

# IAFP BEHAVIORAL HEALTH PICO DE POEM

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## Most Young Men Support Health Care Clinician Identification of Intimate Partner Violence Perpetration and Victimization

### PRESENTING QUESTION

According to men aged 18-35, what is the prevalence of intimate partner violence and what are their beliefs and perceptions regarding clinician identification of IPV?

### STUDY DESIGN

Cross-sectional online survey

### FUNDING SOURCE

Robert Wood Johnson Foundation; Veterans Affairs  
Clinical Scholars Program at the University of Michigan

### SYNOPSIS

The authors conducted a cross-sectional survey administered online from August through September of 2014 using the KnowledgePanel to select a representative sample of the US population of men aged 18-35. Intimate partner violence (IPV) perpetration and victimization were measured by having participants select the frequency, on a four-point scale from 1 (never) to 4 (often), of initiating or receiving behaviors from the Conflict Tactics Scale (CTS) minor and severe physical violence subscales. Participants were also asked about their beliefs regarding clinician IPV identification by asking (1) if health care professionals should ask their patients whether they have received or inflicted IPV, and (2) if they had ever been asked about IPV by a health care professional.

Of a sample of 2889 non-incarcerated men, 1346 (47%) responded to the survey; 1072 (79.6%) of which reported having ever been in a romantic relationship and were subsequently asked questions about IPV perpetration. The sample resulted in 916 respondents who reported having ever been in a romantic relationship and had complete data on all variables. The data was analyzed in two groups: men who reported any perpetration and men who reported any victimization.

The majority of sampled men believed that health care clinicians should ask male patients about IPV perpetration (89.5%) and victimization (92.1%). Yet, only 11% have been asked about perpetration and 13% about victimization.

Men who reported being victims of IPV were more likely to believe that health care clinicians should ask male patients about IPV victimization. Those who did not believe that clinicians should ask about IPV victimization included African American non-Hispanic men and men who had conducted IPV. Men who had conducted IPV were more likely to report having been asked about perpetration and men from lower educational status were more likely to report having been asked about victimization.

### KEY TAKEAWAY

- There are missed opportunities for IPV identification, intervention, and referrals. Assessment is needed to determine the different service needs of male patients with IPV.
  - 9 out of 10 young men in the US support being asked about IPV perpetration or victimization by a health care clinician
  - 1 in 5 young men report perpetration; 1 in 4 report victimization
  - 1 in 10 young men had been asked about IPV perpetration or victimization by a health care clinician

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