School Based Health Centers

TEEN DATING VIOLENCE RESOURCE TOOLKIT (OCTOBER 2023)

.



Connecticut Coalition Against Domestic Violence

INTRODUCTION \bullet \bullet \bullet

Connecticut Coalition Against Domestic Violence (CCADV) believes that domestic violence is a preventable public health crisis. We envision a world free from all forms of violence. CCADV is the voice against domestic violence across Connecticut. We lead a statewide network focused on advocacy, outreach and education. Our work transforms political, economic and social responses to end domestic violence in Connecticut.

CCADV has 18 domestic violence member organizations across the state that provide essential direct services to survivors and their families. Services include individual counseling and group support, risk assessment and safety planning, shelter and housing options, court-based advocacy, age-appropriate advocacy for children and teens, and community education and prevention services, among others. All services are safe, free, confidential, and voluntary. Services may be accessed 24/7 via call, text, chat or email with Safe Connect, Connecticut's statewide domestic violence information and resource line.

This toolkit was created by CCADV's Health Professional Outreach Team to support School Based Health Centers in addressing intimate partner violence (IPV) among youth, identifying unhealthy relationships, distributing healthy relationship tools to students, and developing an understanding of IPV resources available in CT.

If you have any questions, concerns, or would like a free training, please contact:

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SECTIONS

DEFINING DOMESTIC VIOLENCE	2
METHODS OF CONTROL	3
TEENS & INTIMATE PARTNER VIOLENCE	4
HEALTHY VS. UNHEALTHY DATING BEHAVIORS	5
HOW SCHOOL BASED HEALTH CENTERS CAN SUPPORT STUDENTS & FAMILIES	5
CT-BASED DOMESTIC VIOLENCE RESOURCES	8
HELPFUL REMINDERS	10

Domestic violence is a pattern of coercive, controlling behavior that can include physical abuse, emotional or psychological abuse, sexual abuse or financial abuse. It is a pervasive, life-threatening crime that affects thousands of individuals in Connecticut regardless of age, gender, economic status, race, ethnicity, religion, sexual orientation or education. Victims are left feeling scared, confused, dependent and insecure about their ability to survive on their own, financially or otherwise. The children of an abused parent must contend with these same fears and realities.

(A PUBLIC HEALTH CRISIS THAT IMPACTS US ALL)

According to the Centers for Disease Control & Prevention (CDC) National Intimate Partner and Sexual Violence Survey: 2016/2017 Report on Intimate Partner Violence (published October 2022)...

1 in 2 women and 2 in 5 men

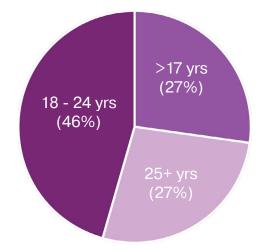
reported experiencing contact sexual violence, physical violence, and/or stalking victimization by an intimate partner at some point in their lifetime.

Experiences with contact sexual violence, physical violence, and/or stalking victimization by an intimate partner at some point in their lifetime varied across racial and ethnic groups, with people of color experiencing higher rates of victimization.

	NON-HISPANIC MULTIRACIAL	NON-HISPANIC AMERICAN INDIAN / ALASKA NATIVE	NON-HISPANIC BLACK	NON-HISPANIC WHITE	HISPANIC	NON-HISPANIC ASIAN / PACIFIC ISLANDER
WOMEN	64%	58%	54%	48%	42%	27%
MEN	52%	51%	58%	44%	40%	25%

(UNHEALTHY RELATIONSHIP BEHAVIORS OFTEN BEGIN AT A YOUNG AGE)

AGE OF FIRST IPV VICTIMIZATION - FEMALE



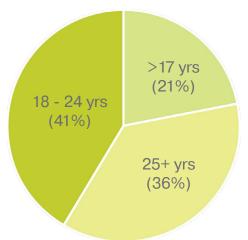
Source: https://www.cdc.gov/violenceprevention/pdf/nisvs/NISVSReportonIPV_2022.pdf

DEFINING DOMESTIC VIOLENCE

ALMOST 3/4 of **FEMALE VICTIMS** OF INTIMATE PARTNER VIOLENCE REPORTED THAT THEY WERE

FIRST VICTIMIZED BEFORE AGE 25. AND MORE THAN 1 IN 4 WERE FIRST VICTIMIZED BEFORE AGE 18

AGE OF FIRST IPV VICTIMIZATION - MALE



METHODS OF CONTROL

Domestic violence is complicated and looks different in different relationships. Below are forms of domestic and dating violence and some common behaviors, all coercive and controlling in nature, that victims may experience. This is not an exhaustive list.

EMOTIONAL/PSYCHOLOGICAL

Emotional or psychological abuse is any behavior, verbal or non-verbal, that someone uses to control their partner and/or damage their emotional well-being. Examples include:

- Name-calling and mocking, especially when targeting things the victim is sensitive about and doing it in front of others
- Telling the victim what to do and/or where they can and cannot go
- Cheating or being overly jealous when the victim spends time with others

TECHNOLOGICAL

A form of controlling behavior that involves the use of technology as a means to coerce, monitor, stalk, or harass the victim. Examples include:

- Tracking location with GPS apps or monitoring the victim's communications
- Stealing or demanding to know the victim's passwords
- Using social media to sabotage the victim and ruin their reputation

PHYSICAL

Physical abuse is often the easiest kind of behavior to recognize and understand as violent. It can be directed toward the victim or anyone the victim cares about, including their pets. Examples include:

- Shoving, pushing, choking, etc.
- Throwing objects to hurt or intimidate the victim
- Destroying possessions or treasured objects

SEXUAL

Sexual abuse is any sexual encounter that happens without the victim's consent, regardless of whether or not the victim is in a relationship with the person who abuses them or has ever previously engaged in consensual sexual activity with that person in the past. Past consensual sexual activity is never an indication of future consent. Examples include:

- Taking advantage of the victim while the victim is intoxicated or otherwise not able to give consent
- Sabatoging or denying use of contraception or protection against sexually transmitted infections
- Threatening to break up with the victim if they refuse sex or taking/sharing intimate images without consent

ECONOMIC

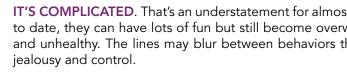
Money is often a tool that abusers use to establish absolute control in their relationships. An abusive partner may try to make their victim entirely financially dependent on them to prevent the victim from leaving. This can include limiting or sabotaging education opportunities, which ultimately impacts employment and earning potential. Examples include:

- Forbidding the victim to work or attend school
- Jeopardizing employment by stalking or harassing the victim at the workplace
- Sabotaging educational opportunities by destroying class assignments

STALKING/HARASSMENT

An abusive partner or ex-partner might inappropriately demand the victim's time even when the victim has made it clear that they do not want any further contact. Examples include:

- Making unwanted visits or sending unwanted messages (voicemails, text messages, emails, etc.)
- Checking up on the victim constantly, following them, or showing up when not invited/wanted
- Refusing to leave when asked



We already touched upon the fact that, nationally, more than 1 in 4 female victims of IPV were first victimized before the age of 18, and nearly 1 in 4 male victims were first victimized before the age of 18. Here in Connecticut, according to the 2019 Youth Risk Behavior Survey conducted by the CT Department of Public Health and completed by over 2,000 students at 33 high schools in Connecticut,...

26% OF **TEENS** REPORTED THAT SOMEONE THEY WERE DATING **PURPOSELY TRIED TO CONTROL** THEM OR **EMOTIONALLY HURT** THEM, WHILE **12%** EXPERIENCED **SEXUAL DATING VIOLENCE** AND 8% EXPERIENCED PHYSICAL DATING VIOLENCE.*

The 2021 results of the national High School Youth Risk Behavior Survey conducted by the CDC (https://www.cdc.gov/ healthyyouth/data/yrbs/feature/index.htm) found that Connecticut high school students experienced sexual dating violence at a higher rate than the national average.

(EVERYONE HAS THE RIGHT TO FEEL SAFE AND GOOD ABOUT THEMSELVES)

IMPACT & HEALTH CONSEQUENCES

When it comes to teens and youth, research has shown that experiencing dating violence can have significant short- and long-term impacts. The landmark Adverse Childhood Experiences (ACES) study launched in 1995 found a significant relationship between childhood experiences of abuse and violence and a host of negative adult physical and mental health outcomes, including heart disease, stroke, depression, suicide attempts, sexually transmitted diseases, and substance abuse. Immediate impacts may include:

- Performing poorly in school
- Experiencing depression, anxiety, and other mental health issues
- Misusing substances
- Attempting suicide
- Engaging in physical fights
- Unplanned pregnancy
- Engaging in self-destructive behavior such as self-harm, self-sabotage in work or relationships, uncontrolled compulsions, etc.
- Withdrawing from people and activities they would typically enjoy

IT'S IMPORTANT FOR TEENS TO KNOW THAT LOVE SHOULD NEVER HURT. EITHER PHYSICALLY OR EMOTIONALLY, AND THAT EVERYONE HAS THE RIGHT TO FEEL SAFE AND GOOD ABOUT THEMSELVES

* Source: https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/CSHS/2019CT_Codebook.pdf



TEENS & INTIMATE PARTNER VIOLENCE

IT'S COMPLICATED. That's an understatement for almost everything teens experience, especially dating. When teens start to date, they can have lots of fun but still become overwhelmed and confused about which dating behaviors are healthy and unhealthy. The lines may blur between behaviors that demonstrate love and affection, and those that demonstrate



HEALTHY VS. UNHEALTHY DATING BEHAVIORS

So, what does a healthy relationship look like? For teens, starting to date is an important time to learn about respect, equality, and communication all being important parts of relationships. Adults can share these helpful examples of healthy and unhealthy dating beahviors.

A HEALTHY RELATIONSHIP MEANS...

- You respect and are honest with each other
- You can communicate your feelings without worrying that you will anger the other person
- Both of your opinions matter and you respect each other's boundaries
- You both understand that you each need time to hang out alone with friends or family
- You're supportive of each other, even when you disagree

AN UNHEALTHY RELATIONSHIP LOOKS LIKE...

- Calling you names or putting you down in front of others
- · Being jealous when you talk to your friends and discouraging you from spending time with friends and family
- Constantly checking on you or demanding to know where you are
- Checking your phone, email or social media accounts without your permission
- Pressuring you to participate in any sexual activities

HOW SCHOOL BASED HEALTH CENTERS CAN SUPPORT STUDENTS & FAMILIES

There are some simple steps school based health centers can take to support students and families experiencing dating violence or IPV. You don't need to be an expert! One of the most important things victims of dating violence or IPV need is someone who will listen without judging them. Being a supportive listener who can then share available resources is what your students need.

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Make resources available and accessible in the school hallways, nurse's office, bathrooms, elevators, etc.

Ask about IPV during health screenings and offer educational resources to every student.



Discuss unhealthy relationships with students through events such as bringing guest speakers to class, tabling during lunches, etc.



Work with your local CCADV member organization to distribute resources to parents at parent-teacher conferences, registration for the school year, and in situations where a student mentions experiencing intimate partner violence, etc.



Discuss and provide resources for friends or family members if they suspect someone they know is in an unhealthy relationship.



Get trained by CCADV & local member organization advocates!



HOW SCHOOL BASED HEALTH CENTERS CAN SUPPORT STUDENTS & FAMILIES (CONT'D)

SPREAD THE WORD WITH CUES

We know that exposure to violence at an early age is linked to health problems that can last into adulthood. One of CCADV's key national partners on prevention efforts is Futures Without Violence (FUTURES). In order to prevent violence from occurring in the first place, FUTURES invests in prevention strategies that promote healthy relationships among teens and young adults. FUTURES equips adolescent healthcare providers with the tools and resources they need to counsel their young patients about healthy relationships and to assess for and respond to dating violence. Enter CUES!

CUES stands for Confidentiality, Univeral Education, Empowerment, and Support. It is an evidence-based intervention by FUTURES to address domestic violence and sexual violence in health settings and is shown to improve health and safety outcomes for survivors. CUES encourages "education every time" so that no one must get the courage to ask about intimate partner violence resources but instead will always be given an idea of what resources exist. This allows a potential victim to use those resources when it is safe for them to do so.

CUES has a specific set of resources for teens called "Hanging Out or Hooking Up". This resource is a result of a randomized control trial that was done in 11 school based health centers (https://publications.aap.org/pediatrics/articleabstract/135/1/76/52911/A-School-Health-Center-Intervention-for-Abusive?redirectedFrom=fulltext). The study showed that when school based health providers talked with each adolescent patient about healthy and unhealthy relationships, and how to get help using the "Hanging Out or Hooking Up?" safety card, there was an improvement in both health and safety outcomes.

C – CONFIDENTIALITY

- Establish a policy in your healthcare setting to educate all students every time.
- If you will be discussing or screening for IPV, ensure that the student or parent is alone with you.
- Stress your mandated reporting requirements as a healthcare professional and remind students and families that your conversation is confidential.
 - Remind students and family that you are required to report child abuse and elder abuse. This way they are not surprised if you do have to make a report.
 - In the state of CT, intimate partner violence is not a mandated reporting opportunity; however, as a SBHC staff member you are mandated to report child abuse.

U – UNIVERSAL EDUCATION

- Incorporate intimate partner violence education into each student visit.
- Utilize with every student every time.

Utilize this simple script with all students and/or guardians to ensure that everyone has information on Safe Connect, Connecticut's domestic violence information and resource line (see page 9 for more information). The script below, based on the nationally accredited CUES method, takes less than 1 minute and will ensure that all students and families know where to turn if they are dealing with an unsafe relationship.

"We have started talking about healthy relationships with all of our students & families because it can have such serious impacts on overall health. We want to let you know that Connecticut has a 24/7 domestic violence information and resource line, called CT Safe Connect. Safe Connect Advocates understand complicated relationships and all services are safe, free, confidential and voluntary (which means you can change your mind at any time). If you, or anyone you know, might benefit from these resources you can call or text 888.774.2900, or email & live chat with an advocate at www.CTSafeConnect.org".



HOW SCHOOL BASED HEALTH CENTERS CAN SUPPORT STUDENTS & FAMILIES (CONT'D)

E - EMPOWERMENT

- Providing everyone with education on healthy relationships and local resources can help save lives.
- Make IPV resources a normal part of bathrooms, patient rooms, classrooms, etc., to empower others to learn and share information.
- Giving out small resources like the "Hanging Out or Hooking Up" safety card can help a patient, friend, or family member.

CCADV encourages handing every student and guardian a safety card. It discusses healthy relationship behaviors and gets the CT Safe Connect phone number and website into every person's hand.

You can request CT-specific safety cards free

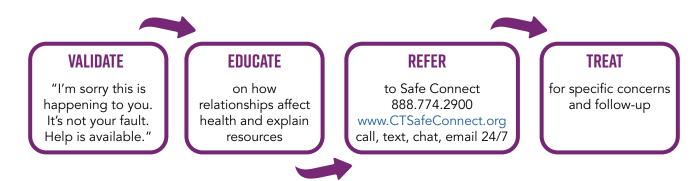
of charge for use in your school by emailing

Ashley at astarrfrechette@ctcadv.org.



S – SUPPORT

- Validate, educate on how relationships affect health and explain resources, refer to CT Safe Connect, treat for specific concerns, and follow up.
- Disclosure is NOT the goal, but if someone does disclose, follow the steps below. The main goal of these steps is to connect a survivor with a domestic violence advocate if the survivor is willing.



ADDITIONAL CUES RESOURCES

The following resources are available free of charge from Futures Without Violence. We encourage CT-based health settings to contact Ashley at CCADV (astarrfrechette@ctcadv.org) to request free copies of the "Hanging Out or Hooking Up" safety card that has CT-specific domestic violence resources listed on it. CCADV also has personalized FUTURES safety cards targeted towards other age groups.

- CUES 8.5x11 poster https://www.futureswithoutviolence.org/wp-content/uploads/CUES-graphic-Final.pdf
- CUES evidence summary https://ipvhealth.org/wp-content/uploads/2021/08/Evidence-for-CUES_1.28.21.pdf
- Additional child & adolescent health resources https://www.futureswithoutviolence.org/child-adolescent-health/

LOCAL DOMESTIC VIOLENCE ORGANIZATIONS

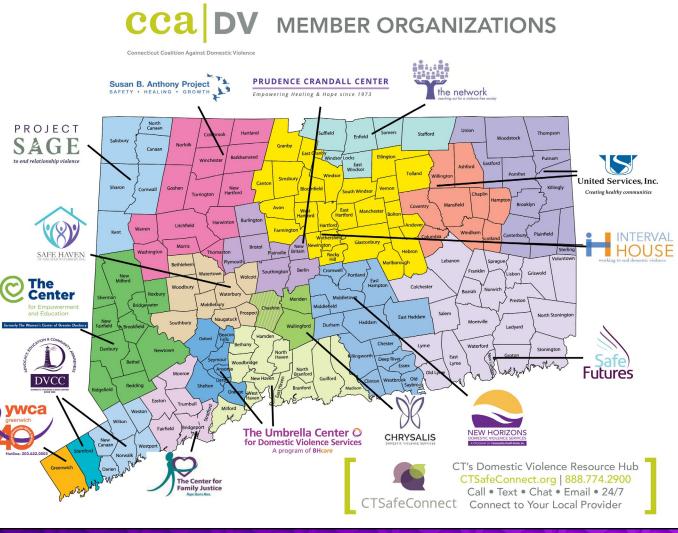
CCADV has 18 domestic violence member organizations across the state that provide essential direct services to survivors and their families (click on the map below to download it). Services include:

- individual counseling and group support;
- risk assessment and safety planning;
- shelter and housing options;
- court-based advocacy;
- age-appropriate advocacy for children and teens; and,
- community education and prevention services, among others.

All services are safe, free, confidential, and voluntary. Services may be accessed 24/7 via call, text, chat or email with CT Safe Connect, Connecticut's statewide domestic violence information and resource line.

Connect with your local CCADV member domestic violence organization!

- Create collaborations, get to know staff, and have confidence in direct referrals.
- resources.



CT-BASED DOMESTIC VIOLENCE RESOURCES

(THE HEARTBEAT OF OUR COALITION)

After contacting CT Safe Connect, callers will be connected to their local member organization to obtain further

CT SAFE CONNECT

(CONNECTICUT'S STATEWIDE DOMESTIC VIOLENCE INFORMATION AND RESOURCE LINE)



888.774.2900 | www.CTSafeConnect.org CALL \cdot TEXT \cdot CHAT \cdot EMAIL \cdot 24/7

Safe Connect advocates are available 24/7 to answer guestions, provide resources, and get survivors connected to the local CCADV member domestic violence organization!



Relationships can be difficult. We're here to help.

CT Safe Connect is Connecticut's statewide domestic violence information and resource line - the entry point into services provided locally by CCADV's 18 member organizations.

People who experience domestic violence or dating violence often say that they feel completely isolated. But survivors should never feel alone, nor should they feel forced in a certain direction. When someone calls Safe Connect, they're the lead decision maker. Safe Connect is available 24/7 and all services are safe, free, confidential, and voluntary.

A friendly resource that's awlays in your back pocket.

Not every survivor is ready to speak with an advocate when they consider reaching out for help. The Safe Connect website offers educational information for survivors and, when ready, prominently displays Safe Connect's enhanced communication options of call, text, chat, and email.

Safe Connect advocates understand that relationships can change. This can happen suddenly or subtly and gradually over time. Sometimes, the hurt feels normal. If someone is feeling confused or unsure about what to do next, encourage them to contact Safe Connect.





Ask us anything. Seriously.

Safe Connect advocates are also always available to offer guidance and support to professionals. As a school based health center professional, you can always call Safe Connect if you have questions about how to help a student or parent.

This service is not directly connected to law enforcement, immigration, or child protective services, although advocates are mandated reporters.

Be sure to share this resource with students and parents! Materials are available free of charge. Email Ashley at astarrfrechette@ctcadv.org.

TALKING WITH SOMEONE EXPERIENCING ABUSE

- in safety planning. Additionally, recognize that their fear is real, and they may be in real danger.
- Support & validate their experiences.
- Give them options not orders.
- Provide Safe Connect and local resources, including the "Hanging Out or Hooking Up" safety card.
- Emphasize that you are here for them if they decide they would like to talk or if anything changes.
- Mention that you will check in with them.
- Remind them that CT Safe Connect is available 24/7 and they don't have to provide identifying information if they are not comfortable.

EMBEDDING EOUITY

- Host staff trainings on topics including social determinants of health, implicit bias, etc.
- Adjust language to be plain, simple, and inclusive
- Be intentional about hiring staff who understand the students' communities and lived experiences
- Diversify your staff where you can.

OTHER REMINDERS

- Listen to the victim survivor -- they know their violence best.
- Ensure that students are alone when talking about intimate partner violence
- If you must document abuse, make sure it is in a safe and secure area
- staff member, you are mandated to report child abuse.
- When in doubt, call CT Safe Connect for support.
- and connect you directly with state directors

HELPFUL REMINDERS

• Emphasize safety! Ending a relationship will not guarantee an end to violence and it is important to involve teenagers

• Do not interrogate them. Understand that it may take more than one talk for them to share what's going on.



• In the state of Connecticut, intimate partner violence is not a mandated reporting opportunity; however, as a SBHC

• As school-based health center staff, CT Safe Connect advocates are there to answer your questions, send resources,



Connecticut Coalition Against Domestic Violence

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CALL • TEXT • CHAT • EMAIL • 24/7 888.774.2900 | CTSafeConnect.org

CONFIDENTIAL, SAFE, FREE, VOLUNTARY