

THE PROBLEM:

Interpersonal violence (IPV) is severely underreported by victims/survivors (V/S).



WHY DOES THIS PROBLEM EXIST?

Shame/stigma surrounding IPV.

Fear of increased violence from the perpetrator if the V/S reports.

Distrust of criminal and legal systems.

DV & Rape Crisis Centers/
Shelters are not always
perceived as a safe option.

The V/S isn't aware that they've
experienced IPV because of a lack of
knowledge or understanding of what IPV is.

Lack of access to community resources for a variety of reasons, including (but not limited to):

- The resources do not exist.
- The V/S cannot access available resources because of isolation by perpetrator.
- The resources are inaccessible due to the V/S's location or work/school/childcare schedule.
- There is a language barrier between the V/S and the resources' staff.

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WHO IS AFFECTED?

Anyone can be affected, but it most severely affects:

- Women
- LGBTQ+ individuals
- Non-White individuals
- Individuals living in rural communities
- Individuals for whom English is not their first language
- Individuals experiencing financial insecurity

Health systems, the government, local domestic violence/sexual assault victim advocacy agencies, and social service agencies are stakeholders in the issue.



WHAT IS THE SOLUTION?

It is important for health systems to be prepared to respond to disclosures and reports of IPV because these services can:

- Reach “hidden” victims
- Reach extremely vulnerable victims
- Identify victims earlier than local agencies
- Keep the V/S safer than a local agency may be able to
- Provide direct physical & mental health care to V/Ss

Health systems can increase the capacities of local agencies by identifying V/Ss and providing services before they even consider going to a local agency.

IMMEDIATE OUTPUT

Medical providers, nursing staff, and health affairs students will feel more confident and capable when caring for patients who have experienced/are experiencing IPV.

IMMEDIATE OUTPUT

All UNC Health patients will be screened for IPV unless there are extenuating circumstances, and all UNC Health patients who screen in for IPV will be offered Beacon's services and/or resources.

INTERMEDIATE OUTCOME

UNC Health hospitals & clinics will be locations where victims/survivors of interpersonal violence feel safe and empowered when seeking care related, or unrelated, to their experiences of violence.

INTERMEDIATE OUTCOME

UNC Health hospitals & clinics will provide services to victims and survivors who, because of a variety of barriers, cannot/will not report their experience(s) or seek services at a local agency.

END GOAL (IMPACT)

All patients who have experienced interpersonal violence will have access to comprehensive and empowering services at UNC Health hospitals & clinics.

THEORY OF CHANGE

