



Understanding Intimate Partner Violence and Its Impact on Youth

Key Takeaways

1 UNDERSTANDING INTIMATE PARTNER VIOLENCE

- Intimate partner violence (IPV) is a serious public health problem that describes patterns of physical, sexual, or psychological harm or stalking by a current or former partner.
- IPV affects individuals, families, and communities of all races, classes, religions, and sexual orientations.
- 1 in 3 women and men in the U.S. (80.9 million people) experience contact sexual violence, physical violence, and/or stalking by an intimate partner in their lifetime—many for the first time before age 18.
- IPV intersects with many other public health and structural issues, such as poverty, homelessness, sexual violence, incarceration, human trafficking, gun violence, substance abuse, disability...
- Victims may stay in abusive relationships for many reasons, including feelings of shame, love for an abuser, concern for children, financial dependence on an abuser, being manipulated or controlled...

2 THE IMPACT OF INTIMATE PARTNER VIOLENCE

- IPV is a public health crisis that has significant health, community, and economic impacts across race, sexual orientation, and class. It costs the U.S. economy approximately \$460+ billion each year.
- Research suggests that some groups may be more impacted by IPV than others, and that experiencing other kinds of marginalization or discrimination may compound the effects of abuse.

3 THE IMPACT ON ADOLESCENTS AND YOUNG ADULTS

- Child who witness IPV are more likely to become victims or perpetrators of violence as they get older.
- IPV starts early. 1 in 5 high school girls, and 1 in 10 high school boys, have been physically and/or sexually victimized by a dating partner in the past year.
- Experiencing IPV at a young age can drastically impact an adolescent or young adult across their lifespan.

4 IMPLICATIONS FOR PROVIDERS AND HEALTH CARE SYSTEMS

- Key guidance comes from: The Joint Commission Standard, the Affordable Care Act, the US Preventive Services Task Force, and the National Consensus Guidelines.
- Health care providers may face a number of challenges in adequately identifying and supporting student victims, including a student's reluctance to disclose or a provider's fear of "saying the wrong thing."
- However, health care providers have a unique and critical role to play: offering support, building trust, validating concerns, sharing resources, and ultimately preventing IPV and improving health outcomes.

5 ADDRESSING IPV IN HEALTH CARE SETTINGS

Screening and Assessment:

- Inform students about mandatory reporting requirements and screen all adolescent and adult students regularly—in private, using direct, non-judgmental language.
- The Job Corps informed consent form outlines the limits of confidentiality and mandatory reporting, and the Social Intake Form looks at emotional wellness, relationships, abuse, and traumatic events.
- Some students may also experience sexual violence, whether as part of an abusive relationship or separately. Many of these IPV questions and strategies can still apply in either situation.
- The Job Corps Sexual Assault and Response Team (SART) helps with prevention, counseling, treatment, reporting, and follow-up care. They have a technical assistance guide on the Health and Wellness website.
 - “Has your partner ever tried to hurt you, control you, or make you feel unsafe?”
 - “Do you feel safe around your partner?”
 - “Can you tell me more about what’s going on? I’m really glad you shared that with me.”
 - “I’m sorry this happened to you. This isn’t your fault, and you deserve to be treated with respect.”
 - *Additional examples on HITS, STAT, WAST tools.*

Interventions:

- Inform students about mandatory reporting requirements and assess immediate safety, while listening, validating, and offering non-judgmental resources and options. Encourage referrals for additional support.
- Reminder: any physical assault or threatening behavior is handled by the Job Corps Behavior Management system and would be considered a Level 1 zero-tolerance separation from the program.
 - “What would help you feel safe right now?”
 - “Are there any options you have considered?”
 - “Can I refer you for additional help and support from [*hotline, SART coordinator, etc.*]?”
 - “What’s something you can do today to take care of yourself and stay safe?”
 - *Refer to Wellness for additional support.*

Safety-Planning:

- Encourage students to create a safety plan, especially if they plan to leave an abusive relationship.
- Safety plans might include: contact info for friends or family, documenting abuse, identifying a safe place to go, setting aside money or documents, obtaining a protective order, or blocking an abuser’s number.
- At Job Corps, students can reach out to residential advisors, counselors, staff mentors, or trade instructors.
 - “Do you have someone you can talk to about creating a safety plan?”
 - “How might you stay safe when the fighting starts?”
 - “Is this a relationship you want to stay in? If not, what do you think your options might be?”
 - “Ending an abusive relationship can be dangerous. What precautions can you take to stay safe?”
 - “Would you feel comfortable reaching out to [*hotline, SART, counselor, advisor, etc.*]?”

Reporting:

- Inform students as early in the conversation as possible about your mandatory reporting requirements.
- Reminder: Job Corps has an informed consent form and a zero-tolerance policy for assault or threats.
 - “Before we get started, I want to let you know that I’m required to make a report about...”
 - “If you’re worried about confidentiality, you don’t have to share any information you don’t want to.”
 - “It’s okay if you don’t want to tell me. Could I share some general safety tips with you, just in case?”
 - “If you ever want to report this, I can give you the contact information for [*hotline, SART, law enforcement, etc.*] who can help.”

6 PREVENTING INTIMATE PARTNER VIOLENCE

- There are three levels of prevention: primary, secondary, and tertiary.
- Primary prevention prevents violence before it occurs, at both the individual and societal levels, by changing attitudes and behaviors, and promoting respect, safety, and equity for everyone.
- Secondary prevention includes early intervention to minimize risk and prevent further victimization, and helping survivors identify healthy, safe healing strategies and next steps.
- Tertiary prevention prevents recurrence and restores long-term wellness, by holding abusers accountable and helping survivors follow through with long-term strategies for healing.
- Job Corps has requirements for center-wide prevention activities (i.e. Youth 2 Youth: Partners 4 Peace), as well as violence prevention training in Citrix as part of SafetyNet, and relationship aggression training on the Health and Wellness website.

Resources:

- **Health and Wellness:** technical assistance guide; relationship aggression training
- **HITS:** Hurt, Insult, Threaten, Scream tool
- **SafetyNet:** violence prevention training
- **SART:** Sexual Assault Response Team
- **STAT:** Slap, Threaten, and Throw tool
- **WAST:** Woman Abuse Screening Tool

- **Saving Promise:** 800-774-5760 or betweenus@savingpromise.org
- **National Domestic Violence Hotline:** 1-800-799-7233 or thehotline.org
- **Rape, Abuse, and Incest National Network (RAINN):** 1-800-656-4673 or rainn.org