

Promoting Healthy Relationships and Responding to Adolescent Relationship Abuse in Adolescent Health Programs

"I talk to all my patients about this because we know..."

1 in 5 (20%) U.S. teen girls report having experienced physical and/or sexual violence in an intimate relationship.

(Silverman et al, 2001)



Prevalence



Each year in the U.S. at least 400,000 adolescents experience serious physical and/or sexual violence in a dating relationship.

(Miller, 2009; Wolitzky-Taylor et al, 2008)



48%

The percent of high school and middle school students who experience sexual harassment at school

American Association of University Women, 2011



LGBTQ experiences of violence

- Higher rates of dating and sexual violence and harassment reported by LGBTQ adults
 - Highest rates reported by Trans and Genderqueer people
 - •2nd highest rates reported by Bisexual people
 - Gender of perpetrator predominantly male
- •42.2% of transgender students specifically, and 10.8% of LGBT students overall have been prevented from using their preferred name in school.
- •50% + LGBT students who were harassed or assaulted in school did not report the incident to school staff, they doubted that effective intervention would occur or assumed the situation could become worse upon being reported.

(Breiding et al, 2011; Walters et al, 2013; Landers & Gilsanz, 2009)



Additional Data on ARA

- Youth involved in same-sex dating are just as likely to experience dating violence as youths involved in opposite sex dating
 - Halpern et al, J of Adol Health, 2004
- In youth, perpetrators are equally likely to be female or male
 - Girls more likely to be victims of physical abuse
 - Boys more likely to be victims of psychological abuse
 - Mutual aggression is common
 - Mulford and Giordano, NIJ Journal 2009



Adolescent relationship abuse is rarely identified in clinics serving adolescents, but is common among adolescents seeking clinical services.

(Miller et al, 2010; Asheley & Foshee, 2005; Schoen et al, 1991)



Barriers to Identifying and Addressing ARA

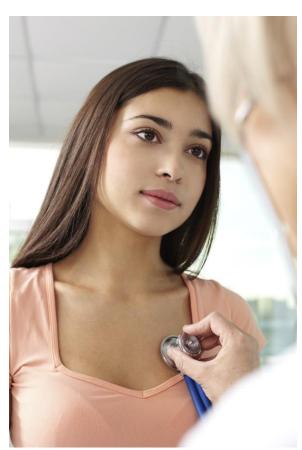
Providers identified the following barriers:

- Comfort levels with initiating conversations with patients about ARA
- Feelings of frustration with patients when they do not follow a plan of care
- Not knowing what to do about positive disclosures of abuse
- Worries about mandatory reporting
- Lack of time



ARA negatively impacts meeting adolescent health program goals such as:

- Reducing unplanned pregnancy
- Preventing sexually transmitted infections
- Reducing unprotected sex
- Promoting health and safety, including mental health





Relationship abuse and dating violence: What is it?

One person in a dating relationship (hooking up, talking to, etc) is using a pattern of methods and tactics to gain and maintain power and control over the other person.

- It is a cycle that gets worse over time not a one time 'incident'
- Abusers use jealousy, social status, mental health, money and other tactics to be controlling and abusive – not just physical violence





Risk Factors

Previous exposure to abuse (child abuse and/or witnessing DV)

Being YOUNG (16-24y.o.)

Substance involvement



Technology as a Tool For Exerting Power and Control

- One in four teens in a relationship report having been called names, harassed, or put down by their partner via cell phone/texting (Zweig et al, 2013)
- One in five teen girls have electronically sent or posted nude/semi-nude photos or videos of themselves (12% of these girls say they felt 'pressured' to do so)



(The National Campaign to Prevent Teen and Unplanned Pregnancy and CosmoGirl.com, 2008)



Cyber Abuse Rarely Happens in Isolation

Technology-based harassment is a red flag for other abuse

- 84% of the teens who report cyber abuse said they were also psychologically abused by their partners
- 52% say they were also physically abused
- 33% say they were also sexually coerced (Zweig et al, 2013)





Adolescent Relationship Abuse and Mental Health

Young women who have experienced abuse have higher rates of:

- Depression and anxiety
- Disordered eating
- Suicidality
- Substance abuse



(Kim-Godwin YS, et al, 2009; Howard DE, et al, 2008; Brossarte RM, et al, 2008; Ackard DM & Neumark-Sztainer D, 2002)



ARA and Mental Health

- Victims of physical and sexual partner violence are more likely to:
 - Report sadness, hopelessness or suicidal ideation.
 - Over 50% of youth reporting both physical and sexual violence in their relationship also reported attempting suicide.
 - Bossard et al, 2008; Ackard et al, 2003





It got so bad, I tried to kill myself. I tried jumping off the bridge, and stuff like that; cause I just couldn't deal with it anymore. I couldn't deal with it. I stopped talking to all my friends. I had a ton of friends from [my hometown], and I wasn't allowed to talk to any of them.



Youth who experience sexual dating violence are more likely to:

- Initiate sex before age 15
- Have had sexual intercourse with 4 or more people
- Use alcohol or drugs before sex
- Have a past or current sexually transmitted infection
- Report inconsistent use or nonuse of condoms
- Have a partner with known HIV risk
 factors (Kim-Goodwin et al, 2009; Wu et al, 2003; Silverman et al, 2001)





Unintended Teen Pregnancy

Adolescent girls in physically abusive relationships were 3.5 times more likely to become pregnant than non abused girls.

(Roberts et al, 2005)





Abuse During & After Pregnancy



Pregnant adolescents are 2-3 times more likely to have experienced violence during and after pregnancy than older pregnant women.

(Parker et al, 1993)



Rapid Repeat Pregnancy

Adolescent mothers who experienced physical abuse within three months after delivery were nearly twice as likely to have a repeat pregnancy within 24 months than nonabused mothers.

(Raneri & Wiemann, 2007)





Defining Reproductive Coercion

Reproductive Coercion involves behaviors that a partner uses to maintain power and control in a relationship that are related to reproductive health:

- Explicit attempts to impregnate a partner against her wishes
- Controlling outcomes of a pregnancy
- Coercing a partner to have unprotected sex
- Interfering with birth control methods



Birth Control Sabotage

Tactics include:

- Destroying or disposing contraceptives
- Impeding condom use (threatening to leave her, poking holes in condoms)
- Not allowing her to obtain or preventing her from using birth control
- Threatening physical harm if she uses contraceptives





Pregnancy Pressure and Coercion

- Threatening to leave a partner if she does not become pregnant
- Threatening to hurt a partner who does not agree to become pregnant
- Forcing a female partner to carry to term against her wishes through threats or acts of violence
- Forcing a female partner to terminate a pregnancy when she does not want to
- Injuring a female partner in a way that she may have a miscarriage



Impact of ARA on Contraceptive Choice

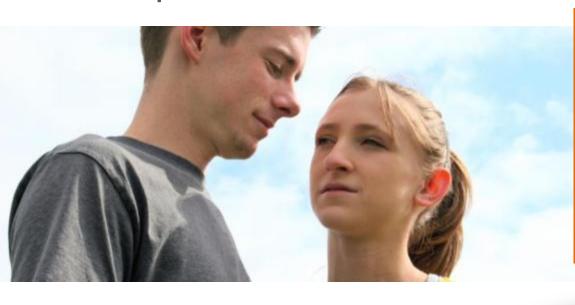
Women, including teens, experiencing physical and emotional abuse are more likely to report not using their preferred method of contraception in the past 12 months

Williams et al, 2008



Pregnancy-Promoting Behaviors

 One-quarter (26.4%) of adolescent females reported that their abusive male partners were



TRYING TO GET THEM PREGNANT



What Happens at School for These Teens?

- Victims and perpetrators are more likely to carry weapons, as well as engage in physical fighting and other high risk behaviors.
- Physical and sexual victimization is associated with an increased risk for school dropout, lower grades, and less connectedness to school.



(Goldstein et al, 2009; Champion et al, 2008; Banyard & Cross, 2008)



The Worst Outcome

A third (32%) of female homicides among adolescents between the ages of 11 and 18 are committed by an intimate partner.

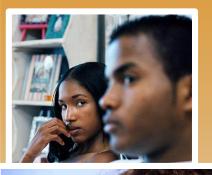




(Coyne-Beasley et al, 2003)



Summary of Research on Adolescent Relationship Abuse



- It is COMMON
- It is associated with multiple risk behaviors and poor health indicators
- It has **SIGNIFICANT CONSEQUENCES** for health and well-being of youth
- It is highly prevalent among youth seeking clinical services





"I talk about this with all my patients..."

Providing Universal Education on Healthy Relationships

Goals for Universal Education About Healthy Relationships

- Distinguish between healthy and unhealthy relationships
- Encourage youth to take action if they witness unhealthy behavior
- Educate sexually active
 adolescents about sexual coercior
 and the importance of consent
- Create a safe environment to discuss relationships





Intervention Elements: CUES

- C Review limits of confidentiality
- **UE** Provide universal education on healthy relationships
- S Discuss youth-friendly resources and make a warm referral; Offer support, validation, and harm reduction strategies if abuse is disclosed



First Things First...

Getting Started:

 Always review the limits of confidentiality, even if you are not asking DIRECT questions about abuse, in case there is disclosure and you need to report.



 For state specific information, go to <u>http://nnedv.org/resources/coalitions.html</u>, to find your state's DSV coalition and talk about how implementation works.



Script for Disclosing Limits of Confidentiality with Adolescents

"Before I get started, I want you to know that everything here is confidential, meaning I won't talk to anyone else about what is happening unless you tell me that you are being hurt physically or sexually by someone or planning to hurt yourself"

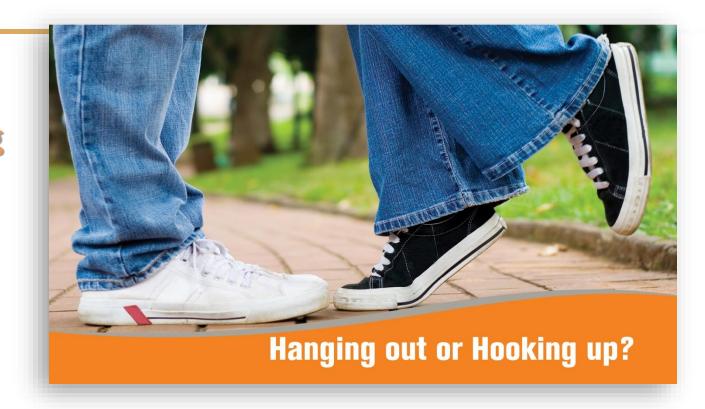


Guidelines For Universal Education

- How Often Should You Educate?
 - At least annually and with each new partner
- When Should You Provide Universal Education?
 - During any health appointment including sports physicals
- Where Should You Provide Education?
 - When the patient is by him/herself without parents, partners, or friends present
- Who Should Receive Education About Healthy Relationships?
 - Every teen regardless of gender or sexual orientation should learn about healthy relationships



Universal
Anticipatory
Guidance: Making
Healthy
Relationship
Conversations
Simple







This Safety Card is Part of a Simple, Evidence-Informed Intervention

- Discuss healthy relationships
- Identify signs of an unhealthy relationship
- Educate patients about how to help others
- Plant seeds for victims
- Help victims learn about harm reduction strategies and support services.





How to Introduce the Card:

- "We've started giving this card to all our patients so they know how to get help for themselves or so they can help others."
- (Unfold card and show it) "It's kind of like a magazine or online quiz. It talks about respect, sex and texting."





"We've started talking to all the teens in our school about what they deserve in relationships..."

How is it Going?

Does the person you are seeing (like a boyfriend or a girlfriend):

- ✓ Treat you well?
- ✓ Respect you (including what you feel comfortable doing sexually)?
- ✓ Give you space to hang out with your friends?
- ✓ Let you wear what you want to wear?

If you answered YES—it sounds like they care about you.

"Everyone deserves to be treated with respect but defining what that looks like can be confusing."

What About Respect?

Anyone you're with (whether talking, hanging out, or hooking up) should:

- Make you feel safe and comfortable.
- Not pressure you or try to get you drunk or high because they want to have sex with you.
- Respect your boundaries and ask if it's ok to touch or kiss you (or whatever else).

How would you want your best friend, sister, or brother to be treated by someone they were going out with? Ask yourself if the person you are seeing treats you with respect, and if you treat them with respect.

Talk about healthy relationships with BOTH teen girls and boys

And on a Bad Day?

How often does the person you are seeing:

- ✓ Shame you or make you feel stupid?
- ✓ Pressure you to go to the next step when you're not ready?
- ✓ Control where you go, or make you afraid?
- Grab your arm, yell at you, or push you when they are angry or frustrated?

Nobody deserves to be treated this way. If these things ever happen in your relationship, talk to someone about it. For more info, go to www.loveisrespect.org.

When does texting stop being fun?

Everybody Texts

Getting a lot of texts can feel good-"Wow, this person really likes me."

What happens when the texts start making you uncomfortable, nervous, or they keep coming nonstop?

Figuring out what to say can be hard, especially if you like the person.

Be honest. "You know I really like you, but I really don't like it when you text me about where I am all the time or pressure me for naked pics." For more tips on what to say go to: www.thatsnotcool.com.

Adolescents report disclosing abusive relationship experiences to friends far more often than to parents, counselors or teachers

How to Help a Friend

Do you have a friend who you think is in an unhealthy relationship?

Try these steps to help them:

- Tell your friend what you have seen in their relationship concerns you.
- Talk in a private place, and don't tell other friends what was said.
- Show them www.loveisrespect.org and give them a copy of this card.
- If you or someone you know is feeling so sad that they plan to hurt themselves and/or wish they could die—get help.
 Suicide Hotline: 1-800-273-8255

Review the Resources panel

"On the back of the card are some phone numbers and websites, in case you or a friend ever needs information or support"

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Formerly Family Violence Prevention Fund

FuturesWithoutViolence.org



The American College of Obstetricians and Gynecologists WOMEN'S HEALTH CARE PHYSICIANS

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If you or someone you know ever just wants to talk, you can call these numbers. All of these hotlines are free, confidential, and you can talk to someone without giving your name.

National Teen Dating Abuse Helpline 1-866-331-9474 or online chat www.loveisrespect.org

Suicide Prevention Hotline 1-800-273-8255

Teen Runaway Hotline 1-800-621-4000

Rape, Abuse, Incest, National Network (RAINN) 1-800-656-HOPE (1-800-656-4673)



Universal Anticipatory Guidance

"One of the things that I always talk with students about is how you deserve to be treated by the people you go out with. You have the right to:

- Be treated with kindness
- Be with your friends when you want to be
- Wear what you want to wear
- Feel safe and have your boundaries be respected.



 Speak up about any controlling behavior, including textual harassment such as receiving too many texts, phone calls or embarrassing posts about you on Facebook or other sites."



Additional Targeted Resources





Student Voices- Student Rights

- Panels include:
- You matter
- Healthy Relationships
- Consent is sexy (positive consent)
- Reality (statistic re: non-consensual sex)
- Student Rights- Title IX
- Retaliation- more information on Title IX
- Cyber Fallout- cyber abuse information
- Prevention App- Circle of 6 safety App with download code
- Phone and Text resources



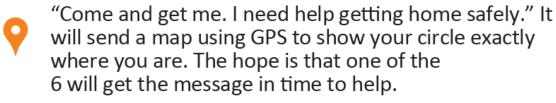
Circle of 6

Prevention App

Figuring out what to do at a party when you know things are getting uncomfortable or out of control can be hard.

Circle of 6 is a safety app where you input contact info of six friends who would have your back if you were in trouble. With just two taps of your finger, a preprogrammed text goes out letting your friends know you need help.





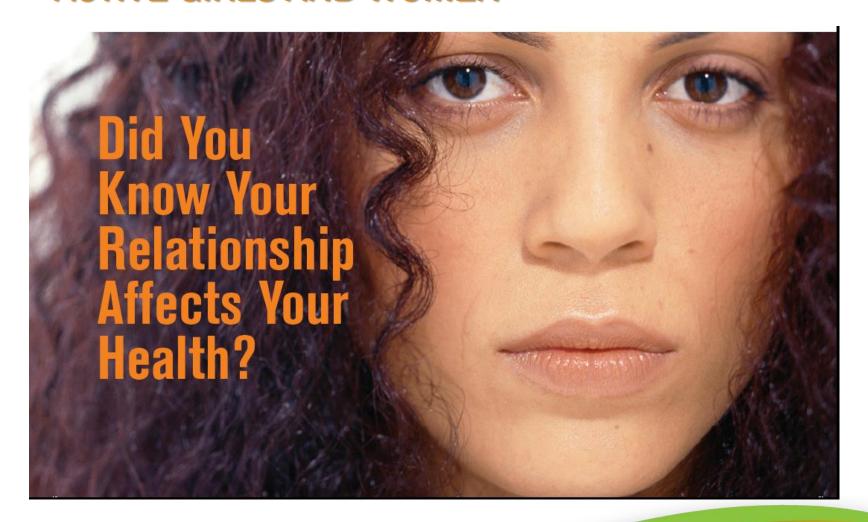




Call 911 if you are in If you know someone who has been



Reproductive Coercion Safety Card- FOR SEXUALLY ACTIVE GIRLS AND WOMEN





Did You Know Your Relationship Affects Your Health?

- Panels include:
- Are you in a HEALTHY Relationship?
 - Examples of healthy interactions related to contraception/pregnancy
- Are you in an UNHEALTHY Relationship?
 - Examples of forms of reproductive coercion
- Is you BODY being affected
- Taking Control
- Who Controls PREGNANCY Decisions?
- Getting Help
- 24 hour Phone Resources



Supported Referral

- Adolescent health providers are key to help youth contact resources
 - Annotated referral list for violence related community resources that serve adolescents
 - Providers should know names of staff, languages spoken, how to get there on public transportation, etc.
- Educate patients that the clinic is safe place for them to connect to such resources
- Normalize the use of referral resources

Outcome: Increased awareness and utilization of DV/SA victim services



When you can connect to a local program it makes all the difference

"If you are comfortable with this idea, I would like to call my colleague at the local program, (fill in person's name), she is really an expert in what to do next and she can talk with you about a plan to be safer."





Internet Resources, Texts or Chats May be Better Options for Youth



"loveis" to 77054

http://www.loveisrespect.org



love is respect lorg

CONGRATES

WASTER

LAST TEAT

GAZILLON

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TERRIBLE

THANKS

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http://www.thatsnotcool.com/



Providing a Warm Referral to the National Hotline

Funded in part by the U.S. Department of Health and Human Services' Office on Women's Health (Grant #1 ASTWH110023-01-00) and Administration on Children, Youth and Families (Grant #90EV0414).



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©2012 Futures Without Violence and American College of Obstetricians and Gynecologists. All rights reserved. All these national hotlines can connect you to your local resources and provide support:

For help 24 hours a day, call:

National Domestic Violence Hotline 1-800-799-SAFE (1-800-799-7233) TTY 1-800-787-3224 www.thehotline.org

National Dating Abuse Helpline 1-866-331-9474 www.loveisrespect.org

National Sexual Assault Hotline 1-800-656-HOPE (1-800-656-4673) www.rainn.org

"There are national confidential hotline numbers and the people who work there really care and have helped thousands of women. They are there 24/7 and can help you find local referrals"



When you need to report:

 After the reason the student was seeking advice or counseling has been addressed, remind the young person of the limits of confidentiality discussed at the start of the visit, then inform him/her of the requirement to report.



"Remember at the start of this visit we talked about situations where if your safety is at risk that we would have to get others involved? This is one of those times. I know it took a great deal of courage to share this with me, and we need to make sure that you are safe."



Supporting a student when you need to make a report

- Inform the student of your requirement to report
- Explain what is likely to happen when the report is made
- Ask the student if she is willing to call or meet with an advocate to develop a safety plan in case of retaliation
- Maximize the role of the student in the process



www.alamy.com - AB52K









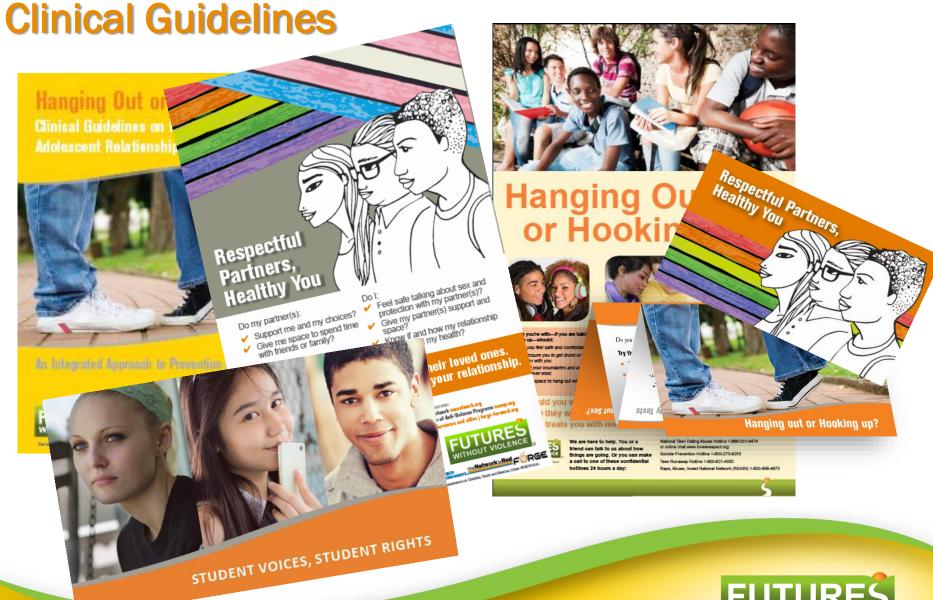
You can help survivors by showing this film in your community

ACTIVATE YOUR SCHOOL

How-to-Guide for hosting an Audrie & Daisy Screening at a Local High School



Safety Cards, Pregnancy Wheels, Posters and



Technical Assistance

For questions about how to introduce and facilitate training vignettes and for other free technical assistance and tools including:

- Posters
- Safety cards
- Guide to Addressing Intimate Partner Violence,
 Reproductive and Sexual Coercion
- Hanging Out or Hooking Up: Clinical Guidelines on Responding to Adolescent Relationship Abuse

Visit: www.FuturesWithoutViolence.org/health

Call: **415 678-5500**

Email: health@FuturesWithoutViolence.org



www.ipvhealth.org







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