identifying information about factors that the pilot project results and literature review suggested may be related to anxieties and behaviour. Page 11, question 29 identifies family and residential factors. Page 12, question 30 identifies personal history factors. Page 12, question 31 identifies friendship factors.
The Useful Definitions sheet also contributed to offence group identification. Page 11 question 28 of the questionnaire measures offence history. The literature review identified research that suggested similarities and differences between young people who harmed sexually and young people who harmed sexually and non-sexually (generalists) (Hunter et al., 2004). Therefore the comparative design had four offence group categories: no-offence; non-sexual offence; sexual offence, and generalist offence. Participants were asked to report if they had committed (regardless of whether or not they had been charged) a non-violent, violent, non-contact or contact sexual offence. The decision to include ‘regardless of whether or not you have been charged’ was made based on research knowledge that young people may not have been identified to the police, may not have been charged or convicted of an offence. For the purpose of analysis the data was coded as nominal variables ‘No’ (0) or ‘Yes’ (1) in SPSS. Participants who reported no offence were put into the no-offence group (coded 0). Participants who reported non-violent or violent offence were put in the non-sexual offence group (coded 1). Participants who reported a contact or non-contact sexual offence were put in the sexual offence group (coded 2). Participants who reported any combination of a sexual and non-sexual offence were put in the generalist group (coded 3).

The pilot project results suggested that young people might perceive harmful dating behaviour (HDB) as normal, separate from any perception of physical or sexual aggression related to a criminal offence. The updated literature review identified previous research that supported this (e.g. Barter,
McCarry, Berridge & Evans, 2009; Sharpe & Thomson, 2005; Wolfe et al., 2001). Therefore, the measures for harmful dating behaviour were presented earlier in the questionnaire than measures for offence types. The decision for this was three-fold. First, even though the behaviour may include incidents associated with a criminal offence (e.g. physically beating a partner may be ABH or forcing a partner to have sex may be rape), young people did not always perceive it as such. Second, at the time the research took place not all harmful dating behaviours (e.g. constantly putting a partner down or emotional intimidation) could be classed as an offence. Third, some comparative data with offence types would be provided. Therefore, the four comparative harmful dating behaviour groups were ‘No HDB’ (coded 0); ‘Non-Sexual HDB’ (coded 1); ‘Sexual HDB’ (coded 2) and ‘Generalist HDB’ (coded 3).

The updated literature review identified a validated measure of adolescent harmful behaviour in dating relationships, the Conflict in Adolescent Dating Relationships Inventory (CADRI) (Wolfe et al., 2001). CADRI is a validated measure for physical, sexual, threatening, relational and emotional or verbal harmful dating behaviour. The measure was developed in the US from research involving 1019 participants, 55% girls and 45% boys, aged 14 to 16 years. No suitable UK measure was available at the time of the current study. Permission was gained from the author to use or amend questions from CADRI to identify harmful dating behaviour groups for the study.
Questions 2, 13, 15 and 19 from CADRI were used to measure for the instigation of harmful sexual dating behaviour. These appear on page 9 of the questionnaire in the second part of question 21. Participants were asked to report on current or previous experience of unwanted sexual touching, forced sex, threats in an attempt to have sex and unwanted kissing in the past year. The exact wording from CADRI was retained, hence the word ‘forced’. Each item had four responses that were coded as ordinal variables for entry into SPSS. ‘Never’ (never happened) (coded as 0), ‘Seldom’ (1-2 times) (coded as 1), ‘Sometimes’ (3-5 times), (coded as 2) ‘Often’ (6 times or more) (coded as 3). Questions used in CADRI to measure non-sexual harmful dating behaviour were used as a guide to create four questions relating to experience of verbal intimidation, threatening behaviour and contact physical aggression. These appear on page 9 of the questionnaire in the first part of question 21. Each item had two nominal variable responses: ‘Yes’ (coded as 1) or ‘No’ (coded as 2).

Participants who reported no harmful dating behaviour were put into the No-HDB group. Participants who reported verbal intimidation, threatening behaviour and contact physical aggression were put in the Non-Sexual HDB group. Participants who reported unwanted sexual touching, forced sex, threats in an attempt to have sex or unwanted kissing were put in the Sexual HDB group. Participants who reported any combination of a sexual and non-sexual harmful dating behaviour were put in the Generalist HDB group.
Similar measures were used to collect data on a history of victimisation in dating relationships. Hence, as presented in CADRI participants were asked to report the same questions used to identify instigation relating to current or previous experience of unwanted sexual touching, forced sex, threats in an attempt to have sex and unwanted kissing in the past year were presented for being a victim harmful sexual behaviour at the same time. To measure non-sexual victimisation, the same questions relating to experience of verbal intimidation, threatening behaviour and contact physical aggression was asked prior to the same questions on instigation. These appear on page 8 of the questionnaire in question 20. The same coding used for reporting instigation of harmful dating behaviour was also used for victimisation. Hence there were four groups for 'No-HDB' (coded 0); ‘Non-Sexual HDB’ (coded 1); ‘Sexual HDB’ (coded 2) and ‘Generalist HDB’ (coded 3).

Questions relating to other dating characteristics were introduced on page 1 of the questionnaire. Question 1, ‘at what age did you become aware of dating?’ and question 6 ‘at what age did you have your first date?’ were measured as scale variables. Question 2 recorded data on the importance of dating using a scale of 1 (very important) to 5 (very unimportant). They were coded 1-5 as ordinal variables. Responses to question 3 ‘which sex do you feel most attracted to?’ were coded as nominal variables. Hence, ‘opposite sex (heterosexual)’ (coded 1), ‘same sex (homosexual)’ (coded 2), ‘both (bisexual)’ (coded 3). Question 4 on sureness about sexuality was coded as ordinal variables from 1 (‘most sure’) to 5 (‘least sure’). Question 7, dating status was coded using nominal variables 1 (‘currently dating’), 2 (‘usually
209
dating’), 3 (‘rarely dating’) and 4 (‘I have not yet begun dating’). Participants
were also asked to respond to what aspect of a relationship made them feel
most confident a date wanted to be with them. Responses were coded as
nominal variables, 1 (‘making me feel cared for’), 2 (‘being intimate together’),
3 (‘both of the above’) and 4 (‘something else’). Participants were asked to
name ‘something else’.

Questions relating to other demographic characteristics were
introduced on Pages 10 to 11 of the questionnaire. Question 23 asked the
participant to report their age. This was entered as a scale variable. Question
24 asked participants to report their gender, male (m) or female (f). For
analysis, this was transformed into a nominal variable male (coded 1) and
female (coded 2). Question 25 asked participants to report their ethnicity.
Examples were provided but not limited. Responses led to five coded nominal
variables. They were White British (1); Irish (2); Mixed Race (3); Black
Caribbean (4) and Indian (5). Question 26 asked participants to report any
diagnosis of mental or physical illness. Again, examples were given but not
limited. Responses led to five coded nominal variables. They were ADHD (0);
Asperger Syndrome (1); depression (2); dyslexia (3); ADHD and Asperger
Syndrome (4) and none (5)

4.6.2 The Dating Anxiety Scale (DAS-A) Measure. The
updated literature review identified a validated measure of adolescent dating
anxiety. The DAS-A Likert scale (Glickman & La Greca, 2004) was developed
in the US to evaluate the psychometric properties of dating anxiety in
adolescents. The DAS-A can be found on pages 5 to 6 of the Not So Scary Dating Questionnaire (Appendix 1). No validated UK measure suitable for use with young people could be found. Not only did the DAS-A provide a validated quantitative measure for dating anxiety but it also consisted of three subscales covering issues highlighted in the pilot project. They were fear of negative evaluation (FNE-Dating), social distress when interacting with real or potential dating partners (SD-Date), and social distress when in a group where peers of both gender are present (SD-Group).

Factor analysis of the DAS-A identified the three-factor solution for the subscales. Glickman and La Greca reported high internal consistency with a Cronbach alpha coefficient reported of .94 for Total DAS-A, .92 for FNE-Dating, .88 for SD-Date and .81 for SD-Group. Confirmatory factor analysis confirmed the three-factor solution.

The final DAS-A scale consisted of 26 items, of which 21 were valid for scoring. FNE-Dating consisted of 10 items (2, 3, 6, 8, 14, 17, 20, 22, 23, and 26), SD-Date 7 items (1, 7, 9, 10, 13, 19, and 24) and SD-Group 4 items (4, 12, 16, and 21). Each item had five response options which equated to a score for analysis: ‘Not at all characteristic of me’ (1); ‘Slightly characteristic of me’ (2); ‘Moderately characteristic of me’ (3); ‘Very characteristic of me’ (4); ‘Extremely characteristic of me’ (5). The total DAS-A score ranged from a minimum of 21 (low anxiety) to a maximum of 105 (high anxiety). The midpoint scores were 63 for the Total DAS-A, 30 for FNE, 21 for SD-Date and
12 for SD-Group. Glickman and La Greca reported the content of the DAS-A to be at fourth grade reading level (age 9-10 years).

### 4.6.3 Reliability of the Dating Anxiety Scale (DAS-A)

**Measure.** In the current study the Cronbach alpha coefficient was .94 for Total DAS-A, .91 for FNE-Dating, .89 for SD-Date, and .65 for SD-Group. Therefore the results for Total DAS-A, FNE-Dating and SD-Date suggested good internal reliability similar to that of Glickman and La Greca’s study. However, internal reliability for SD-Group was much lower. It was also below the recommended minimum Cronbach alpha value of .7 (Howitt & Cramer, 2011).

When the inter-item correlation matrix for the Total DAS-A were analysed more closely, the mean inter-item correlation value was .43 with values ranging from -.014 to .69. The lowest inter-item value -.014 was item 21, ‘parties often make me anxious and uncomfortable’ from the SD-Group scale with item 3 ‘I worry that I may not be attractive to people of the sex I am attracted to’ from the FNE scale.

When item 21 only was removed from the scale the Cronbach alpha coefficient for Total DAS-A remained at .94. The inter-item correlation increased from .43 to .46 with values ranging from .16 to .69. This suggests that deleting item 21 had little effect on Cronbach alpha coefficient for the Total DAS-A scale but increased internal consistency. The Cronbach alpha coefficient for the SD-Group scale increased from .65 to .79. The inter-item
correlation also increased to .46, with values ranging from .36 to .64. This suggests that deleting item 21 from the SD-Group scale increased internal consistency just above the recommended alpha value of .7 and created a stronger relationship between the other items in the scale.

There may a number of reasons for lower Cronbach alpha and inter-item correlation scores. First, the participants in the Glickman and La Greca (2004) study were recruited from mainstream education schools. In contrast, participants in the current study were recruited from community youth projects, treatment projects for young people with harmful sexual behaviour, Children’s Secure Units, and support projects for young people at risk of school exclusion. Therefore, many of participants in the current research were not in mainstream education. Second, the Glickman and La Greca (2004) study reported that participants were primarily from middle class socio-economic backgrounds. Whilst a measure for socio-economic background was not used, research suggests that young people not in mainstream education and with a history of criminality are more likely to be from lower socio-economic backgrounds (Coleman & Hendry, 1999).

Finally, Glickman and La Greca excluded 17 adolescents who reported involvement in homosexual relationships or an interest in dating members of the same sex. The current study included 3 participants who reported homosexual or bi-sexual attraction. However, when a Cronbach Alpha coefficient was run excluding these three participants the only change was a slight decrease from .69 to .62 for SD-Group. Results also reported similar
inter-item correlations. In addition, deleting item 21 from the SD-Group scale also increased internal consistency to .7. Exploratory analysis reported that none of the three participants were outliers in their groups for any of the scales used in the current study. Therefore it was decided to include them in further analysis.

Provided with these results, any results from the analysis using the original DAS-A Total and SD-Group scales needed to be treated with caution and could not be directly compared with those of Glickman and La Greca (2004). In order to highlight any change in significance, it was decided to run the same analysis including and excluding item 21. Excluding item 21 the total DAS-A score ranged from a minimum of 20 (low anxiety) to a maximum of 100 (high anxiety). The midpoint scores were 60 for the Total DAS-A, 30 for FNE, 21 for SD-Date and 9 for SD-Group.

All young people who reviewed the questionnaire prior to implementation in the main study were unsure how to interpret the word ‘characteristic’. Whilst permission was obtained from the authors to use the DAS-A to amend questions for the sexual intimacy anxiety scale, (see section 4.6.5), a request to change the wording on the original DAS-A was refused. Subsequently all participants were verbally informed prior to completing the questionnaire that the term ‘characteristic’ should be comparable to the five levels of agreement provided in the sexual intimacy scale that was completed directly prior to the DAS-A in the questionnaire. That is, ‘disagree very much’
(coded 1), ‘disagree slightly’ (coded 2), ‘unsure’ (coded 3), ‘agree slightly’ (coded 4), ‘agree very much’ (coded 5).

4.6.4 Partnership Anxiety Scale Measure. The pilot study identified that young people may also experience high levels of anxiety about being in a relationship. Therefore, an 11 item scale was developed that asked the participant to consider how they would respond if a partner told them they were going out but they were not asked to go along. The measure can be found on page 7, question 17 of the questionnaire. The items measured levels of trust, self-blame, insecurity and isolation. Items 1-3 were ‘yes’ (coded 1), ‘maybe’ (coded 2) and ‘no’ (coded 3). Scores were reversed for items 4-11. The total score ranged from a minimum of 11 (low anxiety) to a maximum of 33 (high anxiety). The midpoint score was 22. Internal reliability analysis could not be carried out on the Partnership Anxiety scale because the questions were about the same thing.

4.6.5 Sexual Intimacy Anxiety Scale (SIA-A) Measure. The Sexual Intimacy Anxiety Scale (SIA-A) can be found on page 4 of The Not So Scary dating Questionnaire. Sexual intimacy anxiety was measured by changing ‘date’ to ‘intimate’ on eight Fear of Negative Evaluation (FNE-Dating) and five Social Distress-Date (SD-Date) items from the Dating Anxiety Scale for Adolescents. For example, Social Distress-Date item ‘I am usually nervous going on a date with someone for the first time’ was changed to ‘I am usually nervous being intimate with someone for the first time’. Fear of Negative Evaluation item ‘I am often afraid that I may look silly or foolish
while on a date’ was changed to ‘I am often worried I may look silly or foolish when I am being intimate’. FNE-Dating items 2 and 5 and SD-Date items 2 and 4 from the DAS-A were excluded as they scored for how attractive a young person felt they were to a potential date. However, the aim of the sexual intimacy anxiety scale was to measure potential intimacy situations in a committed relationship after a first date. Social Distress-Group items from the DAS-A were also excluded as these focused on social anxieties and potential intimacy situations were unlikely to occur in groups.

As previously discussed, all young people who reviewed the questionnaire were unsure how to interpret the word ‘characteristic’. To resolve this matter, the review proposed a similar Likert scale which stated five levels of agreement. The SIA-A was amended to ‘disagree very much’ (coded 1), ‘disagree slightly’ (coded 2), ‘unsure’ (coded 3), ‘agree slightly’ (coded 4) and ‘agree very much’ (coded 5). Therefore, the total point score for the Sexual Intimacy Anxiety Scale for Adolescents ranged from a minimum of 13 (low anxiety) to a maximum of 65 (high anxiety), midpoint 39. Fear of Negative Evaluation - Intimacy ranged from a minimum of 8 (low fear of negative evaluation) to a maximum of 40 (high negative evaluation), midpoint 24. Social Distress - Intimacy (SD-I) ranged from a minimum of 5 (low social distress about sexual intimacy) to 25 (high social distress about intimacy), midpoint 15.

4.6.6 Reliability of the Sexual Intimacy Anxiety Scale

Measure. The Cronbach alpha coefficient was .93 for Total SIA-A, with an
inter-item correlation value of .51, values ranging from .15 to .89; .91 for FNE-Intimacy, with an inter-item correlation value of .56 with values ranging from .43 to .85, and .81 for SD-Intimacy, with an inter-item correlation value of .46 with values ranging from .30 to .59. This suggests good internal reliability similar to that of the DAS-A.

As discussed in the Introduction to the thesis, Collins (2003) defines dating to include ‘the expectation of sexual relations, eventually, if not now’ (p.2). That suggests that sexual intimacy develops naturally as part of a romantic dating relationship. Therefore, it may be argued that the items present in the sexual intimacy anxiety scale and dating anxiety scale are tapping into the same factors. As the overall sample size ($N = 77$) was below the recommended 150+ and did not meet the five cases for each of the variables ratio (Tabachnick & Fidell, 2007), it was not appropriate to run a factor analysis to test this.

However, the author argues that there is a strong case for measuring sexual intimacy anxiety separately. Sexual intimacy includes a range of physical behaviours, often with physical and emotional consequences, which may occur in or out of a romantic dating relationship. Those sexual behaviours include physical sexual behaviours such as kissing, touching and fondling under and over clothes, dry sex, being seen naked, mutual masturbation, oral and vaginal sexual intercourse. As discussed in the literature review and highlighted in the pilot project results, sexual intimacy may be consensual, non-consensual, coercive or risky. Hence, for the young
person concerned, perception of these physical sexual as acts of romantic and emotional closeness may differ. Therefore, as proposed in the five feature dating and sexual intimacy model in the Introduction, sexually intimate behaviour can exist separate to or interact to be part of a romantic dating relationship.

Furthermore, as discussed in the literature review, sexual boundaries and legitimacy are viewed differently to the notion of emotional boundaries and legitimacy associated with romantic dating. The multiple biological, neuropsychological, psychosexual, cognitive and social factors may impact on sexually intimate behaviour development and dating development in different ways. For example, it may be perceived as legitimate that two young people aged 15 years are in a romantic dating relationship. However, sexual intimacy involving sexual intercourse may not be legitimised, either legally or morally. However, it does happen often with mutual consent between partners. Sexual intimacy also has a range of physical consequences (e.g. pregnancy and sexually transmitted diseases) emotional consequences (e.g. regret, fear of rejection, negative perceptions of performance and distress about how sexually intimate to be) and social consequences (e.g. response by peers and family, cultural and community values, legal boundaries).

However, the Dating Anxiety Scale measure makes no specific reference to physical sexual intimacy. It assumes that participants will give equal consideration to romance and sexual intimacy before responding. However, this may not be the case. Glickman and La Greca (2004) suggest
that young people with more dating experience have lower fear of negative evaluation and social distress about dating overall. Yet, a young person may have dating experience but little sexual intimacy experience, or indeed have a history of negative sexual experience, abuse for example. Hence, the young person may have higher fears of negative evaluation, social distress about the potential of sexually intimate behaviours within the relationship or lack confidence about contact in specific sexual acts without anxieties about starting a romantic dating relationship.

Using just one measure for romantic dating anxiety and sexual intimacy anxiety hides the complexities of sexual behaviour development. It also restricts important knowledge that may associate characteristics in young people with dating anxiety only, sexual intimacy anxiety only or both together. Therefore, sexual intimacy anxieties and confidence about specific sexual behaviours need to be measured separately. This will highlight any similarities or differences in anxieties about romantic dating relationships and of sexually intimate relationships between young people with a variety of personal experience.

4.6.7 Sexual Behaviour Anxiety Scale Measure. Levels of anxiety about actual sexual behaviour were measured using an eight-item scale asking participants to think about how confident they feel performing different types of sexually intimate behaviours. The behaviours were kissing, touching and fondling over clothes, touching and fondling under clothes, being seen naked, dry sex, masturbating each other, oral sex and sexual
intercourse. Definitions for the same behaviours were provided in a question about intimacy experience immediately prior to this on the same page. This was so participants could refer to definitions if required. Each item had five response options: ‘very confident’ (coded 1), ‘confident’ (coded 2) ‘neutral’ coded (3) ‘unconfident’ (coded 4) and ‘very unconfident’ (coded 5). The total score ranged from a minimum of 8 (low sexual behaviour anxiety) to a maximum of 40 (high sexual behaviour anxiety). The midpoint score for the Sexual Behaviour Anxiety Scale was 24. As with the partnership anxiety scale, it was not appropriate to conduct internal reliability.

4.7 Procedure

4.7.1 Design. As with the pilot project, a post-positivist approach was taken to the research design. As discussed in the Materials section 4.6, time limitations, a review of the results and limitations of the pilot project and an updated literature review contributed to a re-consideration of the research design. Time limitations and project closures meant the design had to be amended to collect more data from more participants in a shorter time period. Essential to the design were ethical considerations and confidentiality for the participants. The design also required the collection of categorical and scale data necessary to answer the research questions into consideration. Therefore, it was decided to develop a structured quantitative self-report questionnaire. Subsections were designed using the results of the pilot project and the updated literature review.
The subsections were general questions about dating knowledge, dating development, dating; sexual intimacy (including sexual experience, sexual behaviour anxiety and sexual intimacy anxiety); dating relationships (including dating anxiety and partnership anxiety); harmful dating behaviour (including attitudes, victimisation experience and instigation experience) and finally demographic data (including gender, ethnicity, history of illness or disability, offence history, personal, family and friendship factors).

Using a quantitative questionnaire method reduced the expected completion time of between 30 minutes to one hour to between 15 to 30 minutes. This meant more participants could take place in the research during one visit to a project, hence reducing the need for multiple visits. Placing the completed questionnaire in a sealed envelope with an agreement that it would not be opened until it was scanned in for analysis reassured participants they could not be identified and that any information they provided would not be shared with staff. This was especially important for collecting data about illegal or socially undesirable behaviour, family history and victimisation that had previously been collected from the Participant Data form. Participants were able to respond directly, openly and honestly to questions that had caused embarrassment and awkwardness during the pilot project, sexual intimacy for example. Coded questions (e.g. 1 for Yes or 2 for No) speeded up data entry and data analysis.

However, using a quantitative self-report method was not ideal, especially given the eventual small number of participants and the original aim
to collect detailed qualitative exploratory data. Also, known disadvantages of the self-report method is that participants may deceive themselves, choose not to report socially undesirable behaviour or misinterpret words and meaning of the questions (Barker, Pistrang & Elliott, 2002). In addition, closed-ended questions may force an unnatural reply or understand the questions differently (Barker et al., 2005). Finally, sealing the envelope until data was scanned in meant that the participant could not be traced back to a project. This had the potential to distort comparisons between subgroups.

However, a number of steps were taken to reduce these disadvantages. The questionnaire design and delivery maintained a relaxed and informal approach, providing encouragement throughout. Fun images were included. Subsections were introduced, explained and ended clearly, often using words of encouragement (e.g. ‘Almost there…’ and ‘That’s all done for intimacy!’) were used throughout. This approach aimed to achieve a smooth transition between subsections and maintain interest in completing the questionnaire truthfully. Clear definitions and descriptive examples based upon feedback from potential participants and youth workers were provided to reduce the risk of misinterpretation.

General questions to collect categorical data about dating were introduced first to ease the participant into the questionnaire. The collection of detailed demographic data, (including a history of living in a children’s home, foster care or a secure unit) subsections were used to collect categorical data to identify offence group and potential confounding variables (e.g. gender)
and variables associated with offence and harmful dating behaviour (e.g. witnessing domestic violence). Identifying these factors rather than relying on which project the participants came from alone may contribute to reducing distortion between subgroups. Also, given the under-reporting of such factors, there was more potential for exploratory comparative analysis. Demographic data was completed at the end of the questionnaire as it was recognised that participants may be getting tired and the questions required short, simple responses.

The updated literature review highlighted new research in both harmful sexual behaviour and harmful dating behaviour fields that was of direct relevance to the current study. Of particular interest was new research that confirmed the need for a comparative design. There was increasing evidence that young people who instigated sexual and non-sexual harmful behaviour (generalists) may be associated with factors more similar to young people who instigated harmful non-sexual behaviour than young people who instigated harmful sexual behaviour only (Hunter, Figueredo, Malamuth & Becker, 2004). Also relevant to the design was research on harmful dating behaviour that supported the pilot project results. That is, young people may perceive harmful behaviour in dating relationships as normal, separate from any perception of physical or sexual aggression related to a criminal offence (Barter, McCary, Berridge & Evans, 2009; Sharpe & Thomson, 2005; Wolfe et al., 2001). This previous research identified a range of harmful non-sexual behaviour (including verbal, emotional, physical behaviour) and harmful sexual behaviour in dating relationships.
The updated literature review also identified CADRI (Wolfe et al., 2001) and the Adolescent Dating Anxiety Scale (Glickman & La Greca, 2004), both of which had been validated. As previously discussed, the DAS-A measure was not ideal as it was developed in the US (creating language problems) and in contrast to this research the participants were primarily from middle class backgrounds. However, these problems were recognised, language problems reviewed with potential participants, internal reliability was checked and amendments made to achieve good reliability. The DAS-A questions were relevant to sexual intimacy anxiety issues raised in the pilot project and therefore could be amended. The Sexual Intimacy Anxiety scale followed the Sexual Behaviour Anxiety scale to complete the sexual intimacy subsection.

The questionnaire was designed so that the Sexual Behaviour Anxiety Scale was completed immediately after the sexual experience subsection on the same page where descriptions on the sexual intimacy behaviours were provided. This enabled participants to have definitions fresh in their minds and could refer back if required. A three point Likert Partnership Anxiety scale was designed to measure anxiety levels of trust, self-blame, insecurity and isolation. Full details of the Partnership Anxiety scale can be found in section 4.6.4.

The quantitative data collection methods used in the questionnaire design allowed for quantitative data analysis. Scale data was required to collect and analysis dating anxiety, partnership anxiety, sexual intimacy anxiety and sexual behaviour. Therefore, Likert scale response measures
were used where possible throughout the questionnaire to provide quantifiable data for correlation and univariate analysis of variance. The data collected from the dating anxiety, sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety scales allowed for quantitative correlations to identify a relationship between each of the variables. Analysis of variance analysis (ANOVA) would be used to identify significant differences in anxiety between groups. However, the small number of participants and unequal group sizes meant quantitative analysis might not be ideal. Hence, the design also allowed for comparative exploratory analysis on participants above midpoint and below midpoint, including data on variables such as gender.

Young people and staff working with potential participants were consulted about language, terminology, understanding of what was being asked and length prior to designing the questionnaire. The researcher’s previous experience of working with young people also aided the questionnaire design. The same people reviewed the questionnaire and amendments were made before being delivered for the main research. A ‘Useful Definitions Sheet’ containing definitions of the most subjective words (e.g. ‘sexual offence’ and ‘domestic violence’) was included in the questionnaire pack and participants reminded to refer to it when they saw * at the side of a word. See section 4.6.1 for a full review.

4.7.2 Questionnaire Delivery. The final Not So Scary Dating Questionnaire pack was presented as per the ethics agreement and information provided to potential participants during recruitment. At all projects
a member project staff escorted the participant to a private meeting room and the participant left once the questionnaire had been completed. With participants in one Secure Unit, the researcher wore an emergency wrist buzzer that could send a green alert to a keyworker when the interview had been completed and the participant ready to be escorted back to their unit. In the event that a participant became aggressive or distressed or wished to end the interview the interview would be terminated immediately and a red alert sent for a staff member to escort the participant back to their unit urgently. In the second Secure Unit a phone was available for the same purpose.

Once the staff had left the room the participant verbally repeated all the information provided to the participant during recruitment:

- The questionnaire would take between 15-30 minutes to complete;
- All information provided in the questionnaire was confidential;
- The questionnaire was not a test;
- There were no right or wrong answers;
- All questions should be reported as honestly as possible;
- Participants could take a break or withdraw from completing the questionnaire at any time;
- Once the questionnaire was completed, it would be placed with the signed consent form in the envelope and sealed until it was scanned into a database for analysis;
- The researcher was responsible for the completed questionnaire. It would not be used for anything other than that which the participant had provided consent for;
• The researcher would terminate completion of the questionnaire where appropriate. For example, if the participant became overtly aggressive or distressed or began verbally sharing personal information unrelated to the questionnaire. This information would be shared with Project staff;

• The researcher was unable to provide any advice or support about personal matters before, during or after completing the questionnaire. However, the questionnaire pack contained a sheet with the contact details of ChildLine and the Brook Centre;

• Youth workers at the project would be available to offer advice and support at any time before, during and after the questionnaire was completed;

• No incentives were given. Also, there would be no negative consequences if they refused to volunteer, take a break or withdraw from the interview at any point;

The participant was then given the opportunity to ask questions and/or withdraw from the interview. If the participant indicated they wished to continue they were provided with the research definition of dating verbally and also referred to the same definition in written format on the front of the questionnaire pack. They were asked to keep this definition in mind or refer back to it when necessary when answering all questions. Instructions on how to complete the questionnaire were provided verbally. They were also provided on the top of page 1 of the questionnaire sheet. The instructions included information on how to use the Useful Definitions sheet for
clarification when * appeared at the side of a word. The participant was reminded that the researcher was available would be available to answer questions about the research and questionnaire at any time before, during and after questionnaire completion had taken place. Although approved during the review, all participants at the first data collection point reported confusion when answering questions about which type of relationship they would feel most or least confident in (see question 11 on page 2 of the questionnaire). Subsequently future participants were verbally asked to ignore question 11. All participants who completed the questionnaire took between 15 to 30 minutes. The researcher was present in the same room as the participant at all times.
Chapter 5

Results
5.1 Introduction

The present research aimed to address two questions. First are reports of dating anxiety associated with reports of intimacy anxiety? Second, do young people who harm sexually have higher levels of dating and sexual intimacy anxiety than non-harmers, non-sexual harmers and young people who perpetrate sexual and non-sexual harm (generalists)? Therefore, this research addressed five hypotheses:

- **Hypothesis 1:** Higher levels of dating anxiety is associated with higher levels of sexual intimacy anxiety;
- **Hypothesis 2:** Young people who harm sexually have higher levels of dating anxiety than non-harmers, non-sexual harmers and generalists;
- **Hypothesis 3:** Young people who harm sexually have higher levels of partnership anxiety than non-harmers, non-sexual harmers and generalists;
- **Hypothesis 4:** Young people who harm sexually have higher levels of sexual intimacy anxiety than non-harmers, non-sexual harmers and generalists;
- **Hypothesis 5:** Young people who harm sexually have higher levels of sexual behaviour anxiety than non-harmers, non-sexual harmers and generalists.

This chapter presents the results of the research for harmful dating behaviour subgroups and offence subgroups in order of the hypotheses. Tests for normal distribution, parametric and non-parametric analyses were carried out for all analyses. Due to large standard deviations, medians are
also reported. Any significant differences are reported. Effect size to examine the strength of the association and practical significance of the results are also reported. As recommended by Cohen (1988) and Howitt and Cramer (2011), effect size was measured using Cohen’s guidelines for eta squared for a one-way analysis of variance, omega squared for a one-way analysis of variance where the assumption of homogeneity is not met and Welch’s test was used, r for correlation and Cohen’s d for T-Tests. Guidelines for effect size are presented in Table 5.1.

<table>
<thead>
<tr>
<th>Size</th>
<th>Eta Squared $\eta^2$</th>
<th>Omega Squared $\omega^2$</th>
<th>r (correlation)</th>
<th>Cohen’s d (T-Test)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small</td>
<td>.01</td>
<td>.01</td>
<td>.10 to .29</td>
<td>.2</td>
</tr>
<tr>
<td>Medium</td>
<td>.06</td>
<td>.06</td>
<td>.30 to .49</td>
<td>.5</td>
</tr>
<tr>
<td>Large</td>
<td>.14</td>
<td>.14</td>
<td>.50 to 1.0</td>
<td>.8</td>
</tr>
</tbody>
</table>

Significant differences for strength of association between variables are conducted for males and females. They are not conducted for harmful dating behaviour, offence or harm groups due to their being less than the recommended 20 participants in each group. Due to the unequal group sizes, Scheffe’s test was used to identify significant differences in mean scores and a Games Howell test used where the assumption of homogeneity was not met, as recommended by Howitt and Cramer (2011). In addition, statistical analysis for significance was not conducted unless the group total was more than the recommended minimum of three participants (Howitt & Cramer, 2011).
As discussed in Method section 4.6.6, a Cronbach alpha coefficient found that the Dating Anxiety Scale for Adolescents (DAS-A) was stronger excluding item 21, ‘parties often make me anxious and uncomfortable’, from the SD-Group scale. Therefore to highlight any significant differences the decision was made to conduct analysis including and excluding item 21 where appropriate. Any differences are noted.

5.2 Review of Participant Data

The participants were 77 young people from three adolescent harmful sexual behaviour projects, two children’s Secure Units, three support projects for young people at risk of school exclusion, one school lunch club and six community youth clubs. Forty-five (58%) of participants were female and 32 (42%) participants were male. The age of participants ranged from 13 to 18 years ($M = 15.4$, $SD = 1.41$). The majority of participants (83%, $n = 68$) identified themselves as White British, three as Black Caribbean, two as Irish, two as Mixed Race and one as Indian.

Just over one quarter of participants (26%, $n = 20$), the majority of who were male, reported a sexual offence. Ten participants (13%, $n = 9$ male, $n = 1$ female) reported a sexual offence only. Ten participants (13%, $n = 6$ male, $n = 4$ female) reported a generalist offence. Twenty-two participants (29%, $n = 12$ male, $n = 10$ female) reported a non-sexual offence. Thirty-five participants (46%), the majority of who were female ($n = 30$ female, $n = 5$ male) reported no offence.
Thirty-five participants (46%) reported one or more type of harmful dating behaviour (HDB). The majority of these participants were female (60%, \( n = 21 \)). This represented 47% of all female participants and 44% \( (n = 14) \) of all male participants. Twenty-four participants (31% of total N) reported one or more form of harmful sexual dating behaviour. More males (58%, \( n = 7 \)) reported sexual HDB only than females (42%, \( n = 5 \)). However, more females (75%, \( n = 9 \)) reported generalist HDB than males (25%, \( n = 3 \)). More females (64%, \( n = 7 \)) than males (36%, \( n = 4 \)) also reported non-sexual HBD. Within the HDB group more females (57%, \( n = 24 \)) reported no HDB than males (43%, \( n = 18 \)). However, within their gender a greater percentage of males (56%) reported no HDB than females (53%).

As presented in Table 5.2, further exploratory analysis with one participant in one subgroup found nearly one half of all participants, (48%, \( n = 20 \) male, \( n = 17 \) female) reported a sexual offence and/or a harmful sexual dating behaviour. This represented 63% of all male participants and 38% of all female participants. Seven participants (9%, \( n = 5 \) male, \( n = 2 \) female) reported a sexual offence and harmful sexual dating behaviour together.
### Cross-tabulation of Harm Group (HG) by Gender

<table>
<thead>
<tr>
<th>Harm Group (HG)</th>
<th>Sexual harm</th>
<th>Non-Sexual Harm</th>
<th>No Harm</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Count</td>
<td>% within HG</td>
<td>% within Gender</td>
<td>% of Total</td>
</tr>
<tr>
<td>Sexual harm</td>
<td>Male</td>
<td>Female</td>
<td>Total</td>
<td>Male</td>
</tr>
<tr>
<td>Count</td>
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<td>22</td>
<td>22</td>
<td>26</td>
</tr>
<tr>
<td>Non-Sexual Harm</td>
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<td>Female</td>
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<td>Male</td>
</tr>
<tr>
<td>Count</td>
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<td>9</td>
<td>19</td>
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<td>10</td>
<td>23</td>
<td>13</td>
</tr>
<tr>
<td>% of Total</td>
<td>13</td>
<td>10</td>
<td>23</td>
<td>13</td>
</tr>
<tr>
<td>No Harm</td>
<td>Male</td>
<td>Female</td>
<td>Total</td>
<td>Male</td>
</tr>
<tr>
<td>Count</td>
<td>2</td>
<td>19</td>
<td>21</td>
<td>2</td>
</tr>
<tr>
<td>% within HG</td>
<td>10</td>
<td>90</td>
<td>100</td>
<td>2</td>
</tr>
<tr>
<td>% within Gender</td>
<td>6</td>
<td>42</td>
<td>27</td>
<td>2</td>
</tr>
<tr>
<td>% of Total</td>
<td>3</td>
<td>25</td>
<td>27</td>
<td>3</td>
</tr>
</tbody>
</table>

However, when every type of offence and harmful dating behaviour reported by a participant was accounted for the results were very complex. Of the 37 participants who reported a harmful sexual behaviour, six male participants (16%) reported a sexual offence only, six (16%, n = 4 female, n = 2 male) reported a sexual HDB only, three male participants (8%) reported a sexual offence and sexual HDB together only and two participants (5%, n = 1 male, n = 1 female) reported sexual HDB with a non-sexual offence. Three participants (8%, n = 2 male, n = 1 female) reported a generalist offence only, five female (14%) reported generalist harmful dating behaviour only and two participants (n = 1 female, n = 1 male) reported a generalist offence and generalist harmful dating behaviour together. One male (3%) reported a generalist offence with a harmful sexual dating behaviour and four participants (5%, n = 2 male, n = 2 female) reported a generalist offence with a non-sexual HDB. One female (3%) reported a generalist harmful dating behaviour with a
sexual offence and four participants (11%, $n = 2$ female, $n = 2$ male) reported a generalist harmful dating behaviour with a non-sexual offence.

The extent to which harmful dating behaviour and offence groups can be compared is arguable. Analysis whereby all participants are assigned to an offence group and all participants are assigned to a harmful dating behaviour group includes the same participants. For example, the participants may be assigned to a sexual offence group for offence group analysis and non-sexual harmful dating behaviour for the HDB group analysis. However, putting each participants into just one group, sexual, non-sexual or no harm, may distort the differences between offence and harmful dating behaviour groups that are presented throughout the results.

Therefore, mean, median, standard deviation, minimum and maximum scores of anxiety are presented for participants who reported specific behaviours only. As presented in Table 5.3, 55 participants (71%) reported a harmful sexual dating behaviour only, generalist harmful dating behaviour only, non-sexual harmful dating behaviour, sexual offence only, generalist offence only, non-sexual offence only or no harm. The majority of participants (62%) were female. Over half (56%) of females reported no harm, accounting for 90% of the no harm group. All six participants who reported a sexual offence only were male. However, the majority of participants who reported harmful sexual dating behaviour only, (67%) were female. All participants who reported harmful generalist dating behaviour were female. Hence, females accounted for three quarters (75%, $n = 9$) of harmful sexual or generalist
dating behaviour whilst males accounted for 89% \((n = 8)\) of participants who reported a sexual or generalist offence.

Table 5.3
Cross-tabulation of Specific Behaviour Group (SBG) by Gender

<table>
<thead>
<tr>
<th>SBG</th>
<th>Gender</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Count</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual Offence</td>
<td></td>
<td>6</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>% within SBG</td>
<td>100</td>
<td>0</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>% within gender</td>
<td>29</td>
<td>0</td>
<td>11</td>
</tr>
<tr>
<td>Sexual HDB</td>
<td>Count</td>
<td>2</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>% within SBG</td>
<td>33</td>
<td>67</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>% within gender</td>
<td>10</td>
<td>12</td>
<td>11</td>
</tr>
<tr>
<td>Generalist Offence</td>
<td>Count</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>% within SBG</td>
<td>67</td>
<td>33</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>% within gender</td>
<td>10</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>Generalist HDB</td>
<td>Count</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>% within SBG</td>
<td>0</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>% within gender</td>
<td>0</td>
<td>15</td>
<td>9</td>
</tr>
<tr>
<td>Non-Sexual Offence</td>
<td>Count</td>
<td>8</td>
<td>4</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>% SBG</td>
<td>67</td>
<td>33</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>% within gender</td>
<td>38</td>
<td>12</td>
<td>22</td>
</tr>
<tr>
<td>Non-Sexual HDB</td>
<td>Count</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>% SBG</td>
<td>50</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>% within gender</td>
<td>5</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>No Harm</td>
<td>Count</td>
<td>2</td>
<td>19</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>% SBG</td>
<td>10</td>
<td>90</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>% within gender</td>
<td>10</td>
<td>56</td>
<td>38</td>
</tr>
<tr>
<td>Total</td>
<td>Count</td>
<td>21</td>
<td>34</td>
<td>55</td>
</tr>
<tr>
<td></td>
<td>% SBG</td>
<td>38</td>
<td>62</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>% within gender</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

The questionnaire did collect data on characteristics which research suggests are important to understand adolescent development, dating characteristics, sexual intimacy experience, family and friend relationships for example. However, the small number of participants, wide range of reports for combination of offence and harmful dating behaviours, and limited space within the thesis meant any consistency of association between such variables could not be examined in detail. Therefore, significant results need treating with caution. This highlights the methodological complexities of
comparative research. In particular it highlights how interpretation of the results may have benefited from the original proposal to conduct qualitative interviews alongside the questionnaire.

5.3 Association between Dating Anxiety and Sexual Intimacy Anxiety

As hypothesised, higher levels of dating anxiety were significantly associated with higher levels of sexual intimacy anxiety. Using a Pearson correlation coefficient there was a strong significant positive correlation between the dating anxiety (including and excluding item 21) and sexual intimacy anxiety, \( r(75) = .80, p < .001 \). The same results were found using Spearman’s rho, \( \rho(.80), p < .001 \). This suggests that dating anxiety may help explain 64% of shared variance in participant responses on sexual intimacy anxiety scale. As can be observed in Figure 5.1, high levels of dating anxiety (excluding item 21) were significantly associated with high levels of sexual intimacy anxiety. Young people who reported high levels of dating anxiety also reported high levels of sexual intimacy anxiety.
Figure 5.1: Association between dating anxiety and sexual intimacy anxiety. This figure shows that adolescents who reported high dating anxiety scores also reported high sexual intimacy anxiety scores.

There was a strong significant relationship between dating anxiety (including and excluding item 21) and sexual intimacy anxiety for both males and females. However, including item 21, there was a slightly stronger relationship between the variables for males, $r(30) = .84$, $p < .001$, than for females, $r(43) = .76$, $p < .001$. Comparing the correlation coefficients between females and males excluding item 21 also found a slightly stronger relationship between the variables for males, $r(30) = .79$, $p < .001$, than females, $r(43) = .76$, $p < .001$. Therefore excluding item 21 slightly decreased the strength of the relationship between the variables for males but not for females, suggesting a much more similar level of strength.
Due to the large standard deviations and difference in the number of participants in each group, a Spearman’s rho correlation coefficient was used to explore the relationship between dating anxiety including item 21 and sexual intimacy anxiety between offence groups. The results found a strong, significant positive correlation for all offence groups. However, there was a slightly stronger significant relationship between the variables for young people who reported a sexual offence, $\rho(8) = .93, p < .001$, and young people who reported a generalist offence, $\rho(8) = .86, p = .002$, than young people who reported no offence, $\rho(33) = .77, p < .001$, and young people who reported a non-sexual offence, $\rho(20) = .72, p < .001$. A Spearman’s Rho correlation coefficient to explore the relationship between dating anxiety excluding item 21 and sexual intimacy anxiety produced the same results.

However, the strength and significance of the relationship between dating anxiety and sexual intimacy anxiety was different for harmful dating behaviour groups. Young people who reported no harmful dating behaviour reported the strongest significant relationship between the variables, $\rho(40) = .86, p < .001$. This was slightly higher than young people who reported no offence. Young people who reported generalist harmful dating behaviour reported the second strongest relationship, $\rho(10) = .80, p = .002$, very similar to the generalist offence group. Whilst there was still a strong significant relationship between the variables for young people who reported harmful sexual dating behaviour, $\rho(10) = .73, p = .007$, it was weaker and less significant than young people who reported a sexual offence. Also, in contrast to the strong significant relationship between variables for the non-sexual
offence group, there was only a medium, non-significant positive relationship between the variables for young people who reported non-sexual harmful dating behaviour, $\rho(9) = .47, p = .14$. A Spearman’s Rho correlation coefficient to explore the relationship between dating anxiety excluding item 21 and sexual intimacy increased strength of the relationship slightly for all four groups, but did not change group position, extent of strength or significance value.

A Spearman’s Rho correlation coefficient was used to explore the relationship between dating anxiety including item 21 and sexual intimacy anxiety between sexual, non-sexual and no harm groups. There was a strong, positive significant relationship between dating anxiety and sexual intimacy anxiety for all three groups. However, there was a stronger relationship for young people who reported sexual harm, $\rho(35) = .83, p < .001$, than young people who reported no harm, $\rho(19) = .78, p < .001$, and young people who reported non-sexual harm, $\rho(17) = .66, p = .002$. Similar results for found for analysis excluding item 21.

The initial results found a strong, positive and significant correlation between dating anxiety and sexual intimacy anxiety accounting for 64% of the shared variance. This supports the hypothesis that young people who report high levels of dating anxiety also report high levels of sexual intimacy anxiety. There may be a slightly stronger relationship between variables for males than females. However, no significant differences were found. There was no
difference between dating anxiety including item 21 and sexual intimacy anxiety or excluding item 21.

In addition, strength and level of significance of the relationship between dating anxiety and sexual intimacy anxiety may vary within and between groups of young people who report sexual harm, generalist harm, non-sexual harm and no harm for both offence and harmful dating behaviour. There was a strong, significant, positive relationship for all offence groups, the strongest being for the sexual group and the weakest for the non-sexual offence group. There was a weaker, less significant association between variables for young people who reported harmful sexual dating behaviour. The strongest association was for young people who reported no harmful dating behaviour. As with the offence groups the weakest and non-significant relationship was for young people who reported non-sexual HDB. However, when each participant was put into one group, a strong significant relationship was found for all three, the strongest being for the sexual harm group.

5.3.1 Association between Fear of Negative Evaluation Dating and Fear of Negative Evaluation Sexual Intimacy. Using a Pearson correlation coefficient there was a strong significant positive correlation between fear of negative evaluation dating and fear of negative evaluation sexual intimacy, \( r(75) = .78, p < .001 \). Young people who reported high levels of fear of negative evaluation about dating were significantly associated with a high level of fear of negative evaluation about sexual intimacy. This suggests that dating anxiety may help explain 61% of shared
variance with participant responses for sexual intimacy anxiety. Comparing the correlation coefficients between females and males found that, similar to the relationship between dating anxiety and sexual intimacy anxiety, there was a slightly stronger positive significant relationship between the variables for females, $r(43) = .80$, $p < .001$, than for males, $r(30) = .69$, $p < .001$. However, there was no significant difference in the strength of the correlation between fear of negative evaluation dating and fear of negative evaluation about sexual intimacy for males and females ($p = .30$).

A Spearman’s Rho correlation coefficient was used to explore the relationship between fear of negative evaluation dating and fear of negative evaluation sexual intimacy between offence groups. The results found a strong, significant positive correlation for the generalist offence group, $\rho(8) = .93$, $p < .001$, the no offence group, $\rho(33) = .84$, $p < .001$, and the non-sexual offence group, $\rho(8) = .73$, $p < .001$. Whilst there was a medium positive relationship between the variables for the sexual offence group, it was not significant, $\rho(8) = .47$, $p = .17$.

As with dating anxiety and sexual intimacy anxiety, the strength and significance of the relationship between fear of negative evaluation dating and fear of negative evaluation intimacy was ranked differently for harmful dating behaviour groups. Similar to the offence group, young people who reported harmful generalist dating behaviour reported the strongest positive significant relationship between the variables, $\rho(10) = .90$, $p < .001$. Again, this was slightly lower than young people who reported no harmful dating behaviour,
\( \rho(40) = .80, p < .001 \). However, in contrast to the sexual offence group, young people who reported harmful sexual dating behaviour reported a strong, positive significant relationship between fear of negative evaluation dating and fear of negative evaluation intimacy, \( \rho(10) = .65, p = .02 \). Also, in contrast to the non-sexual offence group, there was a medium, non-significant positive relationship between variables for young people who reported harmful non-sexual dating behaviour, \( \rho(9) = .33, p = .32 \). As with the relationship between dating anxiety and sexual intimacy anxiety, the results suggest that although higher levels of fear of negative evaluation dating are associated with higher levels of fear of negative evaluation intimacy for young people in all groups, there may be a difference in the strength and significance of that association within and between offence and harmful dating behaviour groups.

As with a Spearman's Rho analysis between dating anxiety and sexual intimacy anxiety, there was a strong positive significant relationship between fear of negative evaluation dating and fear of negative evaluation intimacy for all harm groups. However, in contrast the results found that there as a stronger relationship between variables for young people who reported no harm, \( \rho(19) = .83, p < .001 \), to young people who reported sexual harm, \( \rho(35) = .74, p < .001 \), and young people who reported non-sexual harm, \( \rho(17) = .62, p = .01 \).

The initial results found a strong, positive and significant correlation between fear of negative evaluation dating and fear of negative evaluation about sexual intimacy, accounting for 61% of shared variance. Higher levels
for fear of negative evaluation about dating are associated with higher levels of fear of negative evaluation about sexual intimacy. There was a slightly stronger positive and significant association between variables for females. However no significant differences between males and females were found.

In addition there may be a difference in strength and significance levels between young people who report no harm, non-sexual harm, sexual and generalist harmful behaviours for both offence and harmful dating behaviour groups. In contrast to the relationship between dating anxiety and sexual intimacy anxiety for offence groups, the results found a medium non-significant association between the variables for the sexual offence group only. The strongest was for generalist offence, followed by no offence and non-sexual offence. Within the harmful dating behaviour group, the strongest association was also for the generalist groups, followed by or young people who reported no HDB, sexual HDB and non-sexual HDB respectively. There was a strong significant relationship between fear of negative evaluation dating and fear of negative evaluation sexual intimacy for all three harm groups, the strongest being for the sexual harm group.

5.3.2 Association between Social Distress Dating and Social Distress Sexual Intimacy. Using a Pearson correlation coefficient there was a strong, significant positive correlation between social distress dating and social distress intimacy, \( r(75) = .65, p < .001 \). The results suggest approximately 42% of shared variance in participants’ scores. Young people who reported high level of social distress about dating were
significantly associated with a high level of social distress about sexual intimacy. Comparing the correlation coefficients between females and males found that, in contrast to fear of negative evaluation, there was a slightly stronger positive significant relationship between the variables for males, \( r(30) = .68, p < .001 \), than females, \( r(43) = .58, p < .001 \). However, there was no significant difference in correlation between social distress dating and social distress about sexual intimacy for males and females (\( p = .49 \)).

A Spearman’s Rho correlation coefficient was used to explore the relationship between social distress dating and social distress sexual intimacy between offence groups. The results found a strong, significant positive correlation for the generalist offence group, \( \rho(8) = .73, p = .02 \), and the no offence group, \( \rho(33) = .60, p < .001 \). There was a medium positive significant relationship between the variables for young people who reported a non-sexual offence, \( \rho(20) = .45, p = .034 \). Whilst there was a medium positive relationship between the variables for the sexual offence group, it was not significant, \( \rho(8) = .45, p = .191 \).

As with the relationships for offence groups, although there was a positive relationship between social distress dating and social distress intimacy for all harmful dating behaviour groups, the strength and significance levels were different between them. In contrast to the sexual offence group, young people who reported harmful sexual dating behaviour reported much stronger and significant relationship between social distress dating and social distress intimacy, \( \rho(10) = .72, p < .001 \). Young people who reported no
harmful dating behaviour reported a similar level of association between the variables as the no offence group, \( \rho(40) = .67, p < .001 \). Young people who reported harmful generalist dating behaviour reported a much lower (although still strong) and non-significant relationship than young people who reported a generalist offence, \( \rho(10) = .51, p = .088 \). As with the non-sexual offence group, there was a medium positive relationship between the variables for young people who reported harmful dating non-sexual behaviour, however in contrast it was not significant, \( \rho(9) = .41, p = .216 \).

A Spearman's Rho analysis was conducted to explore similarities and differences when young people were put into just one group. As with previous sub-factors, there was a strong positive significant relationship between social distress dating and social distress intimacy for all three groups. The strongest relationship between variables was for young people who reported no harm, \( \rho(19) = .68, p = .001 \), followed by young people who reported sexual harm, \( \rho(35) = .56, p = .001 \) and non-sexual harm, \( \rho(17) = .50, p = .03 \), respectively.

The initial results found a strong positive correlation between social distress dating and social distress sexual intimacy, accounting for 42% of shared variance. There was a slightly stronger relationship between variables for males than females, however no significant differences between them were found. Within the offence groups, the only strong significant relationship was for the generalist and no offence groups. There was a medium positive significant relationship between variables for young people who reported a non-sexual offence. The medium strength relationship between variables for
young people who reported a sexual offence was not significant. In contrast, there was a strong significant relationship between social distress dating and social distress sexual intimacy for the young people who reported harmful sexual dating behaviour and non-significant relationship for young people who reported harmful generalist dating behaviour. Strong, positive significant relationship between variables were found for sexual, nonsexual and no harm groups.

5.4 Association between Dating Anxiety and Partnership Anxiety

High levels of dating anxiety were also associated with high levels of partnership anxiety. However, in contrast to previous correlations, the results found a small significant positive relationship between dating anxiety including item 21 and partnership anxiety, $r(75) = .23, p = .04$. This accounts for only 5% of shared variance. The same small significant positive correlation was also found between dating anxiety excluding item 21 and partnership anxiety, $r(75) = .23, p = .04$. 
Figure 5.2: Association between dating anxiety and partnership anxiety. This figure shows that adolescents who reported high dating anxiety reported high partnership anxiety scores.

A Pearson correlation coefficient between partnership anxiety and dating anxiety including item 21 found a medium positive significant relationship between the variables for males, \( r(30) = .38, p = .03 \). The results found a small, positive non-significant relationship between variables for females, \( r(43) = .14, p = .36 \). However, a Spearman’s rho correlation found a small, non-significant relationship between variables for both males, \( \rho(30) = .29, p = .10 \), and females, \( \rho(43) = .22, p = .17 \). A Pearson correlation coefficient between partnership anxiety and dating anxiety excluding item 21 for females and males also found there was a medium, positive significant
relationship for males, \( r(30) = .37, p = .04 \), and a small, positive non-significant relationship for females, \( r(43) = .14, p = .36 \). However, a Spearman’s rho correlation between variables found a small, non-significant relationship between variables for both males, \( \rho(30) = .27, p = .14 \), and females, \( \rho(43) = .21, p = .18 \). The results suggest that there may be a positive relationship between partnership anxiety and dating anxiety for both males and females. However, the strength and significance of the relationship is unclear. There was no significant difference for males and females between partnership anxiety and dating anxiety including item 21 \( (p = .28) \) or excluding item 21 \( (p = .30) \).

The strength direction and significance of the relationship between partnership anxiety and dating anxiety is even less clear between offence groups. A Spearman’s rho correlation found a strong significant relationship between the variables for the non-sexual group, \( \rho(20) = .70, p < .001 \), and sexual offence group, \( \rho(8) = .66, p = .04 \). However, there was a small, negative non-significant relationship between partnership anxiety and dating anxiety including item 21 for the generalist offence group, \( \rho(8) = -.14, p = .70 \), and no offence group, \( \rho(33) = -.07, p = .67 \). A Spearman’s rho correlation between partnership anxiety and dating anxiety excluding item 21 found the same results.

In contrast a Spearman’s rho correlation between partnership anxiety and dating anxiety including item 21 for harmful dating behaviour groups found small or medium positive non-significant relationship for all groups.
There was a medium positive relationship between variables for the generalist harmful dating behaviour group, $\rho(10) = .43$, $p = .17$, and the non-sexual harmful dating behaviour group, $\rho(9) = .32$, $p = .34$. There was a small positive relationship between variables for the no harmful dating behaviour group, $\rho(40) = .24$, $p = .12$, and harmful sexual dating behaviour group, $\rho(10) = .23$, $p = .47$. A Spearman’s rho correlation between partnership anxiety and dating anxiety excluding item 21 found the same results.

A Spearman’s Rho analysis was conducted to explore the relationship between dating anxiety including item 21 and partnership for sexual harm non-sexual harm and no harm groups. The only strong and significant relationship between variables was for young people who reported non-sexual harm, $\rho(17) = .70$, $p = .001$. There was a small non-significant relationship between dating anxiety and partnership anxiety for young people who reported sexual harm, $\rho(35) = .21$, $p = .20$. However, there was a small negative relationship between variables for young people who reported no harm, $\rho(19) = -.13$, $p = .57$. Similar results were found for dating anxiety excluding item 21.

Results found for the association between dating anxiety (including and excluding item 21) and partnership anxiety were much weaker, less significant with dual directions in comparison to previous anxiety factors. Although a positive and significant relationship was found between the variables, it was very small, accounting for only 5% of shared variance. This suggests that although higher levels of dating anxiety are associated with higher levels of
partnership anxiety, the relationship is weak and should be treated with caution. This is reflected in the mixed results for gender, offence and harmful dating behaviour groups. In addition Pearson’s correlation and Spearman’s rho found different levels of significance for males and females. Still, both tests found small positive associations with no significant difference between males and females.

Within the offence group, strong positive and significant relationships were found for non-sexual and sexual offence groups. However, a small negative and non-significant relationship was found for generalist and no offence groups. Whilst positive relationships were found for harmful dating behaviour groups, none were strong or significant. These results may be reflected in the non-sexual harm group being the only one with a strong positive and significant relationship. Therefore, in contrast to previous anxiety factors, there was a stronger association between dating anxiety and partnership anxiety for non-sexual harm groups.

5.5 Association between Sexual Intimacy Anxiety and Partnership Anxiety

A Pearson correlation coefficient found a small, positive non-significant relationship between partnership anxiety and sexual intimacy anxiety, $r(75) = .19$, $p = .10$. This accounts for only 3% of shared variance between variables. In contrast to dating anxiety, there was no significant relationship between partnership anxiety and sexual intimacy anxiety.
A Pearson correlation coefficient between partnership anxiety and sexual intimacy found that there was a medium positive significant relationship between the variables for males, $r(30) = .42, p = .02$. There was no relationship between variables for females, $r(43) = .04, p = .82$. However, A Spearman’s rho correlation found a small, positive non-significant relationship between variables for both males, ρ(30) = .28, p = .13, and females, ρ(43) = .20, p = .48. The results suggest that there may be a positive relationship between partnership anxiety and dating anxiety for both males and females. However, the strength and significance of the relationship is less clear. There was no significant correlation between partnership anxiety and sexual intimacy anxiety for males and females using the results from the Pearson correlation ($p = .09$) or the Spearman’s rho correlation ($p = .73$).

As with dating anxiety, the strength, direction and significance of the relationship between partnership anxiety and sexual intimacy anxiety is even less clear between a Spearman’s rho correlations for offence groups. Again, the only significant relationship between the variables was for the non-sexual group, ρ(20) = .43, p = .05, and sexual offence group, ρ(8) = .66, $p = .04$. In contrast to the relationship between partnership anxiety and dating anxiety, there was a stronger more significant positive relationship between partnership anxiety and sexual intimacy for the sexual offence group than for the non-sexual offence group. There was no significant relationship between variables for the no offence group, ρ(33) = -.12, $p = .43$, and generalist offence, ρ(8) = .07, $p = .86$ groups.
A Spearman’s rho correlation conducted between partnership anxiety and sexual intimacy anxiety for harmful dating behaviour groups found no significant relationship between variables for all groups. Hence, results found small, positive and non-significant relationships for young people who reported generalist HDB, \( \rho(10) = .29, p = .36 \), young people who reported sexual HDB, \( \rho(10) = .22, p = .50 \), young people who reported no HDB, \( \rho(40) = .20, p = .43 \), and young people who reported non-sexual HDB, \( \rho(9) = .08, p = .82 \), respectively.

As with dating anxiety, the only significant relationship between partnership anxiety and sexual intimacy anxiety was for the non-sexual harm group. There was a medium, positive and significant relationship between variables for young people who reported non-sexual harm, \( \rho(17) = .47, p = .04 \). There was a small positive relationship for young people who reported sexual harm, \( \rho(35) = .24, p = .15 \). In contrast there was a small negative relationship between partnership anxiety and sexual intimacy anxiety for young people who reported no harm, \( \rho(19) = -.17, p = .47 \).

In contrast to previous anxiety factors, there was no significant relationship between partnership anxiety and sexual intimacy anxiety. As with dating anxiety, the results were ambiguous, but no significant differences were found. Only the results for the sexual offence group found a strong positive significant association between partnership anxiety and sexual intimacy. This suggests higher levels of partnership anxiety may be associated with higher levels of sexual intimacy anxiety for the sexual offence.
group only. However, there was a medium positive and significant relationship between variables for the non-sexual offence group and for the non-sexual harm group.

### 5.6 Association between Dating Anxiety and Sexual Behaviour Anxiety

A Pearson correlation coefficient found a medium, significant positive relationship sexual behaviour anxiety and dating anxiety, including and excluding item 21, \( r(75) = .49, p < .001 \). As presented in Figure 5.3, young people who reported high sexual behaviour anxiety scores also reported high dating anxiety scores, excluding item 21.
Figure 5.3: Association between dating anxiety and sexual behaviour anxiety. This figure shows that adolescents who reported high sexual behaviour anxiety scores also reported high sexual dating anxiety scores.

A partial correlation controlling for sexual experience increased the strength of the association to a strong, positive significant correlation, \( r = .52 \), \( n = 75 \), \( p < .001 \). Similar to the results of dating anxiety including item 21, a partial correlation controlling for sexual experience increased the strength of the association to a strong, positive significant correlation, \( r = .51 \), \( n = 75 \), \( p < .001 \). The results suggest that the strength, direction or significance of the correlations between dating anxiety and sexual behaviour anxiety is not influenced by item 21. However, levels of sexual experience may influence
the strength of the relationship between dating anxiety and sexual intimacy anxiety.

A Pearson correlation coefficient between sexual behaviour anxiety and dating anxiety including item 21 found a strong positive significant relationship between variables for females \( r(43) = .52, p < .001 \). There was a medium positive significant relationship between the variables for males, \( r(30) = .47, p = .01 \). A Spearman’s rho correlation including item 21 found, a small decrease in strength for females, \( \rho(43) = .51, p < .001 \). However, there was a small increase in strength between variables for males, \( \rho(30) = .49, p = .01 \). The results found no significant difference in correlations between sexual behaviour anxiety and dating anxiety including item 21 for males and females using either a Pearson correlation \((p = .79)\) or a Spearman’s Rho Correlation \((p = .91)\)

In comparison, a Pearson correlation coefficient between sexual behaviour anxiety and dating anxiety excluding item 21 found no change in direction, strength or significant level for females, \( r(43) = .52, p < .001 \). However, there was a slightly smaller medium positive significant relationship between the variables for males, \( r(30) = .45, p = .01 \). As with dating anxiety including item 21, a Spearman's rho correlation including item 21 found, a small decrease in strength for females, \( \rho(43) = .50, p < .001 \). In contrast to dating anxiety including item 21, a Spearman rho analysis found a small decrease in strength for males, \( \rho(30) = .44, p = .01 \). Higher scores of dating anxiety including and excluding item 21 were significantly associated with
higher scores of sexual behaviour anxiety for both males and females. The association was stronger and more significant for females than males in both cases. However, no significant difference in correlations between sexual behaviour anxiety and dating anxiety excluding item 21 for males and females using either a Pearson correlation \((p = .70)\) or a Spearman’s Rho Correlation \((p = .75)\).

A Spearman’s rho coefficient between dating anxiety including item 21 and sexual behaviour anxiety found a strong positive significant relationship between variables for young people who reported no offence, \(\rho(33) = .54, p = .01\), and a medium positive significant relationship for young people who reported a non-sexual offence, \(\rho(20) = .49, p = .02\). There was a medium, positive non-significant relationship between variables for the sexual offence group, \(\rho(8) = .39, p = .27\), and the generalist offence group, \(\rho(8) = .32, p = .37\). A Spearman’s rho coefficient between dating anxiety excluding item 21 and sexual behaviour anxiety found a slightly stronger positive relationship for the no offence group, \(\rho(33) = .57, p = .01\). However, there was a slight decrease in strength and significance for the non-sexual offence group, \(\rho(20) = .47, p = .03\), and sexual offence group, \(\rho(8) = .37, p = .30\). There was no change in strength or significance level for the generalist offence group. The results suggest that whilst higher levels of sexual behaviour anxiety are associated with higher levels of dating anxiety (including and excluding item 21) there was a stronger, more significant relationship between variables for the no offence and non-sexual offence groups.
In contrast, when a Spearman’s rho coefficient between dating anxiety including item 21 and sexual behaviour anxiety was carried out for the harmful dating behaviour groups, the only significant relationship was for the no harmful dating behaviour group. There was a strong positive significant relationship between variables for young people who reported no harmful dating behaviour, \( \rho(40) = .61, p < .001 \). There was a strong, nearly significant relationship between variables for the generalist harmful dating behaviour group, \( \rho(10) = .56, p = .059 \). In contrast to the offence group, there was a small, negative relationship between variables for the non-sexual harmful dating behaviour group, \( \rho(9) = -.14, p = .67 \) and a small non-significant positive relationship for the harmful sexual dating behaviour group, \( \rho(10) = .14, p = .68 \).

A Spearman’s rho coefficient between dating anxiety excluding item 21 and sexual behaviour anxiety found a slightly weaker positive relationship for the no harmful dating behaviour group, \( \rho(40) = .60, p < .001 \), and the generalist harmful dating behaviour group, \( \rho(10) = .50, p = .10 \). However, there was a slightly higher negative relationship for the non-sexual harmful dating behaviour group, \( \rho(9) = -.22, p = .51 \), and sexual harmful dating behaviour group, \( \rho(8) = .37, p = .30 \). There was no change in strength or significance level for the generalist harmful dating behaviour group. The results suggest that the relationship between sexual behaviour anxiety and dating anxiety (including and excluding item 21) may differ in strength, direction and significance between harmful dating behaviour groups.
A Spearman’s rho coefficient between dating anxiety including item 21 and sexual behaviour anxiety was conducted for young people who reported sexual harm, non-sexual harm or no harm. In contrast to offence and harmful dating behaviour groups alone, a significant positive relationship was found for all three groups. The results found a strong significant positive relationship for young people who reported no harm, ρ(19) = .57, p = .01. A medium positive relationship was found for young people who reported non-sexual harm, ρ(17) = .47, p = .04, and young people who reported sexual harm, ρ(35) = .38, p = .02. No other differences in strength, direction or significance were found excluding item 21. However, a Spearman’s rho coefficient between dating anxiety excluding item 21 and sexual behaviour anxiety found a similar strength but non-significant association between variables for young people who reported non-sexual harm, ρ(17) = .45, p = .06.

The initial results found a medium positive relationship and significant association between dating anxiety, including and excluding item 21, and sexual behaviour anxiety, accounting for 24% of shared variance. This suggests that whilst higher scores of dating anxiety may be associated with higher scores of sexual intimacy anxiety, the strength of the relationship is moderate. In contrast to previous anxiety factors, controlling for sexual intimacy experience increased the strength of the correlation. This suggests that levels of sexual intimacy experience may be influencing the strength of the association between dating anxiety and sexual behaviour anxiety scores. The strength higher scores of dating anxiety with higher scores of sexual
behaviour anxiety were stronger for females than males. However, no significant difference between males and females scores was found.

Young people who reported no offence and young people who reported no harmful dating behaviour both had the strongest and most significant association between higher scores of dating anxiety and higher scores of sexual behaviour anxiety within their respective groups. This was reflected in a strong positive and significant association between variables in the no harm group. There were contrasting differences in strength, significance and direction of the results between sexual, generalist and non-sexual offence and harmful dating behaviour. As with other anxiety factors, this suggests there may be differences between young people who report an offence and young people who report harmful dating behaviour. This is reflected in medium strength, significant association between higher dating anxiety and higher sexual behaviour anxiety for young people who report sexual harm and an unclear relationship between variables for young people who report non-sexual harm.

5.7 Association between Sexual Intimacy Anxiety and Sexual Behaviour Anxiety

There was a highly significant positive relationship between sexual behaviour anxiety and sexual intimacy anxiety, \( r(75) = .58, \ p < 0.001 \) (see Figure 5.4). Young people who reported high sexual behaviour anxiety also reported high sexual intimacy anxiety, accounting for 34% of shared variance.
Figure 5.4: Association between sexual intimacy anxiety and sexual behaviour anxiety. This figure shows that adolescents who reported high sexual behaviour anxiety scores also reported high sexual intimacy anxiety scores.

A Pearson correlation coefficient between sexual behaviour anxiety and sexual intimacy anxiety found a strong positive significant relationship between variables for females, $r(43) = .65, p < .001$, and for males, $r(30) = .51, p = .003$. A Spearman’s rho correlation found, a small decrease in strength for females, $\rho(43) = .63, p < .001$, and for males, $\rho(30) = .47, p = .007$. Higher scores of sexual behaviour anxiety were significantly associated with higher scores of sexual intimacy anxiety for both males and females. The relationship between variables was slightly stronger for females than males.
However, the results found no significant difference in correlations between sexual behaviour anxiety and sexual intimacy anxiety for males and females using either a Pearson correlation ($p = .38$) or a Spearman’s rho correlation ($p = .34$)

A Pearson coefficient between sexual behaviour anxiety and sexual intimacy anxiety found a strong positive significant relationship between variables for young people who reported no offence, $r(33) = .72$, $p < .001$, young people who reported a generalist offence, $r(8) = .66$, $p = .04$, and young people who reported a non-sexual offence, $r(20) = .61$, $p = .002$. There was a small, positive non-significant relationship between variables for young people who reported a sexual offence, $r(8) = .12$, $p = .74$.

A Spearman’s rho coefficient between sexual behaviour anxiety and sexual intimacy anxiety found a slightly stronger positive relationship for the sexual offence group, although it was still small and non-significant, $\rho(8) = .20$, $p = .57$. However, there was a slight decrease in strength and significance for the non-sexual offence group, $\rho(20) = .59$, $p = .004$. Results found a considerable decrease in strength and significance for the generalist offence group, $\rho(8) = .38$, $p = .28$. There was no change in strength or significance level for the no offence group. The results found that whilst young people who report higher scores of sexual behaviour anxiety may be young people who report higher scores of dating anxiety there is a stronger, more significant positive relationship between variables for young people who report no offence or a non-sexual offence.
A Pearson’s coefficient between sexual behaviour anxiety and sexual intimacy anxiety found a strong, positive significant relationship between variables for the no harmful dating behaviour group, \( r(40) = .61, p < .001 \). A strong, positive relationship between variables was also found for young people who reported generalist harmful dating behaviour, however it was not significant, \( r(10) = .55, p = .06 \). Results found medium, non-significant relationship between variables for young people who reported harmful sexual dating behaviour, \( r(10) = .46, p = .14 \), and young people who reported non-sexual harmful dating behaviour, \( r(9) = .42, p = .21 \). A Spearman’s rho coefficient found similar results. The results found that whilst young people who report higher scores of sexual behaviour anxiety tend to be young people who report higher scores of dating anxiety there is a stronger, more significant positive relationship between variables for the no harmful dating behaviour group than non-sexual, sexual and generalist harmful dating behaviour groups.

A Pearson’s coefficient between sexual behaviour anxiety and sexual intimacy anxiety for participants in just one group found a strong, positive significant relationship between variables for young people who reported no harm, \( r(19) = .70, p < .001 \), and young people who reported non-sexual harm, \( r(17) = .67, p = .002 \). Results found a medium strength significant relationship between higher scores of sexual intimacy anxiety and high scores in sexual behaviour anxiety for young people who reported sexual harm, \( r(35) = .42, p = .01 \). A Spearman’s rho correlation found a slight decrease in the strength of
the relationship between variables for young people who reported non-sexual harm, \( \rho(17) = .60, p = .01 \). However, no other changes were found.

The initial results found a strong, positive and significant relationship between sexual behaviour anxiety and sexual intimacy anxiety. Young people who reported high sexual behaviour scores also reported high sexual intimacy scores, accounting for 34% of shared variance. Results suggest that the strength between the variables may be stronger for females than males, however no significant differences between them were found.

Higher scores of sexual behaviour anxiety were significantly associated with higher scores of sexual intimacy for young people who reported no offence, generalist offence or non-sexual offence. There was only a weak non-significant relationship between variables for young people who reported a sexual offence. Strong significant relationship between higher scores of sexual behaviour and higher scores of sexual intimacy anxiety were only found for young people who reported no harmful dating behaviour and young people who reported generalist harmful dating behaviour. There was a medium non-significant relationship for young people who reported sexual or non-sexual harmful dating behaviour. The strength and significance of the relationship between sexual behaviour anxiety and sexual intimacy anxiety was reflected in results when young people were placed in one group. That is, the strongest and most significant relationship was for young people who reported no harm, followed by young people who reported non-sexual harm and sexual harm respectively.
5.8 Dating Anxiety

Analysis was conducted to explore whether young people who harm sexually have higher dating anxiety than young people reported no harm, non-sexual harm or generalist harm. Using all items of the Dating Anxiety Scale for Adolescents (DAS-A) (Glickman & La Greca, 2004), the range of scores was 21 (low dating anxiety) to 105 (high dating anxiety) with a midpoint of 63. The mean score for all participants including item 21 was below midpoint ($M = 56.56, SD = 18.16, Mdn = 58$). Excluding item 21 the scores ranged from 20 (low dating anxiety) to 100 (high dating anxiety), midpoint 60. Again the mean score for all participants was below midpoint ($M = 54.71, SD = 17.71, Mdn = 57$).

An independent-samples t-test was conducted to compare the full item DAS-A scores for males and females. The mean dating anxiety score for females ($M = 60.13, SD = 15.61$) was significantly higher, $t(75) = -2.09$, two tailed $p = .04$, than males ($M = 51.53, SD = 19.15$). Both means were below midpoint. The effect size, calculated using Cohen’s $d$, was .5. An independent-samples t-test to compare DAS-A scores excluding item 21 for males and females found the same significance and effect size. The mean dating anxiety score for females ($M = 58.22, SD = 18.90$) was significantly higher, $t(75) = -2.09$, two tailed $p = .04$, $d = 5$, than males ($M = 49.78, SD = 15.23$).

A one-way between-groups analysis of variance was conducted for harmful dating behaviour and offence groups to explore whether young
people who reported a sexual harm have higher dating anxiety than young people reported no harm, non-sexual harm or generalist harm. The results found no significant difference in means between the harmful dating behaviour groups, \( F(3,73) = 2.01, p = .12 \), or the offence groups, \( F(3,73) = 1.30, p = .28 \). Effect size, calculated using eta squared found a stronger medium effect size for harmful dating behaviour groups \( (\eta^2 = .08) \) in comparison to a small effect size for offence groups \( (\eta^2 = .05) \). Young people who reported generalist harmful dating behaviour were the only group with a mean score above midpoint \( (M = 64.75, SD = 12.05, Mdn = 63) \). A one-way analysis of variance excluding item 21 found similar results. There was no significant difference in means, with medium effect size for harmful dating behaviour groups \( F(3,73) = 2.06, p = .11, \eta^2 = .08 \), and a small effect for offence groups \( F(3,73) = 1.22, p = .31, \eta^2 = .05 \). Furthermore, only the harmful generalist dating behaviour group had a mean score above midpoint \( (M = 63, SD = 11.99, Mdn = 61) \).

Hence, within the harmful dating behaviour group young people who reported harmful sexual dating behaviour did not have significantly higher dating anxiety (including item 21) than young people who reported no-HDB, non-sexual HDB or generalist HDB. Young people who reported generalist HDB had the highest mean score in the study, above midpoint \( (M = 64.75, SD = 12.05, Mdn = 63) \). The harmful sexual dating behaviour group had the second highest mean score in the study, just below midpoint \( (M = 62.08, SD = 13.41, Mdn = 61) \). Young people who did not report any HDB \( (M = 54.52, SD \)
= 20.45, \( Mdn = 55.50 \) and young people who reported non-sexual HDB \( (M = 49.36, SD = 15.59, Mdn = 46) \) both had mean scores below midpoint. Young people who reported non-sexual HDB had lowest mean dating anxiety score of all eight groups with a mean score and median over 10 points on the scale less than young people who reported sexual and generalist harmful dating behaviour. However, young people who reported sexual HDB or generalist HDB did not have statistically significant higher dating anxiety.

Similar mean and median score differences were found for analysis excluding item 21. Young people who reported generalist HDB had the highest mean score, above midpoint \( (M = 63, SD = 11.99, Mdn = 61) \). Young people who reported sexual HDB had the second highest, just below midpoint \( (M = 59.75, SD = 12.90, Mdn = 59) \). Young people who reported no HDB \( (M = 52.88, SD = 20.03, Mdn = 54.40) \) and young people who reported non-sexual HDB \( (M = 47.18, SD = 15.77, Mdn = 43) \) both had mean scores below midpoint.

Within the offence group, all means and medians were below midpoint. Young people who reported no offence had the highest dating anxiety in the offence group \( (M = 60.83, SD = 17.95, Mdn = 62) \). Second and third in the group, young people who reported a sexual offence \( (M = 54.90, SD = 16.16, Mdn = 61) \) had a similar mean score to young people who reported a generalist offence \( (M = 54.40, SD = 18.78, Mdn = 56.50) \). Young people who reported a non-sexual offence \( (M = 51.50, SD = 18.66, Mdn = 52) \) had the lowest mean score within the offence groups and second lowest in the study.
As with harmful dating behaviour groups, similar results were found excluding item 21, with all means and medians below midpoint. Young people who reported no offence \((M = 58.74, SD = 17.52, Mdn = 50)\) had the highest dating anxiety. Young people who reported a sexual offence \((M = 53, SD = 15.77, Mdn = 59.50)\) and young people who reported a generalist offence \((M = 53.20, SD = 18.62, Mdn = 55.50)\) had similar mean scores. Young people who reported a non-sexual offence had the lowest mean score in the offence group and second lowest overall \((M = 49.77, SD = 18.64, Mdn = 51)\).

A one-way analysis of variance for participants was conducted with each participant in one group, sexual harm, non-sexual harm, or no harm. Despite young people who reported sexual harm \((M = 59.05, SD = 15.25, Mdn = 61)\) and young people who reported no harm \((M = 59.10, SD = 21.10, Mdn = 62)\) having a mean scores over 10 points on the scale higher than young people who reported non-sexual harm \((M = 48.89, SD = 18.71, Mdn = 46)\) no statistical significance between groups, \(F(2,74) = 2.32, p = .11\), were found. In addition, all mean scores were below midpoint. Effect size calculated using eta squared found a medium effect size \((\eta^2 = .06)\). The effect size was lower than for harmful dating behaviour groups, but slightly higher than offence groups.

Similar results were found for a one-way analysis of variance excluding item 21. Young people who reported no harm \((M = 57.48, SD = 20.73, Mdn = 59)\) and young people who reported sexual harm \((M = 57.11, SD = 14.83, Mdn = 58)\) had a mean scores over 10 points on the scale higher than young
people who reported non-sexual harm ($M = 47$, $SD = 18.61$, $Mdn = 43$).

However, no statistical significance between groups and the same medium effect size were found, $F(2,74) = 2.45$, $p = .09$, $\eta^2 = .06$.

As presented in Table 5.4 when put into group according to a specific behaviour, the differences between harmful dating behaviour and offence, sexual specific, generalist and non-sexual groups becomes clearer. Young people who reported sexual harmful dating behaviour and generalist harmful dating were the only two groups with mean and median scores above midpoint. In addition, they were the only two groups with scores above young people who reported no harm. It should be noted that two scores from the no harm group of 95 and 102 (both females) may have increased the mean and median. Excluding these two participants the maximum score was 79 ($M = 54.95$; $SD = 17.40$; $Mdn = 58$). This decreased the mean score and median to below young people who reported a sexual offence ($M = 56.17$; $SD = 18.76$; $Mdn = 61.50$). All harmful dating behaviour groups had higher mean and median scores than their comparative offence group. Within harmful dating and offence groups, young people who reported harmful sexual behaviour only had higher mean and median scores than young people who reported non-sexual or generalist behaviour. This suggests that young people who report harmful sexual or generalist dating may have higher dating anxiety than young people who do not. In addition, young people who report generalist harmful dating behaviour levels of dating anxiety more similar to young people who report sexual rather than non-sexual harmful dating behaviour. However,
young people who report a generalist offence may have dating anxiety more similar to young people whom a non-sexual offence.

<table>
<thead>
<tr>
<th>Group</th>
<th>n</th>
<th>M</th>
<th>SD</th>
<th>Mdn</th>
<th>Min</th>
<th>Max</th>
<th>% of Total N</th>
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<td>67</td>
<td>52</td>
<td>81</td>
<td>11</td>
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<tr>
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<td>14.08</td>
<td>63</td>
<td>51</td>
<td>83</td>
<td>9</td>
</tr>
<tr>
<td>No Harm</td>
<td>21</td>
<td>59.10</td>
<td>21.04</td>
<td>62</td>
<td>27</td>
<td>102</td>
<td>38</td>
</tr>
<tr>
<td>Sexual Offence</td>
<td>6</td>
<td>56.17</td>
<td>18.76</td>
<td>61.50</td>
<td>21</td>
<td>76</td>
<td>11</td>
</tr>
<tr>
<td>Non-Sexual HDB</td>
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<td>50.50</td>
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<td>46</td>
<td>24</td>
<td>84</td>
<td>22</td>
</tr>
<tr>
<td>Generalist Offence</td>
<td>3</td>
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<td>17.06</td>
<td>49</td>
<td>25</td>
<td>58</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>55</td>
<td>56.73</td>
<td>19.18</td>
<td>58</td>
<td>21</td>
<td>102</td>
<td>100</td>
</tr>
</tbody>
</table>

5.8.1 Dating Anxiety: Midpoint Analysis. Analysis including all items in the DAS-A found 27 participants (35%) were above midpoint ($M = 75.33$, $SD = 9.11$, $Mdn = 75$). Of the 27 participants above midpoint, 22 (81%) participants were female and five (19%) were male. This represents 49% of all female participants and 16% of all male participants in the study. Females ($M = 76.05$, $SD = 9.30$, $Mdn = 75$) had higher mean score dating anxiety than males ($M = 72.20$, $SD = 8.38$, $Mdn = 68$). However, due to the small numbers in the male group, statistical significance analysis was not possible. The effect size calculated using Cohen’s $d$ was small ($d = .4$). Analysis excluding item 21 found similar results. Thirty participants (39%, $n = 22$ female, $n = 8$ male) were above midpoint ($M = 71.87$, $SD = 9.53$, $Mdn = 72$). Females ($M = 73.77$, $SD = 9.32$, $Mdn = 73$) had higher mean score dating anxiety than males ($M = 69.50$, $SD = 9.04$, $Mdn = 69$). However, due to the small numbers in the male group, statistical significance analysis was not possible. The effect size calculated using Cohen’s $d$ was small ($d = .4$).
SD = 9.50, Mdn = 73) had higher dating anxiety than males (M = 66.63, SD = 
7.93, Mdn = 63.50). In contrast, analysis including item 21, there was large 
effect size (d = .8).

Twelve participants above midpoint (44%, n = 8 female, n = 4 male) 
reported one or more form of harmful sexual behaviour. This represents 32% 
of all young people who reported harmful sexual behaviour in the study. Nine 
participants (33%, n = 8 female, n = 1 male) reported sexual or generalist 
harmful dating behaviour. This represents 38% of all young people who 
reported harmful sexual dating behaviour. Six participants (22%, n = 4 male, n 
= 2 female) reported a sexual or generalist offence, representing 30% of all 
young people who reported a sexual offence. Three participants (11%, n = 2 
female, n = 1 male) of seven participants (43%) reported both sexual or 
generalist HDB and sexual or generalist offence. Five (19%, n = 4 female, n = 
1 male) of 19 (26%) reported non-sexual harm. Ten female participants (37%) 
of 21 (48%) reported no harm.

Excluding item 21, 14 participants (18%, n = 8 female, n = 6 male) 
above midpoint reported one or more form of harmful sexual behaviour. Both 
additional participants were male. One reported a sexual offence only and one 
reported a generalist offence and generalist HDB. The third additional 
participant above midpoint was a male who reported a non-sexual offence.

Within the harmful dating behaviour group who reported dating anxiety 
(including all items) above midpoint, four of the 12 participants, all female,
reported sexual HDB (33%) and five of the 12 participants (42%, n = 4 female, n = 1 male) reported generalist HDB. Three of 11 participants (27%, n = 2 female, n = 1 male) reported non-sexual harm above midpoint and 15 of 42 (36%, n = 12, female, n = 3 male) reported no harm. A one-way analysis of variance found no significant difference between means, $F(3,23) = 4.87$, $p = .70$. In addition, the effect size calculated using eta squared found a decrease in medium effect from $\eta^2 = .08$ to $\eta^2 = .06$. Young people who reported a sexual offence had the highest mean score ($M = 77$, $SD = 4.32$, $Mdn = 78$). This was very similar to young people who reported generalist HDB ($M = 76.60$, $SD = 7.64$, $Mdn = 75$). Young people who reported no HDB ($M = 75.67$, $SD = 11.08$, $Mdn = 75$) and young people who reported non-sexual HDB ($M = 69.33$, $SD = 3.22$, $Mdn = 68$) both had lower means than young people who reported a sexual or generalist HDB. A one-way analysis of variance excluding item 21 also found no significance difference between means, $F(3,26) = .32$, $p = .81$, and a small effect size ($\eta^2 = .04$).

Within the offence groups above midpoint, three of the 10 participants, (30%, n = 3 male, n = 1 female) reported a sexual offence and three of 10 participants (30%, n = 2 male, n = 1 female) reported a generalist offence. Six of 22 participants (27%; n = 5 female, n = 1 male) reported a non-sexual offence above midpoint and 15 female participants of 35 (43%) reported a no offence. A one-way analysis of variance found no significant difference between means including item 21, $F(3,23) = .66$, $p = .58$. However, in contrast to harmful dating behaviour, the effect size for participants above midpoint ($\eta^2$)
= .08) was higher than the effect size including all participants ($\eta^2 = .05$). A one-way analysis of variance excluding item 21 above midpoint found similar results, although a larger medium effect size, $F(3,26) = 1.22, p = .32, \eta^2 = .1$.

A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups including all items above midpoint including all DAS-A items found no significant differences, $F(2,24) = .17, p = .85$. In addition, the effect size decreased from a medium effect size ($\eta^2 = .06$) to very small effect size ($\eta^2 = .01$). This was reflected in the means scores for young people who reported no harm ($M = 76.60, SD = 12.66, Mdn = 74.50$), sexual harm ($M = 74.92, SD = 6.68, Mdn = 75.50$) and non-sexual harm ($M = 73.80, SD = 6.98, Mdn = 73$) being very similar. A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups excluding item 21 above midpoint also found no significant differences and a small effect size, $F(2,27) = .58, p = .57, \eta^2 = .04$. Again, the means scores for young people who reported no-harm ($M = 74.50, SD = 12.98, Mdn = 74$), non-sexual harm ($M = 69.83, SD = 7.94, Mdn = 69$), sexual harm ($M = 70.86, SD = 7.32, Mdn = 72$) were similar.

Using all items of the DAS-A, 50 participants (65%, $n = 27$ male, $n = 23$ female) had a total dating anxiety score below midpoint ($M = 44.82, SD = 12.80, Mdn = 48.50$). An independent samples $t$-test found no significant difference in dating anxiety scores between females ($M = 44.91, SD = 12.46$),
A smaller effect size was found than for analysis of participants above midpoint \((d = .1)\). Excluding item 21, 47 participants (61%, \(n = 24\) male, \(n = 23\) female) were below midpoint \((M = 43.77, SD = 12.46, Mdn = 48)\). There was no significant difference in dating anxiety scores below midpoint excluding item 21 between females \((M = 43.35, SD = 12.47)\), \(t(45) = .75\), two tailed \(p = .83\), and males \((M = 44.17, SD = 12.72)\). There was a larger medium effect size than analysis including item 21 \((d = .6)\).

A one-way analysis of variance was conducted to explore significant mean differences in dating anxiety (including item 21) scores below midpoint between harmful dating behaviour groups. As the variances were significantly unequal, \(F = .4.11, p = .001\), a Games-Howell test was used. Welch’s test, \(F(3,17.97) = 7.51, p = .002\), found a significant difference between groups. As presented in table 5.5, the mean dating anxiety scores for young people who reported generalist HDB \((M = 56.29, SD = 5.15, Mdn = 57.50)\) were significantly higher than young people who reported no HDB \((M = 42.78 SD = 13.87, Mdn = 45)\) and young people who reported non-sexual HDB \((M = 41, SD = 10.45, Mdn = 41.50)\). Despite having a similar mean score to young people who reported generalist HDB, no significant differences were found between young people who reported sexual HDB \((M = 54.63, SD = 9.15, Mdn = 57.50)\). Furthermore, the magnitude of the differences in means calculated using omega squared suggest a large practical significance \((est. \omega^2 = .28)\).
Table 5.5  
Games Howell Test for Dating Anxiety Below Midpoint (Including Item 21) by HDB Group

<table>
<thead>
<tr>
<th>(I) HDB Group</th>
<th>(J) HDB Group</th>
<th>Mean Difference (I-J)</th>
<th>Std. Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generalist HDB</td>
<td>Sexual HDB</td>
<td>1.661</td>
<td>3.776</td>
<td>.970</td>
</tr>
<tr>
<td></td>
<td>No HDB</td>
<td>13.508*</td>
<td>3.304</td>
<td>.002</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual HDB</td>
<td>14.411*</td>
<td>4.178</td>
<td>.025</td>
</tr>
<tr>
<td>Sexual HDB</td>
<td>Generalist HDB</td>
<td>-1.661</td>
<td>3.776</td>
<td>.970</td>
</tr>
<tr>
<td></td>
<td>No HDB</td>
<td>11.847</td>
<td>4.193</td>
<td>.051</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual HDB</td>
<td>12.750</td>
<td>4.911</td>
<td>.088</td>
</tr>
<tr>
<td>No HDB</td>
<td>Generalist HDB</td>
<td>-13.508*</td>
<td>3.304</td>
<td>.002</td>
</tr>
<tr>
<td></td>
<td>Sexual HDB</td>
<td>-11.847</td>
<td>4.193</td>
<td>.051</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual HDB</td>
<td>.903</td>
<td>4.558</td>
<td>.997</td>
</tr>
<tr>
<td>Non-Sexual HDB</td>
<td>Generalist HDB</td>
<td>-14.411*</td>
<td>4.178</td>
<td>.025</td>
</tr>
<tr>
<td></td>
<td>Sexual HDB</td>
<td>-12.750</td>
<td>4.911</td>
<td>.088</td>
</tr>
<tr>
<td></td>
<td>No HDB</td>
<td>-.903</td>
<td>4.178</td>
<td>.997</td>
</tr>
</tbody>
</table>

Note: * The mean difference is significant at the .05 level

Similar results were found for a one-way analysis of variance to explore significant differences in dating anxiety excluding item 21. As the variances were significantly unequal, $F = .4.39, p = .003$, a Games-Howell test was used. Welch’s test, $F(3,17.213) = 7.66, p = .002$, found a significant difference of means scores between harmful dating behaviour groups below midpoint. As presented in Table 5.6 the mean dating anxiety scores for young people who reported generalist HDB ($M = 53.33, SD = 4.55, Mdn = 52.50$) were significantly higher than young people who reported no HDB ($M = 39.92, SD = 12.91, Mdn = 40$) and young people who reported non-sexual HDB ($M = 39.75, SD = 10.88, Mdn = 40.50$). Young people who reported sexual HDB ($M = 52.63, SD = 8.90, Mdn = 55.50$) had significantly higher dating anxiety young people who reported no HDB only. Furthermore, the magnitude of the
differences in means calculated using omega squared suggests a large practical significance ($est. \omega^2 = .29$).

Table 5.6
Games Howell test for Dating Anxiety Below Midpoint (Excluding Item 21) by HDB Group

<table>
<thead>
<tr>
<th>(I) HDB Group</th>
<th>(J) HDB Group</th>
<th>Mean Difference (I-J)</th>
<th>Std. Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generalist HDB</td>
<td>Sexual HDB</td>
<td>.708</td>
<td>3.622</td>
<td>.997</td>
</tr>
<tr>
<td></td>
<td>No HDB</td>
<td>13.413*</td>
<td>3.180</td>
<td>.002</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual HDB</td>
<td>13.583*</td>
<td>4.269</td>
<td>.042</td>
</tr>
<tr>
<td>Sexual HDB</td>
<td>Generalist HDB</td>
<td>-708</td>
<td>3.622</td>
<td>.997</td>
</tr>
<tr>
<td></td>
<td>No HDB</td>
<td>12.705*</td>
<td>4.043</td>
<td>.027</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual HDB</td>
<td>12.875</td>
<td>4.945</td>
<td>.088</td>
</tr>
<tr>
<td>No HDB</td>
<td>Generalist HDB</td>
<td>-13.413*</td>
<td>4.043</td>
<td>.027</td>
</tr>
<tr>
<td></td>
<td>Sexual HDB</td>
<td>-12.875*</td>
<td>4.945</td>
<td>.088</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual HDB</td>
<td>.170</td>
<td>4.631</td>
<td>1.000</td>
</tr>
<tr>
<td>Non-Sexual HDB</td>
<td>Generalist HDB</td>
<td>-13.583*</td>
<td>4.269</td>
<td>.042</td>
</tr>
<tr>
<td></td>
<td>Sexual HDB</td>
<td>-12.875</td>
<td>4.945</td>
<td>.088</td>
</tr>
<tr>
<td></td>
<td>No HDB</td>
<td>-.170</td>
<td>4.631</td>
<td>1.000</td>
</tr>
</tbody>
</table>

Note: * The mean difference is significant at the .05 level

A one-way analysis of variance for offence groups including item 21 below midpoint found no significant difference between means and a small effect size, $F(3,46) = .734$, $p = .54$, $\eta^2 = .05$. Hence, young people who reported a sexual offence ($M = 49$, $SD = 15.57$, $Mdn = 53$) and young people who reported no offence ($M = 48.80$, $SD = 11.86$, $Mdn = 52$) had very similar mean scores. Young people who reported a generalist offence ($M = 45.29$, $SD = 13.45$, $Mdn = 49$) and young people who reported a non-sexual offence ($M = 42.81$, $SD = 13.33$, $Mdn = 43$) both had smaller mean scores. As with results above midpoint, a one-way analysis of variance excluding item 21
below midpoint also found no significant differences but a larger medium effect size $F(3, 43) = .1.43, \ p = .25, \ \eta^2 = .09$.

However, as with the harmful dating behaviour group, significant mean differences were found for dating anxiety including and excluding item 21 below midpoint. A one way analysis of variance between sexual harm, non-sexual harm and no harm groups found a statistically significant difference between mean anxiety scores, $F(2, 47) = 4.48, \ p = .017$. As presented in Table 5.7 Scheffe’s test found that young people who reported sexual harm ($M = 51.44, \ SD = 11.93, \ Mdn = 55$) had significantly higher dating anxiety than young people who reported non-sexual harm ($M = 40, \ SD = 12.08, \ Mdn = 40.50, \ p = .025$). Despite having a similar mean score to young people who reported non-sexual harm, there was no significant difference between young people who reported no harm ($M = 43.18, \ SD = 12.71, \ Mdn = 45$) and other groups. In addition, the effect size calculated using eta squared found a high medium practical significant difference ($\eta^2 = .2$).

Table 5.7

* Scheffe’s test for Dating Anxiety (Including Item 21) by Harm Group

<table>
<thead>
<tr>
<th>(I) Harm Group</th>
<th>(J) Harm Group</th>
<th>Mean Difference (I-J)</th>
<th>Std. Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Harm</td>
<td>No Harm</td>
<td>8.258</td>
<td>4.393</td>
<td>.182</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual Harm</td>
<td>11.440*</td>
<td>4.053</td>
<td>.025</td>
</tr>
<tr>
<td>No Harm</td>
<td>Sexual Harm</td>
<td>-8.258</td>
<td>4.393</td>
<td>.182</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual</td>
<td>3.182</td>
<td>.4892</td>
<td>.810</td>
</tr>
<tr>
<td>Non-Sexual Harm</td>
<td>Sexual Harm</td>
<td>-11.440*</td>
<td>4.053</td>
<td>.025</td>
</tr>
<tr>
<td></td>
<td>No Harm</td>
<td>-3.182</td>
<td>4.892</td>
<td>.810</td>
</tr>
</tbody>
</table>

Note: * The mean difference is significant at the .05 level
Similar results were found for dating anxiety excluding item 21. A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups found a statistically significant difference between mean dating anxiety scores, $F(2,44) = 4.87, p = .012$. As presented in Table 5.8, Scheffe's test found that young people who reported sexual harm ($M = 48.74$, $SD = 11.60$, $Mdn = 51$) had significantly higher dating anxiety than young people who reported non-sexual harm ($M = 36.46$, $SD = 10.60$, $Mdn = 34$, $p = .014$). There was no significant difference between young people who reported no harm ($M = 42$, $SD = 12.43$, $Mdn = 44$) and other groups.

### Table 5.8
*Scheffe*’ test for Dating Anxiety (Excluding Item 21) by Harm Group

<table>
<thead>
<tr>
<th>(I) Harm Group</th>
<th>(J) Harm Group</th>
<th>Mean Difference (I-J)</th>
<th>Std. Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Harm</td>
<td>No Harm</td>
<td>6.739</td>
<td>4.228</td>
<td>.291</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual Harm</td>
<td>12.278*</td>
<td>4.002</td>
<td>.014</td>
</tr>
<tr>
<td>No Harm</td>
<td>Sexual Harm</td>
<td>-6.739</td>
<td>4.228</td>
<td>.291</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual</td>
<td>5.538</td>
<td>4.725</td>
<td>.508</td>
</tr>
<tr>
<td>Non-Sexual Harm</td>
<td>Sexual Harm</td>
<td>-12.278*</td>
<td>4.002</td>
<td>.014</td>
</tr>
<tr>
<td></td>
<td>No Harm</td>
<td>-5.538</td>
<td>4.725</td>
<td>.508</td>
</tr>
</tbody>
</table>

Note: * The mean difference is significant at the .05 level

In addition, the effect size calculated using eta squared found the same high medium practical significant difference ($\eta^2 = .2$).

### 5.9 Fear of Negative Evaluation - Dating

Analysis was conducted for offence and harmful dating behaviour groups to explore whether young people who reported sexual harm have higher fear of negative evaluation about a potential dating relationship than young people reported no harm, non-sexual harm or generalist harm. The
scores ranged from 10 (low fear of negative evaluation) to 50 (high fear of negative evaluation), midpoint 30. The mean score including all participants was below midpoint ($M = 28.96$, $SD = 9.58$, $Mdn = 29$).

An independent-samples $t$-test was conducted to compare the fear of negative evaluation scores for males and females. There was no significant difference in scores between males ($M = 26.63$, $SD = 8.72$) than females ($M = 30.62$, $SD = 9.90$), $t(75) = -1.83$, two tailed $p = .71$, $d = .4$. The small effect size suggests that that gender may only have a small effect on fear of negative evaluation.

As with the results from dating anxiety, there was no significant difference in fear of negative evaluation between the means for offence groups, $F(3,73) = .80$, $p = 0.5$, or harmful dating behaviour groups, $F(3,73) = 1.93$, $p = .13$. Young people who reported a sexual offence or a harmful sexual dating behaviour did not have significantly higher fear of negative evaluation than other groups. Similar to dating anxiety, the effect size on level of fear of negative evaluation was stronger for the harmful dating behaviour group, ($\eta^2 = .07$) than the offence group ($\eta^2 = .03$). This suggests that harmful dating behaviour had a medium effect on fear of negative evaluation whilst offence had a small effect.

In contrast to dating anxiety, young people who reported generalist harmful dating behaviour ($M = 32.50$, $SD = 6.43$, $Mdn = 33$), harmful sexual dating behaviour ($M = 32.42$, $SD = 7.22$, $Mdn = 33$) and no-offence ($M =$
30.66, $SD = 8.99$, $Mdn = 29$), had means just above midpoint. Only the
generalist and harmful sexual dating behaviour groups had medians above
midpoint.

Hence, as with dating anxiety, young people who reported harmful
generalist dating behaviour and young people who reported harmful sexual
dating behaviour had the two highest mean fear of negative evaluation scores
in the study. Furthermore, young people who reported harmful non-sexual
dating behaviour had lower fear of negative evaluation than all other groups in
the study ($M = 24.91$, $SD = 8.75$, $Mdn = 22$).

As with dating anxiety, young people had the highest mean score in the
offence group, just above midpoint. Young people who reported a generalist
offence ($M = 28.20$, $SD = 9.31$, $Mdn = 29.50$) and young people who reported
a sexual offence ($M = 28.80$, $SD = 9.03$, $Mdn = 31$) had similar mean scores
below midpoint. Again young people who reported a non-sexual offence had
the mean score in the offence group and second lowest in the study ($M =
26.68$, $SD = 10.88$, $Mdn = 25$).

A one-way analysis of variance for participants in just one of three
groups, sexual harm, non-sexual harm, or no harm found no statistical
significance and a medium effect size, $F(2,74) = 2.84$, $p = .07$, $\eta^2 = .07$.
Young people who reported a sexual harm ($M = 30.46$, $SD = 8.05$, $Mdn = 31$)
had similar fear of negative evaluation to young people who reported no harm
($M = 30.33$, $SD = 10.26$, $Mdn = 28$). Both were on midpoint. Young people
who reported non-sexual harm had the lowest mean score, below midpoint ($M = 24.53$, $SD = 10.64$, $Mdn = 23$). This suggests that when young people are placed in one group according to whether they have reported any type of sexual harm, offence or harmful dating behaviour and generalists, young people who report sexual harm do not have significantly higher fear of negative evaluation.

As presented in Table 5.9, as with dating anxiety, young people who reported harmful sexual dating behaviour only had the highest mean and median score, above midpoint. Similarly, young people who reported harmful dating behaviour had higher mean scores than their offence match. However, it should be noted that the minimum score of 10 distorts the mean score and median for young people who reported a sexual offence. When that score was removed, four of the remaining five participants had dating anxiety scores above midpoint, the minimum score being 26. This increased the mean and median score to above midpoint ($M = 33.20$, $SD = 5.72$, $Mdn = 33$) and second in the table. This suggests that young people who report harmful dating behaviour may have higher fear of negative evaluation than young people who report an offence. In addition, young people who report sexual specific behaviour have higher fear of negative evaluation than young people who report generalist or non-sexual harm. However, the mean scores of young people who report harmful sexual specific or generalist dating behaviour were very similar to young people who reported no harm.
Table 5.9
Mean Scores of Fear of Negative Evaluation - Dating by Specific Behaviour Group

<table>
<thead>
<tr>
<th>Group</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>Mdn</th>
<th>Min</th>
<th>Max</th>
<th>% of Total N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual HDB</td>
<td>6</td>
<td>34.83</td>
<td>5.67</td>
<td>37</td>
<td>28</td>
<td>40</td>
<td>11</td>
</tr>
<tr>
<td>Generalist HDB</td>
<td>5</td>
<td>30.40</td>
<td>6.88</td>
<td>30</td>
<td>23</td>
<td>40</td>
<td>9</td>
</tr>
<tr>
<td>No Harm</td>
<td>21</td>
<td>30.33</td>
<td>10.26</td>
<td>20</td>
<td>14</td>
<td>50</td>
<td>38</td>
</tr>
<tr>
<td>Sexual Offence</td>
<td>6</td>
<td>29.33</td>
<td>10.76</td>
<td>31.50</td>
<td>10</td>
<td>41</td>
<td>11</td>
</tr>
<tr>
<td>Non-Sexual HDB</td>
<td>2</td>
<td>25</td>
<td>10</td>
<td>25</td>
<td>18</td>
<td>32</td>
<td>4</td>
</tr>
<tr>
<td>Non-Sexual Offence</td>
<td>12</td>
<td>24.42</td>
<td>11.40</td>
<td>23</td>
<td>10</td>
<td>50</td>
<td>22</td>
</tr>
<tr>
<td>Generalist Offence</td>
<td>3</td>
<td>23.67</td>
<td>10.41</td>
<td>27</td>
<td>12</td>
<td>32</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>55</td>
<td>28.87</td>
<td>10</td>
<td>28</td>
<td>10</td>
<td>50</td>
<td>100</td>
</tr>
</tbody>
</table>

5.9.1 Fear of Negative Evaluation - Dating: Midpoint

Analysis. Thirty-four participants (44%) reported fear of negative evaluation above midpoint (\(M = 37.65, SD = 5.16, Mdn = 36.50\)). The majority of participants (65%, \(n = 22\)) were female. In contrast to previous analysis females above midpoint (\(M = 38.95, SD = 5.38\)), reported significantly higher fear of negative evaluation than males (\(M = 35.25, SD = 3.86\), \(t(32) = -2.10\), two tailed \(p = .043\), \(d = .8\). Despite the small difference in means, gender had a strong effect. In contrast, there was no significant difference in means and a very small effect size between females (\(M = 22.65, SD = 5.71\) and males (\(M = 21.45, SD = 6.35\), \(t(39) = -0.65\), two tailed \(p = .52\), \(d = .2\), below midpoint.
Nineteen participants above midpoint (55%, n = 10 male, n = 9 female) reported one or more form of harmful sexual behaviour. These 19 participants represent 51% of all participants who reported harmful sexual behaviour in the study. Fourteen participants (41%, n = 9 female, n = 5 male) reported harmful sexual or generalist dating behaviour. This represents 58% of all young people who reported this type of HDB in the study. Ten participants (29%, n = 8 male, n = 2 female) reported a sexual or generalist offence. This represents 50% of all young people who reported a sexual or generalist offence. Five participants above midpoint (14%, n = 3 male, n = 2 female) reported a sexual or generalist offence in combination with a sexual or generalist harmful dating behaviour. This represents 71% of all participants who reported this type of harm in the study. Seven of 19 participants (20%, n = 5 female, n = 2 male) reported non-sexual harm. This represents 36% of all young people who reported non-sexual harm. Eight of 21 young people (all female) reported no harm. This represents 38% of all young people who reported no harm.

Seven of the 12 participants (58%, n = 4, female, n = 5 male) reported sexual HDB and seven of the 12 participants (58%, n = 5 female, n = 2 male) reported generalist HDB. Four of 11 participants (36%, n = 3 female, n = 1 male) reported non-sexual HDB above midpoint and 16 of 42 participants (38%, n = 10 female, n = 6 male) reported no HDB.

A one-way analysis of variance between sexual HDB, non-sexual HDB, generalist HDB and no HDB groups above midpoint found no significant differences and a medium effect size, $F(3,30) = .846$, $p = .48$, $\eta^2 = .08$. Young
people who reported no harmful dating behaviour ($M = 38.88$, $SD = 6.29$, $Mdn = 38$), young people who reported sexual HDB ($M = 37.43$, $SD = 3.99$, $Mdn = 39$) and young people who reported generalist HDB ($M = 36.86$, $SD = 4.10$, $Mdn = 35$) had very similar mean scores. Young people who reported non-sexual HDB had the lowest fear of negative evaluation mean score within the harmful dating behaviour above midpoint ($M = 34.50$, $SD = 2.52$, $Mdn = 34$).

Nine of 22 participants (40%, $n = 6$ female, $n = 3$ male) reported a non-sexual offence above midpoint and 15 of 35 participants (42%, $n = 14$ female, $n = 1$ male) reported a no offence. A one-way analysis of variance between sexual offence, non-sexual offence, generalist offence and no offence groups above midpoint found no significant differences and a medium effect size, $F(3,30) = 1.20$, $p = .48$, $\eta^2 = .1$. Young people who reported no offence had the highest mean score above midpoint ($M = 39.27$, $SD = 5.05$, $Mdn = 39$).

Young people who reported a non-sexual offence ($M = 37.56$, $SD = 5.81$, $Mdn = 36$), young people who reported a sexual offence ($M = 35.40$, $SD = 3.51$, $Mdn = 35$) and young people who reported a generalist offence ($M = 35.20$, $SD = 5.17$, $Mdn = 34$) all had very similar mean scores.

A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups above midpoint found no significant differences, $F(2,31) = 2.9$, $p = .07$, $\eta^2 = .16$. Young people who reported no-harm had the highest mean ($M = 41.25$, $SD = 5.68$, $Mdn = 39$). Results for young people who reported sexual harm ($M = 36.63$, $SD = 3.82$, $Mdn = 35$) and non-sexual harm
($M = 36.29$, $SD = 6.50$, $Mdn = 34$) were very similar. Despite no significant
differences being found, the effect size increased from a medium to strong
effect ($\eta^2 = .14$).

A one-way analysis of variance between harmful dating behaviour
groups below midpoint also found no significant differences and a medium
effect size, $F(3,39) = 2.14$, $p = .11$, $\eta^2 = .14$. Young people who reported
generalist HDB ($M = 26.40$, $SD = 2.97$, $Mdn = 25$) and young people who
reported sexual HDB ($M = 25.40$, $SD = 3.72$, $Mdn = 26$) had the highest mean
scores within the group. Young people who reported no HDB ($M = 21.35$, $SD$
$= 6.41$, $Mdn = 23.50$) had higher fear of negative evaluation than young
people who reported non-sexual HDB ($M = 19.43$, $SD = 5.29$, $Mdn = 18$).

Similarly, within offence groups below midpoint, no significant
differences but medium, effect size was found, $F(3,39) = 2.06$, $p = .12$, $\eta^2 =$
$.14$. Again, young people who reported no offence had the highest mean
score ($M = 24.20$, $SD = 4.85$, $Mdn = 25.50$). Young people who reported a
sexual offence ($M = 22.20$, $SD = 7.89$, $Mdn = 26$) and young people who
reported a generalist offence ($M = 21.20$, $SD = 6.76$, $Mdn = 22$) had very
similar means. Young people who reported a non-sexual offence had the
lowest fear of negative evaluation in the offence group ($M = 19.15$, $SD =$
$65.89$, $Mdn = 18$).
In contrast, significant differences were found between sexual harm, non-sexual harm and no harm groups below midpoint, $F(2,40) = 5.57, p = .01$.

Table 5.10
**Scheffe’ test for Fear of Negative Evaluation Below Midpoint by Harm Group**

<table>
<thead>
<tr>
<th>(I) Harm Group</th>
<th>(J) Harm Group</th>
<th>Mean Difference (I-J)</th>
<th>Std. Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Harm</td>
<td>Non-Sexual Harm</td>
<td>6.278*</td>
<td>2.018</td>
<td>.013</td>
</tr>
<tr>
<td></td>
<td>No Harm</td>
<td>.329</td>
<td>1.971</td>
<td>.986</td>
</tr>
<tr>
<td>Non-Sexual Harm</td>
<td>Sexual Harm</td>
<td>-6.278*</td>
<td>2.018</td>
<td>.013</td>
</tr>
<tr>
<td></td>
<td>No Harm</td>
<td>-5.949*</td>
<td>2.168</td>
<td>.032</td>
</tr>
<tr>
<td>No Harm</td>
<td>Sexual Harm</td>
<td>-.329</td>
<td>1.971</td>
<td>.986</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual Harm</td>
<td>5.949*</td>
<td>2.168</td>
<td>.032</td>
</tr>
</tbody>
</table>

Note: * The mean difference is significant at the .05 level

As presented in Table 5.10, young people who reported sexual harm ($M = 23.94$, $SD = 5.88$, $Mdn = 26$) and young people who reported no harm ($M = 23.62$, $SD = 5.32$, $Mdn = 26$) had significantly higher fear of negative evaluation than young people who reported non-sexual harm ($M = 17.67$, $SD = 4.76$, $Mdn = 18$). In addition the effect size calculated using eta squared, ($\eta^2 = .22$), suggests that harm group had a high medium effect on the results.

**5.10 Social Distress - Dating**

Analysis was conducted for offence and harmful dating behaviour groups to explore whether young people who reported sexual harm have higher social distress dating than young people reported no harm, non-sexual harm or generalist harm. The scores ranged from 7 (low social distress) to 35 (high social distress), midpoint 21. The mean score including all participants was below midpoint ($M = 19.27$, $SD = 7.12$, $Mdn = 20$).
An independent-samples *t*-test was conducted to compare the social distress dating scores for males and females. The mean social distress-dating score for females (\(M = 20.69, SD = 7.54\)) was significantly higher than males (\(M = 17.28, SD = 6.04\)), \(t(75) = -2.12\), two tailed \(p = .037\), \(d = .5\). This suggests a medium effect of gender for social distress about dating.

A one-way between groups analysis of variance found no significant difference in between the mean scores for offence groups, \(F(3,73) = 1.57, p = .20\). As the variances for the harmful dating behaviour groups were unequal, \(F = 1.50, p < .05\), a Games-Howell test was used. However, there were no significant differences between harmful dating behaviour groups for social distress when dating. There was the same medium effect size for harmful dating behaviour and offence groups, \(\eta^2 = .06\). Young people who reported a sexual offence or harmful sexual dating behaviour did not have significantly higher social distress than young people who reported non-sexual harm, generalist harm or no harm within their groups. Young people who reported generalist and harmful sexual dating behaviour had higher social distress about dating than young people who reported a sexual or generalist offence. Both generalist groups were more similar to young people who reported sexual rather than non-sexual harm.

As previously found, young people who reported generalist harmful dating behaviour (\(M = 22.33, SD = 6.58, Mdn = 23.50\)) had the highest social distress mean in the study, just above midpoint. Young people who reported harmful sexual dating behaviour had the second highest score, below
midpoint, \((M = 20.58, SD = 4.44, Mdn = 21)\). Both were higher than young people who reported no HDB \((M = 18.71, SD = 8.05, Mdn = 20)\) and young people who reported non-sexual HDB \((M = 16.64, SD = 5.26, Mdn = 18)\).

Again young people who reported non-sexual HDB had the lowest social distress mean score in the study.

Young people who reported no offence had the highest mean within the offence group, on midpoint \((M = 21.06, SD = 6.95, Mdn = 21)\). Young people who reported a generalist offence \((M = 18.80, SD = 7.20, Mdn = 19)\), young people who reported a sexual offence \((M = 18.50, SD = 6.20, Mdn = 20)\) and young people who reported a non-sexual offence \((M = 17, SD = 7.12, Mdn = 18)\) had very similar mean scores, all below midpoint.

A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups also found no significant differences in mean scores, \(F(2,74) = 1.32, p = .273\). In contrast to the offence and harmful dating behaviour groups, a small effect size was found, \(\eta^2 = .03\). Young people who reported no harm \((M = 20.29, SD = 8.42, Mdn = 22)\) and young people who reported sexual harm \((M = 19.86, SD = 6.21, Mdn = 21)\) had very similar means scores, on or just above midpoint. Young people who reported non-sexual harm had the lowest social distress - dating \((M = 17, SD = 7.10, Mdn = 18)\), below midpoint. This suggests that when all young people who report sexual harm are placed in the same group, they may not have higher social distress about dating than young people who report no harm or non-sexual harm.
As presented in Table 5.11, young people who reported harmful sexual dating behaviour and young people who reported generalist dating behaviour were the only two groups with mean scores above midpoint. However, young people who reported no harm had a similar mean and median. Again, young people who reported harmful dating behaviour had higher mean scores than young people who reported a similar offence. Young people who reported harmful generalist dating behaviour had a similar mean score to young people who reported sexual rather non-sexual harm. However, young people who reported a non-sexual offence had a similar mean social distress score to young people who reported sexual rather than generalist offence.

<table>
<thead>
<tr>
<th>Group</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>Mdn</th>
<th>Min</th>
<th>Max</th>
<th>% of Total N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual HDB</td>
<td>6</td>
<td>22.83</td>
<td>4.07</td>
<td>21</td>
<td>19</td>
<td>25</td>
<td>11</td>
</tr>
<tr>
<td>Generalist HDB</td>
<td>5</td>
<td>22.80</td>
<td>4.03</td>
<td>23</td>
<td>17</td>
<td>27</td>
<td>9</td>
</tr>
<tr>
<td>No Harm</td>
<td>21</td>
<td>20.29</td>
<td>8.42</td>
<td>22</td>
<td>7</td>
<td>35</td>
<td>38</td>
</tr>
<tr>
<td>Sexual Offence</td>
<td>6</td>
<td>18.33</td>
<td>6.77</td>
<td>20</td>
<td>7</td>
<td>25</td>
<td>11</td>
</tr>
<tr>
<td>Non-Sexual HDB</td>
<td>2</td>
<td>18</td>
<td>0</td>
<td>18</td>
<td>18</td>
<td>18</td>
<td>4</td>
</tr>
<tr>
<td>Non-Sexual Offence</td>
<td>12</td>
<td>17.17</td>
<td>8.07</td>
<td>16.50</td>
<td>7</td>
<td>30</td>
<td>22</td>
</tr>
<tr>
<td>Generalist Offence</td>
<td>3</td>
<td>14.67</td>
<td>8.96</td>
<td>10</td>
<td>9</td>
<td>25</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>55</td>
<td>19.51</td>
<td>7.40</td>
<td>20</td>
<td>7</td>
<td>35</td>
<td>100</td>
</tr>
</tbody>
</table>

5.10.1 Social Distress - Dating: Midpoint Analysis. Thirty participants (39%) reported social distress - dating above midpoint ($M = 26.13$, $SD = 3.44$, $Mdn = 25.50$). The majority of participants (80%, $n = 24$)
were female. In contrast to analysis using all participants, there was no significant difference between social distress-dating scores for males ($M = 25.33$, $SD = 2.81$) and females ($M = 26.33$, $SD = 3.61$), $t(28) = -.63$, two tailed $p = .55$, $d = .3$. The small effect size for gender above midpoint was lower than when all participants were included in the analysis ($d = .5$). Forty-seven participants (61%) reported social distress-dating below midpoint ($M = 14.89$, $SD = 5.09$, $Mdn = 16$). Twenty-six participants (55%) were male and 21 participants (45%) were female. As with participants above midpoint, there was no significant in social distress-dating scores between males ($M = 15.42$, $SD = 4.95$) and females ($M = 14.24$, $SD = 5.30$), $t(45) = .79$, two tailed $p = .43$, $d = .2$. The effect size calculated using Cohen’s $d$ was slightly smaller than the effect size above midpoint.

Fourteen participants above midpoint (47%, $n = 10$ female, $n = 4$ male) reported one or more form of harmful sexual behaviour. This represents 38% of all young people who reported harmful sexual behaviour in the study. Ten participants (71%, $n = 9$ female, $n = 1$ male) reported sexual or generalist harmful dating behaviour. This represents 42% of all young people who reported harmful sexual dating behaviour. Seven participants (50%, $n = 4$ male, $n = 3$ female) reported a sexual or generalist offence, representing 35% of all young people who reported a sexual offence. Five participants (16%, $n = 3$ female, $n = 3$ male) of 19 (26%) reported non-sexual harm. Eleven female participants (37%), of 21 (52%) reported no harm.
Within the HDB group above midpoint, three of the 12 participants, female (25%) reported sexual HDB and seven of the 12 participants (58%, $n = 6$ female, $n = 1$ male) reported generalist HDB. Two of 11 participants (18%, $n = 1$ female, $n = 1$ male) reported non-sexual harm above midpoint and 18 of 42 (43%, $n = 14$ female, $n = 4$ male) reported no harm. As there were only two participants in the non-sexual HDB group, a one-way analysis of variance of social distress - dating between harmful dating behaviour groups below midpoint was not possible.

Within the offence groups above midpoint, three of the 10 participants (30%, $n = 2$ male, $n = 1$ female) reported a sexual offence and four of 10 participants (40%, $n = 2$ male, $n = 2$ female) reported a generalist offence. Six of 22 participants (27%, $n = 4$ female, $n = 2$ male) reported a non-sexual offence above midpoint and 17 of 35 participants, all female (49%) reported no offence. A one-way analysis of variance found no significant difference between means and small effect size, $F(3,26) = .27$, $p = .87$, $\eta^2 = .03$.

Furthermore, young people who reported a generalist offence ($M = 26.75$, $SD = 3.95$, $Mdn = 27.50$), young people who reported no offence ($M = 26.41$, $SD = 3.94$, $Mdn = 26$), young people who reported a non-sexual offence ($M = 25.50$, $SD = 2.74$, $Mdn = 25$) and young people who reported a sexual offence ($M = 25$, $SD = 1.0$, $Mdn = 25$) all had very similar mean scores.

A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups above midpoint found no significant differences and a small effect size, $F(2,27) = 2.1$, $p = .81$, $\eta^2 = .02$. This was reflected in the
small difference in means between young people who reported no-harm \((M = 26.64, SD = 4.74, Mdn = 26)\), non-sexual harm \((M = 26.20, SD = 2.38, Mdn = 25)\) and sexual harm \((M = 25.71, SD = 2.64, Mdn = 25.50)\). However, below midpoint significant differences were found between sexual HDB, non-sexual HDB and no HDB groups \(F(3,43) = 3.43, p = .025\). In addition a high medium effect size was found \((\eta^2 = .2)\).

Table 5.12
Schefte's test for Social Distress - Dating Below Midpoint by HDB Group

<table>
<thead>
<tr>
<th>(I) Offence Group</th>
<th>(J) Offence Group</th>
<th>Mean Difference (I-J)</th>
<th>Std. Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual HDB</td>
<td>No HDB*</td>
<td>5.736</td>
<td>1.847</td>
<td>.032</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual HDB</td>
<td>3.667</td>
<td>2.228</td>
<td>.448</td>
</tr>
<tr>
<td></td>
<td>Generalist</td>
<td>2.378</td>
<td>2.636</td>
<td>.846</td>
</tr>
<tr>
<td>Generalist HDB</td>
<td>No HDB</td>
<td>3.358</td>
<td>2.324</td>
<td>.559</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual</td>
<td>1.289</td>
<td>2.636</td>
<td>.971</td>
</tr>
<tr>
<td></td>
<td>Sexual</td>
<td>-2.378</td>
<td>2.636</td>
<td>.846</td>
</tr>
<tr>
<td>Non-Sexual HDB</td>
<td>No HDB</td>
<td>2.069</td>
<td>1.847</td>
<td>.741</td>
</tr>
<tr>
<td></td>
<td>Sexual HDB</td>
<td>-3.667</td>
<td>2.228</td>
<td>.448</td>
</tr>
<tr>
<td></td>
<td>Generalist HDB</td>
<td>-1.289</td>
<td>2.636</td>
<td>.971</td>
</tr>
<tr>
<td>No HDB</td>
<td>Non-Sexual HDB</td>
<td>-2.069</td>
<td>1.847</td>
<td>.741</td>
</tr>
<tr>
<td></td>
<td>Sexual HDB</td>
<td>-5.736*</td>
<td>1.847</td>
<td>.032</td>
</tr>
<tr>
<td></td>
<td>Generalist HDB</td>
<td>-3.358</td>
<td>2.324</td>
<td>.559</td>
</tr>
</tbody>
</table>

Note: * The mean difference is significant at the .05 level

As presented in Table 5.12, young people who reported sexual HDB \((M = 18.78, SD = 3.07, Mdn = 20)\) had significantly higher social distress about dating than young people who reported no HDB \((M = 13.04, SD = 5.10, Mdn = 11)\). There was no significant difference between young people who reported generalist HDB \((M = 16.40, SD = 5.09, Mdn = 16)\) and young people who reported non-sexual HDB \((M = 15.11, SD = 4.43, Mdn = 15)\).
However, a one-way analysis of variance for offence groups below midpoint found no significant difference between means and small effect size $F(3,43) = .72, p = .54, \eta^2 = .05$. Young people who reported no offence had the highest mean score ($M = 16$, $SD = 5.11$, $Mdn = 18$), similar to young people who reported a sexual offence ($M = 15.71$, $SD = 5.12$, $Mdn = 16$). Young people who reported a non-sexual offence ($M = 13.81$, $SD = 5.36$, $Mdn = 12.50$) and young people who reported a generalist offence ($M = 13.50$, $SD = 4.51$, $Mdn = 12$) had very similar mean scores.

Analysis for participants below midpoint also found no significant difference between means, but a medium effect size, $F(2,44) = 1.81, p = .18, \eta^2 = .08$. Young people who reported sexual harm had the highest mean below midpoint ($M = 16.30$, $SD = 4.89$, $Mdn = 18$). Very similar means were found between young people who reported non-sexual harm ($M = 13.71$, $SD = 4.89$, $Mdn = 12.50$) and young people who reported no harm ($M = 13.30$, $SD = 5.40$, $Mdn = 12.50$).

5.11 Social Distress - Group

As discussed earlier, the Cronbach alpha coefficient for the SD-Group scale increased from .65 to .79 when item 21 was excluded. The inter-item correlation also increased to .46, with values ranging from .36 to .64. However, no differences were found. Results are reported based on the full social distress-group scale, including item 21. Analysis was conducted for offence and harmful dating behaviour groups to explore whether young
people who reported a sexual harm have higher social distress-group than young people reported no harm, non-sexual harm or generalist harm. The scores ranged from 4 (low social distress) to 20 (high social distress), midpoint 12. The mean score including all participants was below midpoint ($M = 8.32$, $SD = 3.39$, $Mdn = 8$).

An independent-samples $t$-test was conducted to compare the social distress-group for males and females. There was no significant difference between the social distress-group score for males ($M = 7.63$, $SD = 3.05$, $Mdn = 7$) and females ($M = 8.82$, $SD = 3.56$, $Mdn = 9$), $t(75) = -1.54$, two tailed $p = .13$, $d = .4$.

A one-way analysis of variance found no significant differences in mean scores between offence groups, $F(3,73) = 1.21$, $p = .31$, or harmful dating behaviour groups, $F(3,73) = 1.57$, $p = .21$. The effect size on level of social distress was stronger for the harmful dating behaviour group, ($\eta^2 = .06$) than the offence group ($\eta^2 = .05$). This suggests that harmful dating behaviour had a medium effect on social distress-group whilst offence had a small effect. Young people who reported a sexual offence or harmful sexual dating behaviour did not report significantly higher levels of social distress in a group than young people who reported non-sexual harm, generalist harm or no harm. In addition none of the offence or harmful dating behaviour groups had a mean or median above midpoint.
As previously, young people who reported harmful generalist dating behaviour did have the highest level of social distress ($M = 9.92, SD = 3.12, Mdn = 9$) in the study. This was just above young people who reported harmful sexual dating behaviour ($M = 9.08, SD = 3.48, Mdn = 9$). Young people who reported harmful non-sexual ($M = 7.82, SD = 2.96, Mdn = 7$) and no harmful dating behaviour ($M = 7.79, SD = 3.46, Mdn = 7$) had very similar mean scores.

In contrast to the harmful dating behaviour group, young people who reported no offence had the highest mean within the offence group and second highest in the study, ($M = 9.11, SD = 3.71, Mdn = 9$). Young people who reported a non-sexual offence ($M = 7.82, SD = 2.92, Mdn = 7$), a sexual offence ($M = 7.60, SD = 3.34, Mdn = 7$) or a generalist offence ($M = 7.40, SD = 2.99, Mdn = 7$) had very similar mean scores.

A one-way analysis of variance for participants in just one of three groups, sexual harm, non-sexual harm, or no harm found no statistical significance with a small effect size, $F(2,74) = 1.06, p = .36, \eta^2 = .03$. In order of mean score, the results were very similar. Hence, young people who reported sexual harm ($M = 8.73, SD = 3.44, Mdn = 8$), no harm ($M = 8.48, SD = 3.73, Mdn = 8$) and non-sexual harm ($M = 7.37, SD = 2.81, Mdn = 7$) all had mean scores below midpoint. This suggests that young people who harm sexually may not have higher social distress than young people who report no harm or non-sexual harm.
When placed into a specific behaviour group the mean, median, minimum and maximum scores were very similar. All mean and median scores were below midpoint. The only difference to previous factors was that young people who reported generalist dating behaviour \( (M = 11.60, \ SD = 4.16, \ Mdn = 12) \) had higher mean and median score to young people who reported harmful sexual dating behaviour \( (M = 9.83, \ SD = 3.49, \ Mdn = 10) \). Similarly, all harmful dating behaviour groups had mean scores above young people who reported a similar offence and young people who reported a generalist offence had the lowest mean and median score \( (M = 5.67, \ SD = 1.53, \ Mdn = 6) \).

5.11.1 Social Distress - Group: Midpoint Analysis. Only nine participants (12%, \( n = 6 \) female, \( n = 2 \) male) reported social distress in a group below the midpoint \( (M = 14.67, \ SD = 1.22, \ Mdn = 14) \). Six (50%, \( n = 4 \) female, \( n = 2 \) male) reported sexual harm, two (17%, \( n = 1 \) male, \( n = 1 \) female) reported no harm and one female participant reported non-sexual harm. Due to the small number of participants, it was not appropriate to carry out further comparative analysis.

5.12 Partnership Anxiety

A one-way between groups analysis of variance was conducted for offence and harmful dating behaviour groups to explore whether young people who reported sexual harm have higher partnership anxiety than young people reported no harm, non-sexual harm or generalist harm. The partnership scale scores ranged from 11 (low partnership anxiety) to 20 (high
partnership anxiety), midpoint 22. The mean score including all participants was below midpoint ($M = 17.61$, $SD = 4.59$, $Mdn = 16$).

An independent samples $t$-test was conducted to compare the partnership anxiety scales between males and females. The variances for females and males were significantly unequal, $F= 8.74$, $p<.05$, therefore a $t$-test for unequal variances was carried out. There was however, no significant difference between the scores for males ($M = 16.97$, $SD = 4.12$) and females ($M = 18.07$, $SD = 5.47$), $t(75) = -1.00$, two tailed $p = .32$, $d = .23$. The results also suggest the magnitude of the differences in means was small.

However, there was no significant difference between the offence groups, $F(3,73) = .47$, $p = 0.70$, or between the harmful dating behaviour groups, $F(3,73) = .45$, $p = .72$. There was the same small effect size for both offence group and the harmful dating behaviour group ($\eta^2 = .02$). In addition, the means and medians for all offence and harmful dating behaviour groups were below midpoint.

In contrast to the hypothesis, young people who reported harmful sexual dating behaviour had the lowest partnership anxiety ($M = 16.58$, $SD = 4.01$, $Mdn = 15.50$). It was also the lowest mean score of all harmful dating behaviour and offence groups. Young people who reported generalist HDB had the highest partnership anxiety of all harmful dating behaviour and offence groups ($M = 18.92$, $SD = 3.32$, $Mdn = 18.50$). Young people who reported non-sexual HDB had very similar levels of partnership anxiety ($M =$
17.64, $SD = 5.70$, $Mdn = 17$) to young people who reported no HDB ($M = 17.52$, $SD = 5.43$, $Mdn = 16$).

In contrast to the harmful dating behaviour group, people who reported a sexual offence only had the highest partnership anxiety of all the offence group and second highest in the study ($M = 18.70$, $SD = 5.81$, $Mdn = 17$). This was very similar to young people who reported generalist harmful dating behaviour. Young people who reported no offence ($M = 17.94$, $SD = 5.01$, $Mdn = 16$) and young people who reported a generalist offence ($M = 17.40$, $SD = 4.77$, $Mdn = 17.50$) had similar means. Young people who reported a non–sexual offence had the lowest partnership anxiety ($M = 16.68$, $SD = 4.72$, $Mdn = 15$), very similar to young people who reported sexual HDB.

A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups also found no significant differences and a very small effect size, $F(2,74) = .29$, $p = .75$, $\eta^2 = .01$. Also, all means and medians were below midpoint. Young people who reported sexual harm ($M = 16.16$, $SD = 4.36$, $Mdn = 17$) and young people who reported no harm ($M = 16.43$, $SD = 5.68$, $Mdn = 16$) had very similar means. Young people who reported non-sexual harm had the lowest partnership anxiety ($M = 15.31$, $SD = 4.70$, $Mdn = 15$). This suggests that young people who report sexual harm may have higher partnership anxiety than young people who report no harm or non-sexual harm.
In contrast to potential dating anxiety factors, all mean and median scores were below midpoint of 22. As presented in Table 5.13 means and medians were very similar to each other. However, in contrast to previous factors, young people who reported a sexual offence had a higher mean score partnership anxiety score than young people who reported harmful sexual dating behaviour. Also, young people who reported harmful non-sexual dating had the highest mean score, whilst young people who reported a non-sexual offence had the lowest. The results suggest that whilst young people who report harmful sexual behaviour may not have higher partnership anxieties, there may differences between the groups that influences levels of potential dating anxieties in comparison to anxieties about actually being in a dating relationship.

Table 5.13
Mean Partnership Anxiety Score by Specific Behaviour Group

<table>
<thead>
<tr>
<th>Group</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>Mdn</th>
<th>Min</th>
<th>Max</th>
<th>% of Total N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Sexual HDB</td>
<td>2</td>
<td>19.50</td>
<td>2.12</td>
<td>19.50</td>
<td>18</td>
<td>21</td>
<td>4</td>
</tr>
<tr>
<td>Sexual Offence</td>
<td>6</td>
<td>18.83</td>
<td>6.91</td>
<td>16.50</td>
<td>11</td>
<td>31</td>
<td>11</td>
</tr>
<tr>
<td>Generalist HDB</td>
<td>5</td>
<td>18.80</td>
<td>3.56</td>
<td>21</td>
<td>14</td>
<td>22</td>
<td>9</td>
</tr>
<tr>
<td>No Harm</td>
<td>21</td>
<td>18</td>
<td>5.90</td>
<td>16</td>
<td>11</td>
<td>31</td>
<td>38</td>
</tr>
<tr>
<td>Generalist Offence</td>
<td>3</td>
<td>17</td>
<td>5.57</td>
<td>18</td>
<td>11</td>
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<tr>
<td>Sexual HDB</td>
<td>6</td>
<td>16.67</td>
<td>4.08</td>
<td>15.50</td>
<td>12</td>
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<tr>
<td>Non-Sexual Offence</td>
<td>12</td>
<td>16.17</td>
<td>3.97</td>
<td>15</td>
<td>12</td>
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<td>22</td>
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<tr>
<td>Total</td>
<td>55</td>
<td>17.62</td>
<td>5.03</td>
<td>16</td>
<td>11</td>
<td>31</td>
<td>100</td>
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</table>
5.12.1 Partnership Anxiety: Midpoint Analysis. Only 14 participants (18%, $n = 12$ female, $n = 2$ male) of participants reported partnership anxiety in a group above the midpoint of 22 ($M = 25.50$, $SD = 2.95$, $Mdn = 24$). Six (43%, $n = 4$ female, $n = 2$ male) reported sexual harm, five, all female (36%) reported no harm and three, all female (21%), reported non-sexual harm. Due to the small number of participants, it was not appropriate to carry out further comparative analysis.

5.13 Sexual Intimacy Anxiety

A one-way between groups analysis of variance was conducted for offence and harmful dating behaviour groups to explore whether young people who reported a sexual harm have higher sexual intimacy anxiety than young people reported no harm, non-sexual harm or generalist harm. The scale scores ranged from 13 (low sexual intimacy anxiety) to 65 (high sexual intimacy anxiety), midpoint 39. The mean score including all participants was below midpoint ($M = 37.78$, $SD = 12.15$, $Mdn = 37$).

An independent-samples $t$-test to compare the sexual intimacy anxiety scores for males and females found that the mean sexual intimacy anxiety score for females ($M = 40.64$, $SD = 11.59$) was significantly higher, than boys ($M = 33.75$, $SD = 11.84$), $t(75) = -2.54$, two tailed $p = .01$. In addition, the mean score for females was above midpoint. The effect size calculated using Cohen’s $d$ found a medium practical significance ($d = .59$).
A one-way between groups analysis of variance found no significant differences between harmful dating behaviour groups, $F(3,73) = .153, p = .22$, or between offence groups, $F(3,73) = .203, p = .12$. Magnitude of means calculated using eta squared found a moderate effect size for both offence ($\eta^2 = .08$) and harmful dating behaviour ($\eta^2 = .06$) groups. In contrast to dating anxiety, there was a larger effect size for offence than harmful dating behaviour groups. Young people who reported harmful sexual dating behaviour ($M = 42.08, SD = 8.86, Mdn = 44.50$), no-offence ($M = 41.20, SD = 11.52, Mdn = 43$) and harmful generalist dating behaviour ($M = 40.67, SD = 10.50, Mdn = 42$) were the only three groups with means and medians above midpoint.

Hence, in contrast to previous anxieties, young people who reported harmful sexual behaviour in a dating relationship had the highest mean in the study. Young people who reported harmful generalist dating behaviour had the third highest. Young people who reported no harmful dating behaviour ($M = 37.14, SD = 13.54, Mdn = 35.50$) and young people who reported harmful dating non-sexual behaviour ($M = 32.26, SD = 9.86, Mdn = 30$) had the third and fourth mean sexual intimacy scores within the HDB group.

Within the offence group, young people who reported no offence had the highest mean, above midpoint and second highest in the study ($M = 41.20, SD = 11.52, Mdn = 43$). In contrast to the hypothesis, young people who reported a non-sexual offence ($M = 36, SD = 11.73, Mdn = 34.40$) had a similar mean score to young people who reported a sexual offence ($M = $
Young people who reported a generalist offence \((M = 32, SD = 13.94, Mdn = 29.50)\) had the lowest mean sexual intimacy anxiety score in the study.

A one-way analysis of variance for participants in just one of three groups, sexual harm, non-sexual harm, or no harm found also no statistical significance between groups, \(F(2,74) = 1.51, p = .23\). In addition, the magnitude of difference between means decreased to a small effect size \(\eta^2 = .04\). Young people who reported no harm \((M = 41.05, SD = 13.28, Mdn = 41)\) had the highest sexual anxiety, just above midpoint. Young people who reported sexual harm \((M = 37.65, SD = 11.63, Mdn = 39)\) had sexual intimacy anxiety just below midpoint. Young people who reported non-sexual harm \((M = 34.42, SD = 11.52, Mdn = 32)\) had the lowest sexual intimacy anxiety, below midpoint. This suggests that young people who report sexual harm may not have higher sexual intimacy anxiety than young people who report no harm or non-sexual harm.

However, when put into a specific behaviour group, the differences between young people who reported harmful dating behaviour and young people who reported offence was clearer. As presented in Table 5.14, in contrast to dating anxiety, all harmful dating behaviour groups reported higher mean and median sexual intimacy scores higher than all offence groups. In addition, all were on or just above the midpoint of 39. However, only young people who reported harmful sexual dating behaviour had a higher mean and median score than young people who reported no harm. Whilst young people
who reported a sexual offence only did have the highest sexual intimacy anxiety within the offence group it was not higher than young people who reported no harm or harmful non-sexual or generalist dating behaviour. As with dating anxiety, young people who reported a generalist offence had a much lower mean and median score than all other groups. This suggests that young people who report harmful dating behaviour may have higher sexual intimacy anxiety than young people who report an offence.

Table 5.14
Mean Sexual Intimacy Anxiety Scores by Specific Behaviour Group

<table>
<thead>
<tr>
<th>Group</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>Mdn</th>
<th>Min</th>
<th>Max</th>
<th>% of Total N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual HDB</td>
<td>6</td>
<td>46.50</td>
<td>3.27</td>
<td>46</td>
<td>43</td>
<td>52</td>
<td>11</td>
</tr>
<tr>
<td>No Harm</td>
<td>21</td>
<td>41.05</td>
<td>13.27</td>
<td>41</td>
<td>17</td>
<td>65</td>
<td>38</td>
</tr>
<tr>
<td>Non-Sexual HDB</td>
<td>2</td>
<td>40</td>
<td>7.07</td>
<td>40</td>
<td>35</td>
<td>45</td>
<td>4</td>
</tr>
<tr>
<td>Generalist HDB</td>
<td>5</td>
<td>39.20</td>
<td>10.47</td>
<td>43</td>
<td>27</td>
<td>52</td>
<td>11</td>
</tr>
<tr>
<td>Sexual Offence</td>
<td>6</td>
<td>36.17</td>
<td>14.50</td>
<td>35.50</td>
<td>13</td>
<td>52</td>
<td>11</td>
</tr>
<tr>
<td>Non-Sexual Offence</td>
<td>12</td>
<td>34.25</td>
<td>12.76</td>
<td>31.50</td>
<td>13</td>
<td>59</td>
<td>22</td>
</tr>
<tr>
<td>Generalist Offence</td>
<td>3</td>
<td>23.33</td>
<td>8.62</td>
<td>25</td>
<td>14</td>
<td>31</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>55</td>
<td>38.45</td>
<td>12.56</td>
<td>38</td>
<td>13</td>
<td>65</td>
<td>100</td>
</tr>
</tbody>
</table>

5.13.1 Sexual Intimacy Anxiety: Midpoint Analysis. Thirty-five participants (45%, n = 26 female, n = 9 male) reported sexual intimacy above midpoint ($M = 48.91$, $SD = 6.40$, $Mdn = 48$). In contrast to analysis that included all participants, there was no significant difference in sexual intimacy anxiety scores between males ($M = 47.33$, $SD = 6.38$) and females ($M = 49.46$, $SD = 6.43$), $t(33) = -.86$, two tailed $p = .40$, $d = .3$. The effect size also
decreased from medium to small. Forty-two participants (55%, $n = 23$ male, $n \neq 19$ female) reported sexual intimacy anxiety below midpoint ($M = 28.50$, $SD = 6.76$, $Mdn = 30$). As the variances of the groups were significantly unequal, $F = 8.03$, $p < .05$, a $t$-test for unequal variances was used. However, as with participants above midpoint, there was no significant difference in sexual intimacy scores between males ($M = 28.43$, $SD = 8.33$) and females ($M = 28.58$, $SD = 4.39$), $t(34.50) = -0.07$, two tailed $p = .94$. This was reflected in a very small effect size ($d = .02$).

Eighteen participants above midpoint (51%, $n = 11$ female, $n = 7$ male) reported one or more form of harmful sexual behaviour. This represents 47% of all young people who reported harmful sexual behaviour in the study. Sixteen participants (46%, $n = 11$ female, $n = 5$ male) reported sexual or generalist harmful dating behaviour. This represents 67% of all young people who reported harmful sexual dating behaviour. Six participants (17%, $n = 4$ male, $n = 2$ female) reported a sexual or generalist offence, representing 30% of all young people who reported a sexual offence. Five (14%, $n = 4$ female, $n = 1$ male) of 19 (26%) reported non-sexual harm. Twelve (35%, $n = 11$ female, $n = 1$ male) of 21 (57%) reported no harm.

Within the HDB group above midpoint, nine of the 12 participants (75%, $n = 5$ female, $n = 4$ male) reported sexual HDB and seven of the 12 participants (58%, $n = 6$ female, $n = 1$ male) reported generalist HDB. Two of 11 participants (18%), both female, reported non-sexual harm above midpoint and 17 of 42 (42%, $n = 13$ female $n = 4$ male) reported no harm. Due to there
being only two participants in the non-sexual HDB group, a one-way analysis of variance was not possible.

Within the offence groups above midpoint, four of the 10 participants (40%, n = 3 male, n = 1 female) reported a sexual offence and two of 10 participants (20%, n = 1 male, n = 1 female) reported a generalist offence. Seven of 22 participants (32%, n = 5 female, n = 2 male) reported a non-sexual offence above midpoint and 22 of 35 participants (63%, n = 19 female, n = 3 male) reported a no offence. A one-way analysis of variance was not possible as there were only two participants above midpoint in the generalist offence group.

A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups above midpoint found no significant differences and a similar small effect size, $F(2,32) = .76, p = .48, \eta^2 = .05$. Young people who reported no-harm ($M = 50.33, SD = 8.26, Mdn = 48.50$) and non-sexual harm ($M = 50.20, SD = 6.06, Mdn = 51$) had very similar means. Young people who reported sexual harm had the lowest mean ($M = 47.61, SD = 5.03, Mdn = 47$).

A one-way analysis of variance between harmful dating behaviour below midpoint found no significant differences between means scores, $F(3,38) = .22, p = .88$. In addition, the effect size calculated using eta squared decreased to a small effect ($\eta^2 = .02$). Young people who reported generalist HDB had the highest mean score ($M = 30.60, SD = 4.83, Mdn = 30$). Young
people who reported non-sexual HDB ($M = 28.89$, $SD = 7.60$, $Mdn = 30$),
young people who reported sexual HDB ($M = 28.67$, $SD = 1.53$, $Mdn = 29$)
and young people who reported no HDB ($M = 27.92$, $SD = 7.60$, $Mdn = 29$)
had very similar mean scores.

A one-way analysis of variance for offence groups below midpoint also
found no significant difference between means, $F(3,41) = .29$, $p = .83$. As with
the harmful dating behaviour group below midpoint, the effect size decreased
to a small effect ($\eta^2 = .02$). Hence, young people who reported a non-sexual
offence ($M = 29.27$, $SD = 6.56$, $Mdn = 29$), young people who reported no
offence ($M = 28.85$, $SD = 5.87$, $Mdn = 30$), young people who reported a
sexual offence ($M = 28.50$, $SD = 8.36$, $Mdn = 30$) and young people who
reported a generalist offence ($M = 26.50$, $SD = 8.16$, $Mdn = 28.50$) had very
similar means and medians.

A one-way analysis of variance between harm groups below midpoint
also found no significant difference between means, $F(2,39) = .03$, $p = .97$. As
with other sexual intimacy anxiety analysis for participants below midpoint, the
effect size decreased to a very small effect ($\eta^2 = .01$). This was reflected in
the very small difference between means of young people who reported non-
sexual harm ($M = 28.79$, $SD = 6.53$, $Mdn = 29$), young people who reported
no harm ($M = 28.67$, $SD = 6.67$, $Mdn = 30$) and young people who reported
sexual harm ($M = 28.21$, $SD = 7.31$, $Mdn = 30$).
5.14 Fear of Negative Evaluation - Intimacy

Analysis was conducted for offence and harmful dating behaviour groups to explore whether young people who reported a sexual harm have higher fear of negative evaluation about sexual intimacy than young people reported no harm, non-sexual harm or generalist harm. The fear of negative evaluation - intimacy scale scores ranged from 8 (low fear of negative evaluation) to 40 (high fear of negative evaluation), midpoint 24. The mean score including all participants was just below midpoint ($M = 23.10$, $SD = 8.15$, $Mdn = 23$).

An independent t-test was conducted to compare the mean fear of negative evaluation for sexual intimacy score for males and females. The mean difference for females was significantly higher ($M = 24.89$, $SD = 8.30$), $t(75) = -2.35$, two tailed $p = .02$, than males ($M = 20.59$, $SD = 7.33$). Females had significantly higher levels of fear of negative evaluation about sexual intimacy than males. In addition the mean score for females was just above midpoint. Effect size calculated using Cohen’s $d$ found that gender had a medium practical significance ($d = .6$).

A one-way analysis of variance found no significant difference of mean fear of negative evaluation scores within the offence groups $F(3,73) = .203$, $p = .12$, or the harmful dating behaviour groups, $F(3,73) = 1.26$, $p = .29$. Similar to overall sexual intimacy anxiety there was a moderate effect size for both offence and harmful dating behaviour. Again, offence had a slightly larger effect on fear of negative evaluation ($\eta^2 = .08$) than harmful dating behaviour.
(\eta^2 = .06). Also, similar to sexual intimacy anxiety scores, young people who reported harmful sexual dating behaviour (\(M = 26, SD = 6.34, Mdn = 28.50\)), no-offence (\(M = 25.34, SD = 7.66, Mdn = 26\)) and harmful generalist dating behaviour (\(M = 24.75, SD = 6.89, Mdn = 26\)), were the only three groups with means and medians above midpoint.

Young people who reported harmful sexual dating behaviour (\(M = 26, SD = 6.34, Mdn = 28.50\)) and young people who reported harmful generalist dating behaviour (\(M = 24.75, SD = 6.89, Mdn = 26\)) had the highest fear of negative evaluation scores of all eight groups. Young people who reported no harmful dating behaviour (\(M = 22.62, SD = 8.88, Mdn = 22.50\)) and young people who reported non-sexual harm (\(M = 20, SD = 7.72, Mdn = 20\)) had similar mean scores.

In contrast to harmful dating behaviour, young people who reported a generalist offence (\(M = 18.80, SD = 8.35, Mdn = 16.50\)) had the lowest and sexual offence (\(M = 21.80, SD = 7.73, Mdn = 22\)) the third lowest level of fear of negative evaluation in all groups. Young people who reported no offence had the only mean score above midpoint in the offence group (\(M = 25.34, SD = 7.66, Mdn = 26\)). Young people who reported a non-sexual offence (\(M = 22.09, SD = 8.41, Mdn = 21\)) had a similar mean score to young people who reported a sexual offence.

A one-way analysis of variance for participants in just one of three groups, sexual harm, non-sexual harm, and no harm also found no statistical
significance between groups, $F(2, 74) = 1.45$, $p = .24$. In addition, the magnitude of difference between means decreased to a small effect size ($\eta^2 = .04$). Young people who reported no harm ($M = 25.33$, $SD = 8.59$, $Mdn = 25$) had the highest fear of negative evaluation, the only group above midpoint. Young people who reported sexual harm ($M = 22.92$, $SD = 7.64$, $Mdn = 23$) and young people who reported non-sexual harm ($M = 21$, $SD = 8.43$, $Mdn = 22$) had similar mean scores below midpoint. This suggests that young people who report harmful sexual behaviour do not have higher fear of negative evaluation than young people who report non-sexual or no harm.

However as with overall sexual intimacy anxiety, when assigned to a specific behaviour group young people who reported harmful sexual dating behaviour did have higher mean and median scores than other groups (see Table 6.15). In addition they were above midpoint of 24. Similarly, all young people who reported harmful dating behaviour had higher mean and median scores than all young people who reported an offence. Also, young people who reported a sexual offence did have higher mean and fear of negative evaluation about sexual intimacy than young people who reported a non-sexual or generalist offence. However, as with sexual intimacy anxiety, only young people who reported harmful sexual dating behaviour had mean and median above young people who reported no harm. As with sexual intimacy anxiety, this suggests that placing all participants into a sexual or non-sexual group may be misleading due to the differences in fear of negative evaluation between young people who report an offence and young people who report harmful dating behaviour. That is, whilst young people who report harmful
sexual dating behaviour may have higher fear of negative evaluation than 
other participants, young people who report a sexual offence may only have 
higher fear of negative evaluation than other young people who report an 
offence.

Table 5.15
Mean Score of Fear of Negative Evaluation - Intimacy by Specific Behaviour Group

<table>
<thead>
<tr>
<th>Group</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>Mdn</th>
<th>Min</th>
<th>Max</th>
<th>Total N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual HDB</td>
<td>6</td>
<td>29.67</td>
<td>2.88</td>
<td>29</td>
<td>26</td>
<td>34</td>
<td>11</td>
</tr>
<tr>
<td>No Harm</td>
<td>21</td>
<td>25.33</td>
<td>8.59</td>
<td>25</td>
<td>8</td>
<td>40</td>
<td>38</td>
</tr>
<tr>
<td>Non-Sexual HDB</td>
<td>2</td>
<td>24.50</td>
<td>6.36</td>
<td>24.50</td>
<td>20</td>
<td>29</td>
<td>4</td>
</tr>
<tr>
<td>Generalist HDB</td>
<td>5</td>
<td>22.60</td>
<td>6.69</td>
<td>26</td>
<td>15</td>
<td>30</td>
<td>9</td>
</tr>
<tr>
<td>Sexual Offence</td>
<td>6</td>
<td>21.83</td>
<td>9.45</td>
<td>22</td>
<td>8</td>
<td>32</td>
<td>11</td>
</tr>
<tr>
<td>Non-Sexual Offence</td>
<td>12</td>
<td>20.17</td>
<td>8.81</td>
<td>18.50</td>
<td>8</td>
<td>40</td>
<td>22</td>
</tr>
<tr>
<td>Generalist Offence</td>
<td>3</td>
<td>15</td>
<td>5.20</td>
<td>18</td>
<td>9</td>
<td>18</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>55</td>
<td>23.45</td>
<td>8.35</td>
<td>24</td>
<td>8</td>
<td>40</td>
<td>100</td>
</tr>
</tbody>
</table>

5.14.1 Fear of Negative Evaluation - Intimacy: Midpoint

Analysis. Thirty-three participants (43%, n = 26 female, n = 7 male), 
reported fear of negative evaluation about sexual intimacy above midpoint (M 
= 31, SD = 4.11, Mdn = 30). An independent sample t-test found that, in 
contrast to analysis including all participants, males (M = 31, SD = 3.51) and 
females (M = 31, SD = 4.32), t(31) = .00, two tailed p = 1.00 had exactly the 
same mean score. Subsequently, there was no effect size (d = .00). Forty-two 
participants (57%, n = 25 male, n = 19 female) reported fear of negative 
evaluation below midpoint (M = 17.18, SD = 4.58, Mdn = 17). Similarly, there
was no significant difference and a small effect size between the mean score males \((M = 17.68, SD = 5.09)\) and females \((M = 16.53, SD = 3.85)\), \(t(42) = .82\), two tailed \(p = .41\), \(d = .2\).

Seventeen participants above midpoint (52%, \(n = 11\) female, \(n = 6\) male) reported one or more form of harmful sexual behaviour. This represents 46% of all young people who reported harmful sexual behaviour in the study. Fifteen participants (45%, \(n = 11\) female, \(n = 4\) male) reported sexual or generalist harmful dating behaviour. This represents 63% of all young people who reported harmful sexual dating behaviour. Five participants (15%, \(n = 3\) male, \(n = 2\) female) reported a sexual or generalist offence, representing 25% of all young people who reported a sexual offence. Five participants (15%, \(n = 4\) female, \(n = 1\) male) of 19 (26%) reported non-sexual harm. Of 21 participants who reported no harm, eleven female (52%) were above midpoint.

Within the HDB group above midpoint, eight of the 12 participants (67%, \(n = 5\) female, \(n = 3\) male) reported sexual HDB and seven of the 12 participants (58%, \(n = 6\) female, \(n = 1\) male) reported generalist HDB. Two of 11 participants (18%), both female, reported non-sexual harm above midpoint and 16 of 42 (38%, \(n = 13\) female, \(n = 4\) male) reported no harm. As with the sexual intimacy anxiety scale, as only two participants reported non-sexual HDB above midpoint it was not possible to conduct a one-way analysis of variance.
Within the offence groups above midpoint, three of the 10 participants (30%, \( n = 2 \) male, \( n = 1 \) female) reported a sexual offence and two of 10 participants (20%, \( n = 1 \) male, \( n = 1 \) female) reported a generalist offence. Seven of 22 participants (32%, \( n = 5 \) female, \( n = 2 \) male) reported a non-sexual offence above midpoint and 21 of 35 participants (60%, \( n = 19 \) female, \( n = 2 \) male) reported a no offence. Again, a one-way analysis of variance was not possible as only two young people who reported a generalist offence had fear of negative evaluation scores above midpoint.

A one-way analysis of variance to explore differences in fear of negative evaluation about sexual intimacy between sexual harm, non-sexual harm and no harm groups above midpoint was conducted. However, Levene’s \( F \) test revealed that the homogeneity of variance assumption had not been met (\( p = .03 \)). Therefore, the Welch’s \( F \) test was used. An alpha level of .05 was used for subsequent analysis. However, a one-way ANOVA still found no significance differences, Welch’s \( F(2,8.98) = 9.14, p = .44 \). Young people who reported non-sexual harm (\( M = 32.40, SD = 5.86, Mdn = 30 \)) no harm (\( M = 31.91, SD = 4.91, Mdn = 30 \)) and sexual harm had very similar mean scores (\( M = 30, SD = 2.81, Mdn = 29 \)).

A one-way analysis of variance was conducted to explore whether young people who reported harmful sexual dating behaviour had higher fear of negative evaluation about sexual intimacy than HDB groups below mean scores were found, \( F(3,40) = .15, p = .93 \). However, the effect size calculated using eta squared decreased to a very small effect (\( \eta^2 = .01 \)). Young people
who reported sexual HDB \((M = 18.25, SD = 3.40, Mdn = 17.50)\) and young people who reported generalist HDB \((M = 18, SD = 3.94, Mdn = 16)\) had very similar mean scores. Young people who reported non-sexual HDB \((M = 17.11, SD = 4.34, Mdn = 17)\) and young people who reported no HDB \((M = 16.88, SD = 5.01, Mdn = 17.50)\) had slightly lower mean scores.

A one-way analysis of variance for offence groups below midpoint also found no significant difference between means, \(F(3,40) = .51, p = .68\). However, as with the harmful dating behaviour group below midpoint, the effect size decreased to a small effect \((\eta^2 = .04)\). Young people who reported a sexual offence \((M = 17.86, SD = 5.31, Mdn = 18)\), young people who reported no offence \((M = 17.64, SD = 4.47, Mdn = 17)\) and young people who reported a non-sexual offence \((M = 17.40, SD = 4.69, Mdn = 17)\) had very similar mean scores. Young people who reported generalist offence had the lowest mean score in the offence group \((M = 15.38, SD = 4.37, Mdn = 15)\).

Analysis for participants in just one group below midpoint also found no significant difference between mean scores, \(F(2,41) = .25, p = .78\). In addition, the effect size decreased to a very small effect \((\eta^2 = .01)\). This was reflected in the very small difference between means of young people who reported no harm \((M = 18.10, SD = 5.11, Mdn = 18)\), non-sexual harm \((M = 16.93, SD = 4.49, Mdn = 17)\) and young people who reported sexual harm \((M = 16.90, SD = 4.56, Mdn = 16.50)\).
5.15 Social Distress - Intimacy

Analysis was conducted for offence and harmful dating behaviour groups to examine whether young people who harm sexually had higher social distress about sexual intimacy than young people who reported non-sexual harm, no harm, or generalists. The scale scores ranged from 5 (low social distress) to 25 (high social distress), midpoint 15. The mean score including all participants was just below midpoint ($M = 14.68$, $SD = 4.71$, $Mdn = 15$).

An independent sample $t$-test was conducted to compare the social distress scores for males and females. The mean social distress - intimacy score for females was significantly higher ($M = 15.56$, $SD = 4.18$), $t(75) = -2.67$, two tailed $p = .016$, than males ($M = 13.16$, $SD = 5.03$). Females had higher levels of social distress about intimacy than males. In addition, the mean score for females was just above midpoint. The practical significance calculated using Cohen’s $d$ found a medium effect size ($d = .6$).

A one-way between groups analysis of variance was conducted for offence and harmful dating behaviour groups to explore whether young people who reported a sexual harm have higher social distress about sexual intimacy than young people reported no harm, non-sexual harm or generalist harm. The results found a similar pattern of means and medians for social distress between and within offence and harmful dating behaviour groups to overall sexual intimacy anxiety and fear of negative evaluation. There was no significant difference in means within either the harmful dating behaviour...
group, $F(3,73) = .157, p = .20$, or the offence group, $F(3,73) = 1.43, p = .24$.

Both offence and harmful behaviour had a moderate effect on level of social
distress about intimacy ($\eta^2 = .06$). Young people who reported harmful sexual
dating behaviour ($M = 16.08, SD = 3.26, Mdn = 16.50$), no-offence ($M =
15.86, SD = 4.32, Mdn = 16$) and generalist harmful dating behaviour ($M =
15.92, SD = 4.26, Mdn = 15.50$), were the only three groups with means and
medians above midpoint.

As with sexual intimacy anxiety and fear of negative evaluation, young
people who reported harmful sexual dating behaviour had the highest mean
score of all eight groups ($M = 16.08, SD = 3.26, Mdn = 16.50$). Young people
who reported generalist harmful dating behaviour had slightly lower social
distress about intimacy, just above midpoint ($M = 15.92, SD = 4.26, Mdn =
15.50$). Young people who reported no harmful dating had a mean score just
below midpoint ($M = 14.52, SD = 5.27, Mdn = 15$). Young people who
reported non-sexual harmful dating behaviour had the lowest mean score of
social distress about sexual intimacy in the study ($M = 12.26, SD = 3.53, Mdn
= 13$).

Young people who reported a no offence had the highest mean in the
offence groups and second highest mean social distress score in the study,
just above midpoint ($M = 15.86, SD = 4.32, Mdn = 16$). Young people who
reported a non-sexual offence ($M = 13.91, SD = 4.13, Mdn = 14$), young
people who reported a sexual offence ($M = 13.70, SD = 5.36, Mdn = 14$) and
a young people who reported a generalist offence (\(M = 13.20, SD = 6.14, Mdn = 13.50\)) all had very similar mean scores below midpoint.

A one-way analysis of variance for participants in just one of three groups, sexual harm, non-sexual harm, or no harm also found no statistical significance between groups, \(F(2,74) = 1.20, p = .31\). In addition, the magnitude of difference between means decreased to a small effect size (\(\eta^2 = .03\)), lower than for harmful dating behaviour and offence groups. Young people who reported no harm (\(M = 15.71, SD = 5.05, Mdn = 15\)) and young people who reported sexual harm (\(M = 14.73, SD = 4.82, Mdn = 16\)) had a very similar mean scores just on midpoint. Young people who reported non-sexual harm (\(M = 13.42, SD = 3.96, Mdn = 14\)) had the lowest social distress about sexual intimacy below midpoint The results suggests that young people who report harmful sexual behaviour may not have higher social distress about sexual intimacy than young people who do not

As presented in Table 5.16 mean scores for social distress about sexual intimacy for participants in a specific behaviour group found similar results to previous sexual intimacy factors. That is, young people who reported harmful sexual dating behaviour had the highest mean score, above the midpoint of 15. In addition, young people who reported harmful generalist dating behaviour, no harm and harmful non-sexual dating behaviour had means and median above midpoint. However, the scores were very similar between the four groups. Still, all harmful dating behaviour had higher mean social distress about sexual intimacy scores than young people who reported
an offence. As with previous factors, young people who reported a generalist offence had the lowest mean and median score. The results suggest that young people who report harmful sexual dating behaviour may have similar social distress about intimacy as young people who report no harm, non-sexual or generalist harmful dating behaviour. However, young people who report a sexual offence may have similar social distress about sexual intimacy as young people who report a non-sexual offence.

Table 5.16  
**Mean Scores of Social Distress – Intimacy by Specific Behaviour Group**

<table>
<thead>
<tr>
<th>Group</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>Mdn</th>
<th>Min</th>
<th>Max</th>
<th>% of Total N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual HDB</td>
<td>6</td>
<td>16.83</td>
<td>2.04</td>
<td>16.50</td>
<td>14</td>
<td>20</td>
<td>11</td>
</tr>
<tr>
<td>Generalist HDB</td>
<td>5</td>
<td>16.60</td>
<td>3.84</td>
<td>17</td>
<td>12</td>
<td>22</td>
<td>9</td>
</tr>
<tr>
<td>No Harm</td>
<td>21</td>
<td>15.71</td>
<td>5.05</td>
<td>15</td>
<td>5</td>
<td>25</td>
<td>38</td>
</tr>
<tr>
<td>Non Sexual HDB</td>
<td>2</td>
<td>15.50</td>
<td>.71</td>
<td>15.50</td>
<td>15</td>
<td>16</td>
<td>4</td>
</tr>
<tr>
<td>Sexual Offence</td>
<td>6</td>
<td>14.33</td>
<td>6.62</td>
<td>17.50</td>
<td>5</td>
<td>20</td>
<td>11</td>
</tr>
<tr>
<td>Non-Sexual Offence</td>
<td>12</td>
<td>14.08</td>
<td>4.52</td>
<td>14.50</td>
<td>5</td>
<td>22</td>
<td>22</td>
</tr>
<tr>
<td>Generalist Offence</td>
<td>3</td>
<td>8.33</td>
<td>4.16</td>
<td>7</td>
<td>5</td>
<td>13</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>55</td>
<td>15</td>
<td>4.83</td>
<td>15</td>
<td>5</td>
<td>25</td>
<td>100</td>
</tr>
</tbody>
</table>

**5.15.1 Social Distress - Intimacy: Midpoint Analysis.**

Thirty-four participants (44%, n = 23 female, n = 11 male) reported social distress about sexual intimacy above midpoint (M = 18.82, SD = 2.54, Mdn = 18.50). This represents 51% of all females and 34% of all males in the study. In contrast to analysis that included all participants, there was no significant difference in social distress scores between males (M = 18.09, SD = 2.43)
and females ($M = 19.17$, $SD = 2.57$), $t(32) = -1.17$, two tailed $p = .25$. This was reflected in a decrease from medium to small effect size ($d = .4$). Forty-three participants (59%, $n = 21$ male, $n = 22$ females) reported social distress about sexual intimacy below midpoint ($M = 11.40$, $SD = 3.17$, $Mdn = 12$). As the variances of the groups were significantly unequal $F=22.05$, $p < .001$, a $t$-test for unequal variances was used. However, as with participants above midpoint, there was no significant difference in sexual intimacy scores between females ($M = 12.18$, $SD = 1.89$), $t(28.26) = -1.70$, two tailed $p = .09$ and males ($M = 10.57$, $SD = 4.0$). Nevertheless, the effect size did increase slightly to a medium effect ($d = .05$).

Twenty participants above midpoint (59%, $n = 11$ female, $n = 9$ male) reported one or more form of harmful sexual behaviour. This represents 54% of all young people who reported harmful sexual behaviour in the study. Fourteen participants (70%, $n = 10$ female, $n = 4$ male) reported harmful sexual or generalist dating behaviour. This represents 58% of all young people who reported harmful sexual dating behaviour. Nine participants (26%, $n = 5$ male, $n = 4$ female) reported a sexual or generalist offence, representing 45% of all young people who reported a sexual offence. Three participants (9%, $n = 2$ male, $n = 1$ female) reported a sexual HDB and sexual offence, of seven participants (43%) reported both sexual HDB and sexual offence. Four (11%, $n = 3$ female, $n = 1$ male) of 19 (21%) reported non-sexual harm. Ten (29%, $n = 9$ female, $n = 1$ male) of 21 (47%) reported no harm.
Within the HDB group above midpoint, eight of the 12 participants (67%, \(n = 5\) female, \(n = 3\) male) reported sexual HDB and six of the 12 participants (50%, \(n = 5\) female, \(n = 1\) male) reported generalist HDB. Three of 11 participants (27%, \(n = 2\) female, \(n = 1\) male) reported non-sexual harm above midpoint and 17 of 42 (40%, \(n = 11\) female, \(n = 6\) male) reported no harm. A one-way analysis of variance found no significant difference between means \(F(3,30) = 2.50, p = .08\). However, the effect size calculated using eta squared found an increase in medium effect from \(\eta^2 = .06\) to \(\eta^2 = .2\). This suggests that the effect of harmful dating behaviour is much larger for participant’s scores above midpoint. Young people who reported no HDB (\(M = 19.59, SD = 2.50, Mdn = 19\)) and young people who reported generalist HDB (\(M = 19.33, SD = 3.08, Mdn = 18.50\)) had very similar mean scores. Young people who reported sexual HDB (\(M = 17.88, SD = 1.80, Mdn = 17.50\)) and young people who reported non-sexual HDB (\(M = 16, SD = 0.00, Mdn = 16\)) had slightly lower mean scores.

Within the offence groups above midpoint, five of the 10 participants, all male, (50%) reported a sexual offence and four of 10 participants (40%, \(n = 2\) male, \(n = 2\) female) reported a generalist offence. Six of 22 participants (27%, \(n = 4\) female, \(n = 2\) male) reported a non-sexual offence above midpoint and 19 of 35 participants (54%, \(n = 17\) female, \(n = 2\) male) reported a no offence. A one-way analysis of variance found no significant difference between means, \(F(3,30) = .17 p = .95\). However, in contrast to harmful dating behaviour above midpoint, the effect size decreased, from a medium effect size (\(\eta^2 = .06\)) to a small effect size (\(\eta^2 = .01\)). Hence, all four groups, young
people who reported a non-sexual offence ($M = 19$, $SD = 2.19$, $Mdn = 18.50$), young people who reported no offence ($M = 18.95$, $SD = 2.72$, $Mdn = 18$), young people who reported a generalist offence ($M = 18.75$, $SD = 3.78$, $Mdn = 17.50$) and young people who reported a sexual offence ($M = 18.20$, $SD = 1.64$, $Mdn = 19$) had very similar mean scores.

A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups above midpoint found no significant differences, $F(2,31) = .1.7$, $p = .21$. However, as with harmful dating behaviour, the effect size increased from a small effect size ($\eta^2 = .03$) to a high medium effect size ($\eta^2 = .10$). Still, the difference in means scores for young people who reported no-harm ($M = 20$, $SD = 2.91$, $Mdn = 19.50$) and non-sexual harm ($M = 18.75$, $SD = 2.50$, $Mdn = 18.50$) and young people who reported sexual harm ($M = 18.25$, $SD = 2.67$, $Mdn = 18.50$) was very similar.

A one-way analysis of variance for between harmful dating groups below midpoint found no significance between mean scores, $F(3,39) = .51$, $p = .68$. However, the effect size calculated using eta squared decreased to a small effect ($\eta^2 = .03$). Young people who reported sexual HDB ($M = 12.50$, $SD = 2.38$, $Mdn = 13.50$) and young people who reported generalist HDB ($M = 12.50$, $SD = 1.76$, $Mdn = 12$) had the same mean score. Young people who reported no HDB ($M = 11.08$, $SD = 3.56$, $Mdn = 12$) and young people who reported non-sexual HDB ($M = 11$, $SD = 3.16$, $Mdn = 11$) had slightly lower social distress about sexual intimacy.
A one-way analysis of variance for offence groups below midpoint also found no significant difference between means, $F(3,39) = .2.21, p = .10$. However, as with the harmful dating behaviour group below midpoint, the effect size decreased to a small effect ($\eta^2 = .01$). In contrast to harmful dating behaviour young people who reported no offence ($M = 12.19, SD = 2.64, Mdn = 12.50$) and young people who reported a non-sexual offence ($M = 12, SD = 2.83, Mdn = 12$) had higher mean social distress scores than young people who reported a generalist offence ($M = 9.50, SD = 4.29, Mdn = 10$) and young people who reported a sexual offence ($M = 9.20, SD = 3.35, Mdn = 9$).

Analysis for participants in one group below midpoint also found no significant difference between means, $F(2,40) = .9.17, p = .41$. The small effect size ($\eta^2 = .04$) was very similar to that will all participants included in the analysis. This was reflected in the very small difference between means of young people who reported non-sexual harm ($M = 12, SD = 2.92, Mdn = 12$), young people who reported no harm ($M = 11.82, SD = 2.89, Mdn = 12$) and young people who reported sexual harm ($M = 10.59, SD = 3.54, Mdn = 12$).

### 5.16 Sexual Behaviour Anxiety

Analysis was conducted for offence and harmful dating behaviour groups to explore whether young people who reported a sexual harm have higher sexual behaviour anxiety than young people reported no harm, non-sexual harm or generalist harm. The scale scores ranged from 8 (low sexual behaviour anxiety) to 40 (high sexual behaviour anxiety), midpoint 24. The
mean score including all participants was below midpoint \((M = 19.78, SD = 8.34, Mdn = 19)\).

An independent-samples \(t\)-test found no significant difference between the mean sexual behaviour anxiety score for males \((M = 19.34, SD = 8.43)\) and females \((M = 20.08, SD = 8.35)\), \(t(75) = -3.84\), two tailed \(p = .70\). The small difference in means is reflected in a small effect size \((d = .1)\).

A one-way between groups analysis of variance was conducted for offence and harmful dating behaviour groups to explore whether young people who reported a sexual harm have higher sexual behaviour anxiety than young people reported no harm, non-sexual harm or generalist harm. In contrast to mean anxiety scores for previous dating and sexual intimacy measures, there was a significant difference between offence groups for sexual behaviour anxiety, \(F(3,73) = 7.02, p < 0.001\).

As presented in Table 5.17, Scheffe’s test found that young people who reported a sexual offence, \((M = 26.50, SD = 7.99, Mdn = 30)\) had significantly higher sexual behaviour anxiety than young people who reported non-sexual offence, \((M = 15.82, SD = 6.23, Mdn = 15, p = .005)\) and young people who reported a generalist offence, \((M = 14.80, SD = 7.38, Mdn = 14, p = .01)\). Young people who reported no offence had significantly higher sexual behaviour anxiety than young people who reported a non-sexual offence \((M = 21.77, SD = 6.53, Mdn = 22, p = .04)\). However, the mean score for young people who reported no-offence was, as with young people who reported a
non-sexual and generalist offence, was below midpoint. Young people who reported a generalist offence had the lowest mean sexual behaviour anxiety score in the study. In addition to the significant differences between offence groups, effect size calculated using eta squared found a high medium practical significance ($\eta^2 = .22$).

Table 5.17
Scheffe's test for Sexual Behaviour Anxiety by Offence Group

<table>
<thead>
<tr>
<th>(I) Offence Group</th>
<th>(J) Offence Group</th>
<th>Mean Difference (I-J)</th>
<th>Std. Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual</td>
<td>No Offence</td>
<td>4.729</td>
<td>2.688</td>
<td>.384</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual</td>
<td>10.682*</td>
<td>2.859</td>
<td>.005</td>
</tr>
<tr>
<td></td>
<td>Generalist</td>
<td>11.700*</td>
<td>3.352</td>
<td>.010</td>
</tr>
<tr>
<td>No Offence</td>
<td>Sexual</td>
<td>-4.279</td>
<td>2.688</td>
<td>.384</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual</td>
<td>5.953*</td>
<td>2.039</td>
<td>.044</td>
</tr>
<tr>
<td></td>
<td>Generalist</td>
<td>6.971</td>
<td>2.688</td>
<td>.090</td>
</tr>
<tr>
<td>Non-Sexual</td>
<td>Sexual</td>
<td>-10.682*</td>
<td>2.859</td>
<td>.005</td>
</tr>
<tr>
<td></td>
<td>No Offence</td>
<td>-5.953*</td>
<td>2.039</td>
<td>.044</td>
</tr>
<tr>
<td></td>
<td>Generalist</td>
<td>1.018</td>
<td>2.859</td>
<td>.988</td>
</tr>
<tr>
<td>Generalist</td>
<td>Sexual</td>
<td>-11.700*</td>
<td>3.352</td>
<td>.010</td>
</tr>
<tr>
<td></td>
<td>No Offence</td>
<td>-6.971</td>
<td>2.688</td>
<td>.090</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual</td>
<td>-1.018</td>
<td>2.859</td>
<td>.988</td>
</tr>
</tbody>
</table>

Note: * The mean difference is significant at the .05 level

A one-way analysis of variance was conducted to explore significant differences in sexual behaviour anxiety scores between young people who reported harmful sexual, non-sexual, generalist or no harmful dating behaviour. As the variances were significantly unequal, $F = .88, p = .002$, a Games-Howell test was used. However, in contrast to offence groups, no significant mean differences between harmful dating behaviour groups were found, Welch's $F(3,27.61) = 2.02, p = .13$. All means and means for the harmful dating behaviour groups were below midpoint. In addition, magnitude
of the differences in means calculated using omega squared suggest a small effect ($\hat{\omega}^2 = .04$).

Hence, the mean sexual behaviour anxiety scores for young people who reported generalist HDB ($M = 20.75$, $SD = 9.04$, $Mdn = 20.50$), young people who reported no HDB ($M = 20.40$ $SD = 9.39$, $Mdn = 19$) and young people who reported sexual HDB ($M = 20.08$, $SD = 5.82$, $Mdn = 19.50$) were very similar. Young people who reported non-sexual HDB had the lowest mean sexual behaviour anxiety ($M = 16$, $SD = 4.65$, $Mdn = 15$).

A one-way analysis of variance conducted for each participants in one group, sexual harm, non-sexual harm and no harm, found a statistically significant difference between groups for sexual behaviour anxiety, $F(2,74) = 3.91$, $p = .02$. As presented in Table 5.18, Scheffe's test found that young people who reported no harm ($M = 22.10$, $SD = 8.94$, $Mdn = 22$) had significantly higher sexual behaviour anxiety than young people who reported non-sexual harm ($M = 15.42$, $SD = 6.78$, $Mdn = 15$, $p = .04$). There was no significant difference between young people who reported sexual harm ($M = 20.70$, $SD = 8.13$, $Mdn = 19$, $p = .07$) and young people who reported non-sexual harm. However, all mean scores were below midpoint. In addition to the significant difference between groups, effect size calculated using eta squared found a medium practical significance ($\eta^2 = .09$). The results suggest that young people who report no harm may have higher sexual behaviour anxiety than young people who report sexual or non-sexual harm. Combining all young people who reported sexual harm into one group decreased more
similar to young people who reported sexual harmful dating behaviour than a sexual offence.

Table 5.18

<table>
<thead>
<tr>
<th>(I) Harm Group</th>
<th>(J) Harm Group</th>
<th>Mean Difference (I-J)</th>
<th>Std. Error</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>No-Harm</td>
<td>Sexual Harm</td>
<td>1.393</td>
<td>2.196</td>
<td>.818</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual Harm</td>
<td>6.674*</td>
<td>2.545</td>
<td>.037</td>
</tr>
<tr>
<td>Sexual Harm</td>
<td>No-Harm</td>
<td>-1.393</td>
<td>2.196</td>
<td>.818</td>
</tr>
<tr>
<td></td>
<td>Non-Sexual</td>
<td>5.282</td>
<td>2.268</td>
<td>.073</td>
</tr>
<tr>
<td>Non-Sexual Harm</td>
<td>No-Harm</td>
<td>-6.674*</td>
<td>2.545</td>
<td>.037</td>
</tr>
<tr>
<td></td>
<td>Sexual Harm</td>
<td>-5.282</td>
<td>2.268</td>
<td>.073</td>
</tr>
</tbody>
</table>

Note: * The mean difference is significant at the .05 level

However, analysis of mean scores when participants are placed in groups according to their specific behaviour highlights how doing this or including participants who have combined difference sexual and non-sexual behaviours can distort results. As presented in Table 6.19, in contrast to all other dating and sexual intimacy anxiety factors, young people who reported a sexual offence only had the highest mean and median score. In addition, the mean score and median was higher than analysis of sexual offence group when participants may have reported harmful dating behaviours ($M = 26.50$, $SD = 7.99$, $Mdn = 30$). All other mean and median scores were below midpoint. Young people who reported sexual harmful dating behaviour, non-sexual harmful dating behaviour had very similar sexual behaviour anxiety. Both mean and median scores were nearly 10 higher than young people who reported a non-sexual or generalist offence. The results suggest that, in contrast to previous dating and sexual intimacy factors, young people who report a sexual offence may have higher sexual behaviour anxiety than other
participants. However, young people who report harmful sexual dating behaviour may only have higher sexual behaviour anxiety than young people who report a non-sexual or generalist offence. Again, the results highlight differences between young people who report harmful dating behaviour and young people who report an offence, which may be distorted when participants are placed in the same group.

### Table 5.19

<table>
<thead>
<tr>
<th>Group</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>Mdn</th>
<th>Min</th>
<th>Max</th>
<th>% of Total N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Offence</td>
<td>6</td>
<td>30.33</td>
<td>4.92</td>
<td>31.50</td>
<td>21</td>
<td>34</td>
<td>11</td>
</tr>
<tr>
<td>Sexual HDB</td>
<td>6</td>
<td>23</td>
<td>5.29</td>
<td>22.50</td>
<td>16</td>
<td>30</td>
<td>11</td>
</tr>
<tr>
<td>No Harm</td>
<td>21</td>
<td>22.10</td>
<td>8.94</td>
<td>22</td>
<td>8</td>
<td>37</td>
<td>38</td>
</tr>
<tr>
<td>Non-Sexual HDB</td>
<td>2</td>
<td>22</td>
<td>2.83</td>
<td>22</td>
<td>20</td>
<td>24</td>
<td>4</td>
</tr>
<tr>
<td>Generalist HDB</td>
<td>5</td>
<td>21</td>
<td>8.52</td>
<td>23</td>
<td>11</td>
<td>32</td>
<td>9</td>
</tr>
<tr>
<td>Non-Sexual Offence</td>
<td>12</td>
<td>14.25</td>
<td>7.34</td>
<td>11</td>
<td>8</td>
<td>31</td>
<td>22</td>
</tr>
<tr>
<td>Generalist Offence</td>
<td>3</td>
<td>13.33</td>
<td>4.73</td>
<td>15</td>
<td>8</td>
<td>17</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>55</td>
<td>19.51</td>
<td>7.40</td>
<td>20</td>
<td>7</td>
<td>35</td>
<td>100</td>
</tr>
</tbody>
</table>

### 5.16.1 Sexual Behaviour Anxiety: Midpoint Analysis.

Despite significant differences a much lower number of participants reported sexual behaviour above midpoint than for other sexual intimacy anxieties. Twenty-three participants (30%, \( n = 13 \) female, \( n = 10 \) male) reported sexual behaviour anxiety above midpoint (\( M = 30.43, SD = 3.44, Mdn = 31 \)). This represents 29% of all females and 31% of all males in the study. As with analysis that included all participants, there was no significant difference in
the mean sexual behaviour anxiety scores between males \((M = 29.80, SD = 3.88)\) and females \((M = 30.92, SD = 3.12)\), \(t(21) = -.77\), two tailed \(p = .45\).

There was however, a small increase in effect size from \(d = .1\) to \(d = .3\). Fifty-four participants \((70\%, n = 32\) female, \(n = 22\) male\) reported sexual behaviour anxiety below midpoint \((M = 15.24, SD = 4.96, Mdn = 15)\). As with participants above midpoint, there was no significant difference in sexual behaviour anxiety scores between males \((M = 14.59, SD = 4.79)\), and females \((M = 15.69, SD = 5.10)\), \(t(52) = -.796\), two tailed \(p = .43\) and a small effect size \((d = .2)\).

Thirteen participants above midpoint \((57\%, n = 9\) male, \(n = 4\) female\) reported one or more form of harmful sexual behaviour. This represents 35% of all young people who reported harmful sexual behaviour in the study. Eight participants \((35\%, n = 4\) female, \(n = 4\) male\) reported harmful sexual or generalist dating behaviour. This represents 33% of all young people who reported harmful sexual dating behaviour. Seven participants \((30\%, n = 6\) male, \(n = 1\) female\) reported a sexual or generalist offence, representing 35% of all young people who reported a sexual offence. Two female participants, \((9\%)\) of 19 \((11\%)\) reported non-sexual harm. Eight participants \((35\%, n = 7\) female, \(n = 1\) male\) of 21 \((38\%)\) reported no harm.

Within the HDB group above midpoint, three of the 12 participants \((25\%, n = 2\) male, \(n = 1\) female\) reported sexual HDB and five of the 12 participants \((42\%, n = 3\) female, \(n = 2\) male\) reported generalist HDB. Fifteen of 42 \((36\%, n = 9\) female, \(n = 6\) male\) reported no harm. No participants who
reported non-sexual harmful dating behaviour had a sexual behaviour anxiety score above midpoint. Due to no non-sexual HDB participants and the very small number of sexual and generalist participants above midpoint, a meaningful one-way analysis of variance was not possible.

Within the offence groups above midpoint, six of the 10 participants (60%, n = 5 male, n = 1 female) reported a sexual offence and one male of 10 participants (10%) reported a generalist offence. Four of 22 participants (18%, n = 2 female, n = 2 male) reported a non-sexual offence above midpoint and 12 of 35 participants (34%, n = 10 female, n = 2 male) reported no offence. Due to the generalist offence group having only one participant a one-way analysis of variance was not possible.

A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups above midpoint was not possible as there were only two participants in the non-sexual harm group.

A one-way analysis of variance for harmful dating behaviour participants below midpoint found no statistical significance between groups, $F(3,50) = 1.07, p = .36$. However, the effect size calculated using eta squared increased to a medium effect ($\eta^2 = .06$). Young people who reported sexual HDB had the highest mean sexual behaviour anxiety score below midpoint ($M = 17.56, SD = 4.04, Mdn = 19$). Young people who reported non-sexual HDB had slightly lower mean score ($M = 16, SD = 4.64, Mdn = 15$). Young people who reported generalist HDB ($M = 14.43, SD = 5.06, Mdn = 14$) and young
people who reported no HDB ($M = 14.37$, $SD = 5.27$, $Mdn = 14$) reported the lowest mean sexual behaviour anxiety scores.

A one-way analysis of variance for offence groups below midpoint found a statistical significant difference between means, $F(3,50) = .3.80$, $p = .02$. Despite the variances being significantly equal, $F = 3.80$, $p = .10$, Scheffe’s test did not identify any significant differences between offence groups below midpoint. However, as presented in Table 5.20, a Games Howell test found that young people who reported no offence had significantly higher mean sexual behaviour anxiety score ($M = 17.22$, $SD = 5.41$, $Mdn = 19$, $p = .03$) than young people who reported a generalist offence ($M = 12.67$, $SD = 3.12$, $Mdn = 14$). However, despite similar mean score differences for young people who reported a sexual offence ($M = 18$, $SD = 4.02$, $Mdn = 19.50$) and young people who reported a non-sexual offence ($M = 13.39$, $SD = 4.10$, $Mdn = 14$) no more significant differences were found. Due to the small number of participants and discrepancies between Scheffe’s test and Games-Howell test, these results should be treated with caution. Despite this, a similar medium practical significance effect size was found ($\eta^2 = .19$).
<table>
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<tr>
<th>(I) Offence Group</th>
<th>(J) Offence Group</th>
<th>Mean Difference (I-J)</th>
<th>Std. Error</th>
<th>Sig.</th>
</tr>
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<td>2.332</td>
<td>.986</td>
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<td></td>
<td>Non-Sexual</td>
<td>4.611</td>
<td>2.259</td>
<td>.298</td>
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<td>Generalist</td>
<td>5.333</td>
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<td>No-Offence</td>
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<td>3.829</td>
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<td>4.551*</td>
<td>1.544</td>
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<tr>
<td>Non-Sexual</td>
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<td>2.259</td>
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<td>1.431</td>
<td>.957</td>
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<td>Non-Sexual</td>
<td>-4.551*</td>
<td>1.544</td>
<td>.033</td>
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Note: * The mean difference is significant at the .05 level

A one-way analysis of variance between sexual harm, non-sexual harm and no harm groups below midpoint found no significant difference between means, $F(2,51) = 1.04$, $p = .36$. Young people who reported no harm had the highest mean score ($M = 16.38$, $SD = 5.77$, $Mdn = 18$). Young people who reported sexual harm ($M = 15.58$, $SD = 4.39$, $Mdn = 15$) only had higher sexual behaviour anxiety than young people who reported non-sexual-harm ($M = 13.88$, $SD = 5.09$, $Mdn = 13$). This was reflected in a smaller effect size ($\eta^2 = .04$) to that when all participants were included in analysis. ($\eta^2 = .09$).
5.17 Summary of Results

Results from correlation analysis support the hypothesis that higher dating anxiety is significantly associated with higher sexual intimacy anxiety, $r(75) = .80$, $p < .001$. In addition, the results found a strong relationship between the two variables accounting for 64% of shared variance. Hence, young people who reported higher scores of dating anxiety also reported higher scores of sexual intimacy anxiety. Sub-factors were also significantly correlated. However, the relationship between variables was stronger for fear of negative evaluation than social distress. Hence, higher scores of fear of negative evaluation about dating and higher fear scores of fear of negative evaluation were significantly correlated $r(75) = .78$, $p < .001$, accounting for 61% of shared variance. Higher scores of social distress about dating were significantly correlated with higher scores of social distress about sexual intimacy $r(75) = .65$, $p < .001$, accounting for 42% of shared variance.

Young people who reported high sexual behaviour anxiety also reported high dating and sexual intimacy anxiety. Hence, higher scores of sexual behaviour anxiety were also associated with higher dating anxiety ($r(75) = .49$, $p < .001$, accounting for 24% of the shared variance. Higher scores of sexual behaviour anxiety were strongly associated with higher sexual intimacy scores anxiety, $r(75) = .58$, $p < .001$, accounting for 34% of the variance. This suggests that sexual behaviour anxiety may have a stronger relationship with sexual intimacy anxiety than with dating anxiety. However, when these results compared to strength of the relationship
between dating anxiety and sexual intimacy anxiety, young people may associate stronger anxieties between a potential dating relationship and a potential sexually intimate relationship, than between a potential dating relationships and actual sexually intimate behaviours. However, controlling for sexual experience increased the strength of the relationship between sexual behaviour anxiety and dating anxiety, \( r(75) = .52, p < .001 \).

However, there was only a small significant relationship between higher scores of partnership anxiety and higher scores of dating anxiety, \( r(30) = .38, p = .03 \), accounting for only 5% of shared variance. No significant relationship between partnership anxiety and sexual intimacy anxiety was found, \( r(75) = .19, p = .10 \). The results suggests that anxieties about actually being in a romantic dating relationship are not as strongly associated with potential dating and sexual intimacy anxieties as anxieties about being in an actual sexually intimate relationship.

Further analysis highlights potential differences in strength and significance that require further consideration. Results found a positive correlation between all variables analysed for both males and females. Whilst no significant differences were found between males and females, strength and significance of the relationship between variables did differ. The results found a strong significant relationship between dating anxiety and sexual intimacy anxiety fear of negative evaluation - dating and fear of negative evaluation - intimacy, social distress - dating and social distress - intimacy and sexual intimacy anxiety and sexual behaviour anxiety for both males and
females. A strong significant relationship was found between dating anxiety and sexual behaviour anxiety for males. However, there was only a medium relationship for females. A Pearson correlation coefficient between partnership anxiety with dating anxiety and sexual intimacy anxiety found a medium significant relationship between the variables for males only \( r(30) = .42, p = .02 \). However, a Spearman’s rho correlation found the relationship to be non-significant. The results suggest that the relationship between higher scores partnership anxiety may be more strongly related with dating and sexual intimacy anxiety for males.

In addition the results suggest that there may be differences in the strength and significance the relationship between young people who report sexual harm, young people who report generalist harm, young people who report non-sexual harm and young people who report no harm, within and between the offence and harmful dating behaviour groups. For example, significant relationships between variables for all anxiety factors were only found only young people who reported a non-sexual offence. No significant relationship between any of the anxiety factors was found for young people who reported harmful non-sexual dating behaviours. Indeed, there was no significant relationship between partnership anxiety and dating or sexual intimacy for all harmful dating behaviour groups. A significant relationship between sexual behaviour anxiety with dating anxiety and sexual intimacy anxiety was only found for young people who reported no harmful dating behaviour. Whilst the results do need to be treated with caution due to the
small participants numbers, the differences are regular enough to warrant discussion.

The mean score for overall dating anxiety was above the results from the Glickman and La Greca study, although still below midpoint. A comparison of other factors with percentage of young people above midpoint for overall dating anxiety (35%, \( n = 27 \)), found a higher percentage above midpoint for fear of negative evaluation dating (44%, \( n = 34 \)), social distress about dating (39%, \( n = 30 \)), overall sexual intimacy anxiety (45%, \( n = 35 \)), fear of negative evaluation about intimacy (43%, \( n = 33 \)) and social distress about sexual intimacy (44%, \( n = 34 \)). A slightly lower percentage was above midpoint for sexual behaviour anxiety (30%, \( n = 23 \)). A much lower percentage was above midpoint for social distress-group (9%, \( n = 12 \)) and partnership anxiety (18%, \( n = 14 \)).

The potential for differences between offence and harmful dating behaviour groups extends to one-way analysis of variance between young people who reported harmful sexual behaviour, young people who reported non-sexual harmful behaviour, young people who reported generalist behaviour (sexual and non-sexual harm) and young people who reported no harm. The hypothesis that young people who harm sexually have higher sexual behaviour anxiety was the only factor that found significant differences when all participants were included in the analysis. As presented in section 6.16, Scheffe's test found that young people who reported a sexual offence, \( (M = 26.50, SD = 7.99, Mdn = 30) \) had significantly higher sexual behaviour
anxiety than young people who reported non-sexual offence, \( (M = 15.82, SD = 6.23, Mdn = 15, p = .005) \) and young people who reported a generalist offence, \( (M = 14.80, SD = 7.38, Mdn = 14, p = .01) \). In addition, they were the only group with a mean score above the midpoint of 24. This suggests that young people who reported a sexual offence may have higher anxieties about actual sexual contact in a sexually intimate relationship than young people who report a non-sexual offence or a generalist offence. In addition to the significant differences between offence groups, effect size calculated using eta squared found a high medium practical significance \( (\eta^2 = .22) \).

However, although young people who reported a sexual offence had a higher mean sexual behaviour anxiety score than young people who reported no offence, no significant differences were found. In addition, young people who reported harmful sexual dating behaviour had a mean score below midpoint \( (M = 20.08, SD = 5.82, Mdn = 19.50) \), very similar to young people who reported generalist harmful dating behaviour \( M = 20.75, SD = 9.04, Mdn = 20.50 \), and young people who reported no harmful dating behaviour, \( (M = 20.40, SD = 9.39, Mdn = 19) \).

Hence, when combined with the low mean scores of young people who reported a generalist offence, the mean score for young people who reported sexual harm (offence, harmful dating behaviour or sexual and non-sexual harm) was much lower and below midpoint, \( (M = 20.70, SD = 8.13, Mdn = 19) \). However, young people who reported no harm \( (M = 22.10, SD = 8.94, Mdn = 22) \) did have significantly higher sexual behaviour anxiety than young
people who reported non-sexual harm \( (M = 15.42, SD = 6.78, Mdn = 15, p = .04) \). A medium effect size was found \( (\eta^2 = .09) \).

No significant differences were found between groups for all anxiety factors above midpoint. However, significant differences were found between groups below midpoint. Indeed, more significant differences were found between young people who reported dating or sexual intimacy anxiety below midpoint than above midpoint or when all participants were included in analysis. All results involved young people who had reported sexual or generalist harmful dating behaviour or sexual harm having significantly higher dating or sexual intimacy anxieties than other groups.

Young people who reported generalist harmful dating behaviour (HDB), \( (M = 56.29, SD = 5.15, Mdn = 57.50) \) had significantly higher dating anxiety mean scores than young people who reported no HDB \( (M = 42.78, SD = 13.87, Mdn = 45) \) and young people who reported non-sexual HDB \( (M = 41, SD = 10.45, Mdn = 41.50) \). In addition a large practical significance was found \( (est. \hat{\eta}^2 = .28) \). Also, young people who reported harmful sexual dating behaviour \( (M = 18.78, SD = 3.07, Mdn = 20) \) had significantly higher social distress about dating than young people who reported no harmful dating behaviour \( (M = 13.04, SD = 5.10, Mdn = 11) \). A similar effect size was found \( (\eta^2 = .2) \).

Young people who reported sexual harm, that is harmful dating behaviour or sexual offence alone, in combination with each other or non-sexual harm \( (M = 51.44, SD = 11.93, Mdn = 55) \) had significantly higher dating anxiety
below midpoint than young people who reported non-sexual harm \((M = 40, SD = 12.08, Mdn = 40.50, p = .025)\). In addition there was a medium effect size \((\eta^2 = .2)\). Young people who reported sexual harm \((M = 23.94, SD = 5.88, Mdn = 26)\) and young people who reported no harm \((M = 23.62, SD = 5.32, Mdn = 26)\) had significantly higher fear of negative evaluation than young people who reported non-sexual harm \((M = 17.67, SD = 4.76, Mdn = 18)\). In addition the effect size calculated using eta squared, \((\eta^2 = .22)\), suggests that harm group had a high medium effect on the results.

Despite non-significant results, a pattern emerged that suggests young people who report harmful sexual or harmful generalist dating behaviour may have higher dating and sexual intimacy anxieties than young people who do not. When all participants were included in analysis, results found that young people who reported sexual or generalist harmful dating behaviour had the highest mean anxiety score for all factors except sexual behaviour anxiety (which was the sexual offence group). Young people who reported generalist harmful dating behaviour had the highest mean scores of all eight groups for all dating anxiety factors. All mean scores were on or above midpoint except social distress group and partnership anxiety. Below midpoint, young people who reported generalist harmful dating behaviour had significantly higher dating anxiety than young people who reported no harmful dating behaviour and non-sexual harmful dating behaviour. Young people who reported harmful sexual dating behaviour had the highest mean scores of all eight groups for all sexual intimacy anxiety factors, except sexual behaviour anxiety. All mean scores were above midpoint. Below midpoint, young people who reported
harmful sexual dating behaviour had significantly higher social distress about dating than young people who reported no harmful dating behaviour.

Specific behaviour analysis found young people who reported harmful sexual dating behaviour had the highest anxiety for all factors, all above midpoint, except partnership anxiety and sexual behaviour anxiety. Young people who reported generalist harmful dating behaviour had the second highest mean score, (on or above midpoint), for overall dating anxiety and dating anxiety sub-factors and social distress about sexual intimacy. Results also found a mean score above midpoint for overall sexual intimacy anxiety.

In contrast, mean scores for young people who reported a generalist offence were not above midpoint for any of the dating or sexual intimacy anxiety factors measured in the study. When all participants were included in analysis for the offence group, results found they had the lowest mean score for all sexual intimacy factors, including sexual behaviour anxiety, and social distress - group. In addition young people who reported generalist offence had significantly lower sexual behaviour anxiety than young people who reported a sexual offence. They had the second lowest mean score for overall dating anxiety, fear of negative evaluation dating and partnership anxiety. Analysis for specific behaviours found young people who reported a generalist offence had the lowest mean anxiety score for every factor except partnership anxiety. All mean scores were below midpoint.
When all participants were included in analysis, sexual behaviour anxiety was the only factor where young people who reported a sexual offence had a significantly higher mean score than other groups and was above midpoint. However, it was not significantly higher than young people who reported no offence. In addition, sexual behaviour anxiety was the only factor (except partnership anxiety where the score was very similar), that young people who reported a sexual offence had a higher mean score than young people who reported no offence.

Young people who reported no offence had the highest mean anxiety score within the offence group all factors except partnership anxiety and sexual behaviour anxiety. However, they only had mean scores just above midpoint for fear of negative evaluation - dating, social distress - dating, fear of negative evaluation - intimacy and social distress-intimacy. Despite this, young people who reported no offence had significantly higher sexual behaviour anxiety than young people who reported a non-sexual offence. In contrast, young people who reported no harmful dating behaviour had lower anxieties than young people who reported sexual or generalist HDB for all factors. All were below midpoint. Specific behaviour analysis found young people who reported no harm had the second or third mean scores for all anxieties. The mean scores were on or above midpoint for fear of negative evaluation - dating, overall sexual intimacy anxiety, fear of negative evaluation - intimacy and social distress - intimacy.
When all participants were included in the group, young people who reported non-sexual harm, in both the offence and harmful dating behaviour groups, frequently had the lowest mean anxieties. Within the offence group, young people who reported a non-sexual offence had the lowest mean score for overall dating anxiety and all dating anxiety sub-factors and partnership anxiety. Young people who reported a non-sexual offence had the second lowest sexual behaviour anxiety, just above young people who reported a generalist offence. Young people who reported non-sexual harmful dating behaviour had the lowest mean score of all groups in the study for overall dating anxiety, fear of negative evaluation when dating, social distress about dating, and social distress about intimacy. Within the harmful dating behaviour group, they had the lowest mean anxiety for every factor except social distress - group and partnership anxiety.

Analysis for specific behaviour groups found that young people who reported a non-sexual offence had lower mean anxiety scores than all other groups except young people who reported a generalist offence for every factor except partnership anxiety. In this case, they had the lowest mean score. All mean scores were below midpoint. Young people who reported non-sexual harmful dating behaviour just above young people, who reported a non-sexual offence for overall dating anxiety, fear of negative evaluation - dating and social distress - dating, all below midpoint. However, they had the highest mean partnership anxiety score, on midpoint. They also had a mean fear on negative evaluation - intimacy on midpoint.
Young people who reported generalist harmful dating behaviour reported mean scores more similar to young people who reported sexual rather than non-sexual harmful dating behaviour for all anxiety factors except for partnership anxiety. Young people who reported a generalist offence reported mean scores more similar to young people who reported a sexual rather than non-sexual offence for five of the nine anxiety factors. They were overall dating anxiety, fear of negative evaluation dating, social distress - dating, overall sexual intimacy anxiety and fear of negative evaluation about sexual intimacy. Sexual behaviour anxiety was the only factor where results found a mean score more similar to young people who reported a non-sexual offence. Results found young people who reported a generalist offence had very similar scores to young people who reported a sexual offence or non-sexual offence for social distress-group and social distress about sexual intimacy.

Females reported higher mean scores than males for every anxiety factor measured. Females reported significantly higher dating anxiety, social distress - dating, sexual intimacy anxiety, fear of negative evaluation about sexual intimacy and social distress about sexual intimacy than males. This suggests that females may have higher dating and sexual intimacy anxiety than males. In addition, the impact of gender differences should be considered when discussing any similarities or difference between or within offence and harmful dating behaviour groups. A one-way ANOVA to find significant differences between young people who reported being victim of no harmful dating behaviour, young people who reported being a victim of non-sexual harmful dating behaviour, young people who reported being a victim of
sexual harmful dating behaviour and young people who reported being victim of generalist harmful dating behaviour. However, no significant differences were found.

Therefore, despite the limitations discussed in the introduction to this chapter, the results found a consistent pattern of high or low anxiety scores within and between offence and harmful dating behaviour groups to which attention should be drawn. Furthermore, there is a pattern, which suggests young people who report non-sexual harm, in particular a non-sexual offence, or a generalist offence have much lower anxieties than other groups, including young people who report no harm. This raises questions about the extent to which potential dating anxiety, potential sexual intimacy anxiety, anxieties about being involved in a partnership or actually being sexually intimate differ for different groups of young people and why.

Therefore, the results presented here, both significant and non-significant, have raised many questions about the future of dating anxiety, sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety. To that extent the results achieve the exploratory aims of the study. The following chapter will interpret the results in more details, discuss the implications for future research and practice and make proposals for future development. Limitations of the study and how they may be overcome in future research are also discussed.
Chapter 6

Discussion
6.1 Introduction

This study had two main aims. First, this study aimed to explore whether higher dating and sexual intimacy anxiety and related sub-factors may be positively correlated. Dating anxieties included fear of negative evaluation and social distress about being in a potential dating relationship, social distress in a group of males and females and actually being in a relationship (partnership anxiety). Sexual intimacy anxiety included fear of negative evaluation and social distress about potential sexual intimacy and anxiety about actual sexual contact (sexual behaviour anxiety). The second aim was to explore whether young people who report harmful sexual behaviour, (as an offence or harmful dating behaviour), may have higher dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety than young people who reported no harm, non-sexual harm, or sexual and non-sexual harm (generalists).

It was intended that that the results of this study may identify the strength of any association between dating and sexual intimacy anxieties. Consequently the results may inform how dating and sexual intimacy impact on each other within the five feature dating and sexual intimacy framework, as described in the Introduction to this thesis, and expand on existing knowledge of dating anxiety. In addition, the results from comparative data may contribute to knowledge similarities and differences in levels of dating and sexual intimacy anxieties between young people who report harmful sexual, non-sexual, generalist or no harm, in or out of a dating relationship.
The results found a strong significant positive relationship between dating anxiety and sexual intimacy anxiety. Therefore, the results support the hypotheses that higher levels of dating anxiety are associated with higher levels of sexual intimacy anxiety. Strong significant positive associations were also found for fear of negative evaluation and social distress. Hence, higher levels of fear of negative evaluation and social distress about potential romantic dating relationships were also associated with fear of negative evaluation and social distress about potential sexually intimate relationships.

However, the association between potential and actual dating and sexual intimacy anxieties were less clear. A strong significant positive association was found between sexual behaviour anxiety and sexual intimacy anxiety. Therefore, young people who reported higher sexual behaviour anxiety may also have higher sexual intimacy anxiety. A weaker medium significant association was found between sexual behaviour anxiety and dating anxiety. However, controlling for sexual experience increased the strength of the relationship. Therefore, whilst young people who reported high sexual behaviour anxiety may also have higher dating anxiety, the relationship is weaker than it is with sexual intimacy anxiety. Furthermore, levels of sexual experience may be influencing the level of anxiety. Results for partnership anxiety found only a small positive association with dating anxiety and no association with sexual intimacy anxiety.

As with the results from Glickman and La Greca (2004), the mean scores for overall dating anxiety, fear of negative evaluation, social distress -
dating and social distress - group for this study were all below midpoint. However, mean scores for overall dating anxiety, fear of negative evaluation and social distress - dating when all participants were included in the study, for all offence, harmful dating behaviour and harm groups were higher than the mean scores found by Glickman and La Greca. Results for social distress - group found much higher mean scores for all groups except young people who reported a sexual offence, a generalist offence and non-sexual harm. Only young people who reported a generalist offence had a similar mean score to the mean scores from Glickman and La Greca study for all dating anxiety factors. Therefore the results may support proposals by Glickman and La Greca (2004) and Chorney and Morris (2008) that some dating anxiety may be normal.

The higher mean scores may be related to the purposive data collection from young people in Children’s Secure Units, harmful sexual behaviour projects and community youth projects. In contrast, the US study by La Glickman and Greca recruited school participants, mainly from middle class socio-economic backgrounds. This study did not collect data on socio-economic background and the study by Glickman and La Greca did not collect data on reports of offence or harmful dating behaviour. Therefore no direct comparison can be made. However, young people who are not in mainstream education, have a history of criminal behaviour or have instigated harmful dating behaviour have been associated with lower socio-economic backgrounds and have more complex needs (e.g. dysfunctional family environment, drugs and alcohol misuse, poor mental health and victimisation),
(Wood, Barter & Berridge, 2011). Therefore, the extent to which these factors impact on levels of dating anxiety requires more research.

There is no previous research to compare ‘normal’ levels of sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety to. As the mean score for dating anxiety was above the results from the Glickman and La Greca study, supporting previous research that suggests some dating anxiety may be normal, the percentage of young people for dating anxiety above midpoint in this study may be used as a guide to compare other factors. Thus, 35% \( (n = 27) \) were above midpoint for overall dating anxiety, 44% \( (n = 34) \) for fear of negative evaluation and 39% \( (n = 30) \) for social distress about dating. Only 9% of participants \( (n = 12) \) were above midpoint for social distress - group. In comparison, 45% of participants \( (n = 35) \) were above midpoint for overall sexual intimacy anxiety, 43% \( (n = 33) \) for fear of negative evaluation about sexual intimacy and 44% for \( (n = 34) \) for social distress about sexual intimacy. Thirty per cent of participants \( (n = 23) \) were above midpoint for sexual behaviour anxiety. The percentage of participants above midpoint for partnership anxiety \( (18\%, n = 14) \) was much lower. Therefore, the results suggest that some sexual intimacy anxiety and sexual behaviour anxiety may also be normal. Also, more young people may have higher anxieties about potential sexual intimacy than potential dating, actual sexual contact and being in a relationship. The need for more research to establish an agreement on what may be ‘high’ or ‘low’ anxiety and what normal levels of adolescent dating anxiety, sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety is discussed in section 6.5.
The results found that young people who reported a sexual offence had significantly higher sexual behaviour anxiety than young people who reported a non-sexual offence and young people who reported a generalist offence. In addition, six of the 10 participants (60%) had a sexual behaviour anxiety score above midpoint in comparison to one of the 10 participants (10%) reported a generalist offence, four of the 22 participants (18%) who reported a non-sexual offence and 12 participants (34%) of young people who reported no offence. Although young people who reported a sexual offence did have higher sexual behaviour anxiety than young people who reported no offence, no significant differences were found.

Despite no significant differences within offence and harmful dating behaviour groups for partnership anxiety, dating anxiety and sexual intimacy anxiety when all participants were included in the analysis, a pattern emerged to which attention should be drawn for further discussion. Young people who reported either harmful generalist dating behaviour or harmful sexual dating behaviour had the highest mean scores of all groups in the study for every factor except sexual behaviour anxiety. The pattern may highlight potential differences between young people who report an offence and young people who report harmful dating behaviour and between the reports of different types of behaviour (i.e. sexual, non-sexual, generalist, no harm).

Five of the 12 participants (42%) who reported harmful generalist dating behaviour were above midpoint for overall dating anxiety and seven of the 12 participants who reported harmful generalist dating behaviour (58%)
were above midpoint for social distress - dating. This was a larger percentage than all other groups. Therefore, future research may examine the anxieties that young people who report harmful sexual and non-sexual dating behaviour together may have about a potential dating relationship, in particular inhibition and distress while interacting with a potential date.

Although analysis for differences between groups for young people who reported an anxiety score above midpoint did not find any significant differences, significant differences were found below midpoint. All differences involved young people who reported harmful sexual or generalist dating behaviour or the sexual harm group (all participants who reported any form of harmful sexual behaviour), having higher dating or sexual intimacy anxieties than other groups. In addition, high and medium effect sizes were found. Of particular interest was that young people who reported harmful generalist dating behaviour had significantly higher overall dating anxiety and social distress about dating than young people who reported no harmful dating behaviour. A strong effect size was found for both factors. No firm conclusion can be drawn due to the small number of participants in each group.

The remainder of this chapter expands on the associations between dating anxiety and sexual intimacy and the comparative similarities and differences between sexual harm, generalist harm non-sexual harm and no harm groups, offence and harmful dating behaviour. Significant differences between females and males, why they may exist and how they may have influenced the results are explored. The implications for research and
practice, including the integrated approach to dating and sexual intimacy and a five feature dating and sexual intimacy framework proposed in the Introduction chapter are discussed. Limitations of the study, how they were overcome or may be overcome in future research are explored throughout this chapter.

6.2 Associations between Dating Anxiety and Sexual Intimacy Anxiety

The results found a strong and significant association between higher scores of overall dating anxiety and higher scores of overall sexual intimacy anxiety. Therefore, young people who have high anxiety about potential dating relationships may also have high anxiety about potential sexual intimacy. Strong significant associations were also found suggesting that young people who reported higher fear of negative evaluation about dating may also have higher fear of negative about sexual intimacy, and young people who have higher social distress about dating may also have higher social distress about sexual intimacy. The relationship between variables was stronger for fear of negative evaluation than for social distress. Therefore, there may be a stronger association for young people between anxieties about the subjective aspects of anxiety (e.g. worries or concerns about being evaluated negatively) in potential dating and sexual intimacy situations than for avoidance, distress and discomfort in potential dating and sexual intimacy situations.
However, the association between anxieties about potential dating and sexual intimacy and anxieties about actually being a relationship and sexual contact were less clear. Hence, a medium strength significant association was found between higher scores of dating anxiety and higher scores of sexual behaviour anxiety. This suggests that young people who have high anxieties fear of negative evaluation and social distress in potential dating situations may also have high anxieties about performing actual sexual contact behaviours such as kissing, touching and fondling under and over clothes, dry sex, being seen naked, mutual masturbation, and oral sexual intercourse. However, in contrast to all other anxiety associations, controlling for sexual intimacy experience increased the level of strength between variables to a strong relationship. This suggests that the amount of sexual experience a young person has may impact on the interaction between dating anxiety and sexual behaviour anxiety. However, controlling for sexual experience did not impact upon the strength of the relationship between sexual intimacy anxiety and sexual behaviour anxiety.

Future research may examine whether the expectation of sexual intimacy in a relationship (Collins, 2003), pressure to engage in sexual activity within a potential relationship (NSPCC, 2006; Lashbrook, 2000; Ungar, 2000), coupled with the amount of sexual experience a young person has may impact more upon dating anxiety. For example, a young person who fears being evaluated negatively by a potential romantic partner negatively may avoid dating, may experience distress and discomfort in a group of males and females and around potential partners because of the amount of sexual
experience they have. This may highlight how important engaging in sexual behaviours within a dating relationship is for some young people. Dating experience was not reported in this research. However, previous research (e.g. Coleman & Hendry, 1999) suggests that young people who date less frequently may have less sexual intimacy experience.

Therefore, coupled with the expectation of sexual intimacy within the relationship, a combination of dating experience and sexual intimacy experience may be more important for anxieties about a potential romantic dating relationship than potential sexual intimacy. Alternatively, many of the young people who participated in this research were from projects where the young people had a history of sexually risky behaviour, including sexual activity outside of a committed relationship. Therefore, future research may examine the possibility that sexual experience may not impact so much on the strength of the association between anxieties about potential sexual intimacy and anxieties about engaging in sexual behaviours.

Another explanation may be that social distress when in a group of males and females was not included in the measure of overall sexual intimacy anxiety. Therefore, future research may examine the role of social distress about personal levels of sexual experience when in a group of males and females on anxieties about a potential dating relationship and anxieties about actually engaging in sexual behaviours.
Perhaps not surprisingly, a strong significant association was found between young people who reported higher sexual behaviour anxiety and young people who reported higher sexual intimacy anxiety. Also, not surprising was that association between variables was stronger for sexual intimacy anxiety than for dating anxiety. Therefore, the results suggest that young people who have high anxieties about the subjective aspects of sexual intimacy such as being evaluated negatively and avoidance, distress and discomfort in potential sexual intimacy situations may also have high anxieties about performing actual sexual contact behaviours. Furthermore, the results suggest that high anxieties about potential sexual intimacy and engaging in actual sexual behaviours are more strongly related for young people than anxieties about being in a potential dating relationship.

The association between potential dating and sexual intimacy anxieties, and actually being in a dating relationship were not as strong as engaging in actual sexual behaviour. A small significant association was found between high levels of partnership anxiety and high levels dating anxiety. Hence, perhaps not surprisingly, young people who have high anxieties about a potential dating relationship may also have high anxieties about fears of rejection and low levels of trust in a dating relationship. No significant association was found between partnership anxiety and sexual intimacy anxiety. Again, this may be related to measures of sexual intimacy anxiety excluding social distress in a group of males and females. The small effect size and low or lack of significant association may be due to an increasing confidence about personal skills and abilities in a relationship.
Future research may examine whether having already overcome the potential pressures and anxieties to establish a relationship, young people may feel less anxious about developing and maintaining it.

Associations between dating anxiety and sexual intimacy anxiety for offence, harmful dating behaviour and harm groups were complex. The results suggested a difference in strength, significance and direction within and between groups. However, the results need treating with extreme caution due to the small number in each participants group. Therefore, significant differences between groups could not be examined.

The significance and the strength of the relationship between dating and intimacy anxiety supports an increasing body of research that contradicts previous notions of adolescent dating as a low ranking transitory period into adulthood (Collins, 2003; Furman, 2002). It also supports proposals that dating and sexual intimacy development may be meaningfully inter-related during adolescence (Bancroft, 2006; Coleman & Hendry, 1999; Collins, 2003; Miller & Benson, 1999). Furthermore, the differences in the significance and strength of association between potential dating and sexual intimacy anxieties and actual dating and sexual intimacy anxieties coupled with the potential impact of sexual experience suggests that dating anxiety scales and sexual intimacy anxiety scales may not be measuring the same thing.

Future research may benefit from a larger participant group, with the ability to develop adolescent dating anxiety, sexual intimacy anxiety, sexual
behaviour anxiety and partnership anxiety scales using factor analysis. This may help to identify the association between each of the anxieties more clearly. It may also contribute to the integrated approach to dating and sexual intimacy development, as discussed in the Introduction. Therefore, research and practice may explore the role of the two factors (dating and sexual intimacy) as functioning separately to each other with the potential to interact within a dating relationship.

The potential for gender and group differences highlighted in the results suggest that individual factors may also be impacting on the strength of the associations. Further research to establish this possibility is also required. However, if supported it may further contribute to a multi-factorial approach to dating and sexual intimacy, how these anxieties impact upon normal dating and sexual intimacy development, dating avoidance, the psychosocial and psychosexual benefits and risks associated with adolescent development. This knowledge may contribute the suggestion by Glickman and La Greca (2004) that more research into how other factors may contribute to dating anxiety, and to Collins (2003) proposal that an increased number of negative interactions may contribute to dysfunctional dating and sexual intimacy behaviour.
6.3 Anxiety Levels in Sexual Harm, Generalist Harm

Non-Sexual Harm and No Harm Groups

As discussed in the introduction to this chapter, when all participants were included in the analysis, the results found that young people who reported a sexual offence had significantly higher sexual behaviour anxiety than young people who reported a non-sexual offence and young people who reported a generalist offence. They were the only group in the study above the midpoint of 24. In addition a high medium effect size was found ($\eta^2 = .22$). Therefore, young people who report a sexual offence may have higher anxiety about engaging in sexual contact behaviours than young people who report a non-sexual offence or young people who report generalist offence.

However, although young people who reported a sexual offence had a higher mean sexual behaviour anxiety score than young people who reported no offence, no significant difference was found. Therefore, young people who report a sexual offence may not have higher anxieties about engaging in contact sexual behaviours than young people who report no offence. In addition, young people who reported harmful sexual dating behaviour had a much lower mean sexual behaviour anxiety score than young people who reported a sexual offence, very similar to young people who reported harmful dating generalist behaviour, harmful non-sexual dating behaviour and no harmful dating behaviour, all below midpoint. Therefore, the hypothesis that young people who harm sexually may have higher sexual behaviour anxiety is not supported for young people who report harmful sexual dating behaviour.
However, when the four participants who also reported harmful dating behaviour were removed from the sexual offence group, the mean score increased from $M = 26.50$, $SD = 7.99$ to $M = 30.33$, $SD = 4.92$. Of the four participants who were removed from the sexual offence group, three also reported harmful sexual dating behaviour and one reported harmful generalist dating behaviour. When participants who reported harmful dating behaviour were removed from the no offence, non-sexual offence and generalist offence groups there was very little change in mean scores. Furthermore, when the six participants who reported an offence were removed from the harmful dating sexual behaviour groups, there was only a small increase in mean score from $M = 20.08$, $SD = 5.82$ to $M = 23$, $SD = 5.29$. This was only slightly higher than the mean score for the 21 young people who reported no offence and no harmful dating behaviour ($M = 22.10$, $SD = 8.94$).

There was very little change for other harmful dating behaviour groups. In contrast to young people who reported a sexual offence or harmful sexual dating behaviour, both non-sexual HDB and generalist HDB groups had mean scores above young people who reported a non-sexual offence or a generalist offence. Therefore, young people who report a sexual offence may have higher anxieties about sexual contact in a dating relationship than young people who do not. However, young people who harm sexually in a dating relationship may not experience the same level of sexual behaviour anxiety as young people who report an offence.
Not surprisingly, when young people who reported harmful sexual behaviour and/or and harmful generalist behaviour (offence or harmful dating behaviour) were placed in one sexual harm group, the mean score decreased to below midpoint ($M = 20.70$, $SD = 8.13$). In addition, no significant differences were found between them and young people who reported non-sexual harm (offence or harmful dating behaviour) and young people who reported no harm. The only significant difference was that young people who reported no harm had significantly higher sexual behaviour anxiety (although it was just below midpoint), than young people who reported non-sexual harm. A medium effect size was found ($\eta^2 = .09$). The results suggest that young people who do not report any harmful behaviour may have higher anxieties about sexual contact behaviours in a dating relationship. However, this distorts the differences between young people who report a sexual or generalist offence and young people who report harmful sexual or generalist dating behaviour. Therefore, future research (whether in the harmful sexual behaviour or harmful dating behaviour field) needs to be aware that if the true picture is to be found, the methodology may need to account for these potential differences.

The only other factor for which young people that reported a sexual offence had the highest mean score (just below midpoint), in their offence group was partnership anxiety. Only two participants who reported a sexual offence were above midpoint (20%), one of who also reported generalist harmful dating behaviour. Young people who reported a sexual offence had the second highest mean score in the study when all participants were
included and when young people were placed into specific behaviour groups. Sexual behaviour anxiety and partnership anxiety were the only two factors that asked young people to report anxiety in a dating relationship. Therefore, young people who report a sexual offence may have higher anxieties associated with being in a dating relationship including engaging in contact sexual behaviours with a partner, fears of rejection and low levels of trust.

Future research may benefit from examining whether high sexual behaviour and partnership anxiety levels may be related to some of the negative experiences of historical, situational, affective, cognitive and behavioural factors Ryan and Lane (1997) suggest may be associated with young people who harm sexually. Thus, a lack of intimacy skills, lack of sexual knowledge, history of sexual abuse, lack of sexual experience, may increase fears about the consequences of sexual contact. Similarly, a lack of dating knowledge and experience, low self-esteem, poor attachment and social isolation may be increase fears about a partner abusing their trust or humiliation.

However, in direct contrast to the offence group, young people who reported harmful sexual dating behaviour had the lowest partnership anxiety in all harmful dating behaviour and offence groups and second lowest in the specific behaviour group. Future research may examine whether young people who report harmful sexual dating behaviour have lower sexual behaviour anxiety and partnership anxiety because they have experience of being in a dating and sexually intimate relationship. However, the lack of
similar research about possible distinctive historical, situational, affective, cognitive and behavioural factors associated with young people who report harmful sexual behaviour specifically in dating relationships means no inferences may be made from this study. This further highlights the need for more harmful sexual dating behaviour research.

The potential differences in levels of dating anxiety and sexual intimacy anxiety between young people who reported a sexual offence and young people who reported harmful sexual dating behaviour continued in the results for anxieties about potential dating relationships and potential sexual intimacy. However, the findings were the opposite to those of partnership anxiety and sexual behaviour anxiety. That is, young people who reported harmful sexual dating behaviour had the highest mean score of all eight groups for overall sexual intimacy, fear of negative evaluation about potential sexual intimacy and social distress about potential sexual intimacy. All mean scores were above midpoint. As discussed in the introduction to this chapter, results for specific behaviour analysis found young people who reported harmful sexual dating behaviour had the highest mean score, all above midpoint, for every anxiety factor except partnership anxiety and sexual behaviour anxiety.

The differences extended to young people who reported a generalist offence and harmful generalist dating behaviour. Hence, young people who reported generalist HDB had the highest partnership anxiety in the study, (although it was very similar to young people who reported a sexual offence), while young people who reported a generalist offence had the lowest
partnership anxiety in the offence group. However, in contrast to sexual behaviour anxiety, specific behaviour analysis found all groups had very similar mean scores.

Furthermore, young people who reported harmful generalist dating behaviour had the highest mean score of all harmful dating behaviour and offence groups in the study for all dating anxiety factors. All mean scores were on or above midpoint, except social distress - group and partnership anxiety. As discussed in the introduction to this chapter, young people who reported generalist harmful dating behaviour below midpoint had significantly higher dating anxiety than young people who reported no harmful dating and harmful non-sexual dating behaviour. When participants who reported an offence were removed from the harmful generalist dating behaviour group, young people who reported generalist harmful dating behaviour had the second highest levels of anxiety (all on or above midpoint).

In contrast, young people who reported a generalist offence did not have mean scores above midpoint for any of the dating or sexual intimacy anxiety factors measured in the study. When all participants were included in the analysis, young people who reported a generalist offence had the lowest mean score for all sexual intimacy related anxieties and the second lowest mean score for overall dating anxiety, fear of negative evaluation dating and partnership anxiety. Of particular note was that whilst young people who reported harmful generalist dating behaviour had the highest sexual behaviour anxiety, young people who reported a generalist offence had the lowest.
Analysis for specific behaviours found young people who reported a generalist offence had the lowest mean anxiety score for every factor except partnership anxiety. All mean scores were below midpoint.

When all participants were included in the group, young people who reported non-sexual harm, in both the offence and harmful dating behaviour groups, frequently had the lowest mean anxieties. Within the harmful dating behaviour group, young people who reported harmful non-sexual dating behaviour had the lowest mean score for every anxiety factor except social distress - group and partnership anxiety. Even then, they were very close to young people who reported no harmful dating behaviour, which had the lowest mean score in the group. Furthermore, young people who reported harmful non-sexual dating behaviour had the lowest mean score of all groups in the study for overall dating anxiety, fear of negative evaluation when dating, social distress about dating, and social distress about intimacy. Within the offence group, young people who reported a non-sexual offence had the lowest or second lowest mean score for five of the nine factors, (dating anxiety, fear of negative evaluation - dating, social distress - dating, social distress - group, partnership anxiety and sexual behaviour anxiety). In addition, young people who reported a non-sexual offence had significantly lower sexual behaviour anxiety than young people who reported a sexual offence and no offence.

Specific behaviour analysis highlighted potential differences between young people who reported a non-sexual offence and young people who
reported harmful non-sexual dating behaviour. Removing ten participants who also reported harmful dating behaviour, (5 of whom reported non-sexual HDB, 2 sexual HDB and 3 generalist HDB), decreased the mean score for young people who reported sexual offence for all factors except social distress - dating and social distress - intimacy. In contrast, the mean score for young people who reported harmful dating behaviour increased for every factor. Hence, young people who reported non-sexual harmful dating behaviour had higher mean scores than young people who reported a non-sexual offence for two of the nine factors when all participants were included. However, specific behaviour analysis found young people who reported non-sexual HDB had higher anxieties than young people who reported a non-sexual offence for all nine factors.

Analysis for young people who reported no offence, no harmful dating behaviour and the no harm group also highlighted the potential impact of reports of different types of harm on dating and sexual intimacy anxiety levels. Thus, young people who reported no offence had the highest mean score for every anxiety within the offence group except sexual behaviour anxiety and partnership anxiety (which was the sexual offence group). However, only fear of negative evaluation - dating, social distress - dating, fear of negative evaluation sexual intimacy and social distress - sexual intimacy were (just) above midpoint. As previously discussed, they also had significantly higher sexual behaviour anxiety than young people who reported a non-sexual offence.
In contrast, young people who reported no harmful dating behaviour had lower mean scores than young people who reported harmful sexual dating behaviour or harmful generalist dating behaviour for every factor except partnership anxiety and sexual behaviour anxiety. In both cases young people who reported no harmful dating behaviour had a very similar mean score to young people who reported harmful sexual dating behaviour. Furthermore, young people who reported no harmful dating behaviour had a higher mean anxiety score than young people who reported no offence for every factor. In addition, all mean scores were below midpoint.

However, when the 21 young people who reported no harm and no harmful dating behaviour were put into one group, (no harm), the mean scores were very similar to the no offence group. Results found a slight decrease or no change in mean score except fear of negative evaluation about dating. However, for the no harmful dating behaviour group, the mean scores increased for every factor, except partnership anxiety. Consequently, specific behaviour analysis found that young people who reported no harm had the second or third highest mean scores for every factor. Fear of negative evaluation - dating, overall sexual intimacy anxiety, fear of negative evaluation intimacy and social distress intimacy were all on or above midpoint.

6.4 The Gender Divide

The results found no significant difference between males and females for all associations. A strong positive association was found for both males and females between overall dating anxiety and over all sexual intimacy
anxiety, and between the sub-factors fear of negative evaluation and social distress. High anxiety about potential sexual intimacy was also strongly associated with high anxiety about engaging in contact sexual behaviours for both males and females. However, results found a stronger association between high dating anxiety and high sexual behaviour anxiety and between partnership anxiety and sexual intimacy anxiety for males rather than females. Whilst the results can not identify the reason for this, the stronger relationship between potential and actual dating and sexual intimacy anxieties may be related to social and personal perceptions of the pressure on males to initiate and control a dating and sexually intimate relationship, to gain sexual consent and confusion about sexual signals from females (Ryan & Lane, 1991; Sharpe & Thomson, 2005). Therefore, future research may examine how young people perceive gender roles during dating and sexual intimacy, and how that may impact on the associations between potential and actual dating and sexual intimacy anxieties. This may involve longitudinal research. In addition, dating and sexual intimacy anxiety research may compare data between partners.

The results found that females reported higher mean scores than males for every anxiety factor measured. In contrast to the results of Glickman and La Greca (2004), females reported significantly higher overall dating anxiety and social distress about dating. Also, the results did not support findings by Glickman and La Greca that males may experience more distress in a group than females. Furthermore, the results from this study found that females reported significantly higher overall sexual intimacy anxiety, fear of
negative evaluation about sexual intimacy and social distress about sexual intimacy than males. Mean scores for females were on or just below midpoint. No significant differences were found for partnership anxiety or sexual behaviour anxiety. This suggests that females may have higher anxieties about potential dating and potential sexual intimacy than males. In particular they may have inhibitions and distress while interacting with a potential romantic dating partner, or a partner that they may be sexually intimate with, and also concerns that a potential sexual intimacy partner may judge them in a negative way.

Given the different experiences of males and females, (discussed in chapter 2), even during ‘normal’ sexualisation, dating and sexual intimacy development from early childhood, these higher anxieties may not be surprising. For example, Chorney and Morris (2008) suggest that from childhood social and cultural norms, especially the influence of traditional gender roles may increase dating anxiety. Research has also identified gendered sexual arousal, sexual attraction and sexual fantasy, often reflecting traditional images of domination and submission developed during sexual play (Bancroft, 2006; Gold & Gold, 1991; Leitenberg & Henning, 1995). This too, as Chorney and Morris suggest, may lead to dating anxiety.

The findings that females also reported higher sexual intimacy anxiety than males may also potentially be explained by gender differences during dating and sexual intimacy development. For example, research has also found males are more likely than females to report they first had sexual
intercourse out of curiosity or physical drive whereas girls are more likely to say it was because they were in love, being romantic or for other relational reasons (Brook, 2005; Hawes et al., 2010; Moore & Rosenthal, 1992; Sharpe & Thompson, 2005). It may not be surprising then that girls may be more likely to regret the first time they have sexual intercourse, feel misled or disillusioned and that boys are interested more in sex than emotional involvement (Sharpe & Thomson, 2005). In addition to fears of being stereotyped as a slag, girls may face more negative consequences of risky sexual behaviour. For example, they may get pregnant (Wellings et al., 2001) be more likely to be exploited by boyfriends, especially when the boyfriend is older (Wood et al., 2011). Also, although boys are at risk of exploitation, they may feel it does them less harm (Barter et al., 2009; Wood et al., 2011). Therefore, although boys may feel under pressure to meet the demands and expectations of the dominant male, they may have less to lose from engaging in sexual intimacy than girls and therefore have lower anxieties. However, the findings of this research does not identify if these are the reasons behind the significant differences. Therefore future research should examine how the qualitative subjective aspects of gender differences in dating and sexual intimacy development may impact on dating and sexual intimacy anxieties.

The pattern of higher mean anxiety scores in harmful dating behaviour groups may be related to the higher prevalence of females in the sexual and generalist HDB group and in the no harm group. Five of the 20 participants who reported a sexual or generalist offence (25%) were females. However, 14 of the 24 young people who reported sexual or generalist HDB (58%) and 19
of the 21 young people who reported no harm (90%) were female. In addition, all of the young people who reported generalist HDB behaviour only and six of the young people who reported sexual HDB only (67%) were female. This was in contrast to previous research that suggests males are more likely to instigate harmful sexual dating behaviour than females (Barter, et al., 2009; Brook, 2005; Carlson, 1987; Foshee, 1996; Foshee, et al., 2009; Hickman, et al., 2004; Sears, et al., 2007; Wood, et al., 2011).

The higher prevalence rates may also have been a consequence of the purposive data collection. A higher number of participants in this study were not in mainstream education, associated with a history of criminal behaviour and coming from disadvantaged backgrounds, which as Wood, Barter and Berridge (2011) suggest, has been associated with higher prevalence rates of harmful dating behaviour. The confidential self-report method may also have encouraged more young people to report their behaviour, knowing that any report of previously unidentified behaviour would not be shared.

The gender divide demonstrates the need for more comparative research with demographically diverse participants, which considers the impact of gender, culture, and developmental factors on levels of dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety. In order to understand why females may have significantly higher dating and sexual intimacy anxieties than males, a better understanding of the developmental and contextual differences experienced between genders during dating and sexual intimacy development is required. Therefore, future
research may wish to examine the impact of highly gendered biological, psychosocial, and psychosexual development on dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety.

6.5 Implications for Dating and Sexual Intimacy

Research and Practice

The Introduction to this thesis proposed an integrated approach to dating and sexual intimacy development, the complexities of which may be understood within a five feature dating and sexual intimacy framework. The integrated approach brings together research theory, knowledge and practice from the clinical psychology field of harmful sexual behaviour and the welfare field of harmful dating behaviour and current dating and sexual intimacy research to inform and benefit each other. Based upon the knowledge that dating and sexual intimacy development is multi-factorial and inter-related (Bancroft, 2006; Coleman & Hendry, 1999; Collins, 2003; Miller & Benson, 1999), a proposal to expand Collins (2003) five feature framework to include sexual intimacy in and out of dating relationships was made. Therefore, sexually intimate behaviour may be conceptualised as potentially part of but separate to romantic dating.

Each of the five features in dating and sexual intimacy development (involvement, partner selection, content, quality, cognitive and emotional processes) may be positively or negatively impacted by previous experience. Hence, context (e.g. culture and community norms and ideals), age related
variations (e.g. changes in expectations according to age) and individual differences (e.g. timing of romantic and sexual involvement, peer and familial dysfunctions and mental health) significantly impact upon the developmental maintenance of relationships. Also, the five feature framework proposes how adolescent dating and sexual intimacy may be explored alone or in combination with each other, in or outside of a romantic dating relationship, and how multiple factors within dating or sexual intimacy may interact with each other. Hence, this research explored dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety as dynamic factors that may impact on healthy dating and sexual intimacy development and behaviour.

The results of this research support the proposal to extend Collins (2003) original five feature dating framework. That is, there was a strong and significant association between higher anxieties about potential dating relationships and higher anxieties about potential sexually intimacy. The dating and sexual intimacy sub-factors fear of negative evaluation and social distress were also strongly and significantly associated. This suggests that, perhaps not surprisingly, the two factors may be interacting, potentially influencing each other. However, the results also suggest that young people may associate anxieties between potential and actual dating and sexual intimacy differently. This may apply to how dating and sexual intimacy interact within the overall framework and within just romantic dating and just sexual intimacy. For example, perhaps not surprisingly, a strong and significant association between overall sexual intimacy anxiety (potential sexual
intimacy) and sexual behaviour anxiety (actual sexual contact) was found. However, there was a much weaker association between overall dating anxiety (potential romantic relationship) and partnership anxiety (actually being in a romantic dating relationship). Furthermore, a weaker, although still significant association was found between dating anxiety and sexual behaviour anxiety, yet there was no significant relationship between sexual intimacy and partnership anxiety.

In addition, the increase in the strength of association between dating anxiety and sexual behaviour anxiety whilst controlling for sexual intimacy experience suggest other factors may also play role. In particular, the pattern of differences in strength of association between variables, anxiety levels between males and females, between and within offence and harmful dating behaviour groups also suggest that gender may be playing a role.

Chorney and Morris (2008) discuss the need for accurate assessment in relation to treatment for dating anxiety, often done in combination with other problem areas the individual has such as physiological arousal, distorted cognitions, low-self esteem and skills deficits. They also acknowledge that dating anxiety may not be the issue that requires the primary attention. Chorney and Morris suggest that dating anxiety assessment measures should seek to identify the potential underlying factors associated with dating anxiety, as well as the level of anxiety itself. The knowledge that dating and sexual intimacy anxiety are inter-related and that other factors may be influencing anxiety levels suggests that future anxiety scale development may want to
consider anxieties about actually being in a relationship as well as a potential dating relationship. In addition, the strong relationship between dating anxiety and sexual intimacy anxiety suggests that dating anxiety assessment may benefit from the development of a sexual intimacy anxiety scale which could be delivered alongside or separate to a dating anxiety scale.

As previously discussed, future research into the development of such scales would benefit from factor analysis in order to maximise the strength and accuracy of assessment. Scale development should be age appropriate and acknowledge that reading levels for young people may vary greatly. Furthermore, one of the limitations of this study was the confusion over the US style of language used in the dating anxiety scale. Therefore, future research should consider potential language barriers. This also highlights the need for more UK research into dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety.

However, the question remains at what point should we become concerned about a higher than normal level of adolescent dating anxiety, sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety? Also, how is it identified prior to referral for assessment and treatment? Chorney and Morris suggest that dating anxiety may only be identified as part of assessment or treatment when other problem areas are identified first. In the case of this study, that may be a report of a sexual offence, harmful or generalist dating behaviour. Therefore, perhaps most importantly, there is an urgent need to find a general agreement on where the boundaries of high and
low levels of dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety are, what is ‘normal’ and what is not.

Glickman and La Greca (2004) suggest that some dating anxiety in adolescence is normal, although overall mean scores were below midpoint. As the results of this study found also found mean dating anxiety scores below midpoint, but higher than the mean scores of the Glickman and La Greca study, it may be argued that the results of this study support those findings. A comparison of percentage scores above midpoint for this study also found mean scores just below or above midpoint for sexual intimacy anxiety, sexual behaviour anxiety and sexual intimacy anxiety that suggests they too may be normal. However, to what extent they may consider ‘normal’ is unclear for three reasons. First, this is the first study to examine sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety and therefore there is nothing to compare the results to. Second, as discussed in the introduction to this chapter, the purposive data collection may have contributed to higher anxiety scores.

This raises another question. Should we ignore adolescent dating anxiety because it is normal? The same question is equally relevant for sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety. The answer must be no. Research (e.g. Bancroft, 2006; Collins, 2003; Miller & Benson, 1999) and practice (e.g. DfEE 2000; Ward & Gannon, 2006; Wolfe, 2010) have consistently acknowledged the importance of emotional well-being in developing and maintaining healthy adolescent dating and sexually intimate
relationships. In addition, anxieties about dating may be associated with a range of psychosocial and psychosexual problems including depression, low self-esteem, dating avoidance, social anxiety, distorted cognitions and sexual dysfunction. Therefore whilst all the answers are not yet available all young people, whether in mainstream education or not, should be provided with reassurance that some dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety may be normal for them, that their partner may be feeling the same way, and ways they may deal with it.

As discussed in the Introduction to this thesis, there may be opportunities to deliver this information as part of programmes such as personal, social, health and economic education (PSHE), treatment for young people who harm sexually (e.g. the Good Lives Model) and prevention models for harmful dating behavior (e.g. the Fourth R) and on-line (e.g. ChildLine) to provide information and assurances about normal dating and sexual intimacy development, how to develop and maintain a healthy relationship.

However, there is a need to understand more about dating anxiety, sexual intimacy anxiety, partnership anxiety and sexual behaviour anxiety in young people in the context of overall dating and sexual intimacy development for young people. Especially if, as the results of this research imply, the multi-factorial nature of dating and sexual intimacy development and influencing factors on dating anxiety suggest, other experiences may have positive or negative impact.
One of the limitations of this study was that using a quantitative self-report method was not ideal, especially given the eventual small number of participants and the original aim to collect detailed qualitative exploratory data. Young people may have been restricted in their answer or forced an unnatural reply (Barker et al., 2005). Other known limitations of using a self-report method is that participants may deceive themselves, choose not to report socially undesirable behaviour or misinterpret words and meaning of the questions (Barker, Pistrang & Elliott, 2002). For example, the Dating Anxiety Scale (Glickman & La Greca, 2004) used for the study was designed for young people in the United States. It was noted from the first review by young people, the meaning of the word “characteristic” did not transfer well. As pointed out in the Methods chapter, this was changed to ‘agree’ or ‘disagree’ to measure intimacy anxiety. The option to ask questions was always available. However, the issue deserves to be noted. Therefore, future research may explore the developmental context and dynamics of how and why dating and sexual intimacy anxieties may impact on the instigation of harmful sexual behaviour or harmful dating behaviour better through qualitative and participatory research.

In addition to the results from the hypotheses, it is important to note the prevalence of reported harmful sexual behaviour and combination of different types of sexual and non-sexual harm, offence and harmful dating behaviour, often occurring together as this may also have implications for research and practice. Just fewer than 50% of young people had reported at least one form of sexually harmful behaviour. Fifty six (73%) reported one or more form of
offence and/or harmful dating behaviour. Seventeen of the 45 female participants (38%) reported an offence and harmful dating behaviour together. Eleven of the 32 male participants (34%) reported an offence and harmful dating behaviour together. Thirty-seven participants (48%) reported one or more forms of harmful sexual behaviour. A total of seven participants (9%) reported a sexual offence and sexual HDB together.

These results have a number of implications for harmful sexual behaviour and harmful dating behaviour, especially where there is a crossover between harmful behaviours (e.g. sexting, coercion, exploitation, non-consensual sexual activity). First, harmful sexual behaviour research that excludes harmful sexual dating behaviour, intentionally or unintentionally, may be underestimating the true prevalence of sexual specific and generalist subgroup behaviour and vice versa. This may be excluding valuable information for research, for an appropriate response to assessment and to a treatment plan. As the harmful dating behaviour field develops, and more young people may be brought to the attention of services, especially if it is under the domestic violence act, research and practice should consider current knowledge and practice being conducted in the harmful sexual behaviour field.

6.6 Limitations

Limitations regarding the participant numbers, demography, quantitative self-report method, gender differences and scale measurement
and how they may be overcome in future research have been discussed throughout this chapter.

A further limitation of the DAS-A was that it was designed for use in heterosexual partnerships. Although the majority of young people in the study reported being heterosexual, this still requires consideration. In addition, the majority of participants reported their ethnicity as White British.

It has been noted that the total number of participants in the study in particular for sexual and generalist groups was small. However, there were an equal number of reports in the sexual and generalist group for both offence and harmful dating behaviour. The co-occurrence of offence and harmful dating behaviour reporting was acknowledged. Although specific behaviour analysis was successfully carried out highlighting consistent patterns of anxiety levels, the sample was too small for meaningful analysis.

Therefore, as proposed throughout the discussion, future research would benefit from comparative studies with larger samples from a wider demographic background. Methodology and data collection need to consider how young people perceive harmful sexual behaviour, in or out of dating relationships and that it may occur in combination with other forms of harmful behaviour. Furthermore, there may be other factors influencing levels of dating anxiety, sexual intimacy anxiety, sexual behaviour anxiety and partnership anxiety. Qualitative research may help to clarify the context of
dating and sexual intimacy anxieties and how it may differ across subgroups and minority groups further.

6.7 Summary and Conclusions

The Introduction to this thesis lay the foundations for an integrated approach to exploring associations between dating and sexual intimacy anxiety and whether young people who report harmful sexual behaviour, (in or out of a dating relationship) may have higher anxieties about potential dating and sexual intimacy, actual sexual contact and being in a partnership than young people who report no harm, non-sexual harm or generalist harm.

A strong significant association was found between higher levels of anxiety about potential dating relationships and higher levels of anxiety about potential sexual intimacy. Also, strong significant higher levels of fear of negative evaluation about potential dating were associated with higher levels of fear of negative evaluation about potential sexual intimacy and higher levels of social distress about potential dating were associated with higher levels of social distress about potential sexual intimacy. The relationship was stronger for fear of negative evaluation than social distress. The results also suggest that young people who have higher anxiety about sexual contact in a dating relationship may also have anxieties about potential dating and potential sexual intimacy. Young people who reported a sexual offence did have significantly higher sexual behaviour anxiety than young people who reported a generalist non-sexual offence. Whilst no other significant differences were found when all participants were included in analysis, a
pattern emerged suggesting that young people who report harmful sexual or
generalist dating behaviour may have higher dating and sexual intimacy
anxieties than those who do not.

Given the importance of dating and sexual intimacy to young people,
the results that higher levels of overall dating anxiety, fear of negative
evaluation and social distress about potential dating relationships may be
associated with higher levels of sexual intimacy anxiety, fear of negative
evaluation and social distress about potential sexual intimacy may not be
surprising. For similar reasons, the strong significant association between
anxieties about potential sexual intimacy and anxieties about engaging in
actual sexual contact with a partner for young people is also unsurprising. The
weaker yet still significant association was found between sexual behaviour
anxiety and dating anxiety suggests that anxieties about potential romantic
dating relationship and anxiety about actual sexual contact in a relationship
may be associated, but the fears and social distress associated with potential
sexual may be stronger for young people. However, the increase in the
strength of relationship for dating anxiety but not sexual intimacy anxiety
suggests that levels of sexual experience may impact upon the association.

The mean overall dating anxiety, fear of negative evaluation, social
distress - date and social distress - group scores when all participants were
included in the analysis were above those from the Glickman and La Greca
(2004) study. Therefore the results supported previous research that suggests
some dating anxiety in young people may be normal. A comparison for the
number of participants above midpoint suggests that some sexual intimacy anxiety, fear of negative evaluation about sexual intimacy, social distress about sexual intimacy and sexual behaviour anxiety may be also be normal. In addition, more young people may have high anxieties about potential sexual intimacy than potential romantic dating and more anxieties about actual sexual contact in a relationship than actual dating.

What was surprising was that young people who reported a sexual offence only had significantly higher anxiety for only one of all the potential and actual dating anxiety and sexual intimacy factors. Furthermore, no significant differences were found between the groups of young people who reported harmful dating behaviour. However, the increase in mean score when the four participants who also reported harmful dating behaviour were removed from the sexual offence group, the decrease when all participants who reported harmful sexual behaviour were put into one groups and the results of specific behaviour analysis highlight how not accounting for a range of harmful sexual, non-sexual and generalist behaviours may distort the results of potential differences. Despite not being statistically significant, the pattern of results suggests young people who reported sexual specific and generalist harmful dating behaviour may have higher dating and sexual intimacy anxieties than young people who report no harm and non-sexual harm. Furthermore, young people who report harmful dating behaviour may have higher anxieties than young people who report an offence. However, due to the small participant group the results should be treated with caution.
In contrast to previous research by Glickman and La Greca (2004), the results found females had significantly higher overall dating anxiety and social distress about dating. In addition, females had significantly higher overall sexual intimacy anxiety, fear of negative evaluation about sexual intimacy and social distress about sexual intimacy than males. No significant differences were found for sexual behaviour anxiety and partnership anxiety. This suggests that females may have higher anxieties about potential dating and sexual intimacy than males, but may not have significantly higher anxieties about dating and sexual intimacy actually in a relationship. Whilst the results found no significant difference between males and females for all associations, results found a stronger association between high dating anxiety and high sexual behaviour anxiety and between partnership anxiety and sexual intimacy anxiety for males rather than females.

No assumptions are made about the reasons for the results of this study. However, based upon previous research knowledge (e.g. Ryan & Lane, 1997), suggestions have been made that multiple developmental contextual characteristics associated with distinctive historical, situational, affective, cognitive and behavioural factors may be impacting upon the strength of associations and differences in levels of potential and actual dating and sexual intimacy anxieties between young people. Therefore recommendations have been made that future research may benefit from more comparative cross-disciplinary studies that are able to consider the demographic diversity of young people, especially gender, sexual orientation, and a wider range of harmful behaviours, in and out of dating and sexually intimate relationships.
In addition, there needs to be an agreement about what is and what is not a ‘normal’ level adolescent dating, sexual intimacy, sexual behaviour and partnership anxiety, how to reassure young people what is normal, provide coping methods, reduce escalating anxieties, when and how to provide assessment, intervention and treatment for high anxiety. Suggestions have been made that future dating, sexual intimacy, sexual behaviour and partnership anxiety assessment measures should seek to identify the potential underlying factors, as well as the level of anxiety itself, consider age, gender and literacy. Future research into the development of such scales would also benefit from factor analysis in order to maximise the strength and accuracy of assessment. Suggestions of provision using PSHE, harmful dating behaviour, harmful sexual behaviour interventions and on-line support have all been made. However, more qualitative research and practice development, preferably one that works across fields using an integrated approach and considers how adolescent dating and sexual intimacy in and out of dating relationships impact on each other, is required.

Despite limitations and unexpected results, the outcomes of this study succeeded in its aims to explore potential associations between high levels of dating and sexual intimacy anxieties, and identifying potential differences between young people who report harmful sexual behaviour, harmful non-sexual behaviour, harmful generalist behaviour and no harm, in and out of dating relationships. In addition, the differing associations between dating and sexual intimacy anxieties, and the potential influence of factors such as gender or sexual experience suggests that this may be understood within a
multi-factorial five feature dating and sexual intimacy framework. Perhaps most importantly, this study demonstrates how effective using a cross-disciplinary integrated approach, bringing together knowledge from harmful sexual behaviour and harmful dating behaviour fields, can successfully inform and benefit each other and subsequently open up avenues for future research and practice.
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doi:10.1016/j.chiabu.2007.08.005


Appendix 1

The Not So Scary Dating Questionnaire
The (not so scary) Dating Questionnaire!

The following questions are about dating. It is really important for you to answer them as honestly as you can so we can get the best information possible to be right there for young people like you! Anything marked with an * has an explanation at the back of the questionnaire. Remember this is not a test and any answers you give are 100% confidential and cannot be traced back to you, even by the researcher.

As there are a few questions, we’re using a computer and scanner to collect the data – you’ll see circles with letters like this □ in which we’d like you to fill in a bit like this ● (so that you can’t see the letter any more). Don’t make a tick, cross or dash – the scanner won’t pick it up. Don’t worry if you change your mind about your answer after you have filled it in. Just put a cross through it, like this X and fill your new answer in as usual.

First, a bit about you:

1. At what age did you become aware of dating? ......................

2. How important is dating to you?

   *(1 = very important, 5 = very unimportant)*

   □ □ □ □ □

3. Which sex you feel most attracted to?

   □ Opposite sex (heterosexual)
   □ Same sex (homosexual)
   □ Both (bi-sexual)

4. How sure are you of your sexuality, (that you are heterosexual, homosexual or bi-sexual)?

   *(1 = most sure, 5 = least sure)*

   □ □ □ □ □

5. Please tick the answer that most applies to you.

   □ Currently dating
   □ Rarely dating
   □ Usually dating
   □ I have not yet begun dating *(please go to question 7)*

6. At what age did you have your first date? ......................

7. Most of the people I ask out say

   □ Yes
   □ No
   □ I’ve never asked anyone out

8. To most of the people who ask me out, I say

   □ Yes
   □ No
   □ No one has asked me out

9. In a dating relationship, what makes you feel the most confident a date wants to be together with you?

   □ Making me feel cared for
   □ Both of the above
   □ Being intimate together
   □ Something else *(please name)*
10. Please indicate how much you agree with the following statements using the scale below: 
1=disagree very much, 2=disagree slightly, 3=unsure, 4=agree slightly, 5=agree very much

<table>
<thead>
<tr>
<th>Statement</th>
<th>Disagree</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>If my mates have dates but I don’t it makes me feel left out</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I often get nervous if I am not in some kind of dating relationship</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>I feel that I have a lot to offer potential dates but they just don’t want</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>to know</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>I often feel isolated because I think no one wants to date me</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

11. Using the following guide please show which type of relationship you would feel most and least confident in:

A. One night stand (planned or unplanned date whom you did not date again);
B. Brief without commitment (no longer than one month and still free to see other partners);
C. Long term without commitment (longer than one month and still free to see other partners);
D. Brief with commitment (less than one month and dating only that person);
E. Long term with commitment (more than one month and dating only that person);

Most confident: A B C D E
Least confident: A B C D E
About being intimate when you are dating

You may feel a bit embarrassed by some of the questions, but please answer them honestly and remember everything you say is 100% confidential and cannot be traced back to you.

12. How intimate have you been with dates: *(mark all the ones that apply)*

   A. Kissing
   B. Touching and fondling over clothes
   C. Touching and fondling under clothes
   D. Dry sex (stimulating sex over clothes)
   E. Seen naked by your partner
   F. Masturbating each other (getting sexual pleasure by touching each others’ genitals)
   G. Oral sex (stimulating your partner’s genitals with your mouth or tongue)
   H. Sexual intercourse

13. I am going to ask you a few questions about how confident you feel about being intimate. When answering, please think about how confident you would feel about each particular thing this at this time in your life.

   1=very confident, 2=confident, 3=neutral, 4=unconfident, 5=very unconfident

<table>
<thead>
<tr>
<th></th>
<th>Confident</th>
<th>Unconfident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kissing</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Touching and fondling over clothes</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Touching and fondling under clothes</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Being seen naked by your partner</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Dry sex</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Masturbating each other</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Oral Sex</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Sexual Intercourse</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
</tbody>
</table>
14. Sometimes people have worries or concerns about being intimate, (see questions 12 and 13) when they are dating. The following few questions ask about any worries or concerns you may have.

1=disagree very much, 2=disagree slightly, 3=unsure, 4=agree slightly, 5=agree very much

<table>
<thead>
<tr>
<th>Question</th>
<th>Disagree</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am usually nervous being intimate with someone for the first time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am often worried I may look silly or foolish when I am being intimate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am usually worried about the kind of impression I make when being intimate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I think I am too concerned with what people I am intimate with think of me</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel nervous in intimate situations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel tense when I am intimate with someone I don't know very well</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel concerned that a date is forming a negative impression of me when we are being intimate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I become tense and jittery when I think someone wants to be intimate with me</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am frequently afraid that a date will notice my intimacy flaws</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I often worry about the kind of impression I make when being intimate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am afraid that the person I am being intimate with will find fault in what I am doing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am more shy with someone when I think they want to be intimate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I worry what my date will think of me when we are intimate even though I know it doesn’t matter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I enjoy being intimate with a date most of the time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I sometimes get confused how far a dates wants me to be intimate with them</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

That’s all done for intimacy!
15. Read each item carefully, and decide how much the statement is characteristic or true of you. Show HOW MUCH something is true of you, by using the following scale:

1 = Not at all characteristic of me,
2 = Slightly characteristic of me,
3 = Moderately characteristic of me,
4 = Very characteristic of me,
5 = Extremely characteristic of me

<table>
<thead>
<tr>
<th>Statement</th>
<th>Uncharacteristic</th>
<th>Characteristic</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am usually nervous going on a date with someone for the first time</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>I am often afraid that I may look silly or foolish while on a date</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>I worry that I may not be attractive to people of the sex I am attracted to</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>It takes me along time to feel comfortable in a group of both males and females</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>I enjoy dating</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>I am usually worried about what kind of impression I make while on date</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>It is difficult for me to relax when I am with a member of the sex I am attracted to who I do not know very well</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>I think I am too concerned with what members of the sex I am attracted to think of me</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>I feel nervous in dating situations</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>I often feel nervous when talking to an attractive member of the sex I am attracted to</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>I love to go to parties</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>I tend to be quieter than usual when I’m with group of both males and females</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>I feel tense when I’m on a date with someone I don’t know very well</td>
<td>1</td>
<td>4</td>
</tr>
</tbody>
</table>

Continued on next page
1 = Not at all characteristic of me,  
2 = Slightly characteristic of me,  
3 = Moderately characteristic of me,  
4 = Very characteristic of me,  
5 = Extremely characteristic of me

<table>
<thead>
<tr>
<th>Item</th>
<th>Uncharacteristic</th>
<th>Characteristic</th>
</tr>
</thead>
<tbody>
<tr>
<td>I often worry that the person I have a crush on won’t think very much of me</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I love meeting new people</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I often feel nervous or tense in casual get togethers in which both males and females are present</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I am concerned when I think that a date is forming a negative impression of me</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I feel confident in dating situations</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I become tense and jittery when I feel that someone of the sex I am attracted to is checking me out</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I am frequently afraid that the person I have a crush on will notice my flaws</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Parties often make me anxious and uncomfortable</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I often worry about what kind of impression I am making on members of the sex I am attracted to</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I am afraid that the person I am dating will find fault with me</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I am more shy with someone of the sex I am attracted to</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I think that most people find me to be attractive</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I worry what my date will think of me even when I know it doesn’t make any difference</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
</tbody>
</table>
Sometimes people find it useful to ask questions and talk about all sorts of problems.

The following question looks at problems you and your date might have together.

16. In the event of any of the issues listed below happening, please indicate how likely you would be to talk to your date about it.
   *1=very likely, 2=likely, 3=neutral, 4=unlikely, 5=very unlikely*

<table>
<thead>
<tr>
<th>Likely</th>
<th>Unlikely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Argument or disagreement with a parent</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Argument or disagreement with a friend</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Argument or disagreement with each other</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Being intimate with each other</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Being physically violent against each other</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

17. Your partner has told you they are going out, but he/she doesn’t ask you to go along. Could you please mark *Yes, No, Maybe* to each of the following statements:

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Maybe</th>
</tr>
</thead>
<tbody>
<tr>
<td>I would be confident that they were telling me the truth about what they were doing</td>
<td>①</td>
<td>②</td>
</tr>
<tr>
<td>I would hope that they had a nice time</td>
<td>①</td>
<td>②</td>
</tr>
<tr>
<td>I would feel relaxed about it</td>
<td>①</td>
<td>②</td>
</tr>
<tr>
<td>I would try to stop them going</td>
<td>①</td>
<td>②</td>
</tr>
<tr>
<td>I would feel jealous</td>
<td>①</td>
<td>②</td>
</tr>
<tr>
<td>I would feel lonely</td>
<td>①</td>
<td>②</td>
</tr>
<tr>
<td>I would check up on them that they were telling the truth</td>
<td>①</td>
<td>②</td>
</tr>
<tr>
<td>I would feel that they were going out without me to deliberately hurt me</td>
<td>①</td>
<td>②</td>
</tr>
<tr>
<td>I would feel insecure about our relationship</td>
<td>①</td>
<td>②</td>
</tr>
<tr>
<td>I would feel that I had done something wrong</td>
<td>①</td>
<td>②</td>
</tr>
<tr>
<td>I would feel nervous that they might cheat on me because I am not there</td>
<td>①</td>
<td>②</td>
</tr>
</tbody>
</table>
The following questions ask about things that may have happened to you with your partner while you were having an argument.

18. Please indicate Yes, Sometimes, Never to each of the following statements.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Yes</th>
<th>Sometimes</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>I would pretend to change my attitudes and behaviour to suit my date, even if I disagreed</td>
<td>☑️</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td>It is OK for my date to regularly put me down in a hurtful way</td>
<td>☑️</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td>It is OK for my date to be violent in a harmful way towards me</td>
<td>☑️</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td>It is OK for my date to force me to do things I don’t want to</td>
<td>☑️</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td>It is OK for my date to force me to be intimate with them when I don’t want to</td>
<td>☑️</td>
<td>☐️</td>
<td>☐️</td>
</tr>
</tbody>
</table>

19. Please indicate Yes, Sometimes, Never to each of the following statements.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Yes</th>
<th>Sometimes</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is OK for me to my date put my down in a hurtful way</td>
<td>☑️</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td>It is OK for me to be violent in a harmful way towards my date</td>
<td>☑️</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td>It is OK for me to force my partner to do things they don’t want to</td>
<td>☑️</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td>It is OK for me to force my partner to be intimate with me when they don’t want to</td>
<td>☑️</td>
<td>☐️</td>
<td>☐️</td>
</tr>
</tbody>
</table>

20. Have you ever been in a dating relationship where your partner harmed you in any of the following ways?

<table>
<thead>
<tr>
<th>Harmful Action</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turning friends against you, spreading bad rumours</td>
<td>☑️</td>
<td>☐️</td>
</tr>
<tr>
<td>Deliberate threats to hit, throw, hurt, frighten, destroy something of worth</td>
<td>☑️</td>
<td>☐️</td>
</tr>
<tr>
<td>Jealousy, put downs, flirting with others, tracking where you are, what you are doing</td>
<td>☑️</td>
<td>☐️</td>
</tr>
<tr>
<td>Actual shoving, punching, kicking, throwing, hurting, slapping</td>
<td>☑️</td>
<td>☐️</td>
</tr>
</tbody>
</table>
21. Have you ever been in a dating relationship where you harmed your partner in any of the following ways?

<table>
<thead>
<tr>
<th>Action</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turning friends against them spreading bad rumours</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Deliberate threats to hit, throw, hurt, frighten, destroy something of worth</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Jealousy, put downs, flirting with others, tracking where you are, what they are doing</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Actual shoving, punching, kicking, throwing, hurting, slapping</td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

Please mark your best estimate of how often these things have happened with your current or ex dates in the past year. Please remember that all answers are confidential. As a guide use the following scale:

- **Never**: this has never happened in your relationship (s)
- **Seldom**: this has happened only 1-2 times in your relationship (s)
- **Sometimes**: this has happened about 3-5 times in your relationship (s)
- **Often**: this has happened 6 times or more in your relationship (s)

<table>
<thead>
<tr>
<th>Event</th>
<th>Never</th>
<th>Seldom</th>
<th>Sometimes</th>
<th>Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>I touched them sexually when they didn't want me to</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>They touched me sexually when I didn't want them to</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>I forced them to have sex when they didn't want to</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>They forced me to have sex when I didn't want to</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>I threatened them in an attempt to have sex with them</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>They threatened me in an attempt to have sex with me</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>I kissed them when they didn't want me to</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>They kissed me when I didn't want him to</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
</tbody>
</table>

Almost there...
22. Please indicate how much you agree with the following statements using the scale below:
1=disagree very much, 2=disagree slightly, 3=unsure, 4=agree slightly, 5=agree very much

<table>
<thead>
<tr>
<th>Statement</th>
<th>Disagree</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel that I am a person of worth, at least on an equal plane as others for dating</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I feel that I have a number of good dating qualities</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>All in all I am inclined to think that I am a failure when it comes to dating</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I am able to do dating as well as most other people my age</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I feel I do not have much to be proud of dating wise</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I take a positive attitude towards myself and dating</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>When it comes to dating on the whole I am satisfied with myself</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I wish I could have more respect for myself when dating</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>When it comes to dating I certainly feel useless</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>At times I think I am no good at all at dating</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
</tbody>
</table>

And finally, we know that every young person is different, with different experiences and different needs.

It might be that some things influence how you feel about dating, even if you aren’t aware of them!

To give all young people the very best advice and support for them as an individual it would help if you could answer the final few questions.

*If you see an asterisk like this * above a word or phrase please have a look at the guidelines at the back of the questionnaire before you answer. Remember the answer can’t be traced to you!

23. Your age: ...........................

24. Your gender:  

   M  Male  
   F  Female

25. Ethnicity: (which ethnic group you identify with i.e. Black, White British, Indian):

...................................................................................................................................
26. Are you currently diagnosed with any mental or physical illness (s) i.e. Depression, ADHD, Epilepsy, Cancer, paralysis etc? (if yes please state which).


................................................................................................................................

27. Please indicate how important you feel, using the scale below:

I=not very important, 2=somewhat important, 3=important, 4=very important

<table>
<thead>
<tr>
<th></th>
<th>Not important</th>
<th>Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>As part of my family I feel</td>
<td>1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>As part of my friendship group I feel</td>
<td>1 2 3 4</td>
<td></td>
</tr>
</tbody>
</table>

28. Please indicate if you have committed any of the following offences, whether you have been charged or not.

It is important you check the guidelines at the back of the questionnaire, be honest and remember no one else; including the researcher will be able trace your answers back to you.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non Violent Offence*</td>
<td>☑</td>
<td>☐</td>
</tr>
<tr>
<td>Violent Offence*</td>
<td>☑</td>
<td>☐</td>
</tr>
<tr>
<td>Non–Contact Sexual Offence*</td>
<td>☑</td>
<td>☐</td>
</tr>
<tr>
<td>Contact Sexual Offence*</td>
<td>☑</td>
<td>☐</td>
</tr>
</tbody>
</table>

29. Could you please mark 1, 2 or 3 to each of the following things which you may have experienced?

I=experienced in the past 12 months, 2=experienced more than 12 months ago. 3=never experienced

<table>
<thead>
<tr>
<th></th>
<th>In the past 12 Months</th>
<th>More than 12 months ago</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Living with only one parent</td>
<td>1 2 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Living in foster care or in a children’s home</td>
<td>1 2 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Living in a secure institution</td>
<td>1 2 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A family member involved in crime, alcohol, drugs misuse</td>
<td>1 2 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>You witnessed domestic abuse*</td>
<td>1 2 3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
30. Could you please mark 1, 2 or 3 to each of the following things which you may have experienced?

1=experienced in the past 12 months, 2=experienced more than 12 months ago.
3=never experienced

<table>
<thead>
<tr>
<th></th>
<th>In the past 12 Months</th>
<th>More than 12 months ago</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>You misused drugs and/or alcohol</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>You deliberately harmed yourself</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>You attempted suicide</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>You were bullied *</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>You were neglected *</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>You were emotionally abused*</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>You were physically abused*</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>You were sexually abused*</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

31. Could you please mark 1, 2 or 3 to each of the following things which you may have experienced?

1=experienced in the past 12 months, 2=experienced more than 12 months ago.
3=never experienced

<table>
<thead>
<tr>
<th></th>
<th>In the past 12 Months</th>
<th>More than 12 months ago</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>You have friends involved in crime, misuse drugs, alcohol</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>You have friends who bully other people</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>You have friends who are violent towards another person</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>You have friends who are violent towards a date</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

**NOW – the LAST PAGE, only one question to go!!**
32. Please mark the following questions using guide:

1 = disagree very much, 2 = disagree slightly, 3 = unsure, 4 = agree slightly, 5 = agree very much

<table>
<thead>
<tr>
<th>Statements</th>
<th>Disagree</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel that I am a person of worth, at least on an equal plane as others</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I feel that I have a number of good qualities</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
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<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I am able to do things as well as most other people my age</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I feel I do not have much to be proud of</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I take a positive attitude towards myself</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>On the whole I am satisfied with myself</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I wish I could have more respect for myself</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I certainly feel useless</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>At times I think I am no good at all</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
</tbody>
</table>

Thanks loads – you’re a super star!
Appendix 2

Parent Carer Consent Form
Parent/Carer Consent Form.

I am currently carrying out research that involves young people between the ages of thirteen and eighteen years old. With your consent, I would like to invite your child to take part in this research. The study has two main purposes:

1. To understand more about how confident young people feel about dating.
2. To see whether there is any difference between offenders and other young people in terms of how confident they feel about dating.

If a young person consents to take part in the research they will be provided with a confidential questionnaire to complete. Any answers they give cannot be traced back to them. The ID number is only used to link the questionnaire with the consent forms.

The results of this study may help to understand how young people feel about dating. This could aid the development of dating advice and support services available for young people, parents, carers and professionals.

Could you please sign below to authorise your consent and give to your child to return with their questionnaire. Please return this form in the pre-paid addressed envelope provided. If I do not hear from you within one month of the questionnaire being completed I will assume that your consent has been given.

Please note that I hold a Criminal Records Bureau certificate, which confirms I have a no criminal record and am able to work with vulnerable groups. If you have any further questions please do not hesitate to contact me. Thank you for taking time to read this letter.

Signature of consent:________________ Date____________________

Yours sincerely

Debbie Eagle
PhD Postgraduate Researcher - Youth Support
Loughborough University
Dept. Social Sciences
Loughborough
LE11 3TU
E-mail: d.j.eagle@lboro.ac.uk
Appendix 3

Participant Data Form
Demographics
D.O.B: 
GENDER: 
ETHNICITY: 
RELIGION: 
CURRENT PHYSICAL OR MENTAL ILLNESS (S): i.e. Depression, ADHD, Epilepsy, Cancer, paralysis etc

Previous History of Offending (charged and not charged)

<table>
<thead>
<tr>
<th>OFFENCE</th>
<th>YES/NO</th>
<th>AGE (S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burglary (breaking &amp; entering; theft from a dwelling or commercial property)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Criminal Damage/Vandalism (intentionally damaging property of another)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arson (deliberately setting fire to property of another)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Possession of Drugs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dealing Drugs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anti-social Behaviour (behaviour likely to cause distress to others not living in the same property)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threatening Behaviour (causing another to feel concerned about actual or potential risk of violence)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Robbery (seizing property through violence &amp; intimidation)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assault (use of physical force against the will of another)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABH (causing actual bodily harm against the will of another)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GBH (causing grievous bodily harm against the will of another)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Animal Cruelty</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manslaughter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Murder</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact Sexual Offending</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Contact Sexual Offending</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix 4

Semi-Structured Questionnaire

(Pilot Project)
If you are completing the questionnaire on-line, please highlight in bold and underline your answers where you would otherwise be required to tick/circle them.

Unless stated, when answering the following questions I would like you to think about how you feel and what you believe about your dating relationships in general, not just your most recent one. Any use of the term ‘serious’ means a steady relationship dating relationship where you are committed to each other. Any use of the term ‘casual’ means a one night stand or dating relationship where you are not committed to each other.

Section 1

1. What is most important to you right now?
   - PARTNER
   - DATING
   - EDUCATION
   - CAREER
   - FAMILY
   - OTHER

2. Could you please give me three words that you believe describe yourself?
   1. ________________  2. ________________  3. ________________

3. How would you rate your overall confidence most of the time?
   - VERY CONFIDENT
   - CONFIDENT
   - UNCONFIDENT
   - VERY UNCONFIDENT

4. With regards your sexuality, that which sex you are most sexually attracted to, do you believe that you are
   - HETEROSEXUAL (opposite sex)
   - HOMOSEXUAL (same sex)
   - BISEXUAL (both sexes)
   - DON’T KNOW

5. How sure are you feel of your sexuality?
   - VERY SURE
   - SURE
   - UNSURE
   - VERY UNSURE
   - NEITHER SURE OR UNSURE

6. Could you please give me three words that you believe describe how people that may want to date you would see you?
   1. ________________  2. ________________  3. ________________

7. Overall how confident do you feel about dating?
   - VERY CONFIDENT
   - CONFIDENT
   - UNCONFIDENT
   - VERY UNCONFIDENT

8. How important are you as part of your family?
   - VERY IMPORTANT
   - IMPORTANT
   - UNIMPORTANT
   - VERY UNIMPORTANT
   - DON’T KNOW
9. Do you believe when you need your family that they will be there for you?
   □ YES   □ NO   □ SOMETIMES   □ DON'T KNOW

10. How important are you as part of your friendship group?
    □ VERY IMPORTANT   □ IMPORTANT   □ UNIMPORTANT   □ VERY UNIMPORTANT

11. Do you believe when you need your friends that they will be there for you?
    □ YES   □ NO   □ SOMETIMES   □ DON'T KNOW

12. Have your parents set you any boundaries and/or advice about being in relationships, i.e. what type of person you should go out with, where you can go, how intimate you can be?
    □ A LOT   □ SOME   □ NONE

13. Do you stick to
    □ ALL OF THEM   □ SOME OF THEM   □ NONE OF THEM

14. I would like you rate on a scale of 1-5 how much knowledge you have gained about dating and sexual relationships from each of the following?
    □ 1 is the most amount of knowledge and 5 five is the least.
    
    | Type of Source                                      | 1 | 2 | 3 | 4 | 5 |
    |----------------------------------------------------|---|---|---|---|---|
    | Friends                                            |   |   |   |   |   |
    | Parents                                            |   |   |   |   |   |
    | Siblings                                           |   |   |   |   |   |
    | Other family                                       |   |   |   |   |   |
    | Being in dating relationships                      |   |   |   |   |   |
    | Sex and emotional health education lessons         |   |   |   |   |   |
    | Internet chat rooms                                |   |   |   |   |   |
    | Internet web sites                                 |   |   |   |   |   |
    | Pornography                                        |   |   |   |   |   |
    | Reading books and magazines                        |   |   |   |   |   |
    | Films and TV                                       |   |   |   |   |   |
    | Other (please state)                               |   |   |   |   |   |

15. I am going to ask you to answer a few similar questions about to what extent do you believe your friends, family and the media have influenced you and how you deal with dating issues. In each case could you indicate
   a. how influential they have been and whether you and
   b. Whether you believe it affected your self confidence levels about dating in a good or bad way.
Influence:
VERY HIGH (VH)  HIGH (H)  MEDIUM (M)  LOW (L)
VERY LOW (VL)

Affect on dating confidence:
VERY GOOD (VG)  GOOD (G)  MEDIUM (M)  BAD (B)
VERY BAD (VB)

<table>
<thead>
<tr>
<th>Confidence</th>
<th>Influence</th>
<th>Affect on dating confidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friends</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Media</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Attitudes</th>
<th>Influence</th>
<th>Affect on dating confidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friends</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Media</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Behaviour</th>
<th>Influence</th>
<th>Affect on dating confidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friends</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Media</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

16. Have you ever found that relationships with your friends and family suffer in a bad way just because you have boyfriend or girlfriend?

☐ YES  ☐ SOMETIMES  ☐ NO

17. Would you keep a dating relationship a secret from either your friends or family?

☐ YES  ☐ MAYBE  ☐ NO

Dating and Relationship Confidence

1. Do you enjoy dating?

☐ YES  ☐ SOMETIMES  ☐ NO

2. What age were you when you became aware of dating?

______________________________

3. Why do you think people date each other?

______________________________

4. At what age were you when you first became of aware of sex?
5. Why do you think people have sex?

6. How would you rate your dating skills?
   □ EXCELLENT  □ GOOD  □ OK  □ BAD  □ VERY BAD

7. How would you rate your ability to deal with relationship issues?
   □ EXCELLENT  □ GOOD  □ OK  □ BAD  □ VERY BAD

8. What sorts of things do you think makes a good boyfriend/girlfriend?

9. Do you think you make a good boyfriend/girlfriend?
   □ VERY GOOD  □ GOOD  □ OK  □ BAD  □ VERY BAD

10. What do you believe would make someone want to date you?

11. Physically, that is the way you look do you think that you are
   □ VERY ATTRACTIVE  □ ATTRACTIVE  □ UGLY  □ VERY UGLY

12. Emotionally, that is your personality do you think that you are
   □ VERY ATTRACTIVE  □ ATTRACTIVE  □ UGLY  □ VERY UGLY

13. Do you think that potential dates see you in this way too?
   PHYSICALLY: □ YES  □ SOMETIMES  □ NO
   EMOTIONALLY: □ YES  □ SOMETIMES  □ NO

14. When you think about how attractive other people find you does your
    confidence about dating confidence
    □ INCREASE A LOT  □ INCREASE  □ DECREASE
    □ DECREASE A LOT  □ STAY THE SAME

15. Do you tend to get embarrassed or flustered around someone when
    you know they find you attractive?
    □ ALWAYS  □ MOST OF THE TIME  □ RARELEY  □ NEVER

16. Would you be more nervous than usual if someone from a different
    culture was disabled or had different coloured skin to you chatted
    you up?
    □ YES  □ MAYBE  □ NO

17. How do you usually expect to meet new dates?
18. How confident are you to start a conversation with someone who you find attractive?

☐ VERY CONFIDENT  ☐ CONFIDENT  ☐ UNCONFIDENT  ☐ VERY UNCONFIDENT

19. If you chat them up or ask someone out on a date how confident are you that they will be interested in you?

☐ VERY CONFIDENT  ☐ CONFIDENT  ☐ UNCONFIDENT  ☐ VERY UNCONFIDENT

20. Do you ever get your friends to tell someone that you fancy them or to ask them out for you?

☐ ALWAYS  ☐ SOMETIMES  ☐ NEVER

21. Do most of the people you chat up or ask out respond positively?

☐ YES  ☐ ABOUT 50/50  ☐ NO  ☐ NEVER

22. Please circle any of the following you have used to meet dates (If none please go to question 24)

- Internet chat lines
- Personal advertisements
- Speed dating

23. Please circle the reasons why you chose these method(s). You can circle more than one.

- Curiosity
- A bit of fun
- Friends were doing it
- Lacked confidence to ask someone out face to face
- Wanted more dating experience
- Previous dating relationships did not meet your needs
- It is easier and quicker
- Thought that someone will find you attractive for who you are not the way you look
- No one was asking to date you
- You believe that anyone you asked out face to face would have said no
- Other (please state what)

24. Do you feel like everyone around you is dating but you are not part of it? Like you are isolated.

☐ ALWAYS  ☐ MOST OF THE TIME  ☐ RARELY  ☐ NEVER
25. Do you feel that you scare dates away for any reason?
☐ YES  ☐ SOMETIMES  ☐ NO  ☐ DON'T KNOW

26. How does this make you feel about your dating relationships?
☐ VERY CONFIDENT  ☐ CONFIDENT  ☐ UNCONFIDENT
☐ VERY UNCONFIDENT

27. Do you ever feel confused by the messages a person is giving you i.e. whether they are attracted to you or how far they want to go?
☐ ALL OF THE TIME  ☐ SOME OF THE TIME  ☐ NEVER

28. How would you expect a dating relationship to develop from when you first meet for someone your age?
_______________________________________________________

29. Are the majority of your dating relationships
   a) One night stands
   b) Brief (less than one month) without commitment
   c) Brief (less than one months) but serious
   d) Long term (more than one month) without commitment
   e) Long term (more than one month) and serious
   f) A mixture (of what?)

30. From the options listed in questions 29 which type of dating relationship do you ☐ prefer to be in?
A.  B.  C.  D.  E.  F.

31. From the options listed in questions 29, what type of relationship do you ☐ feel most confident in?
A.  B.  C.  D.  E.  F.

32. What makes you feel most confident that your partner wants to be with you?
☐ MAKING YOU FEEL CARED FOR  ☐ BEING INTIMATE  ☐ BOTH
☐ OTHER (please state)

33. If you start a new dating relationship how confident are you that
   a. You will be happy
      ☐ VERY CONFIDENT  ☐ CONFIDENT  ☐ UNCONFIDENT
      ☐ VERY UNCONFIDENT
   b. It will become serious
      ☐ VERY CONFIDENT  ☐ CONFIDENT  ☐ UNCONFIDENT
      ☐ VERY UNCONFIDENT
34. If you are dating how long on average would you expect your relationships to last? ___________________________________

35. Do you feel nervous if you are not in some kind of dating relationship?
☐ DEFINITELY ☐ YES ☐ SOMETIMES ☐ NO

36. Do you ever worry about what others think about you if you are not dating?
☐ ALWAYS ☐ YES ☐ SOMETIMES ☐ NEVER

37. Do you feel that you have a lot to offer people dating you but they just don’t want to know?
☐ ALWAYS ☐ YES ☐ SOMETIMES ☐ NEVER

38. Should another person who is dating be given more respect than you just because they are dating?
☐ DEFINITELY ☐ YES ☐ POSSIBLY ☐ NO

39. How many relationships have you been in that you would consider to have been serious?
NONE 1-5 6-10 11-15 16-20 21-25 25+
(If none please go to question 40)

How old were you when you had your first serious relationship? ___
How old were they? ___
Were you in love with your partner? YES NO DON'T KNOW
Do you believe that they were in love you? YES NO DON'T KNOW
Did you kiss? YES NO
Did it get any more intimate than kissing? YES NO
Did you have sex? YES NO
How long did it last? ___
Were you happy in the relationship whilst it lasted? YES SOMETIMES NO

How did it end? ________________________________________
Do you have any regrets? YES SOMETIMES NO
Did your self confidence about dating increase or decrease, even for a short period after you split up?
INCREASED A LOT INCREASED STAYED THE SAME DECREASED DECREASED A LOT

40. How many relationships have you been in that you would consider to have been serious?
NONE 1-5 6-10 11-15 16-20 21-25 25+
(If none please go to question 41)
How old were you when you had your first relationship like this? ___
How old were they? ___
Did you kiss? YES NO
Did it get more intimate than kissing? YES NO
Did you have sex? YES NO
Do you have any regrets? YES SOME NO
Why did it not develop into a steady relationship? _______________________________________________________

Did your self confidence about dating change, even for a short period due to this experience?
INCREASED A LOT INCREASED STAYED THE SAME
DECREASED DECREASED A LOT

41. Are you currently in a serious relationship? ☐ YES ☐ NO
   If no please go to question 42
   • How did you meet? _____________________________________
   • How long have you been seeing each other? _________________
   • How old are they? _____
   • Are you in love with your partner? YES NO DON'T KNOW
   • Do you believe that they are in love you? YES NO DON'T KNOW
   • Does your partner make you feel confident about yourself in general? YES SOMETIMES NO
   • Do you think it will last? YES NO DON'T KNOW
   • Do you regularly get more intimate than kissing? YES NO
   • Have you had sexual intercourse together YES NO

42. How long ago did your last serious relationship end?
   If you have not previously been in a relationship please go to question 43
   • How did you meet? _____________________________________
   • How long were you seeing each other? _________________
   • How old were they? _____
   • Did your partner make you feel confident during your relationship? YES NO SOMETIMES
   • Were you in love with your partner? YES NO DON'T KNOW
   • Do you believe that they were in love you? YES NO DON'T KNOW
   • Who ended the relationship? THEM ME BOTH
   • How did it affect your confidence about dating when you split up?
      INCREASED A LOT INCREASED STAYED THE SAME
      DECREASED DECREASED A LOT
   • What, if anything could you have done to make this relationship better?________________________________________________

43. Why have most of your relationships in come to an end?
44. How does this made you feel about dating?

45. If you wanted to end a relationship, how confident would you be to tell that person face to face?
   - VERY CONFIDENT
   - CONFIDENT
   - UNCONFIDENT
   - VERY UNCONFIDENT

46. If a partner ended a relationship with you that you didn’t want to end that how sure are you that you that you could cope?
   - VERY SURE
   - SURE
   - UNSURE
   - VERY UNSURE

47. After a serious relationship ends, do you prefer to remain friends with your ex-partner?
   - ALWAYS
   - SOMETIMES
   - NEVER

48. After a casual relationship ends, do you prefer to remain friends with your ex-partner?
   - ALWAYS
   - SOMETIMES
   - NEVER

49. Have you ever been in love?
   - YES
   - NO
   - DON’T KNOW

If no please go to question 50

- How many times have you been in love? _________________
- Did you date this person(s)? YES NO
- How did it make you feel? _________________
- Are you currently in love? YES NO
- Does being in love increase your confidence about dating?
  - ALWAYS
  - YES
  - SOMETIMES
  - NEVER

50. Have you ever told someone you loved them even when you didn’t?
   - YES
   - NO

- Why? _________________
- Did you mean it when you said it? YES NO

51. If you enter a new dating situation whether it is serious or casual, are you always clear in your own mind what you expect to gain from it?
   - ALWAYS
   - YES
   - SOMETIMES
   - NEVER

52. Do you think that your own expectations for your relationships are
   - VERY LOW
   - LOW
   - ABOUT RIGHT
   - HIGH
   - TOO HIGH
53. The following are a list of qualities that you or may not expect of your partner when you are dating in a serious relationship. Based on your personal experience of dating relationships, I would like you to rate how much you expect your partner will actually provide the quality for you. The options are

<table>
<thead>
<tr>
<th>Quality</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>They are attractive</td>
<td></td>
</tr>
<tr>
<td>They are intelligent</td>
<td></td>
</tr>
<tr>
<td>They are confident</td>
<td></td>
</tr>
<tr>
<td>You can freely discuss your interest with them</td>
<td></td>
</tr>
<tr>
<td>You can freely discuss your opinions</td>
<td></td>
</tr>
<tr>
<td>You can trust them</td>
<td></td>
</tr>
<tr>
<td>They will respect you</td>
<td></td>
</tr>
<tr>
<td>They will be physically aggressive towards you</td>
<td></td>
</tr>
<tr>
<td>They will emotionally hurt you</td>
<td></td>
</tr>
<tr>
<td>They will love you</td>
<td></td>
</tr>
<tr>
<td>They will flirt with you</td>
<td></td>
</tr>
<tr>
<td>They will kiss and cuddle you</td>
<td></td>
</tr>
<tr>
<td>They will intimate with you without having sex</td>
<td></td>
</tr>
<tr>
<td>They will want to have consensual sex with you</td>
<td></td>
</tr>
<tr>
<td>They will expect you to be more intimate than you feel comfortable</td>
<td></td>
</tr>
<tr>
<td>If you feel it is getting too intimate they will stop when you say stop</td>
<td></td>
</tr>
<tr>
<td>They will listen to you</td>
<td></td>
</tr>
<tr>
<td>They will want to make you happy</td>
<td></td>
</tr>
<tr>
<td>They will make you feel special</td>
<td></td>
</tr>
<tr>
<td>They will be committed to you</td>
<td></td>
</tr>
<tr>
<td>They will cheat on you</td>
<td></td>
</tr>
<tr>
<td>They will expect you to do what they ask even if it feels wrong</td>
<td></td>
</tr>
</tbody>
</table>

54. Please could you rate how likely it is that your partner could expect to get these things from you, regardless of what they want.

<table>
<thead>
<tr>
<th>Quality</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>You are physically attractive</td>
<td></td>
</tr>
<tr>
<td>You are popular</td>
<td></td>
</tr>
<tr>
<td>You are intelligent</td>
<td></td>
</tr>
<tr>
<td>You are confident</td>
<td></td>
</tr>
<tr>
<td>They can freely discuss their interest with you</td>
<td></td>
</tr>
</tbody>
</table>
They can freely discuss their opinions with you
They can trust you
You will respect them
You will be physically aggressive towards them
You will emotionally hurt them
You will love them
You will flirt with them
You will kiss and cuddle them
You will want to intimate without having sex
You will want to have consensual sex with them
You will expect them to be more intimate than they feel comfortable
If they feel it is getting too intimate and say stop, you will stop
You will listen to them
You will want them to be happy
You will make them feel special
You will be committed to them
You will cheat on them
You will expect them to do what you want even if they think it is wrong

55. How many previous dating experiences have met most of your expectations?
   ☐ ALL  ☐ ALMOST ALL  ☐ ABOUT 50/50  ☐ ALMOST NONE  ☐ NONE AT ALL

56. How confident does this make you feel about dating?
   ☐ INCREASES A LOT  ☐ INCREASES  ☐ STAYS THE SAME  ☐ DECREASES  ☐ DECREASES A LOT

57. Do you have a right to feel happy, cared for and respected in
   A. a serious dating relationship?
      ☐ ALWAYS  ☐ SOMETIMES  ☐ NEVER
   B. a casual dating relationship?
      ☐ ALWAYS  ☐ SOMETIMES  ☐ NEVER

58. If you meet someone and you both know that it will only be casual relationship, how important is it to you that you can trust them?
   ☐ VERY IMPORTANT  ☐ IMPORTANT  ☐ UNIMPORTANT  ☐ VERY UNIMPORTANT

59. Do you expect them to respect you and your wishes during and after your date?
   ☐ YES  ☐ SOMETIMES  ☐ NO
60. Do you ever expect a serious partner to cheat on you?
   - [ ] YES
   - [ ] SOMETIMES
   - [ ] NO

61. Do you ever cheat on your serious partners?
   - [ ] YES
   - [ ] SOMETIMES
   - [ ] NO

62. Do you ever worry that you don’t have the amount of dating experience others expect you to have for your age?
   - [ ] YES
   - [ ] SOMETIMES
   - [ ] NO

63. Do you ever wish that you could have more experience of dating?
   - [ ] YES
   - [ ] SOMETIMES
   - [ ] NO

64. If you date someone who you know has more dating experience than you does it make you feel
   - [ ] VERY NERVOUS
   - [ ] NERVOUS
   - [ ] A LITTLE BIT NERVOUS
   - [ ] NOT NERVOUS AT ALL

65. What is the furthest you have been in dating relationship
   - [ ] KISSING
   - [ ] TOUCHING UNDER CLOTHES
   - [ ] TOUCHING OVER CLOTHES
   - [ ] ORAL SEX
   - [ ] SEX

66. Do you think you have the right amount of intimate and sexual experience for someone of your age?
   - [ ] NOT ENOUGH
   - [ ] A LITTLE BIT LESS
   - [ ] ABOUT RIGHT
   - [ ] A LITTLE BIT MORE
   - [ ] TOO MUCH

67. I am going to ask you a few questions about how confident you would feel about intimacy, in serious relationships and casual relationships. I would like you to answer how confident you would feel about each particular intimacy this at this moment in time.
   - VERY CONFIDENT (VC)
   - CONFIDENT (C)
   - UNCONFIDENT (UC)
   - VERY UNCONFIDENT (VU)

<table>
<thead>
<tr>
<th></th>
<th>SERIOUS</th>
<th>CASUAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kissing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kissing with tongues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Being seen naked by your partner</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Touching and fondling over clothes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Touching and fondling under clothes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dry sex (imitating sex without intercourse)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Masturbating each other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oral Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual Intercourse</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
68. Have you ever felt under pressure to be more intimate in dating relationships than you felt comfortable with by any of the following? Please answer YES SOMETIMES NO

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>SOMETIMES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friends</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dates/Partners</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Media</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

69. Have you ever deliberately watched people being intimate with each other (recorded or live) to make you feel good about yourself? □ YES □ NO

70. Does how intimate you are depend on how confident you feel about the relationship? □ YES □ SOMETIMES □ NO

71. If you had sex for the first time with a new partner do you prefer to talk about it first or just let it happen?

<table>
<thead>
<tr>
<th></th>
<th>Serious Relationship</th>
<th>Casual Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>Talk about it</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Let it happen</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

72. Who would you expect to initiate any intimate or sexual contact between you and a partner? □ ALWAYS THEM □ MAINLY THEM □ 50/50 □ MAINLY ME □ ALWAYS ME

73. Do you believe a good sexual performance is essential for a good relationship to work? □ YES □ SOMETIMES □ NO

74. If you are in a sexual relationship who is responsible for contraception □ YOU □ YOUR PARTNER □ BOTH OF YOU □ I DON'T USE CONTRACEPTION

75. a. Have you ever had a sexually transmitted disease? □ YES □ NO
b. Whether you have answered yes or no, does this increase or decrease your confidence about dating.

☐ INCREASE   ☐ STAY THE SAME   ☐ DECREASE

76. a. Have you ever been pregnant or got someone else pregnant?

☐ YES   ☐ NO

b. Whether you have answered yes or no, does this increase or decrease your confidence about dating.

☐ INCREASE   ☐ STAY THE SAME   ☐ DECREASE

77. I am going to ask you how you might feel if you saw two people in a happy dating relationship

Please tick YES, NO or SOMETIMES to each of the following.

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>SOMETIMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Happy for them</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sad for them</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Happy for yourself</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sad for yourself</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jealous</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Empty</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Angry</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lonely</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

78. What sort of fears and concerns do you have about dating?

___________________________________________________________

79. If you had fears or concerns about any type of dating issue would you feel comfortable to ask advice from a friend?

☐ YES   ☐ NO   ☐ DEPENDS ON THE ISSUE

If you answered ‘depends on the issue’ could you please briefly explain which issues you do or do not feel comfortable speaking about ________________

______________________________________________________________

80. If you had fears or concerns about any type of dating issue would you feel comfortable to ask advice from your parents or carer?

☐ YES   ☐ NO   ☐ DEPENDS ON THE ISSUE

If you answered ‘depends on the issue’ could you please briefly explain which issues you do or do not feel comfortable speaking about?

________________

______________________________________________________________
81. How comfortable would you feel discussing your fears and concerns about your relationship with your partner?

☐ VERY COMFORTABLE  ☐ COMFORTABLE  ☐ UNCOMFORTABLE  ☐ VERY UNCOMFORTABLE  ☐ DEPENDS ON THE ISSUE

If you answered ‘depends on the issue’ could you please briefly explain which issues you do or do not feel comfortable speaking about ________________

82. If someone who was attractive, popular with your friends and everyone wanted to date them asked you out, but you knew they had a reputation for treating their dates badly, would you say yes?

☐ YES  ☐ MAYBE  ☐ NO

83. Would you pretend to change your attitudes and behaviour to suit your partner even if you did not believe that they were right?

☐ YES  ☐ MAYBE  ☐ NO

84. Should you take responsibility for the way a date behaves towards you, regardless of whether their behaviour is good or bad?

☐ ALWAYS  ☐ SOMETIMES  ☐ NEVER

85. How much control (i.e. where you go, what you do, who you see, how intimate you get) would you let your date take?

☐ ALL  ☐ MOST  ☐ HALF  ☐ LESS THAN HALF  ☐ NONE

86. If you could change the amount of control you feel you have in dating relationships would it be

☐ A LOT MORE  ☐ MORE  ☐ LESS  ☐ A LOT LESS  ☐ STAY THE SAME

87. Do you ever deliberately flirt with others to make your partner feel jealous?

☐ YES  ☐ MAYBE  ☐ NO

88. If you are in a serious relationship and you see your partner flirting with someone else does it make you fell any of the following (you can circle more than one)

☒ They are just having fun
☒ You would feel jealous
☒ They will cheat on you
☒ They will finish with you
☒ It is your fault
☒ It is the fault of the other person they are flirting with
☒ You would want to physically hurt your partner
You would want to emotionally hurt your partner
You would want to get revenge on the person that they are flirting with

89. Should your partner be angry with you if you need to spend time or own or with friends alone?
☐ YES ☐ MAYBE ☐ NO

90. Your partner has told you they are going out with some of their friends, but he/she doesn’t ask you to go along. Could you please answer YES, NO, or MAYBE to the following

☐ You would be confident that they were telling you the truth
☐ You would hope that they had a nice time
☐ You would try to stop them going
☐ You would feel jealous
☐ You would call them once to make sure that they were telling you the truth
☐ You would call them more than once to make doubly sure
☐ You would check with friends they were telling you the truth
☐ You would feel that they were going out without you to deliberately hurt you
☐ You deserve it?
☐ You would feel insecure about your relationship
☐ You would feel that you had done something wrong
☐ You would feel nervous that they might cheat on you because you are not there

91. If you have a row with a date, how confident are you to sort it out face to face?
☐ VERY CONFIDENT ☐ CONFIDENT ☐ UNCONFIDENT ☐ VERY UNCONFIDENT

92. Could you please name any other method you would prefer to use?
____________________________________________________________

93. Is it ever Ok for a partner to constantly call you worthless?
☐ YES ☐ SOMETIMES ☐ NO

94. Can violence by date or a partner ever be justified?
☐ YES ☐ SOMETIMES ☐ NO

95. If you are in a serious relationship and your partner is deliberately emotionally, physically or sexually hurting you would you (please circle)
☐ Finish it straight away
☐ Tell your partner to stop or you will leave them
If they do not stop after the first warning, leave them
Seek advice then consider what to do
Carry on as usual

96. Are you currently in a relationship where your partner regularly deliberately hurts you (you can tick more than one)

☐ PHYSICALLY  ☐ EMOTIONALLY  ☐ SEXUALLY
If no please go to question 97

• Do you deserve it? YES MAYBE NO
• Do you regret it? YES MAYBE NO
• On a scale of 1-5 with five being the most confident, how confident were you about dating at the time? 1 2 3 4 5
• During most of you experience(s) were either of you under the influence of drugs or alcohol?
  ME MY PARTNER BOTH OF US
• How did this has affected your confidence in the relationship immediately afterwards?
  INCREASED STAYED THE SAME DECREASED
• Since then has your confidence about dating
  INCREASED STAYED THE SAME DECREASED

97. Has a previous partner or date has ever deliberately hurt you in any of the following ways (you can tick more than one)

☐ PHYSICALLY  ☐ SEXUALLY ☐ EMOTIONALLY
If no please go to question 98

• Did you deserve it? YES MAYBE NO
• Do you regret it? YES MAYBE NO
• On a scale of 1-5 with five being the most confident, how confident were you about dating at the time? 1 2 3 4 5
• Has this happened with more than one partner? YES NO
• During most of you experience(s) were either of you under the influence of drugs or alcohol?
  ME MY PARTNER BOTH OF US
• How did this has affected your confidence in relationship immediately afterwards?
  INCREASED STAYED THE SAME DECREASED
• Since then has your confidence about dating
  INCREASED STAYED THE SAME DECREASED

98. Are you currently in a relationship where you regularly deliberately hurt your date or partner in any of the following ways? (You can tick more than one)

☐ PHYSICALLY  ☐ EMOTIONALLY  ☐ SEXUALLY
If no please go to question 99

• Did they deserve it? YES MAYBE NO
• Do you regret it? YES MAYBE NO
• On a scale of 1-5 with five being the most confident, how confident were you about dating at the time? 1 2 3 4 5
• Has this happened with more than one partner? YES NO
• During most of your experience(s) were either of you under the influence of drugs or alcohol?
  ME MY PARTNER BOTH OF US
• How did this have affected your confidence in relationship immediately afterwards?
  INCREASED STAYED THE SAME DECREASED
• Since then has your confidence about dating increased? 1 2 3 4 5
• Has this happened with more than one partner? YES NO
• During most of your experience(s) were either of you under the influence of drugs or alcohol?
  ME MY PARTNER BOTH OF US
• How did this have affected your confidence in relationship immediately afterwards?
  INCREASED STAYED THE SAME DECREASED
• Since then has your confidence about dating increased? 1 2 3 4 5

99. Have you ever deliberately hurt a date or partner in any of the following ways? (You can tick more than one)
  □ PHYSICALLY □ EMOTIONALLY □ SEXUALLY
  If no please go to question 100
• Did they deserve it? YES MAYBE NO
• Do you regret it? YES MAYBE NO
• On a scale of 1-5 with five being the most confident, how confident were you about dating at the time? 1 2 3 4 5
• Has this happened with more than one partner? YES NO
• During most of your experience(s) were either of you under the influence of drugs or alcohol?
  ME MY PARTNER BOTH OF US
• How did this have affected your confidence in relationship immediately afterwards?
  INCREASED STAYED THE SAME DECREASED
• Since then has your confidence about dating increased? 1 2 3 4 5

100. Have you ever been drunk or on drugs and consented to do something in a serious or casual relationship that you later regretted?
  □ YES □ NO

101. Do you think that your previous experience of dating and relationships has influenced your current confidence about them?
  □ YES □ MAYBE □ NO

102. Do you believe that your attitudes and behaviour towards dating relationships and sex will change as you get older?
  □ YES □ MAYBE □ NO

103. How sure are you that will meet someone and you will both want to stay together for the rest of your life?
  □ VERY CONFIDENT □ CONFIDENT □ UNCONFIDENT
Appendix 5

Definition of Dating, Intimate, Date
Unless the question defines a specific type of dating or intimate relationship, please use the following definitions to answer the questions.

**Dating**: Being in a long or short term relationship, even a one off date with someone you are romantically and/or sexually attracted to. This person means more than just a friend. You may or may not be intimate together.

**Intimate**: Doing one or more of the following things: kissing, touching each other sexually under or over clothes, sexual intercourse. You do not have to have done all of these to be intimate.

**A date**: Meeting up with someone specifically because you are both thinking about starting or are already in a dating relationship. This may be just the two of you or you may be with friends.
Appendix 6

Useful Definitions
*Useful Definitions*

The following bits of information will help you answer some of the questions if you are unclear what the terms mean.

*Non Violent offence*: a crime where you have not physically hurt anyone i.e. stealing.

*Violent offence*: a crime where you have physically hurt somebody, i.e. beating someone up.

*Non-contact sexual offence*: i.e. flashing or exposing your body at others for sexual pleasure; you force someone to watch sexual pictures or videos; you force someone to watch someone do something sexual.

*Contact sexual offence*: i.e. you are sexually intimate with someone 5 years or more years younger than you; you force someone to be touched by you, to touch themselves or someone else; you force someone to have sex.

*Domestic abuse*: aggression or violence that happens in the home when a grown up attacks, threatens, puts down or attempts to control the behaviour of another adult in the family.

*Bullying*: being bullied at school, home or online might involve someone pushing you, hitting you, teasing you, talking about you or calling you names.

*Neglect*: not being looked after or supervised properly. If the people who are supposed to look after you don’t give you the important things you need, or make it hard for you to take care of yourself.

*Emotional abuse*: someone tries to make you feel bad. This can be saying things on purpose to scare you, put you down, humiliate or hurt you.

*Physical abuse*: someone deliberately hurts or injures you. Hitting, kicking, beating with objects, throwing and shaking are all physical abuse, and can cause pain, cuts, bruising, broken bones and sometimes even death.

*Sexual abuse*: you’re being touched in a way you don’t like; you’re being forced to have sex; you’re forced to look at sexual pictures or videos; you’re made to watch someone do something sexual. This can include someone flashing or exposing themselves to you; you’re made to do something sexual to someone that feels uncomfortable or wrong.
Appendix 7

Young Persons Consent Form
Consent Form

I am currently carrying out some research about dating relationships and young people. The results will help understand what young people think about dating and develop better dating advice and support services for others like you. So, it is really important to hear what you think!

If you are happy to take part it would great if you could please complete the confidential questionnaire enclosed with this consent form. It is not a test. There are no right or wrong answers. No information you give will be shared or can be traced back to you by anyone.

If you are happy with this, please sign below to give your consent to take part in this research. Please return the form with your completed questionnaire in the envelope provided.

There is also a consent form for your parent/carer to fill in and return. It is important that they are happy for us to use the information you give. They will not have access to your questionnaire or any other information you disclose. The ID number is only used to link the consent form to the questionnaire.

Signature of consent:__________________ Date__________________

Thanks

Debbie Eagle

ID:
Appendix 8

Contact Details and Further Information

Sheet
Contact Details and Further Support

Thank you for taking part in this research.

If you have any questions about the research you can contact me at the following address:
Deborah Eagle
Loughborough University
Dept. Social Sciences
Loughborough
LE11 3TU
d.j.eagle2@lboro.ac.uk

If you have any fears or concerns about personal issues that you need to discuss, or feel that you need further advice and support the following lines of support may be of use.

1. **ChildLine: 0800 1111 or [www.childline.org.uk](http://www.childline.org.uk).**
   ChildLine offers a wide range of special advice and support for children and young people. This includes information about family, friend and dating relationships, bullying, neglect, abuse, being in care, puberty and sex, to name but a few! Look to ChildLine for anything, you may be surprised at what you find and you will always find someone to listen. The ChildLine phone number is free to call from landlines and most mobile networks. It does not show up on a bill so no one else will know you have called them.

2. **Brook Centre: 0808 802 1234 or [www.askbrook.org.uk](http://www.askbrook.org.uk).** Brook offers free confidential advice and support on sex and relationships issues. They also have local centres around the country. The Brook phone number is free to call from all landline and mobile networks.