

Public Health and In Their Shoes

We all want communities where people can live and love freely without fear. Yet the reality is that one in three adults in the United States have experienced some form of violence at the hands of an intimate partner.¹ Those numbers are sobering and far too high and it is in everyone's best interest to take an intentional and determined look at curbing domestic and sexual violence in our communities. This is where public health work can make a difference. Public health promotes and protects the health of people and the communities where they live, learn, work and play. It is up to us to create conditions where violence does not thrive and where communities are safe, secure, and whole.

What is teen dating violence?

Teen dating violence is defined by the CDC as physical, sexual, psychological, or emotional aggression within a dating relationship, including stalking. It can occur in person or electronically and might occur between a current or former dating partner.² Regardless of how it occurs, teen dating violence is common and can have lasting impacts on young people's health, safety, and well-being.

If we want safe and secure communities, addressing the violence that young people experience is paramount to our efforts. Understanding the realities young people face in their relationships is a first step to creating the conditions communities need to thrive.

Learn by walking in their shoes.

In Their Shoes: Teens and Dating Violence – Classroom Edition is an educational tool designed by the Washington State Coalition Against Domestic Violence (WSCADV) and gives participants the opportunity to become one of six teen characters based on real teens' experiences, including sexting, pregnancy, homophobia, and stalking. Participants make choices about their relationships and move through scenarios by reading about interactions with their dating partner, family, friends, counselors, police, and others.

Designed with the classroom in mind, *In Their Shoes* is an engaging way to talk about dating violence, healthy relationships, and sexuality with young people in one class period. And this tool isn't limited to the classroom—this is a great educational tool for adults, too. We've seen incredible conversations result from using *In Their Shoes* in a variety of settings, including youth groups, PTOs, and community task forces.

Facilitating a conversation using *In Their Shoes* can be a springboard for your violence prevention efforts. It is a great first step in addressing risk factors for dating and sexual violence in your community as well as supporting and increasing the protective factors that help people resist it.

¹ <https://wscadv.org/news/new-data-from-the-national-intimate-partner-sexual-violence-survey-nisvs/>

² https://www.cdc.gov/violenceprevention/intimatepartnerviolence/teen_dating_violence.html Several different words are used to describe teen dating violence: relationship abuse, Intimate partner violence, Relationship violence, Dating abuse, Domestic abuse, Domestic violence



How can you use In Their Shoes in your community?

While *In Their Shoes* was designed for the classroom, it works in many different settings with both youth and adults. Public health and other professionals have used it to start conversations about root causes of gender-based violence, community expectations, and norms about relationships, and as a launching pad for more intensive and targeted prevention work.

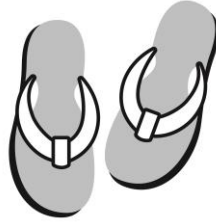
Relationships and social interactions are important and relate to our health and well-being. *In Their Shoes* provides tangible examples of how that plays out in a public health framework. This kit can be the perfect tool to use to bring allied organizations on board to help them recognize the role that each sector has in addressing teen dating violence and to begin the process of creating community collaborations.

Get the conversation started.

Each character in *In Their Shoes* provides opportunities to highlight intersecting public health issues. The social determinants of health³ can provide a useful framework to examine the social structures, systems, and conditions where each of the characters live. Additionally, the social ecological model⁴ invites us to ask and notice where change can and needs to happen. Since each layer of the social ecology can influence the others, it's important to identify and address necessary changes across multiple levels. Simultaneously addressing multiple layers of the social ecology is more likely to create lasting change and sustain prevention efforts. Questions to help participants think about the social and physical environments and contexts of the characters in the training module are included after each character synopsis below.

³ <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

⁴ <https://www.cdc.gov/violenceprevention/overview/social-ecologicalmodel.html>



Ashley grew up in a religious family and is dating an older guy named Jimmy. She does not want to have sex, but he forces her early on in their relationship. Her story is marked by a mutual sense of being wildly in love and by Jimmy's misguided and controlling efforts to deepen the relationship (refusing to use protection during sex, which results in her pregnancy; installing a webcam to monitor her at night; not allowing her to continue school). As Ashley's story ends, she is unsure of what to do about her pregnancy and her life with Jimmy.

At the end of her story, participants are asked to consider:

- *What do you think will happen to Ashley and her baby?*

Public Health Focus Questions

- What do you think about Ashley's access to comprehensive health care and information that supports her autonomy and ability to care for herself?
- Why was Ashley confused about whether she consented to sex when she asked Jimmy to wear a condom? What about consent is important for people to understand in order to have healthy relationships?
- What elements in her community could change that would help her break free of Jimmy's control?
- What does Jimmy need to engage in a more equitable and healthy relationship?
- What kind of community supports (like transportation, access to alternative education for parenting teens, employment opportunities) do Ashley and Jimmy need?
- What do you wish Ashley's parents or friend Chelsea knew or did differently?
- After experiencing this story, what new partnerships will you seek?



Cara is almost 18. She has a job, a lot of friends, and a supportive family. She is looking forward to graduating high school and going to college. In anticipation of this transition, Cara decides to break up with her boyfriend, Brian. He does not accept the breakup and stalks her with escalating despair and disturbing behavior. Despite Cara's best efforts, Brian murders her and kills himself. Her story is marked by poor police response and shocking separation violence. (Cara's story is inspired by the experiences of Dayna Fure who was murdered by her ex-boyfriend in Stanwood, WA in 2004.)

At the end of her story, participants are asked to consider:

- *Is there anything anyone could have done to stop Brian?*
- *At one point in the story, Cara says that Brian is not a "psycho stalker." How do we know when someone has crossed the line into stalking or other scary behavior?*
- *What might have helped Cara? Brian?*

Public Health Focus Questions

- What did you think about Brian's access to weapons?
- What referrals should Cara have been given to get support?
- What would have been different if law enforcement and other systems she interacted with had taken her experience seriously?
- What elements in her community could change that would have helped her get meaningful support as well as support for Brian?
- After experiencing this story, what new partnerships will you seek?



Derek, one of only a few African Americans at his school, is dating Charlene, a popular white girl from a prominent family. Charlene makes unrealistic demands, engages in risky behavior to get his attention, and chides him when he resists her advances. Her actions interfere with Derek's performance at school, at work, and on the swim team. His decision-making about the relationship is complicated by peer pressure from others to stay with her, the fact that her father is going to help him get a scholarship for college, and her unpredictable behavior. Derek's story is marked by the invisibility of this unhealthy dynamic and by Charlene's possessiveness and jealousy.

At the end of his story, participants are asked to consider:

- *Why is it so hard for Derek to figure out what to do about Charlene?*
- *How does racism impact Derek and his relationship with Charlene?*

Public Health Focus Questions

- How do Derek's experiences of being in such a small minority (one of only a few black kids at his school) compound his challenges and what might be done to mitigate that?
- How do narrow definitions of masculinity and rigid expectations associated with gender play into Derek and Charlene's story?
- Derek experiences racism, classism, and homophobia. How do these intersecting oppressions limit Derek's decision-making and options?
- What can your community do to address the intersecting oppressions that people face?
- After experiencing this story, what new partnerships will you seek?



Elena emigrated from Colombia with her mom and her brother four years ago and is dating Ian. Initially, Elena is attracted to Ian's intelligence and enjoys his company, but it becomes clear that Ian does not really respect Elena (for instance, he calls her "Elaine") and that he's using her to comfort his hurt feelings about his past breakup. He can be rude, threatening, and even violent when Elena doesn't do what he wants. Her story is marked by sexting (Ian uses his cell phone to take a topless picture of her and sends it to other students) and by the consequences of that action.

At the end of her story, participants are asked to consider:

- *What is most important to Ian?*
- *What are the potential long-term impacts of sexting on Elena? On Ian?*
- *What do Elena and her family need?*

Public Health Focus Questions

- How does Elena's experience of being a first-generation American affect her relationships?
- What support (beyond law enforcement) does the school need to more holistically address the sexting and resulting bullying that Elena experiences?
- After reading this story, what new partnerships will you seek?



Kyoko is a 19-year-old artist living with her parents. She is in a healthy relationship with a young woman, Meera. Kyoko's ex-boyfriend, George, who is very close with her family, returns home from military service overseas and expects to get back together with her. Kyoko's story is marked by homophobia, by George's escalating control and physical aggression, and by confusion about how much of George's behavior is related to his experiences at war. In the end, we don't know what George will do, but Kyoko's family rallies to support her.

At the end of her story, participants are asked to consider:

- *How does homophobia play into George's attempts to control Kyoko?*
- *How do you think George's military service has affected him?*
- *How is Kyoko's new relationship with Meera different from her past relationship with George?*

Public Health Focus Questions

- What resiliency factors show up for Kyoko and her family?
- What are the impacts of homophobia on Kyoko's relationships?
- How could your community address homophobia in a way that would benefit all young people regardless of their relationships?
- What is the role of public health in supporting veterans returning from war to have healthy relationships?
- After reading this story, what new partnerships will you seek?



Samantha is almost 15 and has just started a relationship with 17-year-old runaway Roxanna. Roxanna provides a much-needed connection to a community in which Sam feels like she can be herself. Roxanna also pressures her to drink, to stay out all night, and to disconnect from her family. Samantha's story is marked by Roxanna's increasing jealousy and abuse, by problems related to alcohol use, and by Sam's shaky relationship with her homophobic parents, which leads her to leave home.

At the end of her story, participants are asked to consider:

- *What does Sam need?*
- *Does sexual orientation affect how you think about relationships? How so?*

Public Health Focus Questions

- What resiliency factors show up for Sam? What does she need to move forward?
- What kind of supports exist for LGBTQIA teens in your community?
- Given that trans and nonbinary folks in general are at such a higher risk of abuse and harassment, what kinds of support, assistance, and practices can your community adopt to intentionally tend to their needs?
- How do you support and engage runaway and homeless youth in your community?
- After reading this story, what new partnerships will you seek?

Next Steps: Taking These Learnings into Your Work

- Public health work is best when we do it together. Connect with your local domestic and sexual violence advocates.
 - You can find complete lists of Washington State [domestic violence](#) and [sexual violence](#) programs. Anyone can reach out to an advocate for free, confidential support.

- The [National Domestic Violence Hotline](#) is available 24/7 by phone, chat, and text in multiple languages.
- [Love is respect](#) is especially for teens and is available 24/7 by phone, chat, and text in multiple languages.
- Encourage your community to take on these issues together by providing opportunities to engage on this issue. Offer *In Their Shoes* to community partners and start the conversation!
- Continue to ask questions about what your role is in addressing teen dating violence in your community. What community responses, practices, and policies can you change to better support young people to have healthy relationships?
- Start conversations with other public health folks about how violence and health equity are interconnected.
- Identify one thing you're going to do to build people's resiliency and resistance to dating violence in your community and your work. Write it down and do it.
- Keep moving forward!

A note about the world we live in

Addressing teen dating violence requires us to look at the broader context in which violence and abuse thrives. It is important to acknowledge the systems and structures that aid and abet abuse, control, and coercion in people's lives. In this particular time and place, we must recognize the role that sexism, homophobia, racism, xenophobia, and the rising tide of anti-Semitism play in harming communities, limiting options for safety, and fostering fear and resentment among all of us. Therefore, anti-oppression work is central to our public health work. We must address these oppressions in our work, communities, and homes.

Public health approaches, beyond engaging communities with *In Their Shoes*, can look like:

- ensuring that LGBTQIA youth in your community are supported,
- supporting immigrant families to access the social and economic supports they need,
- creating anti-racist policies and practices that center the lives of those most targeted by police violence, and
- promoting an intersectional analysis and lens to your work to ensure that all marginalized populations are represented and involved.

This is clearly not an exhaustive list and you know your community best. It is our hope that you understand and acknowledge the cultural and societal factors at play that both help and hinder abuse. Your work is crucial to lessen the impacts and intensity of risk factors for abuse, and to promote and lift up those things that help people survive and thrive.

Thank you for helping teens create and sustain healthy relationships in your community.ⁱ

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