Did you know that your relationship can affect your health?

Intimate partner violence (IPV) is a serious, and preventable, public health problem in the United States. IPV can involve physical and sexual violence, threats of physical or sexual violence, and psychological abuse, including stalking. It can occur within opposite-sex or same-sex couples and can range from one incident to an ongoing pattern of violence. On average, 24 persons per minute are victims of rape, physical violence, or stalking by an intimate partner in the United States. These numbers underestimate the problem because many victims do not report IPV to police, friends, or families.

In 2010, IPV contributed to 1,295 deaths, accounting for 10% of all homicides for that year. The combined medical, mental health, and lost productivity costs of IPV against women are estimated to exceed $8.3 billion per year.

In addition to the economic burden of IPV, victims are more likely to experience adverse health outcomes, such as depression, anxiety, posttraumatic stress disorder symptoms, suicidal behavior, sexually transmitted infections, and unintended pregnancy.

Are you in a HEALTHY relationship?

Ask yourself:
- Is my partner kind to me and respectful of my choices?
- Does my partner demand to read my texts or email?
- Does my partner tell me who I can talk to and where I can go?
- Has my partner made me afraid or physically hurt me?
- Does my partner make me have sex when I don’t want to?

If your answers to this self-assessment concern you-

Reach out!

Respect yourself
Protect yourself!
Partner violence often begins at a young age. Based on results from the 2011 Youth Risk Behavior Survey, approximately 9% of high school students reported date-related physical violence by a boyfriend or girlfriend. Among females who experienced rape, physical violence, or stalking by an intimate partner, 22.4% experienced some form of IPV for the first time at age 11–17 years, 47.1% at age 18–24 years, and 21.1% at age 25–34 years. Among males who experienced rape, physical violence, or stalking by an intimate partner, 15.0% experienced some form of IPV for the first time at age 11–17 year, 38.6% at age 18–24 years, and 30.6% at age 25–34 years. Many persons who experience IPV while young continue to encounter a pattern of abuse well into adulthood.

FIGURE. Age at occurrence of first intimate partner violence experience among males and females who experienced rape, physical violence, or stalking by an intimate partner — National Intimate Partner and Sexual Violence Survey, United States, 2010
Prevention Activities of Partner Violence

Raising awareness and developing rigorous evidence-based programs, practices, and policies to prevent IPV are essential to stopping violent behavior before it starts. Efforts to effectively prevent the start of IPV also need to focus on healthy relationships across the lifespan, with a particular emphasis on children and youth. Early education and prevention provide the best hope for creating healthy futures and fostering a society without domestic violence.

More research on longitudinal risk for IPV and protective factors is needed to better understand what works, and rigorous evaluation of prevention strategies that are being implemented is critical. Programs, practices, and policies need to be developed that are culturally based and responsive to the populations at greatest risk, and evidence needs to be gathered on how best to scale-up effective approaches to ensure widespread adoption.

Given the social and environmental complexities of IPV, collaborators within and outside public health need to be involved in finding solutions. The problem of IPV can only be addressed if the focus is shifted from responding to acts of violence to preventing violence before it starts. This will require the involvement of many key sectors, including education, the media, housing and community development, criminal justice, transportation, and private industry. Public health programs such as Futures Without Violence, established in 1993 by HHS National Health Resource Center on Domestic Violence, have a history of being effective champions of multidisciplinary and multisector initiatives. Ultimately, rigorous evaluation of the outcomes of prevention efforts makes it possible to determine the long-term impact on population health, inform policy decisions, and build effective strategies to prevent IPV.

Do you have a friend that may be involved in a risky relationship?
Are you looking for an easier way to start that conversation with him or her?
Stop by the Health or Counseling Centers — get advice, pick up information cards and gain confidence for conversation starters. You can make a difference!

FuturesWithoutViolence.org
SEEK HELP!!!

Susquehanna University Public Safety
570-372-4444

Susquehanna University Counseling Center
570-372-4751

Susquehanna University Health Center
570-372-4385

National Domestic Violence Hotline 1-800-799-SAFE (7233)

National Dating Abuse Helpline:
1-866-331-9474 or text 77054

National Sexual Assault Hotline
1-800-656-HOPE (4673)

CDC’s Dating Matters: Strategies to Promote Healthy Teen Relationships
www.cdc.gov/violenceprevention/datingmatters

National Sexual Violence Resource Center
www.nsvrc.org

Futures without Violence (formerly Family Violence Prevention Fund)
www.futureswithoutviolence.org

The Women’s Center Medical Advocacy Program
1-800-799-SAFE
570-271-5473

Dating Matters: Understanding Teen Dating Violence Prevention
www.etovviolence.org/datingmatters

Snyder County Victim Services
570-837-4232

Transitions
1-800-850-7948

RESOURCE CENTER:
National Online Resource Center on Violence Against Women

The National Sexual Violence Resource Center
Prevention Connection