



**Support Needs among Young Adult Female Survivors of  
Intimate Partner Violence in Texas**

A Report for Texas Council on Family Violence

by

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## **Introduction and Project Aims**

Youth intimate partner violence (IPV) is a serious public health concern. A recent meta-analysis of 101 studies found an overall 20% of youth reported experiencing physical IPV (ranged from 1% to 61%), and 9% reported experiencing sexual IPV (ranged from <1% to 54%; Wincentak, Connolloy, & Card, 2017). Youth-specific support and intervention programs have been recommended in light of a growing awareness of the prevalence of adolescent dating violence (Black, Tolman, Callahan, Saunders, & Weisz, 2008; Olson, Rickert, & Davidson, 2004). In this report, we examine the unmet formal and informal support needs of young adult survivors of IPV in Texas.

### **Sources of Help**

Victims of partner violence may seek help from informal (e.g., family, friends) or formal (police, social work) sources. Friends and parents are the most commonly reported informal sources of support (Black et al., 2008; Elias-Lambert, Black, & Chigbu, 2014; Fry et al., 2014; Molidor & Tolman, 1998; Sabina, Cuevas, & Rodriguez, 2014). A review of literature (Bundock, Chan, & Hewitt, 2018) listed a range of formal sources as outlined in prior research, including counselors, social workers, therapists, teachers, school, minister, hotline, and police. The majority of studies (Elias-Lambert et al., 2014; Molidor & Tolman, 1998; Sabina et al., 2014; Watson, Cascardi, Avery-Leaf, & O'Leary, 2001) reported that youth rarely seek help from formal sources, with help seeking rate ranging from 3% to 17%. One exception is Ashley and Foshee (2005), which found that 40% of youth seek help from formal sources in responding to physical abuse. The varied help seeking rate from formal sources are likely due to varied definitions of these sources; for example, Watson et al. (2001) focused on hotline and police, while Ashley and Foshee (2005) included teacher, school worker, school nurse, social worker,

lawyer, police, hotline, therapist, health care professional from hospital, or minister. When comparing varied formal sources, it was found that school staff were the most commonly used formal source for youth (17%, Elias-Lambert et al., 2014; 9.2%, Sabina et al., 2014).

A large number of studies suggest that, relative to formal sources, youth were more likely to seek informal sources of support for experiencing dating violence, such as parents, peers, friends (Bundock, Chan, & Hewitt, 2018; Cho & Huang, 2017; Ocampo, Shelly, & Jaycox, 2007). Main factors that influence youth's choice between formal and informal sources is the type of abuse experience and their need for support (Ashley & Foshee 2005; Liang, Goodman, Tummala-Narra, & Weintraub, 2005). Research suggests that victims tend to choose informal help for emotional support after psychological or emotional abuse, whereas for physical or sexual violence, especially in situations that need immediate medical or legal assistance, youth tend to seek formal sources of support (Alleyne-Green, Fernandes, & Clark, 2015; Bonomi, Holt, Martin, & Thompson, 2006; Cho & Huang, 2017; Coker, Derrick, Lumpkin, Aldrich, & Oldendick, 2000; Duterte et al. 2008; Jackson, Cram, & Seymour, 2000; Leone, Johnson, & Cohan, 2007). Access to care is another important factor in predicting whether or not youth seek formal support; specifically, youth in higher socioeconomic status and who have health insurance are more likely to seek formal help (Alegria, Lin, Chen, Duan, Cook, & Meng, 2012; Cho and Kim 2012; Landerman, Burns, Swartz, Wagner, & George, 1994).

### **The Role of Technology**

The increased popularity of technology use has enabled a new platform of help seeking. Research indicates that romantic relationship issues are among the most prevalent topics of inquiry on Internet forums for adolescents (Weinstein & Selman, 2014; Suzuki & Calzo, 2004). The anonymous nature of online interactions helps mitigate concerns on confidentiality and

judgments that are known to pose barriers for youth offline help-seeking (McKenna & Bargh, 2000; Suler, 2004). Indeed, one study found that IPV victims learn about IPV and prefer to disclose their abusive experiences using social media applications (Love & Richards, 2013). However, overall, research on support seeking on online platforms is still lacking and future research is needed to understand why, how, and the outcomes of online help seeking.

### **Help Seeking Barriers**

Barriers of youth help seeking identified in prior research include interpersonal and interpersonal. Youth may not want to seek help because they feel embarrassed and ashamed (Martin, Houston, Mmari, & Decker, 2012; Miller, Decker, Raj, Reed, Marable, & Silverman, 2010; Sabina et al., 2014), believing the abuse they experienced was “not a big deal” (Miller et al., 2010), viewing help-seeking as a weakness (Rueda, Williams, & Nagoshi, 2015), or wanting to handle the problem on their own (Gulliver et al., 2010). In addition, youth may not seek help because of their relationship with their abuser. Specifically, they may not want to end the relationship (Rueda et al., 2015), are worried about retaliation from their abusive partner (Martin et al., 2012; Miller et al., 2010), or they are unable to seek help due to being isolated by their abuser (Gonzalez- Guarda, Ferranti, Halstead, & Ilias, 2016). Finally, youth may not seek help because of their lack of knowledge and negative perceptions of the sources of help. The majority of barriers identified were for formal sources, including lack of trust in adult professionals (Ocampo et al., 2007), concern about confidentiality (Miller et al., 2010; Sabina et al., 2014), lack of knowledge of existing services (Gonzalez-Guarda et al., 2016), reluctance from health-care providers to screen for dating violence (Gonzalez-Guarda et al., 2016), and expense and time associated with professional service (Gould et al., 2006; Sheffield et al., 2004; Wilson & Deane, 2001).

## **The Possible Role of School**

In the U.S., twenty-two states have laws requiring school districts or public health districts to incorporate an adolescent dating violence (ADV) prevention program. Since 2007, Texas school districts have been mandated to adopt and implement ADV policy, education, counseling, and safety planning measures (Ocampo, Shelley, & Jaycox, 2007).

Although school staff is reported to be the most commonly used formal source for youth (Elias-Lambert et al., 2014; 9.2%, Sabina et al., 2014), a survey study (Khubchandani et al., 2012) with a national random sample of 550 high school counselors found that 81% of school counselors reported that they did not have a protocol in their schools to respond to an incident of ADV, 90% of counselors reported that training to assist survivors of teen dating abuse has not been provided to personnel in their schools, 83% of schools did not conduct periodic student surveys that included questions on teen dating abuse behaviors, and 76% of schools did not have a committee that meets periodically to address health and safety issues that include dating abuse.

School is an appropriate, if not ideal, outlet for youth IPV prevention programs. As suggested by Temple, Le, Goforth, and McElhany (2013), school-based programs can reach a large number of students for an extended period of time and can elicit a change in culture. Moreover, the already available school infrastructure helps safely and cost-effectively administer prevention programs. Indeed, various school-based prevention programs, such as Safe Dates, Ending Violence, and Fourth R, have been shown to successfully increase youth knowledge about IPV, promote healthy attitudes, and reduce youth IPV behaviors (Foshee et al., 2005; Jaycox et al., 2006; Wolfe et al., 2009).

## **Project Aims**

Overall, prior research has explored available sources and possible barriers youth face in accessing IPV services. However, these studies typically use a sample of youth that is inclusive of IPV victims and non-victims (Cho & Huang, 2017; Fry et al, 2013; Kim et al., 2017; Martin et al., 2012; Oscampo et al., 2007) to think of their responses to hypothetical IPV experiences. Rarely research has gathered information from actual victims. To address this gap in knowledge, the current mixed methods study explores unmet formal and informal support needs of young adult survivors of intimate partner violence (IPV) who have never sought service in Texas. The purpose of this project is two-fold:

1. Examine the stability of IPV and provide insights on prevention.
2. Assess the unmet support needs of IPV survivors and provide suggestion for services.

The first purpose is achieved through secondary data analysis of *Dating It Safe (DiS)*, an ongoing longitudinal study about adolescent and young adult IPV. For the second project purpose, qualitative individual interviews are conducted with female IPV survivors to gather their perceptions of and suggestions on services. We focus on female IPV survivors because of the higher victimization rate as well more severe consequences female victims suffer. We explain in detail the two studies and provide suggestions synthesizing the findings.

## **Methods**

This project consists of two components, a quantitative secondary data analysis and qualitative interviews. Methods of both components are explained in detail below.

### **Quantitative Secondary Data Analysis**

*DiS* is a longitudinal cohort study of 1,042 youth in southeast Texas. Primarily freshman high school students were recruited and assessed in spring 2010, with ongoing follow-ups

annually from 2011 through 2017 (Waves 1–8). Thus, there was a total of 8 assessment periods, each separated by one year (a brief “check in” survey was conducted in 2016 to bridge funding periods and retain participants). Using data from *DiS* enables the examination of longitudinal patterns of IPV and identification of modifiable risk and protective factors for IPV. Further, our research team has developed a long-term trusting relationship with participants, which enables us to recruit participants who have never sought services, interview them, and triangulate their responses from qualitative and quantitative methods.

**Participants.** Participants (n=1,042) were recruited from 7 high schools in 5 Houston-area school districts. At baseline, mean age of the sample was 15.1 years, and 56% were female. The racial/ethnic distribution of the baseline sample was 30% African American, 31% white, 31% Hispanic, 4% Asian/Pacific Islander, and 4% Mixed/Other. Most recent Wave (2017) revealed that 10% of the sample was married and 20% have children of their own.

**Recruitment.** Study recruitment occurred during school hours in freshman and sophomore classes with mandated attendance (i.e., health, media literacy, world geography, and English). All students present in the selected classes were eligible to participate. A multi-stage approach was used to obtain explicit written parental permission. The PI and research assistant attended each class two times prior to the assessment. At this time, we took approximately 5 minutes to describe the purpose, general design, and answer any questions about the study. This same information along with a parental permission form was sent home with the students for their parents to review, sign, and return. A duplicate permission form was also sent home for the parents’ records. Materials were sent home in both English and Spanish. Parents were provided with the PI’s contact information and encouraged to contact him with any questions or concerns.

Students received a \$5 gift card for returned consent forms regardless of whether or not they were granted parental permission to participate.

**Procedure.** All study procedures were carefully explained to both the adolescents and their parents, including the potential benefits and risks and the expected duration and time commitment. Potential participants and their parent/guardian were informed that a decision not to participate in the research would have no impact on their status with the school. Moreover, the adolescents were informed that none of their individual information provided during the assessments would be shared with their peers, parents, or school employees. Students who obtained written and informed parental/guardian permission completed their assent on the day of the assessment (prior to actual data collection). A site coordinator was identified at each school to assist in obtaining class lists and coordinating the consent form distribution and assessment.

Of the 1,702 students present on recruitment days, 1,215 returned parental permission forms (71%), 1,119 obtained parental permission to participate (66% of those recruited; 92% of those who returned permission forms), and 1,046 completed the survey (62% of those recruited; 94% of those who received parental permission). Four surveys were discarded because of overt random responding, which resulted in a total of 1,042 participants recruited and assessed. Participant retention rates for the follow-up assessments were high: 93% at Wave 2; 86% at Wave 3; 75% at Wave 4; 67% at Wave 5; 73% at Wave 6; and 66% at Wave 8 (Wave 7 was an abbreviated survey with a subsample [n=500] of participants). Written parental consent and child assent were obtained. Participants were re-consented when they reached the age of 18. For Baseline and Waves 2, 3, and 4, assessments occurred during school hours. For the remaining waves, the survey was completed via a web-based platform. Participants were reimbursed in the



form of a gift card in the amount of \$5 (Wave 1), \$10 (Waves 2 and 3), \$20 (Waves 4 and 5), \$15 (abbreviated Wave 7), and \$30 (Waves 6 and 8).

**Measures.** Measures assessed (1) history of IPV victimization and perpetration, and (2) modifiable risk and protective factors. Five types of IPV was assessed using Conflict in Adolescent Dating Relationship Inventory (Wolfe et al., 2001): physical abuse, psychological abuse, threatening abuse, sexual abuse, and relational abuse. Other variables included cyber dating abuse, substance use, and mental health (e.g., stress, depress, posttraumatic stress disorder). Childhood experiences with trauma were assessed when participants reached the age of 18. Measures for variables used in this secondary analysis are included in Appendix A.

### **Qualitative Interviews with IPV Survivors**

Individual interviews are capable of collecting rich, detailed data and offer flexibility, which is appropriate for probing individualized experiences of IPV and perceptions of IPV services. Thus, qualitative interviews were conducted with known female IPV survivors.

**Recruitment.** Potential participants were identified from the *DiS* study. Specifically, females who reported being a victim of physical violence from their romantic partners in the most recent survey (spring 2017) were identified. Recruitment emails were sent to 45 female IPV survivors. Potential participants were told that they were invited to participate in an interview to learn about their relationship experiences and perceptions of services. Given the study purpose to learn about service gaps among people who have never used IPV services, in the recruitment email, a link to a Qualtrics survey was included for the participant to answer a screening question “Have you ever used a service provided by an organization that deals with partner violence or family violence?” Only these who answered “no” to the question were eligible to participate. Eligible participants also indicated their preference of a face-to-face or phone interview in the

survey and provided their phone number. Participants who filled out the survey were contacted via email with a Study Fact Sheet providing more study details. Participant were asked to read the Study Fact Sheet and reply to the email if they agreed to participate and to schedule the interview.

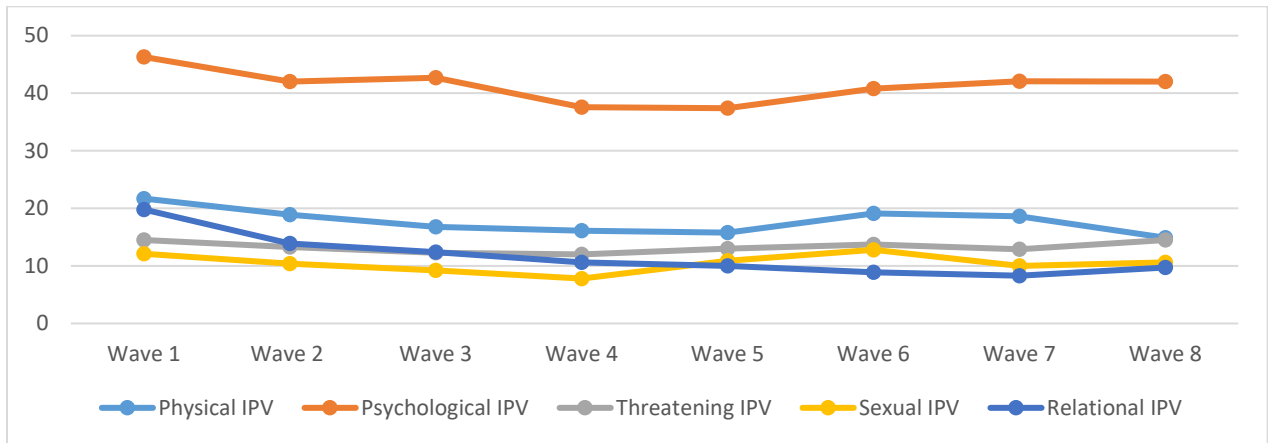
**Participants.** A total of 30 potential participants responded to the initial recruitment, 6 reported having used IPV service and thus were screened out, 21 interviews were scheduled, 2 participants did not respond to the phone call and follow up messages. The 19 women who participated included 9 African Americans, 3 European Americans, 4 Hispanic Americans, 2 Asian Americans, and 1 mixed. All participants were either 23 or 24 years old. Six participants had High school education, 2 completed an Associate degree, 10 were attending college or had completed a college degree, and 1 had completed a Master's degree. Among the participants, 11 were dating, 2 were married, and 6 were not in a relationship. Seven participants lived with their romantic partner at the time of the interview, and the rest of lived with their family (n = 5), friends/roommates (n = 4) and alone (n = 2).

**Procedure.** Among the 19 interviews, 18 were conducted over the phone and one was in person. For all interviews, the researcher who conducted the interview texted a reminder to the participant at least 2 hours prior to the interview. The interview started with the researcher re-stating the study purpose and procedure. Participants provided a verbal consent to participate. All interviews were audio recorded. Upon completion of the interview, participants received a demographic survey via email. After completing the demographic survey, each participant received a \$40 Amazon gift card. The study procedure was approved by the institutional review board of the University of Texas Medical Branch.

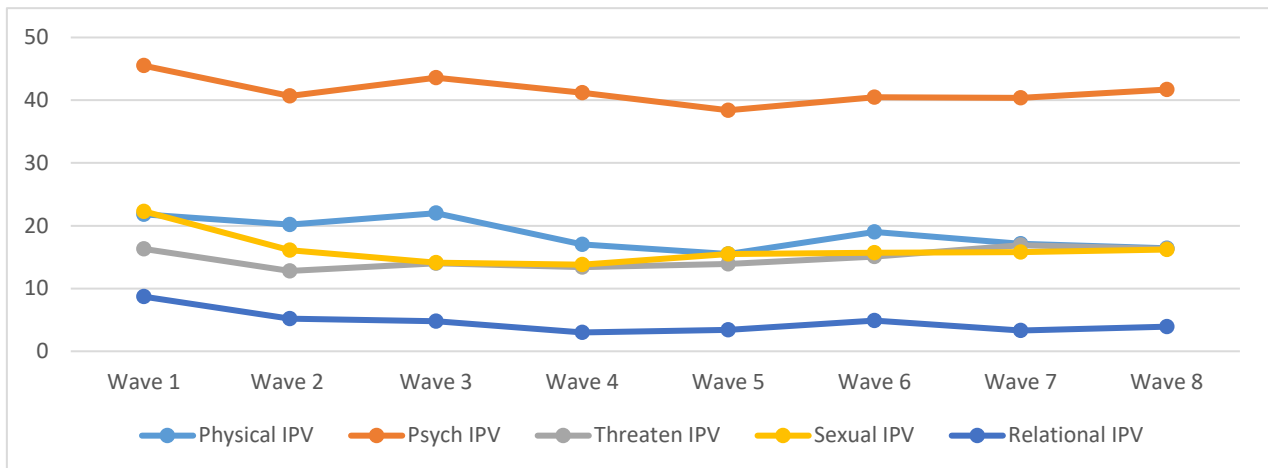
## Findings

### Quantitative Secondary Data Analysis

**Stability of IPV.** Dating violence data collected in all eight waves of data collection enabled us to examine the stability of IPV overtime. The prevalence of the five types of IPV perpetration and victimization are shown in Figures 1 and 2, respectively. Psychological and threatening IPV were stable across the eight years. Although physical, sexual, and relational IPV seemed to decrease slightly as participants aged, at Wave 8, the percentage of those who reported physical and sexual IPV were still at a concerning rate (16% for both physical and sexual IPV victimization, 15% for physical IPV perpetration, and 11% for sexual IPV perpetration).



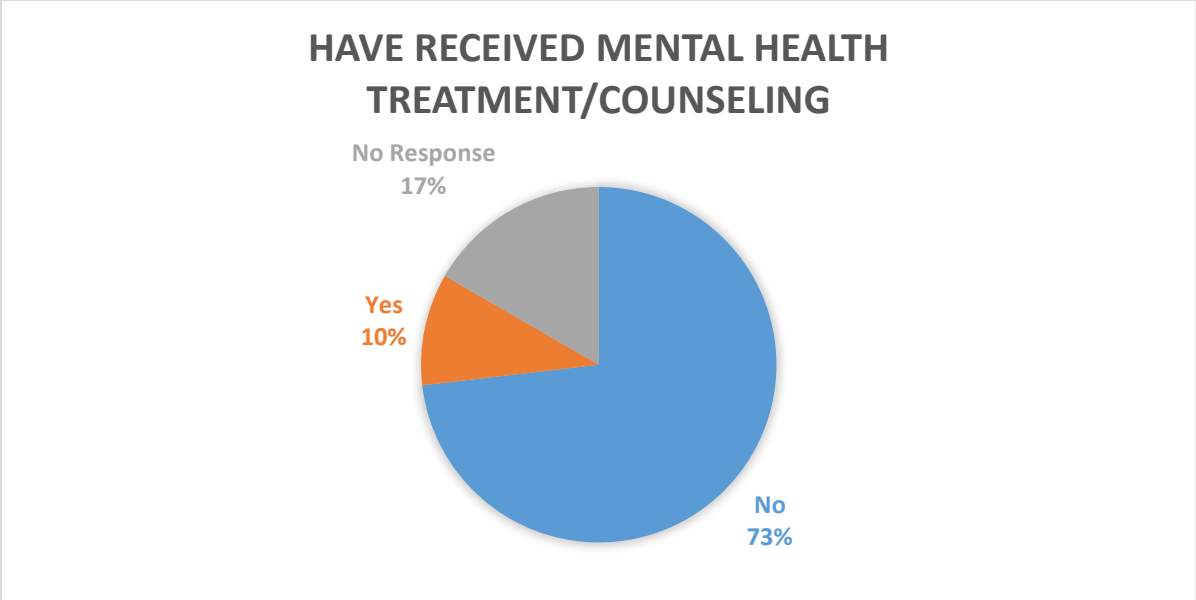
**Figure 1. Prevalence of IPV perpetration across 8 waves**



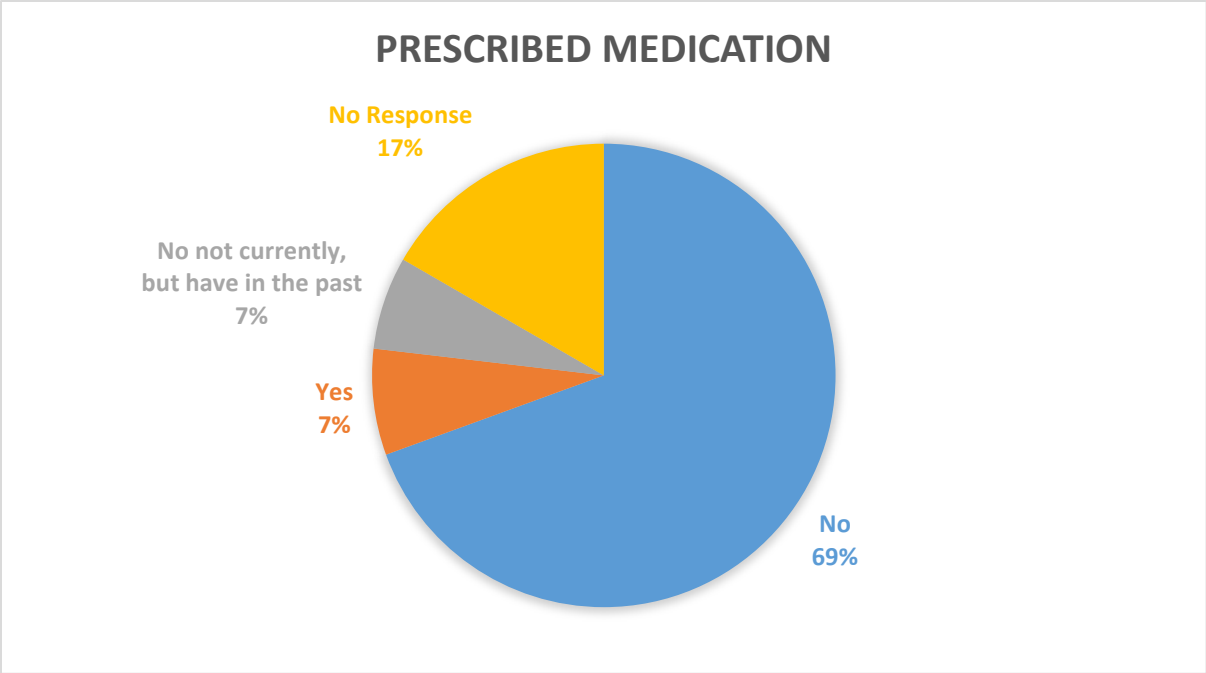
**Figure 2. Prevalence of IPV victimization across 8 waves**

**Predictors of IPV.** Using *DiS* data, many variables have been identified as risk markers and factors of IPV. First, an intergenerational link between witnessing mother-to-father violence and IPV perpetration and victimization is identified such that individual who witness interparental violence were at heightened risk of both IPV perpetration and victimization (Choi & Temple, 2016; Shorey, Fite, Cohen, Stuart, & Temple, 2018; Temple, Shorey, Tortolero, Wolfe, & Stuart, 2013). Second, in-person IPV was predicted by experiences with cyber dating abuse, suggesting that victims may experience abuse in multiple contexts (Temple et al., 2015). Third, Childhood corporal punishment was associated with future IPV perpetration (Temple, Choi, Reuter, Wolfe, Taylor, Madigan, & Scott, 2018). Fourth, substance use, such as alcohol and cannabis, was highly associated with IPV and this co-occurrence persisted over time (Choi, Elmquist, Shorey, Rothman, Stuart, & Temple, 2017; Shorey, Haynes, Strauss, Temple, & Stuart, 2017). Fifth, adverse mental health, such as posttraumatic stress disorder was linked to IPV (Jouriles, Choi, Rancher, Temple, 2017; Shorey, Fite, Menon, Cohen, Stuart, & Temple, in press).

**Mental health Service Experiences of IPV survivors.** A total of 108 participants reported in Wave 8 survey that they experienced physical IPV victimization in the previous year. Their self-reported mental health service experiences are shown below. Chi-square independent tests did not detect significant difference between IPV survivors and those who did not have IPV experiences on their mental health service ( $\chi^2 = .16, p = .69$ ) or medication statuses ( $\chi^2 = .11, p = .95$ ).

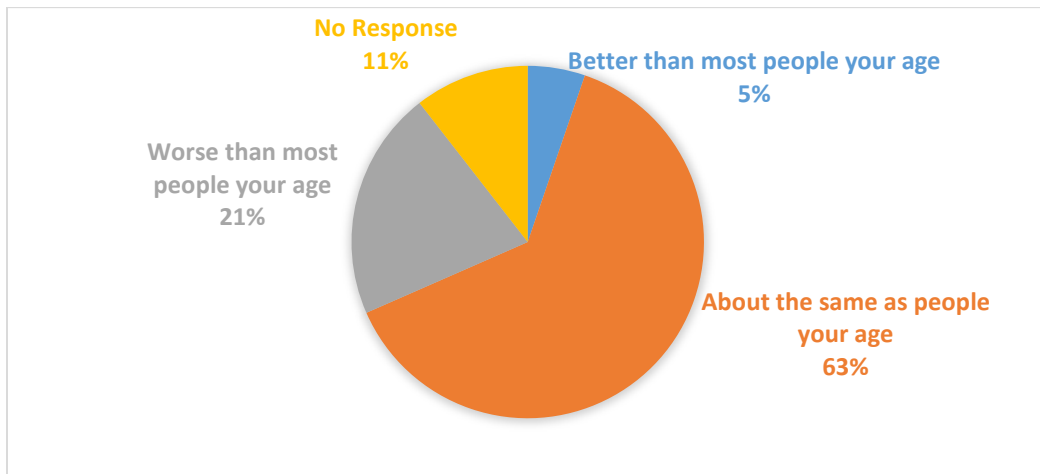


**Figure 3.** Responses to the questions “Have you received mental health treatment/counseling in the past year from a psychologist, psychiatrist, social worker, or counselor?” (n = 108)

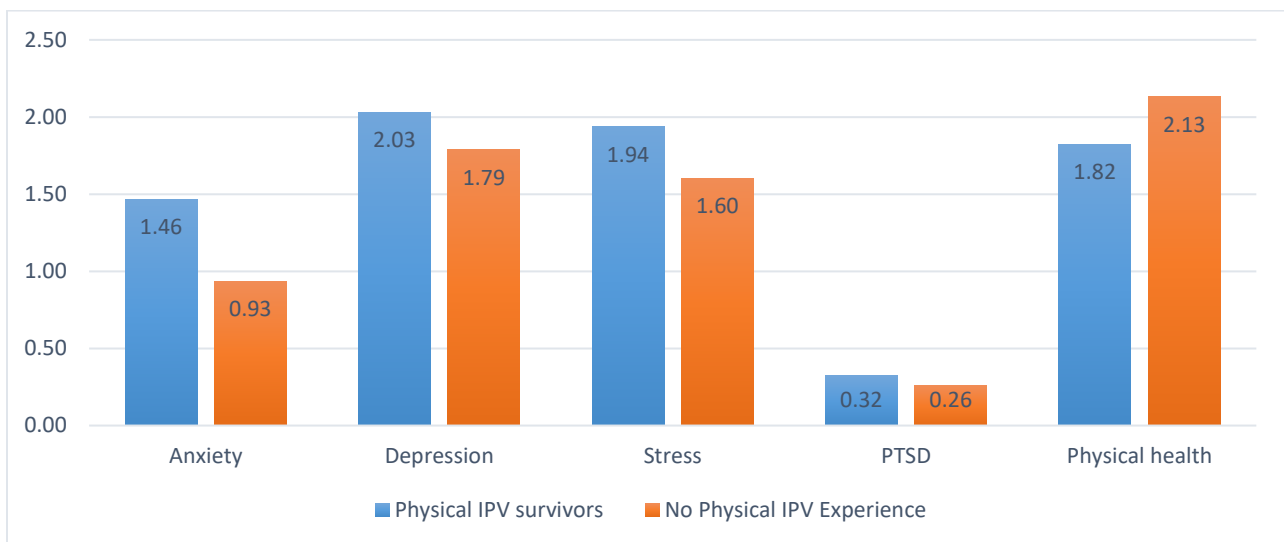


**Figure 4.** Responses to the question “Are you CURRENTLY taking any medication prescribed by a health professional used to treat depression, anxiety, ADHD, or any other psychological or mental health concern?” (n = 108)

**Physical and Mental health of IPV survivors who have never sought service.** The physical and mental health of the 19 interviewees were examined in comparison to those who did not experience physical IPV victimization. Independent sample *t* tests suggest that physical IPV survivors reported significant worse physical health ( $t = -2.11, p < .05$ ), higher level of stress ( $t = 2.09, p < .05$ ) and anxiety ( $t = 3.84, p < .001$ ). While not reaching statistical significance, depression ( $t = 1.81, p = .07$ ) and PTSD ( $t = .70, p = .49$ ), IPV survivors reported higher average depression and PTSD than their counterparts who have never experienced physical IPV.



**Figure 5.** Self-reported Physical Health Statuses



**Figure 6.** IPV Survivor Physical and Mental Health in Comparison with Non-survivors

## Qualitative Interviews

**IPV Experiences.** The survivors reported many different forms of abuse, ranging from emotional abuse (e.g., name calling, degrading, 15 out of 19 participants reported this type of abuse), financial abuse (e.g., “*most of my money would go to him*”, 4 out of 19) to being forced to leave the shared house/apartment (3 out of 19), damaged property (e.g., slashed car tire, smashed phone, 5 out of 19), and physical violence (e.g., hit by a phone, pushed, hit, 9 out of 19).

All participants, whether still in the relationship<sup>1</sup> or not, were aware of the unhealthy nature of and upset by the relationship. However, they expressed the struggle of leaving the relationship, due to feelings toward the person, low relationship self-efficacy (e.g., worried about finding someone else), or practical constraints (e.g., not having money, job, or a place to stay).

Survivors who had left the abusive relationship, when reflecting back, expressed regret of not ending the relationship earlier and not calling out for help. However, they did recognize the difficulty of leaving the relationship, and three participants who had just broke up talked about their urge of going back to the abusive partner.

**Disclosure and barriers.** Although most participants reported talking about their experiences to others, typically a close family member or close friends, the majority of them mentioned that they did not feel comfortable talking to others about their abusive relationship. When asked whether they had someone to talk to if they needed support, all participants responded that they had at least one or two family members or close friends to talk to. However, whether they chose to talk was a different story. They identified multiple reasons for this reluctance:

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<sup>1</sup> For participants who were in an abusive relationship, interviewers followed a protocol (Appendix D) and a help sources document (Appendix E) is shared to the participants.

*Deprivation of close relations.* Many participants talked feeling “*isolated*” in their abusive relationship because their partner was jealous and controlling, which forced them to distance themselves from others, including family and friends. For example, one participant said,

*I remember I kind of cut off communication with even my family because... me and my brother used to be close... but when I started dating V, he would be like, "You and your brother have an inappropriate relationship." Like yeah, just things like that. And I definitely distanced myself. I was like okay, like anything to make it stop.*

Some participants also mentioned that their partner asked them to not talk to others because “*If you talk to anybody about it, they're going to think like negatively of me.*”

*Worrying about bothering others.* Others noted that they were worried about being burdensome to others. Thus, even if they initially talked with a friend, they later tried to refrain from speaking about the abuse too much. One participant said, “*I would call like my best friend every once in a while when something would happen, and it just felt like too much. And I wouldn't do that often because I felt like such a bad friend, only calling when I needed, and not really listening to her.*”

*Afraid of being judged.* Some participants decided to not to talk to others because they were worried about being judged. One participant reflected: “*I felt like I had people to talk to but a lot of people are very judgmental so-... some people would just say, oh you should've left a long time ago. You knew this was gonna happen. Just degrading-... the fact that I didn't leave prior to when I did.*” Feelings of shame repeated themselves across interviews (e.g., “*I feel ashamed because I shouldn't be in a situation like this*”).

*Talking is not always helpful.* Participants also noted that their conversation with family and friends were not always helpful. For example, one participant said that she used to talk to



this friend about her abusive relationship and the friend would say “*just leave, just leave*”. It was not helpful to the participant because she did not feel she could leave the relationship at the time, so she “*stopped telling her what was going on.*” Another participant said she did not want to talk to others because “*I didn't want people to continue telling me the same thing.*” She further added “*I told somebody something they would tell me, oh well you're just- you're overreacting...Like, you know, it's not that serious and you can get over it. You'll be fine. But....*”

*Protecting the image of their partner.* One factor that prevented female domestic violence survivors from talking to others was the need to protect their partner’s image. As one survivor said,

*I would think that I can talk to people, but at the same time, it's like I try to keep my relationship private and stuff. And don't get me wrong, I have friends and family members and everything that I can talk to, but I kind of also don't want them in my business either because I don't want to tell them stuff and let them into our business and then they look at him as a bad person, because I don't think he's so much of a bad person as just that he's very stubborn and just doesn't have a lot of understanding of some things sometimes.*

Similarly, many women stated that they did not tell others because they wanted to protect their relationships and did not to be told to end the relationship. One participant said, “*I don't want drama to start and people to get mad at him and my brothers try to fight him or my friends and family turn against him and don't like him. There's just a lot of stuff that comes with that.*”

Another participant said,

*I wouldn't want some of my family members knowing what's going on because I mean that would make it harder. ...cause like I said it makes it really hard whenever you want*

*to be with somebody but nobody else wants you to be with that person. You feel isolated. You feel like you have no one-... but that person. And just simple arguments and simple fights because you break up for something stupid and then, you know, you get back together and it feels like you lose friends, you lose family members. You lose your support group and it sucks.*

**Support needs.** When asked about support needs, almost all participants talked about the need for more support, even among those who reported having many people to talk with. When the participants talk about support, they were mostly referring to emotional support such as someone who can listen to them without judging, who understand their situation, and someone who can provide suggestions. This relates to some of the aforementioned barriers to disclosure. For example, one participant said,

*I wish I could've had someone to talk to- ... that didn't tell me to leave him. That wouldn't care if I stayed with him or I left him but would listen to what I had going on and help me walk through what could, you know, help me work on the situation. 'Cause like I said, I didn't wanna leave at all for a long time.*

As a result, several participants mentioned wanting someone to talk to anonymously or someone who experienced a similar situation who could relate to their experiences.

**Knowledge about professional services.** When asked what they knew about IPV services, the majority of participant knew very little, save that services exist. What little they did know about IPV services came from publicly posted information in their community, school/workplace, or other organizations. Many were also aware of shelters in their neighborhood because of a family works there or they have passed by. Despite this lack of overall awareness, all participants demonstrated high efficacy in finding information if needed.

Almost all said that they would “*just google it*” if they needed any information.

**Reasons for not seeking professional help.** When asked about what influenced their decision to not seek professional help, many different reasons were mentioned, including “*did not want to go through the trouble*” or not wanting to “*wake the beast up*”. Survivors also mentioned family influences and intentions to protect their partner as additional reasons.

**Family influence.** Several IPV survivors mentioned family influence when making a decision about service utilization. Specifically, participants suggested that they would either follow the pattern of their parents or avoid being like their parents. Many participants reported that they endured the abuse just as their parents did. As one participant said, “*I felt like if my parents made it I could make it too*”. Another participant also described,

*I'm very stubborn, like I touch the stove to get burned And I think part of my like my family history, like my parents' relationship, because I feel like I'm very much like my father. My mom, growing up, was an alcoholic. And my dad stayed through it all. He just gave and gave and gave. I think I'm a lot like my father.*

On the other hand, many stayed in the abusive relationship because they did not want to be like their parents who were no longer together. One participant stated that she did not want to call the police when she was abused by her boyfriend because her dad went to jail after her mom called the police, and she had blamed her mom for all her life. Another respondent said,

*But at the same time that is my daughter's father and I grew up in an unhappy home. It's still unhappy. My parents argue all the time and I don't ... you don't see affection from them, um. And my dad badmouths everyone, including me. And I felt like if my parents made it I could make it too. I didn't grow up without both of my parents and I didn't want my daughter to grow up without both of her parents.*

Others discussed not wanting “to go through the trouble” of reporting and dealing with professionals.

**Protecting partner.** Two participants reported defending their partners when the police were called because they did not want their partner to get into trouble. One participant said that she did not want to ruin her partner’s career. The other participant described a situation when her neighbors called the police because they heard them fighting. In order to protect her partner, when the police arrived, her partner was “on top of me” abusing her but she told the police it was her fault. Consequently, the police asked her to leave her partner’s apartment and she had to take her cat and drove several hours to her mother’s place in a late evening.

Another participant reported that her partner called the police when he was abusing her:

*Participant: I never called the police, but he has before. Yeah, he called them because he was like, "I'm just going to do it before you do it, and stuff." "Since I'm the bad guy here, I'll just call the police on myself and just tell them that I was putting my hands on you."*

*Interviewer: Okay. So, he knew at some point the police was going to be called, right?*

*Participant: Yeah. And he would use that. And then I would try to tell him, "No, please don't call the police because I know what you're doing is wrong," but I guess me showing too much sympathy and stuff I be like, "I don't want you to go to jail and charges to be filed against you, so please don't call the police." So, a lot of times the police wouldn't end up coming because of that.*

**Barriers accessing professional help.** Some participants talked about wanting to get professional help but decided against it. Notably, when asked about services to help with relationship problems, participants primarily thought of counseling or therapy, suggesting that many viewed the abuse as a “relationship problem” rather than something needing legal or

domestic violence services. Indeed, as one participant said, “in my age group, we kind of think like, oh, it's not that bad. So I don't need to seek services for it.” Relatedly, one of the frequently mentioned reasons for not utilizing IPV services was that participants did not want to take resources. As one participant said, *“I don't wanna waste somebody else's resources, whatever. I could figure something else out.”* Another said, *“I'll let the services be here for other people who may have it worse than me.”*

One participant who did reach out for IPV services (i.e., called a hotline), mentioned additional barriers like worrying about her partner finding out. This was especially challenging because she was married to and living with her abusive partner. At the time of the interview, she had just tried to call the hotline the week before. Her partner walked in when she was on the phone, so she had to hang up, but she was hoping to try again.

Another participant reached to Suicide Hotline and reported feeling worse after using the service. The participant said *“they'll talk to you for like a few minutes until they think you're no longer in, quote-unquote, “danger,” and then they're like, ‘Okay, you know, if you're not about to jump off the ledge then we need to stop talking to you. Bye.’”* She further elaborated *“they weren't really listening or really caring for that matter, It was more of like they have a policy they're following, and they're listening and they're going, ‘Aha. Aha. Aha.’ But they could just be saying ‘Aha’ while not even listening.”*

Survivors also worried about getting judged from family or friends if they used services. For example, one participant said,

*and I think there's just like fear of ... I would say fear of judgment, not by like the service people or services, but like claiming it, that you go or attend or need those services, like*

*saying I'm going to such and such or ... I think fear of judgment by like, friends or family or things like that might impact why people don't want to do.*

Many participants also talked about wanting to use counseling services to help address problems they encounter with their abusive partner. However, lack of time and money was identified as a persistent problem, especially given that participants in this study were mostly emerging adults with limited financial resources. Most participants were still in school or just started working and many work full time with limited flexibility in their work schedules. Some mentioned that their school offered free counseling, however, these services were often “too busy” and “tough to book a time”.

**Suggestions.** Participants provided many suggestions on how to better help those who are dealing with abusive relationships.

**Education.** Many survivors who have ended an abusive relationship talked about the importance of educating people about unhealthy and abusive relationships. Using their own experiences, they noted that not knowing that they were in an unhealthy relationship was one of the main reasons they stayed in the relationship. For example, one participant said,

*I don't think I knew about like emotional abuse until like this relationship because I was like ... it like was head-on. ...I think that definitely kind of needs to be brought to light because I don't think a lot of people know about it. And it is really hard to see and define and recognize it because I think emotional abuse is just as damaging as physical abuse. So I think that should definitely be like promoted in some way, like, "Hey- even if it's not physical you still have the option, like you can call us or you can..."so I think bringing to light abuse isn't just physical.*

**Support groups.** Many participants felt they did not have enough support and wish they had someone to talk to. They emphasized the importance of talking with someone anonymously in order to not worry about being judged. Many also stressed the importance of having someone who had similar experiences who would understand their predicament. As one participant described,

*Well I mean I feel like if there was a ... like a- like a Facebook group where, you know-... people in similar situations can talk about things without being ... like they can understand each other-... and understanding why like, okay I get why you're not leaving and be there for people. Or maybe like an anonymous chatroom or something. Something where no one's gonna really know what's going on but you can tell if- somebody everything that's happening and they can, you know, help you just help you through what you could do to-... to make this situation better or just so somebody can get it out.*

**Service easy to access.** When asked about how to make service easier to access, many ideas emerged including services provided at close locations and in different forms using modern media technology. While participants suggested that making services available through phone, text messages, internet chat, or phone apps would be helpful, no clear preference of one technology over another emerged.

**Help from school/work place.** When asked about what school/work place can do to help with their situation, several suggestions came up. Participants emphasized the importance of having supportive environment that is “*more understanding of your personal life and they weren't too strictly focused on productivity at work and producing results.*” For school, one participant mentioned that she found inclusion of support resources in course syllabi is very helpful, especially when the professor verbally went over the information on the first day of

class. More importantly, almost all participants talked about the importance of having free onsite counseling/therapy services at school. However, many complained that the services were too busy and suggested increased availability. Similarly, onsite counseling/therapy services at work place is suggested. Some participants also hoped that their work place would provide family service/support (e.g., child care during work hours) and a benefit package that covers service and wellness checks which will enable participants to go for services “*before it is too late.*”

***Help from communities.*** A couple of participants also suggested that communities could reach out to IPV victims. One participant said, “*I'm sure there's a lot of girls going through that behind closed doors, but they're just not saying anything about it or it's not being put out there in the open, so nobody would ever know about it and stuff. But I feel like if somebody was to make a page and reach out to people about it and stuff, there will be more women to talk about--be comfortable in talking about the situation and getting help and advice when it comes to that.*” As a result, three participants had recommended to have more community outreach programs.

Participants also mentioned the importance of having service information in easily accessible locations in community. For example, some suggested having flyers or pamphlets in community centers or area businesses (e.g., “*Starbucks*”, churches), “*because you never know where you run into it.*” The reason for this recommendation is because they feel many people who are in need of help do not know these services exist, thus making information available, such as providing hotline numbers, would be helpful.

### **Recommendations for IPV Services**

The study identified an overall lack of knowledge of IPV and awareness of professional IPV services among young adult female IPV survivors. Although our participants appeared to know that professional help is available, many of them did not seem to know enough about the



course and consequences of IPV to realize that they may be in need of such services. Although many recognized that counseling or therapists were potential resources, they identified the high cost and lack of access as a major barrier to utilizing. Knowledge of reduced cost or free help such as hotlines was lacking. Based on these findings, more promotion of available – and especially reduced-cost – services is needed.

One potentially effective way to promote professional services for this age group is to utilize modern technology, such as text messaging, phone apps, and social media. Indeed, when our participants received text messages from our research team with links to websites and apps, they were more willing to explore options. Also, making information available at convenient locations (e.g., coffee shops, advertisements on popular social media sites) is likely effective.

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## Appendix A. Measures of the *DiS* Survey

### IPV Measure

<b>The following questions ask about things that may have happened to you with your boyfriend/girlfriend while you were having an argument. Please remember that all answers will be kept confidential (private).</b>		
<b>During a conflict or argument with my boyfriend/girlfriend (or ex-boyfriend/ex-girlfriend)...</b>	<b>Yes [1]</b>	<b>No [2]</b>
1.A. <b>I</b> touched him/her sexually when he/she didn't want me to. <b>[cad1a]</b>	yes <input type="radio"/>	no <input type="radio"/>
1. B. <b>He/She</b> touched me sexually when I didn't want him/her to. <b>[cad1b]</b>	yes <input type="radio"/>	no <input type="radio"/>
2.A. <b>I</b> tried to turn his/her friends against him/her. <b>[cad2a]</b>	yes <input type="radio"/>	no <input type="radio"/>
2. B. <b>He/She</b> tried to turn my friends against me. <b>[cad2b]</b>	yes <input type="radio"/>	no <input type="radio"/>
3.A. <b>I</b> did something to make him/her feel jealous. <b>[cad3a]</b>	yes <input type="radio"/>	no <input type="radio"/>
3. B. <b>He/She</b> did something to make me feel jealous. <b>[cad3b]</b>	yes <input type="radio"/>	no <input type="radio"/>
4.A. <b>I</b> destroyed or threatened to destroy something he/she valued. <b>[cad4a]</b>	yes <input type="radio"/>	no <input type="radio"/>
4. B. <b>He/She</b> destroyed or threatened to destroy something I valued. <b>[cad4b]</b>	yes <input type="radio"/>	no <input type="radio"/>
5.A. <b>I</b> brought up something bad that he/she had done in the past. <b>[cad5a]</b>	yes <input type="radio"/>	no <input type="radio"/>
5. B. <b>He/She</b> brought up something bad that I had done in the past. <b>[cad5b]</b>	yes <input type="radio"/>	no <input type="radio"/>
6.A. <b>I</b> threw something at him/her. <b>[cad6a]</b>	yes <input type="radio"/>	no <input type="radio"/>
6. B. <b>He/She</b> threw something at me. <b>[cad6b]</b>	yes <input type="radio"/>	no <input type="radio"/>
7.A. <b>I</b> said things just to make him/her angry. <b>[cad7a]</b>	yes <input type="radio"/>	no <input type="radio"/>
7. B. <b>He/She</b> said things just to make me angry. <b>[cad7b]</b>	yes <input type="radio"/>	no <input type="radio"/>
8.A. <b>I</b> spoke to him/her in a hostile or mean tone of voice. <b>[cad8a]</b>	yes <input type="radio"/>	no <input type="radio"/>
8.B. <b>He/She</b> spoke to me in a hostile or mean tone of voice. <b>[cad8b]</b>	yes <input type="radio"/>	no <input type="radio"/>
9.A. <b>I</b> forced him/her to have sex when he/she didn't want to. <b>[cad9a]</b>	yes <input type="radio"/>	no <input type="radio"/>
9.B. <b>He/She</b> forced me to have sex when I didn't want to. <b>[cad9b]</b>	yes <input type="radio"/>	no <input type="radio"/>

10.A. <b>I</b> threatened him/her in an attempt to have sex with him/her. <b>[cad10a]</b>	yes <input type="radio"/>	no <input type="radio"/>
10.B. <b>He/She</b> threatened me in an attempt to have sex with me. <b>[cad10b]</b>	yes <input type="radio"/>	no <input type="radio"/>
11.A. <b>I</b> insulted him/her with put-downs. <b>[cad11a]</b>	yes <input type="radio"/>	no <input type="radio"/>
11.B. <b>He/She</b> insulted me with put-downs. <b>[cad11b]</b>	yes <input type="radio"/>	no <input type="radio"/>
12.A. <b>I</b> kissed him/her when he/she didn't want me to. <b>[cad12a]</b>	yes <input type="radio"/>	no <input type="radio"/>
12.B. <b>He/She</b> kissed me when I didn't want him/her to. <b>[cad12b]</b>	yes <input type="radio"/>	no <input type="radio"/>
13.A. <b>I</b> said things to his friends about him/her to turn them against him/her. <b>[cad13a]</b>	yes <input type="radio"/>	no <input type="radio"/>
13.B. <b>He/She</b> said things to my friends about me to turn them against me. <b>[cad13b]</b>	yes <input type="radio"/>	no <input type="radio"/>
14.A. <b>I</b> ridiculed or made fun of him/her in front of others. <b>[cad14a]</b>	yes <input type="radio"/>	no <input type="radio"/>
14.B. <b>He/She</b> ridiculed or made fun of me in front of others. <b>[cad14b]</b>	yes <input type="radio"/>	no <input type="radio"/>
15.A. <b>I</b> kept track of who he/she was with and where he/she was. <b>[cad15a]</b>	yes <input type="radio"/>	no <input type="radio"/>
15.B. <b>He/She</b> kept track of who I was with and where I was. <b>[cad15b]</b>	yes <input type="radio"/>	no <input type="radio"/>
16.A. <b>I</b> blamed him/her for the problem. <b>[cad16a]</b>	yes <input type="radio"/>	no <input type="radio"/>
16.B. <b>He/She</b> blamed me for the problem. <b>[cad16b]</b>	yes <input type="radio"/>	no <input type="radio"/>
17.A. <b>I</b> kicked, hit, or punched him/her. <b>[cad17a]</b>	yes <input type="radio"/>	no <input type="radio"/>
17.B. <b>He/She</b> kicked, hit, or punched me. <b>[cad17b]</b>	yes <input type="radio"/>	no <input type="radio"/>
18.A. <b>I</b> accused him/her of flirting with another girl/guy. <b>[cad18a]</b>	yes <input type="radio"/>	no <input type="radio"/>
18.B. <b>He/She</b> accused me of flirting with another girl/guy. <b>[cad18b]</b>	yes <input type="radio"/>	no <input type="radio"/>
19.A. <b>I</b> deliberately tried to frighten him/her. <b>[cad19a]</b>	yes <input type="radio"/>	no <input type="radio"/>
19.B. <b>He/She</b> deliberately tried to frighten me. <b>[cad19b]</b>	yes <input type="radio"/>	no <input type="radio"/>
20.A. <b>I</b> slapped him/her or pulled his/her hair. <b>[cad20a]</b>	yes <input type="radio"/>	no <input type="radio"/>
20.B. <b>He/She</b> slapped me or pulled my hair. <b>[cad20b]</b>	yes <input type="radio"/>	no <input type="radio"/>
21.A. <b>I</b> threatened to hurt him/her. <b>[cad21a]</b>	yes <input type="radio"/>	no <input type="radio"/>
21.B. <b>He/She</b> threatened to hurt me. <b>[cad21b]</b>	yes <input type="radio"/>	no <input type="radio"/>
22.A. <b>I</b> threatened to end the relationship. <b>[cad22a]</b>	yes <input type="radio"/>	no <input type="radio"/>

22.B. <b>He/She</b> threatened to end the relationship. [cad22b]	yes <input type="radio"/>	no <input type="radio"/>
23.A. <b>I</b> threatened to hit him/her or throw something at him/her. [cad23a]	yes <input type="radio"/>	no <input type="radio"/>
23.B. <b>He/She</b> threatened to hit me or throw something at me. [cad23b]	yes <input type="radio"/>	no <input type="radio"/>
24.A. <b>I</b> pushed, shoved, or shook him/her. [cad24a]	yes <input type="radio"/>	no <input type="radio"/>
24.B. <b>He/She</b> pushed, shoved, or shook me. [cad24b]	yes <input type="radio"/>	no <input type="radio"/>
25.A. <b>I</b> spread rumors about him/her. [cad25a]	yes <input type="radio"/>	no <input type="radio"/>
25.B. <b>He/She</b> spread rumors about me. [cad25b]	yes <input type="radio"/>	no <input type="radio"/>

### Cyber Dating Abuse Measure

<b>In the <u>past year</u>, have the following behaviors occurred with the person that you currently are dating, or if you are not currently dating, the person you most recently dated?</b>	<b>Yes</b>	<b>No</b>
1.A. <b>I</b> posted embarrassing photos or other images of him/her online.	yes <input type="radio"/>	no <input type="radio"/>
1.B. <b>He/She</b> posted embarrassing photos or other images of me online.	yes <input type="radio"/>	no <input type="radio"/>
2.A. <b>I</b> sent threatening text messages to him/her.	yes <input type="radio"/>	no <input type="radio"/>
2.B. <b>He/She</b> sent threatening text messages to me.	yes <input type="radio"/>	no <input type="radio"/>
3.A. <b>I</b> used his/her social networking account (Facebook, MySpace, etc) without his/her permission.	yes <input type="radio"/>	no <input type="radio"/>
3.B. <b>He/She</b> used my social networking account (Facebook, MySpace, etc) without my permission.	yes <input type="radio"/>	no <input type="radio"/>
4.A. <b>I</b> wrote nasty things about him/her on my profile page/timeline (on Facebook, MySpace, etc).	yes <input type="radio"/>	no <input type="radio"/>
4.B. <b>He/She</b> wrote nasty things about me on his/her profile page/timeline (on Facebook, MySpace, etc).	yes <input type="radio"/>	no <input type="radio"/>
5.A. <b>I</b> sent him/her so many messages (like texts, emails, chats) that it made him/her feel unsafe	yes <input type="radio"/>	no <input type="radio"/>

5.B. <b>He/she</b> sent me so many messages (like texts, emails, chats) that it made me feel unsafe	yes <input type="radio"/>	no <input type="radio"/>
6.A. <b>I</b> sent him/her texts messages on his/her cell phone to check up on him/her (where are you, what are you doing, who are you with)	yes <input type="radio"/>	no <input type="radio"/>
6.B. <b>He/she</b> sent me texts messages on my cell phone to check up on me (where are you, what are you doing, who are you with)	yes <input type="radio"/>	no <input type="radio"/>
7.A. <b>I</b> sent him/her text messages, email, IM, chats, etc, to have sex or engage in sexual acts with me when I knew he/she did not want to	yes <input type="radio"/>	no <input type="radio"/>
7.B. <b>He/she</b> sent me text messages, email, IM, chats, etc, to have sex or engage in sexual acts with him/her when he/she knew I did not want to	yes <input type="radio"/>	no <input type="radio"/>
8.A. <b>I</b> spread rumors about him/her using a cell phone, email, IM, web chat, social networking site (Facebook, MySpace), etc.	yes <input type="radio"/>	no <input type="radio"/>
8.B. <b>He/she</b> spread rumors about me using a cell phone, email, IM, web chat, social networking site (Facebook, MySpace), etc.	yes <input type="radio"/>	no <input type="radio"/>

### Substance Use Measures

**The next set of questions are about alcohol and drug use. When the statement refers to “drinking alcohol,” please think in terms of any alcoholic beverage such as beer, wine, whiskey, liquor, rum, scotch, vodka, gin, or various alcoholic mixed drinks. Please also keep in mind that one drink of alcohol refers to one beer, one shot of liquor, or one glass of wine.**

In your <b>LIFETIME</b> , have you <b>EVER</b> used:	Yes [1]	No [2]
a) Alcohol (more than just a few sips) <b>[lifealc]</b>	yes <input type="radio"/>	no <input type="radio"/>
b) Cigarettes <b>[lifecig]</b>	yes <input type="radio"/>	no <input type="radio"/>
c) Marijuana <b>[lifepot]</b>	yes <input type="radio"/>	no <input type="radio"/>
d) Cocaine (powder, crack, or freebase) <b>[lifecoke]</b>	yes <input type="radio"/>	no <input type="radio"/>
e) Amphetamines (speed, crystal, crank, ice) <b>[lifespeed]</b>	yes <input type="radio"/>	no <input type="radio"/>
f) Inhalants (sniffed glue, huffing...) <b>[lifeinhale]</b>	yes <input type="radio"/>	no <input type="radio"/>
g) Ecstasy (MDMA, X, XTC, E) <b>[lifex]</b>	yes <input type="radio"/>	no <input type="radio"/>

<b>h)</b> Steroids that weren't prescribed by a health professional (juice, pumpers, weight trainers) <b>[liferoid]</b>	yes <input type="radio"/>	no <input type="radio"/>
<b>i)</b> Prescription medications that weren't prescribed by a health professional (Xanax, Vicodin, Oxycontin, Percocet, Ritalin, Ludes, Vitamin R, Handlebars) <b>[liferx]</b>	yes <input type="radio"/>	no <input type="radio"/>

**SPECIFIC QUESTIONS WILL ONLY BE ASKED IF THEY ENDORSED LIFETIME USE**

What about in the <b>PAST YEAR</b> , did you use any of the following ( <i>use your best estimate</i> ):	<b>Yes [1]</b>	<b>No [2]</b>
<b>a)</b> Alcohol (more than just a few sips) <b>[yralc]</b>	yes <input type="radio"/>	no <input type="radio"/>
<b>B)</b> Cigarettes <b>[yrcig]</b>	yes <input type="radio"/>	no <input type="radio"/>
<b>c)</b> Marijuana <b>[yrpot]</b>	yes <input type="radio"/>	no <input type="radio"/>
<b>d)</b> Cocaine (powder, crack, or freebase) <b>[yrcoke]</b>	yes <input type="radio"/>	no <input type="radio"/>
<b>e)</b> Amphetamines (speed, crystal, crank, ice) <b>[yrspeed]</b>	yes <input type="radio"/>	no <input type="radio"/>
<b>f)</b> Inhalants (sniffed glue, huffing...) <b>[yrinhale]</b>	yes <input type="radio"/>	no <input type="radio"/>
<b>g)</b> Ecstasy (MDMA, X, XTC, E) <b>[yrrx]</b>	yes <input type="radio"/>	no <input type="radio"/>
<b>h)</b> Steroids that weren't prescribed by a health professional (juice, pumpers, weight trainers) <b>[yrroid]</b>	yes <input type="radio"/>	no <input type="radio"/>
<b>i)</b> Prescription medications that weren't prescribed by a health professional (Xanax, Vicodin, Oxycontin, Percocet, Ritalin, Ludes, Vitamin R, Handlebars) <b>[yrrx]</b>	yes <input type="radio"/>	no <input type="radio"/>

**SPECIFIC QUESTIONS WILL ONLY BE ASKED IF THEY ENDORSED PAST YEAR USE**

The next questions are about the **PAST MONTH**.

**1. During the past 30 days, on how many days did you have at least one drink of alcohol? **[#daysalc]****

\_\_ \_\_ days (enter a # between 0 and 30)

**2. On average, how many drinks do you have per drinking occasion? (please keep in mind that a beer, glass of wine, and shot of liquor each equal 1 drink) **[#drinks]****

\_\_ \_\_ drinks per drinking occasion

3. For the next question, **binge drinking** is defined as 5 or more drinks for boys and 4 or more drinks for girls. In the **past month**, how many days would you say you participated in **binge drinking**? [**#daysbd**]

\_\_ days (enter a # between 0 and 30)

4. In the **past month**, how many days did you use marijuana? [**#dayspot**]

\_\_ days (enter a # between 0 and 30)

5. In the **past month**, how many days did you use ecstasy (for example, MDMA, X, XTC, E)? [**#daysx**]

\_\_ days (enter a # between 0 and 30)

6. In the **past month**, how many days did you use prescription medications that weren't prescribed (for example, (Xanax, Vicodin, Oxycontin, Percocet, Ritalin, Ludes, Vitamin R, Handlebars)? [**#daysrx**]

\_\_ days (enter a # between 0 and 30)

7. In the **past month**, how many days did you use other drugs (for example, cocaine, amphetamines, inhalants)? [**#daysinhale**]

\_\_ days (enter a # between 0 and 30)

**Mental Health Measures**

<b>In general, how true are the following statements about you:</b>			
	<b>Not True or Hardly Ever True [0]</b>	<b>Somewhat True or Sometimes True [1]</b>	<b>Very True or Often True [2]</b>
1. I worry about other people liking me. [ <b>gad1</b> ]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I am nervous. [ <b>gad2</b> ]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I worry about being as good as other kids. [ <b>gad3</b> ]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. I worry about things working out for me. <b>[gad4]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. I am a worrier. <b>[gad5]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. People tell me that I worry too much. <b>[gad6]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I worry about what is going to happen in the future <b>[gad7]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I worry about how well I do things. <b>[gad8]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. I worry about things that have already happened. <b>[gad9]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

<b>In general, how often do you:</b>				
	<b>Never</b> [1]	<b>once in a while</b> [2]	<b>fairly often</b> [3]	<b>most of the time</b> [4]
1. Feel easily annoyed or irritated? <b>[hos1]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Have temper outbursts you can't control? <b>[hos2]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Have urges to beat, injure, or harm someone? <b>[hos3]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Have urges to break or smash things? <b>[hos4]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Get into frequent arguments? <b>[hos5]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Shout or throw things? <b>[hos6]</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

<b>Below is a list of the ways you might have felt or behaved. Please tell me how often you have felt this way during the <u>PAST WEEK</u></b>				
<b>DURING THE <u>PAST WEEK</u>...</b>	<b>rarely or never (less than 1 day)</b>	<b>Some or a little of the time (1-2 days)</b>	<b>occasionally (3-4 days)</b>	<b>most or all of the time (5-7 days)</b>
1. I was bothered by things that usually don't bother me. <b>[cesd1]</b>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4

2. I had trouble keeping my mind on what I was doing. <b>[cesd2]</b>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
3. I felt depressed. <b>[cesd3]</b>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
4. I felt that everything I did was an effort. <b>[cesd4]</b>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
5. I felt hopeful about the future. <b>[cesd5]</b>	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
6. I felt fearful. <b>[cesd6]</b>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
7. My sleep was restless. <b>[cesd7]</b>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
8. I was happy. <b>[cesd8]</b>	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
9. I felt lonely. <b>[cesd9]</b>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
10. I could not “get going.” <b>[cesd10]</b>	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4

<b>Have you had any experience in your lifetime that was so frightening, horrible, or upsetting that, in the PAST MONTH you...</b>	<b>Yes [1]</b>	<b>No [2]</b>
1. Had nightmares about it or thought about it when you did not want to? <b>[ptsd1]</b>	yes <input type="radio"/>	No <input type="radio"/>
2. Tried hard not to think about it or went out of your way to avoid situations that reminded you of it? <b>[ptsd2]</b>	yes <input type="radio"/>	No <input type="radio"/>
3. Were constantly on guard, watchful, or easily startled? <b>[ptsd3]</b>	yes <input type="radio"/>	No <input type="radio"/>
4. Felt numb or detached from others, activities, or your surroundings? <b>[ptsd4]</b>	yes <input type="radio"/>	No <input type="radio"/>

### Childhood Abuse Measure

These questions ask about some of your experiences growing up as a child and up to age seventeen. Although these questions are of a personal nature, please try to answer as honestly as you can. For each question, select the response that best describes how you feel. Please indicate if the statements are **Never True**, **Rarely True**, **Sometimes True**, **Often True**, or **Very Often True**.



```[grow#_Y3]	Never True [1]	Rarely True [2]	Sometimes True [3]	Often True [4]	Very Often True [5]
1. I didn't have enough to eat.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I knew that there was someone to take care of me and protect me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. People in my family called me things like "stupid," "lazy," or "ugly".	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. My parents were too drunk or high to take care of the family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. There was someone in my family who helped me feel that I was important or special.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I had to wear dirty clothes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I felt loved.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I thought that my parents wished I had never been born.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. I got hit so hard by someone in my family that I had to see a doctor or go to the hospital.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. There was nothing I wanted to change about my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. People in my family hit me so hard that it left me with bruises or marks.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. I was punished with a belt, a board, a cord, or some other hard object.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. People in my family looked out for each other.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. People in my family said hurtful or insulting things to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. I believe that I was physically abused.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. I had the perfect childhood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. I got hit or beaten so badly that it was noticed by someone like a teacher, neighbor, or doctor.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I felt that someone in my family hated me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. People in my family felt close to each other.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Someone tried to touch me in a sexual way, or tried to make me touch them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. Someone threatened to hurt me or tell lies about me unless I did something sexual with them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I had the best family in the world.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Someone tried to make me do sexual things or watch sexual things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. Someone molested me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. I believe that I was emotionally abused.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. There was someone to take me to the doctor if I needed it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. I believe that I was sexually abused.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. My family was a source of strength and support.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Appendix B. Interview Guide

**Relationship Experiences:** Our interview today is about romantic relationships, we would like to start asking about your romantic relationship experiences.

1. Could you describe how you handle or talk about problems in your relationships?
2. Are you currently in a relationship? If yes, how long has it been? (If no, skip to Q7. If unsure of relationship status, try Q3 to decide if need to skip current relationship or not).

Let's talk about your **current relationship**.

3. Have you experienced any problems with jealousy or control in your current relationship?

**Probe:** (if just an answer yes without further information) Could you tell me a little more about it?

(if no mention of physical violence) Did is ever get physical?

(if no mention of their own action) What did you do in that situation?

(possible additional probing question if nothing like this come up in previous conversation) Was there a time you felt unsafe in your relationship?

How did you feel back then?

How do you feel now?

How did you handle the feeling?

4. Have you ever told anyone about your experiences in this relationship?

**Probe:** (if yes) To whom? How did you tell him/her?

How did you decide to tell him/her?

Was there a particular reason you decided to talk to this person?

**Probe:** (if no) Do you feel you need to talk with anyone about it?

Do you have someone to talk with if needed?

What are the barriers to talking about it with someone?

5. Have you ever had to go to the hospital/doctor to seek medical treatment for injuries because of something that happened in your current relationship?

**Probe:** (if yes) What happened?

6. Have you ever had to call the police (or did someone call the police for you) to intervene/help during a dispute with your current partner?

**Probe:** (if yes) What happened? How did police respond? How did your partner respond?

We will hear more about your **previous relationships** next.

7. Have you experienced any problems with jealousy or control in your previous relationship?

**Probe:** (if just an answer yes without no further information) Could you tell us a little more about it?

(if no mention of physical violence) Did it ever get physical?

(if no mention of their own action) What did you do in that situation?

(possible additional probing question if nothing like this come up in previous conversation) Was there a time you felt unsafe in your relationship?

How did the relationship end?

How did you feel back then?

How do you feel now?

How did you handle the feeling?

8. Have you ever told anyone about your experiences in this relationship? **SKIP QUESTIONS**

8-10 IF THEIR ANSWER IS NO TO Q7.

**Probe:** (if yes) To whom? How did you tell him/her?

How did you decide to tell him/her?

Was there a particular reason you decided to talk to this person?

**Probe:** (if no) Do you feel you need to talk with anyone about it?

Do you have someone to talk with if needed?

What are the barriers to talking about it with someone?

9. Have you ever had to go to the hospital/doctor to seek medical treatment for injuries because of something that happened in your previous relationship?

**Probe:** (if yes) What happened?

10. Have you ever had to call the police (or did someone call the police for you) to intervene/help during a dispute in your previous relationship?

**Probe:** (if yes) What happened? How did police respond? How did your partner respond?

**Services:** We will next talk about what you know and think of services.

11. (If no mention of service use in prior conversation) What kinds of services for health or mental health have you used in your community?
12. Tell me about a time when you wished you had more information about services or when you really needed or wanted support services.
13. What do you know about partner violence or family violence services?
14. How did you find out about family violence services?

**Probe:** Do you know how to find out or how to access if need to?

**Probe:** Who do you think need the service? In what type of situation?

15. Did you ever consider using such service but did not?

**Probe:** What happened? Why did you **not** use the service?

16. What are some barriers of using family violence services?

17. What can be improved to make family violence services more accessible/easy access?

18. How have your experiences with relationship problems influenced you at

[WORK/SCHOOL]?

**Probe:** Are there things your [WORKPLACE/SCHOOL] could do to help you meet your

[EMPLOYMENT/EDUCATIONAL] goals?

19. One of the goals of our study is to understand what unmet needs domestic violence survivors

have. Is there anything else you would like to tell me about the best ways agencies and

communities can help with the unmet needs of survivors?

### **Closing**

20. Is there anything else you would like to tell us about getting help for relationship problems?

Anything we have missed?

### Appendix C. Demographic Survey for Qualitative Study

1. How old are you in years? \_\_\_\_\_
2. How do you identify your gender?
  - (a) Male
  - (b) Female
  - (c) Other
3. How do you describe your ethnicity? (choose only ONE)
  - (a) Black/African-American
  - (b) White
  - (c) Hispanic
  - (d) Asian
  - (e) Native Alaskan, Native Hawaiian, Native American, or American Indian
  - (f) Multiracial
  - (g) Other: \_\_\_\_\_
4. What is the highest educational degree you have earned?
  - (a) Elementary school or middle school
  - (b) High school or GED
  - (c) Associate's degree
  - (d) Currently attending college
  - (e) College degree
  - (f) Master's degree
  - (g) Other: \_\_\_\_\_
5. What best fits your current situation?

- (a) College/trade school (even if working)
  - (b) Working (not in school)
  - (c) Not in school and not working
6. Who do you live with?
- (a) Family (parents, step-parents, grandparents, siblings)
  - (b) Friend(s)/Roommate(s)
  - (c) Girlfriend/Wife or Boyfriend/Husband
  - (d) Alone
7. Are you currently \_\_\_\_\_?
- (a) In a casual relationship
  - (b) In a boyfriend/girlfriend relationship
  - (c) Married
  - (d) Not in a relationship
8. What is the gender of your current or the most recent partner?
- (a) Male
  - (b) Female
  - (c) Other



## Appendix D. Protocol to Respond to Participant if Reporting Abuse

### During the interview

- Show sympathy during the interview, echo what the participant is saying, and do not to express opinions/feeling that is contradicting with what the participant is thinking/feeling. Given the topic of our study, we want to avoid possible discomfort if they are still contemplating the relationship and not ready to take any action.
- If participant expresses concerns or needs of help, ask her if she feels like she is in immediate, present danger.
  - If she says yes, ask if she would like us to end the interview there. Ask if she wants us to call the police or some other support for her. Stop the interview if she says so, and call or email Yu immediately.
  - If she says no, you could mention that we will provide resources at the end of the interview.

### At the end of interview (after turning off the recorder)

- Tell the participant that she can contact us for help in looking for resources. She could email [utmbdatingsurvey@gmail.com](mailto:utmbdatingsurvey@gmail.com) or call 409-370-6096.
- Tell the participant possible things she can do are:
  - Call hotline numbers for help
    - Available ones include National Domestic Violence Hotline, the Houston Area Women's Center, AVDA, and Crisis Text Line.
    - Ask her if she feels safe with her email, if yes, we will email her these numbers.
    - Ask her if she wants to have the numbers while on the phone and if she requests, we could text her the numbers.
  - Create a Safety Plan.
    - Ask the participant if she knows about Safety Plan, if not, you can provide the information below.
      - A safety plan is a personalized, practical plan that includes ways to remain safe while in a relationship, planning to leave, or after you leave. Safety planning involves how to cope with emotions, tell friends and family about the abuse, take legal action and more. A good safety plan will have all of the vital information you need and be tailored to your unique situation, and will help walk you through different scenarios.
    - Tell her to visit this website (<https://www.thehotline.org/help/path-to-safety/>) for information on how to create a Safety Plan.
    - She could also use “myplan app”, which is available both on mobile phone and web-based. It takes one through the creation of a safety plan (<https://www.myplanapp.org/home>)

## Appendix E. Help Resources

If you ever feel you or anyone you know may be in need of family violence or partner violence help, below are some possible useful resources:

### Find Out More on Family Violence and Healthy Relationships

National Domestic Violence Hotline website: <https://www.thehotline.org/>

### Call for Help

There are a number of free resources that are available 24/7. Below is a list of a few.

#### 1. National Domestic Violence Hotline

1-800-799-SAFE(7233) or TTY 1-800-787-3224.

#### 2. Houston Area Women's Center

Email: [info@hawc.org](mailto:info@hawc.org)

Website: <https://hawc.org>

- **Domestic Violence Hotline:** 713-528-2121

TDD Line: 713-528-3625

Toll Free: 1-800-256-0551

- **Sexual Assault Hotline:** 713-528-RAPE (7273)

TDD Line: 713-528-3691

Toll Free: 1-800-256-0661

#### 3. AVDA

Email: [contact@avda-tx.org](mailto:contact@avda-tx.org)

Website: <https://avda-tx.org/>

Phone: 713-224-9911

#### 4. Crisis Text Line

Text HOME to 741741 to get help from a trained crisis counselor

### Creating a Personalized Safety Plan

Something you might want to consider is to create a safety plan.

A safety plan is a personalized, practical plan that includes ways to remain safe while in a relationship, planning to leave, or after you leave. Safety planning involves how to cope with emotions, tell friends and family about the abuse, take legal action and more. A good safety plan

will have all of the vital information you need and be tailored to your unique situation, and will help walk you through different scenarios.

- We have included below a web link that contains tips on creating a personalized safety plan.

<https://www.thehotline.org/help/path-to-safety/>

- You could also use “myPlan App”, which is available both on mobile phone and web-based. It takes one through the creation of a safety plan (<https://www.myplanapp.org/home>)