



# Supporting Clients Who Have Experienced Intimate Partner Violence or Sexual Violence

Quick Tool # 4 – Provided by Jessica Jacoby, LCSW

The impact of intimate partner violence (IPV) and sexual violence (SV) on victims can manifest in a multitude of ways and its effects can last a lifetime. Obtaining and maintaining employment is one area that can be affected by these traumatic experiences. Whether the client has a history of IPV or SV or is currently in an abusive situation, it is necessary to approach their experience with support and understanding. As a workforce development professional, you can act as a source of safety and a bridge to the help that they need. It may be necessary to encourage them to see a specialist so that they can process their experience; however, it is essential to respect whatever decision they make whether it be to not seek support or leave an abusive relationship. This article will define both IPV and SV, explore the impacts this type of trauma has on survivors and address how you can support them in your work together.

## Intimate Partner Violence (IPV)

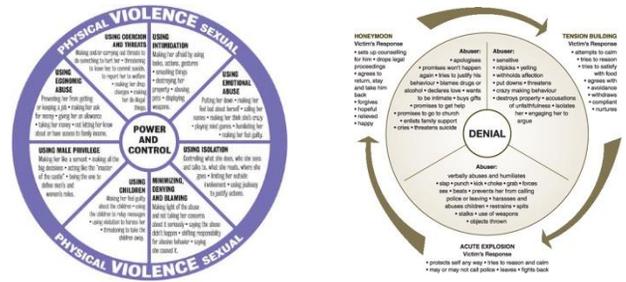
### Definition:

- Physical violence, sexual violence, stalking, psychological aggression or control of reproductive or sexual health by a current or former intimate partner
- It should be remembered that violence in intimate partner relationships can occur in same-sex relationships and that women do abuse men both physically and mentally

### Prevalence:

- One in 4 women (22.3%) have been the victim of severe physical violence by an intimate partner
- One in 7 men (14%) have experienced the same
- Racial/ethnic minorities are disproportionately affected by IPV
- IPV victimization is associated with lower household income and food and housing insecurity [NISVS]

There are many theories on the cycle of IPV and the struggle for victims to leave the abusive situation. The “Power and Control Wheel” (left) is a helpful tool in understanding the tactics that abusers use to gain power and control over their victims. The “Cycle of Violence” (right) demonstrates ways in which loving and abusive behaviors coexist and is difficult to break. If you are interested in learning more, please click on the icons below.



## Sexual Violence (SV)

**Definition:**

- Sexual activity when consent is not obtained or given freely
- It is about coercion and control, rarely about sexual gratification
- Can occur within intimate partner relationships or by acquaintances and is no less traumatic than stranger rape

**Prevalence:**

- Approximately 1 in 5 women (21.3%) in the U.S. reported experiencing completed or attempted rape at some point in their lifetime
- About 2.6% of U.S. men experienced completed or attempted rape victimization in their lifetime [NISVS]

### The Psychological Impact on Victims

The trauma of experiencing IPV and SV lead to long-term and far-reaching health impacts. The effects can last long after the incident or beyond the departure of the abusive partner. **About 52% of women and 17% of men who have experienced IPV develop symptoms of Posttraumatic Stress Disorder (PTSD).** Many victims struggle with depression, low self-worth, loss of self-respect, feelings of hopelessness and loss of confidence. They may suffer from anxiety attacks, agoraphobia, and claustrophobia. There is often a high level of fear and guilt in those who are involved in an abusive relationship and these feelings are influenced by other factors such as social isolation, lack of social support systems, restricted educational opportunities, job instability and financial insecurity. The victim can experience sleep difficulties or cognitive changes (i.e., belief systems, self-concepts). Shame and self-blame are common feelings after a sexual assault and can often interfere with sharing or reporting the incident; these responses also increase the likelihood of revictimization. Often, victims of rape have interpersonal difficulties and higher rates of unemployment after the assault.

It is no wonder, given the many impacts of IPV and SV, that survivors can have difficulty in the workplace. These may include struggling to concentrate or to complete job tasks. There may be long-term consequences on job opportunities especially if the victim needs to leave employment to escape from the violent partner. Also, there is a higher likelihood that the victim will need to take time off to deal with physical injuries, legal proceedings, housing issues or meetings with social services. In these cases, it may be difficult to disclose to their employer why they need the time off as confidentiality is not

always protected in the workplace. There has also been a growing concern, as seen in recent incidents (the Mercy Hospital shooting), about the perpetrator seeking out their victim while they are at work resulting in on-site violence.

### Barriers to Disclosure

To outsiders, disclosing the abuse or act of sexual violence may seem like an “obvious” step in stopping the abuse and/or getting help. However, to victims it is fraught with doubt and fear. The risks can feel like they outweigh the benefits and it is a complicated process to navigate. There may be fear of retribution from the perpetrator or from third parties who do not want the abuse reported. Additionally, there are a multitude of negative repercussions having to do with finance, housing, children, family etc. Victims may feel a sense of shame and embarrassment and fear the judgment or blame of others. Other emotions can be barriers to disclosing the abuse including feelings of failure, guilt or fear of rejection from those who find out. It is not an easy feat to share these experiences with others and takes a great amount of courage.

### Recognizing Warning Signs

The below table describe observable signs which may help in identifying someone who has been or is currently being victimized. This list does not capture the breadth of what might be observed but it is a place to start.

Sexual Assault Reactions	Signs of Physical Abuse	Signs of Isolation	Signs of Psychological Abuse
Fear, distrust Anger Difficulty concentrating Changes in eating or sleeping Increased startle response Concerns about physical safety	Frequent injuries with excuse of “accidents” Frequently miss work, school or social occasions without explanation Dresses in clothing designed to hide bruises or scars (i.e., wearing long sleeves in summer or sunglasses indoors)	Restricted from seeing family and friends Rarely goes out in public without partner Limited access to money, credit cards or the car	Very low self-esteem even if they used to be confident Showing major personality changes Depressed, anxious or suicidal

Melinda Smith, M.A. & Jeanne Segal, Ph.D.

### Promote Safety for Disclosure

There are two ways in which a client will disclose the abuse: spontaneously or via prompting. The client may offer up the information or may need to be screened/asked directly. Either way, it is important to provide a private and safe setting so that the client feels comfortable sharing. They may not want to disclose in front of family or friends. The questions should be asked using nonjudgmental language and can be part of the routine assessment. Indirect questions could be included during inquiry about safety (i.e., seat belt use or gun safety) or they can be embedded in the discussion of the client’s social history. Additionally, the disclosure may take place during an exploration of the barriers to obtaining and maintaining employment. Examples of indirect questions would be: “Is there anything else on your mind that you would like to tell me? Is there something going on at home that may impact our ability to work on your goals?” Another option is to utilize questionnaires/screening instruments or ask direct questions about the patient’s safety and/or traumatic life experiences. If these are used, one must be prepared to address the answers given at that time. You will need to approach this with willingness to listen, validate and to have resources at the ready.

## Responses to Disclosure

The response to the disclosure of IPV or SV can either promote healing or create a “second injury” for the survivors. Responses that are mindless, mean-spirited, devoid of warmth or empathy, blaming or doubting can exacerbate posttraumatic stress. The response should be received by the client as “positive:” validating, acknowledging the abuse was wrong and confirming the client’s worth. The most helpful responses include kindness, encouragement and affirmations of their dignity and humanity. Communicate to your client that you believe them and you will support them. Although it is tempting to take over the process and begin planning next steps, **it is crucial the client regain their sense of control and therefore should be in charge of making all decisions having to do with the trauma.** Do not blame, judge, give advice or pressure them to act. Listening, expressing concern and offering help is something that you can do to make them feel safe and cared for. Support their decisions even if they are not ready to approach the trauma or make changes.

## Offer Specialized Referrals

The employment support work that you will be doing with clients can be strenuous if the client has not addressed or processed the trauma they have endured. In most cases, engaging with specialized support or treatment is what is needed to move forward. IPV or SV specialists can take a complete history, assess for safety and develop a safety plan if need be. Additionally, they have the knowledge to comply with mandatory reporting requirements. In order to increase the chances that clients will reach out to the necessary resources, you can offer to call with them or even to go with them (if possible) to their first appointment. It is through this step that healing can occur and the work of job readiness is made more successful.

### IPV & SV Resources

National Domestic Violence Hotline  
(800)799-7233 voice  
(800)787-3224 TTY

(773)890-7676 Pilsen

[Illinois Coalition Against Domestic Violence](#)

Domestic Violence Helpline  
Illinois Department of Human Services  
(877)863-6338 voice  
(877)863-6339 TTY  
Multilingual and open 24-hours

[The Network: Advocating Against Domestic Violence](#)

Rape Crisis Hotlines  
Chicago: (888)293-2080  
DuPage County: (630)971-3927  
South Suburbs: (708)748-5672

[Illinois Domestic Violence Agencies by City](#)

Chicago (full list on above site):

[Apna Ghar \(Our Home\), Inc.](#)

(773)334-4663 Hotline

[Between Friends](#)

(800)603-4357 Hotline

[Chicago Abused Women Coalition](#)

(773)278-4566 Hotline

(773)278-4114 TTY Hotline

[Family Rescue, Inc.](#)

(773)745-7107

[Howard Brown Health](#) (IPV and SV)

(773)388-1600 Appointments

[Metropolitan Family Services](#)

Phone number based on location

[Mujeres Latinas en Acción](#)

[Resilience: Empowering Survivors, Ending Sexual Violence](#)

[C4 Sexual Trauma Awareness and Recovery Services \(STARS\)](#)

[YWCA Metropolitan Chicago Sexual Violence Support Services](#)