As the program begins, viewers meet Juliana, Kayla, and Mary, three young women who are real-life survivors of dating abuse. Each survivor describes instances of dating abuse and the affects the abuse took on their lives. Throughout the video, these young women appear in candid interviews. They detail their individual experiences and how it felt to be in abusive relationships.

Soon viewers meet Melissa Siegel, co-founder of LoveSpeaksOut, a speakers’ bureau of teen dating abuse survivors. Melissa defines dating abuse as a relationship “…where one partner uses power and control through a pattern of abusive behaviors.” Next, viewers meet Dr. Shanti Kulkarni, professor of social work at University of North Carolina at Charlotte, who adds that the abuse can be physical, emotional, verbal, sexual, financial, or electronic. Dr. Kulkarni adds that regardless of the form of abuse, the intention of the abuser is to control his/her victim’s behaviors. Viewers also learn that the abuser’s desire for control must be an on-going pattern of behavior, not just one out-of-the-ordinary experience.

**Physical Abuse**

Next, Juliana describes the first instance where she experienced physical abuse at the hands of her boyfriend. In her story, Juliana describes that she had to go home even though her boyfriend didn’t want her to leave. When she tried to get out of the car, he grabbed her and punched her. Kayla then describes a scenario where her boyfriend picked her up out of the car and dropped her on the ground. He pinned her on the floor and restrained her movement. Kayla also recalls her father asking why she had bruises on her arm, to which she replied she wasn’t sure. Similarly, Juliana describes how she would make excuses for having marks on her body; that she ran into a corner or bumped her arm on a door.

Melissa notes that physical abuse is often seen as the most overt form on abuse. It can be scratching, kicking, punching, or physically retraining someone. Physical abuse can also be less tactile. For example, a person can use his/her body to intimidate another person. A weapon can also be used to physically intimidate a partner.

**Emotional Abuse**

Next, Melissa introduced emotional/verbal abuse. In her professional career, Melissa talks about emotional and verbal abuse as one concept because they go hand-in-hand. Dr. Kulkarni defines emotional/verbal abuse as, “using emotional and verbal tactics as a means of power and control.” It could be using put-downs, insults, name-calling, or berating a partner.

Juliana adds a survivor’s perspective by describing how worthless you feel when someone tells you you’re ugly and you’re fat. She describes that her boyfriend would strategically lower her self-esteem so that she would not be confident enough to leave him. Mary, another survivor, says that her boyfriend would become jealous and call her “a slut,” and “a whore.” Kayla also recalls that her boyfriend would manipulate her to believe she is a bad person, which had a terrible impact on her self-esteem. Dr. Kulkarni points out that emotional/verbal abuse can be difficult to understand because it can be subtle compared to physical abuse or sexual abuse. Abusers might publicly humiliate their partner or disrespect them in front of others. Kayla describes that her boyfriend tried
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Program Summary continued

to control the type of clothing she wore; he wanted to keep her covered up, despite the fact that they live in a very warm climate. He even tried to control how much makeup she wore by telling her she shouldn’t be trying to impress anyone else with makeup. Juliana details a story where her boyfriend hosed her with water and covered her in dirt because he didn’t approve of her wearing white jeans and a white blouse. After he destroyed her clothing, he paraded her down the street to humiliate her.

Melissa and Shanti also discuss how important bystanders can be in a public humiliation scenario. Rumors and destroyed reputations are perpetuated by bystanders who begin to gossip. Both professionals articulate how important it is to stop the cycle of gossip if you are a bystander. Similarly, Dr. Kulkarni mentions that LGBTQ youth can be manipulated by abusers who threaten to out their victims before they are ready.

Mary talks about the fact that her abuser would threaten self-harm if things didn’t go his way. Ms. Siegel talks about threats as a form of control. Abusers will threaten to harm themselves, their partner, their partner’s family, friends and/or pets. Ms. Siegel discusses the difference between threatening suicide as a means of control and threatening suicide as a cry for help.

Sexual Abuse

Ms. Siegel discusses rape as the most overt form of sexual abuse. Dr. Kulkarni adds that sexual abuse also comes in other forms, such as forced pregnancy and birth control sabotage. If the abuser thinks he/she has a right to you sexually, it can be a form of abuse. Abusers can manipulate their victims sexually by threatening to damage their reputations or otherwise. Ms. Siegel continues that consenting to any sexual encounter means having a constant conversation; that you need to consent to each sexual act every time and every location.

Digital/Cyber Abuse

Dr. Kulkarni opens this segment by stating that we know the least about digital/cyber abuse because it is the newest form of abuse. Ms. Siegel continues that abusers use cell phones, social media and computers to control, just as they would use anything else they can. Cyber abuse is particularly interesting as a form of abuse because abusers can use cell phones and social media to abuse their victims when they aren’t in their physical presence. Juliana describes obsessive calling and texts from her boyfriend, always demanding to know where she was and whom she was with. Additionally, Kayla experienced similar cyber abuse. Mary discusses how her boyfriend would post social media statuses about killing her and threatening to harm her.

Ms. Siegel discusses problems with GPS locators on victim’s phones—that abusers will secretly enable this function on a phone to be able to track where their partner is. Other types of cyber abuse include demanding passwords for cellphones, social media and computers. Ms. Siegel continues by saying that it’s important to have a conversation with your partner about your boundaries and expectations for cellphone, computer and social media privacy.
Getting Help

Kayla says she didn’t leave sooner because she got too comfortable. She thought she knew how to deal with him and that was enough. Mary says she didn’t realize how difficult it is to end abusive relationships until she was in one herself. Juliana says she stayed because she felt like she could change her boyfriend to be a better person. Ms. Siegel talks about the barriers to leaving abusive relationships, including fear. In fact, according to professionals, the ending of a relationship is often the most dangerous time for victims. They are at the peak of danger for fear of what the abuser might do in desperation. Additionally, victims often think that their abuse is their fault or that the abuse is “normal.”

Dr. Kulkarni and Ms. Siegel talk about the importance of telling someone you trust that you’re in a dangerous situation. If you don’t get the response that you need, try talking to someone else. A school counselor, a teacher, a parent, good friend, or other trusted adult can give guidance and support in this difficult situation. LoveisRespect.org is a great resource for teen dating abuse. It is completely anonymous, meaning that you are not required to give your name or address unless you’d like more help. Users can call, text or chat with an advocate who can talk to you about any concern you might have.

Helping a Friend

Ms. Siegel explains that as a friend, the first thing you want to do is keep your friend safe. And even though you might think this means you can confront the abuser, this is often not productive or helpful to your friend. Often friends will set ultimatums to the victim, saying that if they don’t end the relationship, we can’t be friends. This, too, is not helpful or productive for a victim of dating abuse.

Juliana introduces her friend, Tasia, who stuck by her throughout the abusive relationship. Rather than tell Juliana what to do, Tasia provided “a shoulder to cry on,” which was very helpful to Juliana. Ms. Siegel reiterates that the best thing a friend can do is explain his/her concern while also emphasizes his/her unconditional support. It’s extremely important for victims of abuse to make the decision to leave on their own. As a friend, you don’t want to tell your friend what to do; the choice is up to them.

Ms. Siegel also discusses the warning signs to look for in your friends, including isolation from friends and family, spending less time doing the things they love, having a very controlling partner, changing habits (like dress or activities), grades dropping. The key is to look for a pattern of behavior.

Conclusion

Trusting your instincts is incredibly important, according to Ms. Siegel, especially in the context of a relationship. Whether you feel really good in a relationship or if something just doesn’t feel right, young people should feel empowered to listen to your instinct and discuss it with your partner. If your partner doesn’t listen to you or seems unwilling to change, this is also a warning sign.
Dr. Kulkarni describes a healthy relationship as having mutual respect, trust, good communication, where you can be yourself, where you can have conflict and be able to work through it, where you have fun and shared interests.

**Financial Abuse**  
*(This section is included on the DVD under Additional Material)*

Dr. Kulkarni defines financial abuse as anything having to do with money in attempt to control and manipulate a partner. It could be regulating how much a partner spends, buying gifts as a way to manipulate a partner, preventing a partner from working and earning their own income; anything having to do with controlling someone’s financial flexibility.

**Effects of Dating Abuse**  
*(This section is included on the DVD under Additional Material)*

Mary explains that her grades at school started to drop because she spent so much time on the phone with her boyfriend. Kayla describes how her self-esteem was so low that she turned to drugs and alcohol as a way to numb the pain. Even now, after the relationship is over, Mary talks about how she has difficulty forming relationships and trusting people. Juliana says that she felt worthless. Ms. Siegel talks about the impact of low self-esteem on victims of abuse, including depression, self-medication with drugs and alcohol, eating disorders, and attempted suicide. She explains that trauma can create many other problems for victims and it’s important to treat each of the effects of dating abuse as seriously as the abuse itself.
The video and print materials in *Coping with Dating Violence and Abuse* are compatible with the Performance Indicators of the *National Health Education Standards* (grades 6 - 8) as indicated below.

**National Health Education Standard 1:** Students will comprehend concepts related to health promotion and disease prevention to enhance health.

**Performance indicators for grades 6 - 8**

1.8.1 Analyze the relationship between healthy behaviors and personal health.
1.8.2 Describe the interrelationships of emotional, intellectual, physical, and social health in adolescence.
1.8.3 Analyze how the environment affects personal health.
1.8.4 Describe how family history can affect personal health.
1.8.5 Describe ways to reduce or prevent injuries and other adolescent health problems.
1.8.6 Explain how appropriate health care can promote personal health.
1.8.7 Describe the benefits of and barriers to practicing healthy behaviors.
1.8.8 Examine the likelihood of injury or illness if engaging in unhealthy behaviors.
1.8.9 Examine the potential seriousness of injury or illness if engaging in unhealthy behaviors.

**National Health Education Standard 2:** Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

**Performance indicators for grades 6 - 8**

2.8.1 Examine how the family influences the health of adolescents.
2.8.2 Describe the influence of culture on health beliefs, practices, and behaviors.
2.8.3 Describe how peers influence healthy and unhealthy behaviors.
2.8.4 Analyze how the school and community can affect personal health practices and behaviors.
2.8.5 Analyze how messages from media influence health behaviors.
2.8.6 Analyze the influence of technology on personal and family health.
2.8.7 Explain how the perceptions of norms influence healthy and unhealthy behaviors.
2.8.8 Explain the influence of personal values and beliefs on individual health practices and behaviors.

**National Health Education Standard 3:** Students will demonstrate the ability to access valid information, products, and services to enhance health.

**Performance indicators for grades 6 - 8**

3.8.2 Access valid health information from home, school, and community.
3.8.4 Describe situations that may require professional health services.
**National Health Education Standard 4:** Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

**Performance indicators for grades 6 - 8**

- 4.8.1 Apply effective verbal and nonverbal communication skills to enhance health.
- 4.8.2 Demonstrate refusal and negotiation skills that avoid or reduce health risks.
- 4.8.3 Demonstrate effective conflict management or resolution strategies.
- 4.8.4 Demonstrate how to ask for assistance to enhance the health of self and others.

**National Health Education Standard 5:** Students will demonstrate the ability to use decision-making skills to enhance health.

**Performance indicators for grades 6 - 8**

- 5.8.1 Identify circumstances that can help or hinder healthy decision making.
- 5.8.2 Determine when health-related situations require the application of a thoughtful decision-making process.
- 5.8.3 Distinguish when individual or collaborative decision making is appropriate.
- 5.8.5 Predict the potential short-term impact of each alternative on self and others.
- 5.8.6 Choose healthy alternatives over unhealthy alternatives when making a decision.
- 5.8.7 Analyze the outcomes of a health-related decision.

**National Health Education Standard 6:** Students will demonstrate the ability to use goal-setting skills to enhance health.

**Performance indicators for grades 6 - 8**

- 6.8.1 Assess personal health practices.
- 6.8.2 Develop a goal to adopt, maintain, or improve a personal health practice.
- 6.8.3 Apply strategies and skills needed to attain a personal health goal.
- 6.8.4 Describe how personal health goals can vary with changing abilities, priorities, and responsibilities.

**National Health Education Standard 7:** Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

**Performance indicators for grades 6 - 8**

- 7.8.1 Explain the importance of assuming responsibility for personal health behaviors.
- 7.8.2 Demonstrate healthy practices and behaviors that will maintain or improve the health of self and others.
- 7.8.3 Demonstrate behaviors to avoid or reduce health risks to self and others.

**National Health Education Standard 8:** Students will demonstrate the ability to advocate for personal, family, and community health.

**Performance indicators for grades 6 - 8**

- 8.8.1 State a health-enhancing position on a topic and support it with accurate information.
- 8.8.2 Demonstrate how to influence and support others to make positive health choices.
The video and print materials in *Coping with Dating Violence and Abuse* are compatible with the Performance Indicators of the *National Health Education Standards* (grades 9 - 12) as indicated below.

**National Health Education Standard 1:** Students will comprehend concepts related to health promotion and disease prevention to enhance health.

**Performance indicators for grades 9 - 12**

1.12.1 Predict how healthy behaviors can affect health status.
1.12.2 Describe the interrelationships of emotional, intellectual, physical, and social health.
1.12.3 Analyze how environment and personal health are interrelated.
1.12.4 Analyze how genetics and family history can impact personal health.
1.12.5 Propose ways to reduce or prevent injuries and health problems.
1.12.6 Analyze the relationship between access to health care and health status.
1.12.7 Compare and contrast the benefits of and barriers to practicing a variety of healthy behaviors.
1.12.8 Analyze personal susceptibility to injury, illness, or death if engaging in unhealthy behaviors.
1.12.9 Analyze the potential severity of injury or illness if engaging in unhealthy behaviors.

**National Health Education Standard 2:** Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

**Performance indicators for grades 9 - 12**

2.12.1 Analyze how the family influences the health of individuals.
2.12.2 Analyze how the culture supports and challenges health beliefs, practices, and behaviors.
2.12.3 Analyze how peers influence healthy and unhealthy behaviors.
2.12.4 Evaluate how the school and community can affect personal health practice and behaviors.
2.12.5 Evaluate the effect of media on personal and family health.
2.12.6 Evaluate the impact of technology on personal, family, and community health.
2.12.7 Analyze how the perceptions of norms influence healthy and unhealthy behaviors.
2.12.8 Analyze the influence of personal values and beliefs on individual health practices and behaviors.

**National Health Education Standard 3:** Students will demonstrate the ability to access valid information, products, and services to enhance health.

**Performance indicators for grades 9 - 12**

3.12.2 Use resources from home, school, and community that provide valid health information.
3.12.4 Determine when professional health services may be required.
National Health Education Standard 4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

Performance indicators for grades 9 - 12

4.12.1 Use skills for communicating effectively with family, peers, and others to enhance health.
4.12.2 Demonstrate refusal, negotiation, and collaboration skills to enhance health and avoid or reduce health risks.
4.12.3 Demonstrate strategies to prevent, manage, or resolve interpersonal conflicts without harming self or others.
4.12.4 Demonstrate how to ask for and offer assistance to enhance the health of self and others.

National Health Education Standard 5: Students will demonstrate the ability to use decision-making skills to enhance health.

Performance indicators for grades 9 - 12

5.12.1 Examine barriers that can hinder healthy decision making.
5.12.2 Determine the value of applying a thoughtful decision-making process in health-related situations.
5.12.3 Justify when individual or collaborative decision making is appropriate.
5.12.5 Predict the potential short-term and long-term impact of each alternative on self and others.
5.12.6 Defend the healthy choice when making decisions.
5.12.7 Evaluate the effectiveness of health-related decisions.

National Health Education Standard 6: Students will demonstrate the ability to use goal-setting skills to enhance health.

Performance indicators for grades 9 - 12

6.12.1 Assess personal health practices and overall health status.
6.12.2 Develop a plan to attain a personal health goal that addresses strengths, needs, and risks.
6.12.3 Implement strategies and monitor progress in achieving a personal health goal.
6.12.4 Formulate an effective long-term personal health plan.

National Health Education Standard 7: Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

Performance indicators for grades 9 - 12

7.12.1 Analyze the role of individual responsibility for enhancing health.
7.12.2 Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.
7.12.3 Demonstrate a variety of behaviors to avoid or reduce health risks to self and others.

National Health Education Standard 8: Students will demonstrate the ability to advocate for personal, family, and community health.

Performance indicators for grades 9 - 12

8.12.1 Utilize accurate peer and societal norms to formulate a health-enhancing message.
8.12.2 Demonstrate how to influence and support others to make positive health choices.