

Young People and Dating Violence

Teaching Healthy Relationship Skills to Protect Health and Well-Being

THE FACTS

In a healthy relationship, both partners respect and trust one another and embrace each other's differences. Both partners are able to communicate effectively their needs and listen to their partner, and work to resolve conflict in a rational and non-violent way. But maintaining a healthy relationship requires skills many young people are never taught. A lack of these skills, and growing up in a society that sometimes celebrates violence or in a community that experiences high rates of violence, can lead to unhealthy and even violent relationships among youth.

Dating violence includes psychological or emotional violence, such as controlling behaviors or jealousy; physical violence, such as hitting or punching; and sexual violence such as nonconsensual sexual activity and rape. Young people of every ethnicity, orientation, gender identity, and socioeconomic class can be victims and perpetrators of dating violence. More than 20 percent of all adolescents report having experienced either psychological or physical violence from an intimate partner - and underreporting remains a concern.¹ Dating violence and abuse can lead to a wide array of negative health outcomes.

Adolescents, especially older adolescents, often have romantic relationships which are long-term, serious, and intimate. Society has a responsibility to provide young people with the resources, skills, and space necessary to safeguard their physical and emotional well being in these relationships. Youth-serving professionals, educators, and parents can help young people in need access services to address dating abuse victimization. Research also has shown that programs intended to prevent dating violence can be successful.

DATING VIOLENCE INCLUDES PHYSICAL, PSYCHOLOGICAL, AND SEXUAL VIOLENCE

- One in 10 high school students has experienced physical violence from a dating partner in the past year.²
- According to data from the 2011 Youth Risk Behavior Surveillance (YRBS), nationwide,

eight percent of students had ever been physically forced to have sexual intercourse when they did not want to. Overall, the prevalence of having been forced to have sexual intercourse was higher among female (11.8 percent) than male (4.5 percent) students. For 28 percent of young women who were raped or sexually assaulted, the perpetrator was a former or current intimate partner.³

- Young women between the ages of 16 and 24 experience the highest rate of intimate partner violence. According to one national study, 29 percent of the young women surveyed who had ever been in a relationship said they had been pressured to have sex or to engage in sexual activity they did not want.^{4,5}
- Most female victims of intimate partner violence were previously victimized by the same offender, including 77 percent of female victims ages 18 to 24.³
- Psychological violence includes uneven power dynamics, control, jealousy and threats regarding the relationship. In one study, 21 percent of teens said that they had been in a relationship with someone who wanted to keep them from seeing friends and family. The same study found that 64 percent of those surveyed had a partner who acted jealous and demanded to know their whereabouts at all times.⁵
- A 2013 study of dating violence among lesbian, gay, bisexual, and transgender (LGBT) youth found that LGBT youth showed significantly higher rates of all types of dating violence victimization and perpetration experiences, compared to heterosexual youth.⁶

FACTORS WHICH CONTRIBUTE TO HIGH RATES OF DATING VIOLENCE

- Dating violence occurs among all races, religions, and demographic categories. However, those living in poverty are more likely to be involved in heavy conflict about finances and relationship roles and to lack

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the skills needed for non-violent conflict resolution - which leads to higher rates of violence.⁷

- Heavy alcohol consumption by either partner in a relationship increases the risk of violence.⁷
- A young person's community and friends are a factor in dating violence. Perpetrators of dating violence tend to have peer groups who were more violent, whereas those with nonviolent friends were the least likely to perpetrate dating violence in adulthood.⁸ Overall, the risk of violence in relationships is greater in communities and cultures where using violence in many situations is a socially-accepted norm.⁷

DATING VIOLENCE IS ASSOCIATED WITH MULTIPLE HEALTH AND SEXUAL HEALTH RISKS

- Experiencing dating violence is associated with an increase in sexual risk-taking behaviors, inconsistent condom use or partner refusing to use condoms, reduced use of hormonal contraceptives, and having been diagnosed with a sexually transmitted infection (STI).⁹
- Dating violence victimization was also associated with having some type of vaginal infection or UTI, chronic pelvic or abdominal pain, painful menses, and sexual dissatisfaction or lack of sexual pleasure.⁹
- Dating violence is associated with adolescent and unwanted pregnancy.⁹
- Dating violence may also include reproductive coercion, explicit behavior to promote pregnancy that is unwanted by a partner, birth control sabotage (interference with contraception), and/or pregnancy coercion.¹⁰
- Experiencing intimate partner violence was associated with a 38 percent increase in odds of reporting poorer health.¹¹
- Dating violence in adolescence has been linked with suicidality, substance use problems, emotional distress, depression,

and posttraumatic stress disorder (PTSD) symptoms.^{12,13,14}

- A study of the consequences of dating violence in rural adolescents found that, for boys, experiencing physical dating violence was predictive of having fewer close friends.¹⁴

PREVENTION & TREATMENT

- All students should receive education about healthy relationships in as a part of health education. These lessons should include understanding and identifying healthy and unhealthy relationship patterns; effective ways to communicate relationship needs and manage conflict; and strategies to avoid or end an unhealthy relationship.¹⁵
- Interventions targeting perpetration and victimization of intimate partner violence among adolescents can be effective. Those interventions are more likely to be based in multiple settings, and focus on key people in the adolescents' environment.¹⁶
- Since physical violence often arises during conflict, interventions that target youth experiencing physical dating violence should address communication and conflict resolution skills within relationships.¹²
- Dating violence occurs within relationships and needs to be addressed in that context.¹² Anti-violence campaigns and education should acknowledge how unhealthy intimate partner dynamics might result in violence and provide young people with the tools to navigate conflict effectively and avoid violent behavior. Campaigns that simply condemn perpetrators of violence are less effective.
- Adolescent clinics can serve as a critical site for identifying adolescent dating violence, and for offering resources, referrals, and otherwise intervening to assist young women in danger. Experiencing dating violence may result in particular health concerns that affect care-seeking patterns, such as need for pregnancy testing or sexually transmitted infection treatment.^{17,18}
- While health care professionals should not assume that patients will disclose abuse, even when asked directly, they should make information about dating violence hotlines and assistance for assault patients available to all visitors.^{19,20}

CONCLUSION

All young people have the right to be safe in their relationships. Dating violence

affects young people in a unique way and can have long-lasting negative physical and psychological consequences. Providing young people with the communication and conflict resolution skills, support, and resources to avoid or end unhealthy and violent relationships is key to their well-being. Meanwhile, underlying causes such as poverty, and violence as a social norm, must be addressed in order to bring an end to relationship violence.

Written by Colin Adamo, Young Men's Initiative Coordinator
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MISSION

Established in 1980 as the Center for Population Options, Advocates for Youth champions efforts to help young people make informed and responsible decisions about their reproductive and sexual health. Advocates believes it can best serve the field by boldly advocating for a more positive and realistic approach to adolescent sexual health.

OUR VISION: THE 3RS

Advocates for Youth envisions a society that views sexuality as normal and healthy and treats young people as a valuable resource.

The core values of Rights. Respect. Responsibility.® (3Rs) animate this vision:

RIGHTS Youth have the right to accurate and complete sexual health information, confidential reproductive and sexual health services, and a secure stake in the future.

RESPECT Youth deserve respect. Valuing young people means involving them in the design, implementation and evaluation of programs and policies that affect their health and well-being.

RESPONSIBILITY Society has the responsibility to provide young people with the tools they need to safeguard their sexual health, and young people have the responsibility to protect themselves from too-early childbearing and sexually transmitted infections (STIs), including HIV.

SOME RELATED PUBLICATIONS FROM ADVOCATES FOR YOUTH

Adolescent Sexual Health in Europe and the US: The Case For A Rights. Respect. Responsibility.® Approach

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