

Intimate Partner Violence Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. Which statement best describes Lenore Walker's role in intimate partner violence theory?**
 - A. She is the theorist most often cited for the transmission of violence theory.**
 - B. She developed the concept of cycles of violence in corporate settings.**
 - C. She studied child attachment.**
 - D. She proposed the strain theory.**

- 2. Which of the following is NOT a nonviolent coercive control tactic used in IPV?**
 - A. Physical violence**
 - B. Isolation from friends and family**
 - C. Gaslighting**
 - D. Controlling information about finances or children**

- 3. Which term is a synonym for intimate partner violence?**
 - A. Domestic violence**
 - B. Sports violence**
 - C. Corporate violence**
 - D. School violence**

- 4. The official counts of rape and rape attempts are believed to underestimate the true incidence because many cases are not reported.**
 - A. False**
 - B. Unclear**
 - C. True**
 - D. Not relevant**

- 5. What considerations arise when working with immigrant or undocumented survivors of IPV?**
 - A. Fear of deportation**
 - B. Language barriers**
 - C. Limited access to resources**
 - D. All of the above**

- 6. Which outcome has the largest relative increase in likelihood for rape survivors?**
- A. Abuse drugs (26x)**
 - B. Suffer from depression (3x)**
 - C. Contemplate suicide (4x)**
 - D. Suffer from PTSD (6x)**
- 7. What is vicarious trauma, and how should professionals care for themselves when working with IPV cases?**
- A. A form of burnout due to workload**
 - B. Secondary exposure to others' trauma**
 - C. A primary traumatic event experienced directly**
 - D. A mental health disorder**
- 8. Which combination describes economic abuse in IPV?**
- A. Encouraging independent financial planning**
 - B. Non-financial abuse only**
 - C. Controlling finances and restricting work**
 - D. Providing equal access to resources**
- 9. Which option is NOT among the listed higher-likelihood outcomes for rape survivors?**
- A. Suffer from depression (3x)**
 - B. Suffer from anxiety attacks (5x)**
 - C. Contemplate suicide (4x)**
 - D. Suffer from PTSD (6x)**
- 10. What best describes the difference between screening and comprehensive risk assessment in IPV practice?**
- A. Screening and comprehensive risk assessment are identical in scope.**
 - B. Screening is brief and identifies potential IPV; risk assessment is in-depth and estimates risk of serious harm.**
 - C. Comprehensive risk assessment is brief and only uses formal tools.**
 - D. Screening involves only legal considerations.**

Answers

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1. A
2. A
3. A
4. C
5. D
6. A
7. B
8. C
9. B
10. B

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Explanations

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1. Which statement best describes Lenore Walker's role in intimate partner violence theory?

A. She is the theorist most often cited for the transmission of violence theory.

B. She developed the concept of cycles of violence in corporate settings.

C. She studied child attachment.

D. She proposed the strain theory.

Lenore Walker is best known for describing the cycle of violence in intimate partner violence. This model explains how abusive relationships often unfold in repeating phases: a period of increasing tension, followed by an abusive incident, and then a reconciliation or “honeymoon” phase where the abuser might apologize or sweeten the relationship. That brief calm can make the abuse feel tolerable or hopeful, leading the victim to stay and the cycle to repeat. This framework helps clinicians understand why violence can recur and why leaving can be complex. The other options point to different ideas or contexts that aren’t attributed to Walker’s IPV theory. The idea of violence being transmitted across generations is a separate concept about intergenerational patterns, not Walker’s cycle of violence. Cycles of violence in corporate settings, child attachment theory, and strain theory come from other areas of study altogether.

2. Which of the following is NOT a nonviolent coercive control tactic used in IPV?

A. Physical violence

B. Isolation from friends and family

C. Gaslighting

D. Controlling information about finances or children

Nonviolent coercive control relies on psychological, social, and economic methods to dominate a partner without physical harm. Isolation from friends and family is a classic example: it cuts the person off from support and increases dependence on the abuser. Gaslighting is another: it distorts the victim’s sense of reality, making them doubt themselves and feel they can’t trust their own perceptions. Controlling information about finances or children is about power over resources and decisions, restricting autonomy and daily control. Physical violence, however, is not a nonviolent tactic. It constitutes violent abuse and is categorized separately from nonviolent forms of coercive control. It may accompany coercive control, but as a tactic it is inherently violent rather than nonviolent.

3. Which term is a synonym for intimate partner violence?

- A. Domestic violence**
- B. Sports violence**
- C. Corporate violence**
- D. School violence**

Intimate partner violence refers to abuse by a current or former partner in an intimate relationship. Domestic violence is the broader term used to describe violence within a household or home, which includes abuse by partners as well as other family members in some definitions. Because IPV specifically involves partners, domestic violence is often used as a synonym in many educational and policy contexts. The other terms describe violence in settings like sports, corporate environments, or schools, which do not capture abuse within intimate relationships.

4. The official counts of rape and rape attempts are believed to underestimate the true incidence because many cases are not reported.

- A. False**
- B. Unclear**
- C. True**
- D. Not relevant**

The main idea is that official statistics reflect only what gets reported to authorities. In rape cases, many victims do not come forward due to fear of retaliation, stigma, not being believed, concerns about how they'll be treated, or distrust in the system. Because these incidents never enter police or official medical records, they aren't counted, so the official counts are almost always lower than the true number of occurrences. Research that uses victim surveys often finds higher rates of rape than police figures, illustrating this underreporting gap. Therefore, the statement is true.

5. What considerations arise when working with immigrant or undocumented survivors of IPV?

- A. Fear of deportation**
- B. Language barriers**
- C. Limited access to resources**
- D. All of the above**

When supporting immigrant or undocumented survivors of IPV, safety and access are shaped by immigration status. Fear of deportation, language barriers, and limited access to resources often occur together and create layered barriers that can keep someone from seeking help or leaving an abusive situation. Fear of deportation can deter survivors from contacting services, reporting abuse, or involving authorities, even when help is available. This fear can extend to signing documents, sharing personal information, or disclosing details of the violence. Language barriers mean survivors may not fully understand their options, rights, or the steps they need to take, and they may struggle to give informed consent or navigate complex systems without interpreters or translated materials. Limited access to resources reflects real constraints such as ineligibility for certain benefits, lack of insurance, financial dependence, or shelter policies that restrict occupancy, all of which can limit viable paths to safety. An effective response integrates these realities by offering confidential, culturally competent, language-accessible services; connecting survivors to resources that are available regardless of immigration status; providing trauma-informed safety planning; and collaborating with immigration- and refugee-serving organizations and legal services to address both safety and legal needs. This holistic approach recognizes that all of these factors matter and often coexist, shaping how a survivor can access help and move toward safety.

6. Which outcome has the largest relative increase in likelihood for rape survivors?

- A. Abuse drugs (26x)**
- B. Suffer from depression (3x)**
- C. Contemplate suicide (4x)**
- D. Suffer from PTSD (6x)**

When estimating relative increases in likelihood after a traumatic event like rape, we compare how much more likely survivors are to experience each outcome versus people who have not experienced rape. The outcome with the largest multiplier shows the strongest relative association in this set. Drinking or abusing drugs stands out as the largest relative increase—about 26 times more likely for rape survivors. That substantial 26x figure means substance misuse is, relative to the other listed outcomes, the most amplified risk in this context. While other issues such as PTSD (about 6x), contemplation of suicide (about 4x), and depression (about 3x) are also elevated among survivors, their relative increases are smaller than the jump seen with drug abuse. This pattern is often observed because trauma can lead to coping through substances, intertwining neurobiological stress responses with behavioral health risks. In short, the far greater relative increase for drug abuse makes it the best answer here, compared with the other outcomes.

7. What is vicarious trauma, and how should professionals care for themselves when working with IPV cases?

- A. A form of burnout due to workload**
- B. Secondary exposure to others' trauma**
- C. A primary traumatic event experienced directly**
- D. A mental health disorder**

Vicarious trauma happens when you repeatedly hear and engage with clients' traumatic experiences through your work, and it gradually changes how you view safety, trust, power, and your own sense of the world. This is secondary exposure to others' trauma, not a direct traumatic event you experienced yourself, and it's different from burnout, which stems more from workload and organizational stress. It can produce symptoms similar to PTSD—intrusive thoughts, emotional numbness, irritability, sleep problems, and a shift in beliefs or worldview—but those effects come from sustained professional exposure rather than a single incident, and it's not classified as a separate mental disorder. Caring for yourself in IPV work means actively supporting your own emotional and physical well-being. Seek regular supervision or case consultation to process reactions and maintain perspective. Set clear boundaries around work hours and caseloads, and ensure you have time for rest and decompression. Maintain self-care routines, stay connected with trusted colleagues or peers who understand the work, and use grounding or mindfulness practices to stay centered. If distress persists, consider personal therapy or counseling. Organizational supports are essential too—accessible debriefing after difficult cases, trauma-informed approaches, adequate supervision, and resources like employee assistance programs. By combining individual strategies with supportive workplace practices, you reduce the risk of vicarious trauma and sustain your ability to help others safely.

8. Which combination describes economic abuse in IPV?

- A. Encouraging independent financial planning**
- B. Non-financial abuse only**
- C. Controlling finances and restricting work**
- D. Providing equal access to resources**

Economic abuse centers on using money and access to finances as a means of control in a relationship. When an abuser controls finances and restricts a partner's ability to work, they shape what the partner can earn, spend, or save, and they limit the partner's autonomy to make money-related choices. This keeps the survivor financially dependent and trapped, making it harder to leave or resist abuse. Controlling finances can include dictating how money is spent, monitoring or restricting access to bank accounts, hiding or taking money, or creating debt in the partner's name. Restricting work involves preventing or sabotaging employment, forcing someone to quit, or otherwise blocking opportunities to earn income. Together, these tactics reduce financial independence and power the abuser holds in the relationship. The other statements don't fit because they describe healthy or non-financial dynamics. Encouraging independent financial planning would empower a person, not control them. Non-financial abuse alone omits the financial coercion that characterizes economic abuse. Providing equal access to resources is the opposite of abuse, representing an equitable arrangement.

9. Which option is NOT among the listed higher-likelihood outcomes for rape survivors?

- A. Suffer from depression (3x)
- B. Suffer from anxiety attacks (5x)**
- C. Contemplate suicide (4x)
- D. Suffer from PTSD (6x)

In trauma risk assessment for rape survivors, we focus on outcomes that are notably more likely than in the general population. The material in this question flags several outcomes with higher likelihoods: depression, contemplating suicide, and PTSD, each with its own multiplier to show how much more common it is relative to non-survivors. Depression is a common, persistent reaction to trauma and mood disruption; contemplating suicide signals extreme distress and danger, making it a critical risk marker; PTSD represents a trauma-related syndrome with hallmark symptoms that often follows rape, hence its strong association and higher likelihood. Anxiety attacks, while they can occur after trauma, are not listed among the higher-likelihood outcomes in this particular set of data. That's why the option describing anxiety attacks isn't counted among the outcomes shown as elevated risk, even though anxiety can be part of the broader trauma response. So the reason this choice is the best answer is that it does not appear on the specific list of higher-likelihood outcomes, whereas the others do and are supported by their substantially increased likelihoods.

10. What best describes the difference between screening and comprehensive risk assessment in IPV practice?

- A. Screening and comprehensive risk assessment are identical in scope.
- B. Screening is brief and identifies potential IPV; risk assessment is in-depth and estimates risk of serious harm.**
- C. Comprehensive risk assessment is brief and only uses formal tools.
- D. Screening involves only legal considerations.

Screening and comprehensive risk assessment serve different purposes in IPV practice. Screening is a brief process used to identify whether IPV may be present and whether further evaluation or safety planning is needed. It's designed to be quick and feasible in busy settings, often with a short set of questions or a validated screen. If screening suggests possible IPV, a more thorough risk assessment is then conducted. A comprehensive risk assessment goes beyond identification and aims to estimate the risk of serious harm or lethality. It is in-depth and systematic, often using validated tools and multiple information sources. It examines risk factors such as history of violence, escalation, threats, access to weapons, controlling behavior, substance use, mental health, protective factors, and available safety resources. The findings inform immediate safety planning, crisis response, and referrals. So, the best description is that screening quickly flags potential IPV, while a comprehensive risk assessment provides a deeper, structured estimate of risk to guide safety actions.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://intimatepartnerviolence.examzify.com>

We wish you the very best on your exam journey. You've got this!

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