



# INTERSECTIONS

ENGAGE

COLLABORATE

TRANSFORM

**dvn**

domestic violence network

Community Wide Plan

# INTERSECTIONS

engage | collaborate | transform

## Contents

	Executive Summary	3
	Introduction	4
	History of the Community Wide Plans	5
	Intimate Partner Violence	6
	Risk Factors: Individual, Relationship, Community, Societal	8
INTERSECTIONS	Economics and Domestic Violence	12
	Childhood Experiences and Domestic Violence	16
	Education and Domestic Violence	18
	Substance Abuse and Domestic Violence	20
	Mental Health and Domestic Violence	22
	Suicide and Domestic Violence	24
	Closing	25
	Sources	26

## EXECUTIVE SUMMARY

For twenty years, the Domestic Violence Network has been a leader in the community to address issues surrounding the prevention and response of domestic violence in Central Indiana. Through facilitating collaborative relationships between service providers, providing training on best practices, and advocating for those who experience violence, the Domestic Violence Network enters into a new phase to bring these issues to the community. *Intersections: Engage, Collaborate, Transform* will guide the work of the Domestic Violence Network over the next three years.

Rather than focus on specific population groups, *Intersections* will examine the risk and protective factors associated with domestic violence and a variety of social concerns. Throughout the course of the next three years, DVN will select a different risk factor every six months. Guided by challenges and opportunities specifically related to each risk factor, DVN will facilitate community conversations, consult with experts, and provide educational opportunities to understand the intersection between specific issues and domestic violence. Additionally, we will convene agencies that directly address each risk factor and facilitate collaboration between these agencies and domestic violence service providers. After learning from one another, specific goals and outcomes will be identified for the organizations to work toward together.

The Domestic Violence Network's goal in this Community Wide Plan is to educate the community on domestic violence and the intersection with the following risk and protective factors:

THE INTERSECTION  
OF ECONOMICS  
AND DOMESTIC  
VIOLENCE

THE INTERSECTION  
OF EDUCATION  
AND DOMESTIC  
VIOLENCE

THE INTERSECTION  
OF CHILDHOOD  
EXPERIENCES  
AND DOMESTIC  
VIOLENCE

THE INTERSECTION  
OF SUBSTANCE  
ABUSE AND  
DOMESTIC  
VIOLENCE

THE INTERSECTION  
OF MENTAL  
HEALTH AND  
DOMESTIC  
VIOLENCE

THE INTERSECTION  
OF SUICIDE  
AND DOMESTIC  
VIOLENCE

By working together and expanding our knowledge of the correlation between risk and protective factors with those who experience abuse, the community will be better equipped to prevent and respond to domestic violence today, tomorrow, and for years to come.

## INTRODUCTION

Domestic violence is not just his or her story. Sexual assault is not just his or her story. It is part of their stories. The trauma that comes from violence lasts for years — but overcoming it, that is the story.

— Christine De’Kung, The Julian Center

Domestic violence is not confined to the home where it occurs; it is a community issue. According to the Avon Foundation, 53% of Americans know someone who has experienced domestic violence (2013). That means that half of everyone at work, in school, at community centers, in houses of worship, at shopping centers, and in our streets knows someone who has been abused. Though the prevalence of violence is staggering, those who experience it are often shamed into silence.

Domestic violence is a complex issue that is multi-faceted. Traditionally, domestic violence has been viewed as an issue independent, but correlated, to other social concerns. If a person experiences domestic violence, they are encouraged to seek services to address the specific issue of abuse. Historically, homelessness, economic disparities, substance abuse, and mental health have been viewed similarly. Efforts to prevent all of these concerns have been approached the same way: independent of one another.

The domestic violence movement, which began in the early 1970’s, has shifted in the past several years. While intervention with victims is still essential to safety, more and more emphasis is being placed on preventing domestic violence from occurring in the first place.

Research has shown a variety of risk factors which raise the probability of an individual experiencing domestic violence. Among them are lower levels of education, economic instability, adverse childhood experiences, mental health issues, and substance abuse. The presence of these risk factors increases the likelihood of domestic violence. Only through examination and understanding of these risk factors can the community work to end domestic violence.

To this end, a new innovative approach to the Community Wide Plan, *Intersections: Engage, Collaborate, Transform* will lead the community to examine the intersections of domestic violence and factors which could increase or reduce the probability of an individual to experience abuse. *Intersections* will utilize educational sessions, social media, blog posts, podcasts, and collaborative opportunities to bring together disparate community sectors. Groups that have previously been working in isolation will be brought together in collaboration to transform the lives of Hoosiers across Central Indiana. The Domestic Violence Network will host numerous trainings and community conversations to enable agencies to learn from one another. Opportunities to participate will be frequent and promoted through the Domestic Violence Network’s Advocates Group, social media, and press releases. The overarching goal of *Intersections* is to facilitate collaboration between entities in different sectors of social services. In the coming years, the Domestic Violence Network will bring together experts who will identify risk and protective factors in the community, and commit to working toward common goals. At the conclusions of the community conversations, task forces will emerge to develop specific goals and objectives to address these issues within Central Indiana.

## HISTORY OF THE COMMUNITY WIDE PLANS

In 2000, Mayor Bart Peterson challenged the community to provide an accountable, comprehensive, and culturally sensitive approach to preventing family violence. The Domestic Violence Network (DVN) facilitated the creation and implementation of the Family Violence Community Wide Plan which continued for several years.

After reviewing the successes and growth areas of the Family Violence Community Wide Plan, with the support of a steering committee which included Indianapolis Mayor Gregory Ballard, Congressman Dan Burton, and Congressman André Carson, DVN launched a new initiative. *Peace in Our Homes: A Call to End Domestic Abuse In Central Indiana* was a three-year initiative that built on the foundation of its predecessor, but focused on the needs articulated by the Advocates Group, the Steering Committee, and community participants.

The third iteration of the Community Wide Plan began with a strong campaign to involve the entire community in violence prevention. By commissioning an environmental scan to assess community needs and the capacity to address domestic violence in Central Indiana, the Community Wide Plan 3.0 (CWP 3.0) was born.

Building on the foundation laid by the previous Community Wide Plans, CWP 3.0 sought to end domestic violence through bold strategies focusing on four targeted populations: the community, victims/survivors, people who batter and abuse, and youth. Over the course of its three year period, CWP 3.0 brought together service providers, law enforcement, and the community to improve the response to and the prevention of domestic violence in Central Indiana. At the same

time, partnerships among these entities strengthened as they worked toward the common goal of ending domestic violence.

Domestic violence is a complex problem intertwined with many other social and systemic issues. DVN's data collection work, which analyzes information from local agencies and the criminal justice system, shows that domestic violence is closely related to risk factors such as poverty, mental illness, substance abuse, and child abuse and neglect. While many domestic violence organizations account for these factors in their services, these factors require additional attention to ensure providers address the full scope of issues victims and survivors face.

Based on feedback obtained from eight listening sessions attended by a total of 73 participants which included advocates, law enforcement, community members, prosecutors, medical professionals, and educators; DVN will employ a new and innovative approach to the next Community Wide Plan called *Intersections: Engage, Collaborate, Transform*. This approach will center on convening additional social service agencies to assist in identifying and cultivating protective factors to prevent domestic violence. DVN will select a different risk and protective factor every six months on which it will focus Advocates Group trainings, community trainings, awareness events, educational opportunities, and social media promotion. Additionally, DVN will convene agencies that directly address each risk and protective factor and facilitate collaboration between these agencies and domestic violence service providers. After learning from one another, specific goals and outcomes will be identified for the organizations to continue the work together.



# INTIMATE PARTNER VIOLENCE

## PROTECTIVE FACTORS

According to the Substance Abuse and Mental Health Services Administration (2015), protective factors are characteristics associated with a lower likelihood of negative outcomes or that reduce a risk factor's impact. Protective factors may be seen as positive countering events which can prevent domestic violence as well as other social issues. Most research shows that increasing protective factors on individual and community levels reduces the probability that people will experience domestic violence. It is important to note that increasing protective factors is not a guarantee that someone will not experience abuse; rather, it increases the likelihood that violence will be prevented.

The World Health Organization (2005) reports that these protective factors can prevent violence:

- Completion of secondary education for girls (and boys)
- Delaying age of marriage to the age of 18
- Women's economic autonomy and access to skills training, credit, and employment
- Social norms that promote gender equality
- Quality response services (judicial, security/protection, social, and medical) staffed with knowledgeable, skilled, and trained personnel
- Availability of safe spaces or shelters
- Access to support groups

## RISK FACTORS

According to the Substance Abuse and Mental Health Services Administration, risk factors are characteristics at the biological, psychological, family, community, or cultural level that precede and are associated with a higher likelihood of negative outcomes (2015).

Domestic violence is not an isolated social issue that can be addressed without understanding it in the context of the culture in which it exists. Over the past few decades, research on domestic violence has shown a commonality of risk factors shared by those who experience violence. Poverty, inadequate education, substance abuse, and the exposure to violence as a child are all risk factors for both being victimized by and perpetrating domestic violence. However, it is important to note that the presence of risk factors does not ensure experiencing violence, but it does increase its likelihood. Further, the absence of risk factors does not mean one will not experience violence, only that they are more likely to be protected from violence. Understanding and addressing risk factors is complicated, and the prevention of domestic violence must begin with decreasing risk factors and increasing protective factors.



# RISK FACTORS

## INDIVIDUAL RISK FACTORS

### Individual:

Includes biological and personal history factors that may increase the likelihood that an individual will become a victim or perpetrator of violence. (WHO, 2010)

The Center for Disease Control lists the following as risk factors for individuals:

- Low self-esteem
- Low income
- Low academic achievement
- Young age
- Aggressive or delinquent behavior as a youth
- Heavy alcohol and drug use
- Depression
- Anger and hostility
- Antisocial personality traits
- Borderline personality traits
- Prior history of being physically abusive
- Having few friends and being isolated from other people
- Unemployment
- Emotional dependence and insecurity
- Belief in strict gender roles (e.g., male dominance and aggression in relationships)
- Desire for power and control in relationships
- Perpetrating psychological aggression
- Being a victim of physical or psychological abuse (consistently one of the strongest predictors of perpetration)
- History of experiencing poor parenting as a child
- History of experiencing physical discipline as a child (CDC, 2016)



To illustrate this issue, Mary Alice shares her story.

I come from a large Hispanic family where I saw family members abused, but leaving wasn't an option. In my community, your husband gives you food, gives you shelter, and the attitude is, "Why would you even think of leaving?" My grandmother was harder on my aunts for wanting to leave their abusive relationships because, to her, you stayed with your husband no matter what. Leaving was just not part of the deal. Even though my mother did not experience an intimate partnership violence relationship, she did experience some violence from her older brothers. When my mother told my grandfather about it, he put a stop to it. But my grandmother was angry that my mother would say something to her father. When my grandfather saw that my grandmother was so upset about my mother's decision to say something about the violence, he said "If we make it ok for her brothers to beat her, we are saying it is ok for her future husband to beat her." My mother also said that day was her Independence Day.

My mother's decision to break away from those traditional roles influenced me. Out of 8 kids, my mom was the only one to graduate from high school and college. She had a strained relationship with my grandmother, because she refused to accept violence, and she educated herself. The attitude my family members had was that she thought she was better than everyone else (personal communication, 2016).

Mary Alice's mother showed tremendous courage to break the cycle of violence in her family so she and her children could have a better life. She left a violent relationship, endured the consequences from an unsupportive family, and chose to live a life free of abuse. Her strength is an example to the community of overcoming abuse and thriving in the midst of violence. In her story, she faced a culture which accepted violence, but she chose to fight against it.

Digging deeper into her story, several risk factors were present. She was raised in a culture where violence was accepted as a normal part of relationships. From childhood, she witnessed several relationships where abuse was all too common. Additionally, she was taught that women were to rely on men economically for food, clothing, and shelter. Dependence is created through this system which also does not encourage people to be economically independent or seek educational opportunities. These attitudes and beliefs greatly increase the risk for domestic violence which can be connected to substance abuse, mental health issues, and many other social ills.

## RELATIONSHIP RISK FACTORS

### Relationship:

Includes factors that increase risk as a result of relationships with peers, intimate partners, and family members. These are a person's closest social circle and can shape their behaviour and range of experiences (WHO, 2010).

- Marital conflict: fights, tension, and other struggles
- Marital instability: divorces or separations
- Dominance and control of the relationship by one partner over the other
- Economic stress
- Unhealthy family relationships and interactions (CDC, 2016)

While these factors increase the risk for experiencing violence, reducing them can prevent abuse. One of the most powerful ways to combat violence is to model healthy relationships to children, youth, and the community.

Josh Driver, founder of Open for Service, shares his story of witnessing his parents in a healthy and loving relationship.

I am an only child with parents who are still married to each other. Rarely do I hear of these relationships anymore. They started dating in high school and then got married in college. I admire that they made that commitment to each other before actually getting out into the real world. Since then, my parents have grown a business together, had a child, and become philanthropic pillars within their community. They truly are each other's best friends. It hasn't always been easy, and romance has always been a secondary priority for them. I think their bond is strong because of their selflessness. Both of them have allowed each other to grow and focus on personal goals. They both have always made decisions that benefited them both. They've also sacrificed for the other quite a bit. I envy the security that they have within each other. No matter how hard it has gotten, the other one has automatically picked up the slack or they made the right choices to make a better future for themselves. The temptations of today do not seem to burden them. They know how they want their lives to be, and they focus on meeting that goal. I'm proud of them — they worked it out when they had problems. They forgive each other for the mistakes each make. They found the silver lining when it seemed insurmountable. I think that, also, is what keeps them together. They have beat the odds and really can't imagine life without the other (personal communication, 2016).

## COMMUNITY AND SOCIETAL RISK FACTORS

### Community:

Refers to the community contexts in which social relationships are embedded — such as schools, workplaces, and neighborhoods — and seeks to identify the characteristics of these settings that are associated with people becoming victims or perpetrators of intimate partner and sexual violence (WHO, 2010).

- Poverty and associated factors (e.g., overcrowding)
- Low social capital — lack of institutions, relationships, and norms that shape a community's social interactions
- Weak community sanctions against IPV (e.g., unwillingness of neighbors to intervene in situations where they witness violence) (CDC)

### Societal:

Includes the larger, macro-level factors that influence sexual and intimate partner violence, such as gender inequality, religious or cultural belief systems, societal norms, and economic or social policies that create or sustain gaps and tensions between groups of people (WHO, 2009).

DVN will lead a community discussion on risk and protective factors through social media, advocates meetings, engaging with organizations who specialize in the area, and community roundtables to understand how each risk factor contributes to domestic violence and to identify ways to increase protective factors.

Domestic Violence prevention programs should increase focus on transforming gender norms and attitudes, addressing childhood abuse, and reducing harmful drinking. Development initiatives to improve access to education for girls and boys may also have an important role in violence prevention (WHO, 2009).



# INTERSECTIONS

## ECONOMICS AND DOMESTIC VIOLENCE

Mary-Margaret Sweeney, Training Services Manager for Domestic Violence Network, shares her story of economic abuse, and how economic self-sufficiency enabled her to leave the relationship:

Growing up, my mother always stressed the importance of being able to support myself without the help of a man. My father died when I was very young, and because my mother worked and could support us, we were able to move forward financially after his death. I watched her negotiate car and home purchases, engage in work she loved, and provide for me. In my early 20s, I found myself in an economically abusive relationship. I was the only breadwinner in the household, working two jobs while trying to complete my college degree. During this time, my partner either didn't work or quit jobs the moment he became frustrated with them. But I kept a careful budget and knew exactly what we needed to pay bills. And yet, I was working so much, and the math just never worked out. I couldn't understand where all of our money was going. It didn't cross my mind for years that perhaps he was being dishonest. He lied about us having health insurance under one of these jobs, which resulted in me calling him from an emergency room asking for our coverage information only to find out, as I waited in pain for treatment, that I had been lied to. Money that I had put into our joint account for health care and property taxes had been spent on a new bicycle, video games, to pay off debt he had accrued without my knowledge, and I'll likely never know what else. I learned the extent of this when I received notification that there was a lien on my property, and I was in danger of losing the home I'd worked so hard to purchase. We were not a happy couple. Verbal and emotional abuse began to take place, and happy moments were rare. When I hit my breaking point and ended the relationship, I thanked my mother for instilling in me the notion of self-sufficiency and economic independence. I was able to leave him, and without having to wait to save a certain amount of money before I could do so. It still took me a couple of years to pay the back property taxes to relieve the lien on my home which negatively impacted my credit, pay the lawyer, and that emergency room bill, but I was able to do so (personal communication, November 29 2016).

Economics and domestic violence intersect primarily through the freedom that financial stability provides and the dependency caused when an abusive partner controls finances. Whether living below the poverty line or miles above it, financial abuse immobilizes a person seeking to leave a relationship.

By making his partner economically dependent, the abuser controls her ability to become self-sufficient. This is accomplished by maintaining complete control over her money and other economic resources by making all financial decisions, reducing her ability to acquire, use, and maintain money, and/or forcing her to rely on him for all of her financial needs (Adams et al., 2008; Fawole, 2008).

Consequently, those with little to no financial means struggle to safely exit a relationship. For those experiencing violence and wanting to leave an abusive relationship, the necessities of food, clothing, and shelter are very real barriers. More than just finding temporary solutions to these issues, a person who experiences violence may struggle for years to stabilize personal finances and housing. Aiding those experiencing violence must include addressing issues surrounding financial stability.

Economic considerations cannot easily be dismissed as a barrier to safely exiting a relationship. The safety of the individual experiencing violence as well as any children in the family are impacted immediately when there is little to no income, no place to live, and an uncertain financial future.

While much of the conversation has revolved around finding safe and affordable housing for those experiencing

**16% OF PEOPLE** experiencing homelessness are victims of domestic violence (U.S. Conference of Mayors, 2013)

Approximately **50% OF ALL WOMEN** who are homeless report that domestic violence was the immediate cause of their homelessness (The National Center on Family Homelessness, 2013)

The need for **SAFE HOUSING** and the **ECONOMIC RESOURCES** to maintain safe housing are two of the most pressing concerns among abused women who are planning to leave or have recently left abusers (Clough, Draughon, et al., 2014).

Domestic violence creates vulnerability to homelessness for women and children with limited economic resources. Among mothers with children experiencing homelessness, **MORE THAN 80%** had previously experienced domestic violence (Aratani, 2009).

violence, it must also be understood that violence occurs in affluent neighborhoods, as well. Often those who are abused but are economically more advantaged experience financial abuse with limited access to money and pressure to maintain the illusion of a healthy relationship. “My client may be driving a \$60,000 car, but she has \$20 in (her) wallet ... she may have the appearance of money, but in reality, she (has nothing)” (Haselschwerdt, 2016).

**Examples of Economic Abuse include:**

- Limiting access or restricting money
- Preventing or sabotaging the ability to work
- Diminishing an individual’s ability to support him/herself (Weaver et al., 2009)

*Intersections* will focus on educating the community about financial abuse, examining the economic barriers of safely leaving a relationship, and discussing ways to improve our systems to protect those experiencing abuse.

By bringing together service providers, experts in a variety of fields, and the community, DVN will facilitate discussions and action plans on the following topics:

- Housing and domestic violence: services, barriers, and the future
- Homelessness, poverty, and domestic violence
- Wages, discrepancies in pay between men and women, and the intersection of abuse
- The impact of domestic violence on middle class families
- Domestic violence in affluent communities



## CHILDHOOD EXPERIENCES AND DOMESTIC VIOLENCE

The Adverse Childhood Experience Study (ACES) is an assessment tool used to assess the amount of neglect, trauma, or other indicators of a difficult childhood. Research has found that, the higher the score, the more likely an individual is to experience physical, emotional, and social health problems in adulthood. As the community examines the intersection between domestic violence and childhood experiences, the ACES test is an important tool to understand the dynamics of abuse.

Women who have experienced five or more ACEs are three times more likely than women who have experienced zero ACEs to be victims of domestic violence as an adult. People who have experienced four ACEs or more are eight times more likely than those with no ACEs to be raped later in life (Shriver, 2011).

A clear connection has been made between domestic violence and adverse childhood experiences. None is more critical than those who experience domestic violence as children, such as watching a parent abuse an intimate partner.

The Childhood Domestic Violence Association published these statistics about the effects of abuse on children (2014):

**5 MILLION CHILDREN** witness domestic violence each year in the US

**40 MILLION ADULT** Americans grew up living with domestic violence

Children in homes with violence are physically abused or seriously neglected at a rate **1500% HIGHER** than the national average

If you grow up with domestic violence, you're **74% MORE LIKELY** to commit a violent crime against someone else

Children of domestic violence are **3 TIMES MORE LIKELY** to repeat the cycle in adulthood, as growing up with domestic violence is the most significant predictor of whether or not someone will be engaged in domestic violence later in life (CDVA, 2014)



On the other side of experiencing trauma as a child, *Intersections* will also explore the impact of witnessing healthy relationships in childhood. For many years, prevention work has focused on teaching healthy relationships to students, but the most powerful method of prevention is for children to witness and be involved with couples who are in healthy relationships. Children learn the dynamics of healthy relationships by witnessing and experiencing them on a regular basis, which can reduce the likelihood that they will experience violence.

Finally, when parents experience domestic violence, one of the most common fears revolve around custody and children. For many advocates and those who experience violence, the laws and outcomes surrounding custody, parenting time, and domestic abuse can seem overwhelming and not easy to understand. Due to this lack of information and the anxiety it brings, people stay in violent relationships to avoid being separated from their children. The Domestic Violence Network will host a discussion on advocacy and custody laws to understand this important topic.

By bringing together service providers, experts in a variety of fields, and the community, DVN will facilitate discussions and action plans on the following topics:

- Adverse Childhood Experiences (ACES) Test
- Effects of experiencing domestic violence in the home
- Impact of modeling healthy relationships
- Examine childhood risk and protective factors



## EDUCATION AND DOMESTIC VIOLENCE

Traditionally, education is considered a protective factor to prevent violence because it empowers individuals socially, economically, and personally (Jewkes et al., 2002). While those who are at lower educational levels, defined as those who have a high school diploma or less, are more likely to experience violence, it is important to note that abuse occurs across all academic achievement levels. "In the simplest of terms, those individuals with less than a college education are at a higher risk of being victims of domestic violence than those with a college degree" (Jackson, 2007). Those with little education are often limited to lower-paying jobs or unemployment, which can create dependence on those who would abuse. If someone is being abused, but is unable to financially support him/herself and potential children, leaving the relationship can seem impossible.

Several factors in the education system contribute to the prevalence of violence. Recently, much research has been devoted to the effects of schools outsourcing disciplinary procedures to police and/or the juvenile justice system. The presence of "zero tolerance" policies and presence of school police who handle much of the discipline in schools has been shown to have a negative effect on the long-term health and wellbeing of communities and individuals. Students who, in the past, would have been disciplined for minor infractions on an institutional level are now facing criminal prosecution and time in the juvenile corrections system. By incarcerating students at this age, they are not being reformed from potential criminal behavior, but are learning it behind bars. Further, this system disproportionately affects minority and lower socioeconomic communities in much higher numbers (Lind & Nelson,

2015). Though this trend has not been directly linked to domestic violence efforts, a connection can be made to increasing educational opportunities to youth and the reduction of violence.

It is also important to recognize that low educational achievement is associated with perpetrating violence. Many studies have linked education and communication skills with the common understanding that perpetrators resort to violence because they are unable to communicate anger and frustration (Jeyaseelan, et. al, 2004). Though communication skills are adopted through education, the difference in educational levels may also be a risk factor. A partner with a higher educational level may be perceived as a threat by an offender who may resort to emotional or physical abuse to regain control in the relationship. Often those who experience violence report that efforts to achieve higher levels of education are sabotaged by those who abuse because of the threat of increased earning potential and independence, and/or because the abuser feels psychologically threatened (Jackson, 2007). To this end, adult education becomes a critical protective factor against domestic violence. Those who are able to achieve academically, especially into adulthood, increase self-esteem, increase employment opportunities, and are able to find independence from abusive relationships.

Finally, students who have received evidence-based healthy relationship education experience violence at lower rates than those who have not. Research has shown that students who receive multi-session education on healthy relationships, delivered over time, can affect positive change in dating relationships. In order to affect change, the focus of these sessions

should be to challenge attitudes and confront cultural norms, rather than give information about teen dating violence. Simply giving information about abuse is not effective, but empowering students to redefine the attitudes and beliefs of their community result in reduced rates of violence (WHO, 2009). It is the common belief that educational institutions who incorporate healthy relationship education as part of their curriculum will see incidents of violence reduce among students.

*Intersections* will bring together service providers, education professionals at various levels, and support system staff to learn about the impact of education on the prevention and response to domestic violence.

By bringing together service providers, experts in a variety of fields, and the community, DVN will facilitate discussions and action plans on the following topics:

- The impact of domestic violence on childhood education
- Allocation of school resources and their effect on education
- Education and domestic violence
- Adult education as a protective factor
- Healthy relationship education in K-12



## SUBSTANCE ABUSE AND DOMESTIC VIOLENCE

Having an alcoholic father, I have witnessed his drunkenness and how it fueled his rages and meanness. I have found that substance abuse also made him bolder and blunt, showing a side that you did not see as easily when he was not drunk. Substance abuse can ratchet up abuse and violence. It alone can't be blamed, but it can make matters worse (Angela Cain, personal communication, 2016).

Angela's experience rings true to many who experience violence directly or witness it at home. While it may seem that substance abuse motivates domestic violence, it is clear that it is not a causal relationship, but rather a correlative one. Substance abuse removes inhibitions and allows those who abuse to act violently without reservation. The relationship between substance abuse and battering is strongest for those men who already think domestic violence is appropriate in certain situations (Bennett & Bland, 2008). Research shows that substance abuse does not cause someone to be violent, but unleashes violent tendencies.

Even though substance abuse does not cause violence, the correlation between the two is apparent.

Just as there is a significant correlation between those who perpetrate domestic violence and substance abuse, there is a similar connection between those who experience violence and abuse substances. For some, illegal drugs or heavy alcohol use is encouraged by an abusive partner as a method of control, leaving the person being victimized dependent on an abuser to access these substances. Jenni White, Vice President of Mission Impact for Coburn Place, a service provider for domestic violence victims in Indianapolis says:

Unfortunately, substance abuse is often linked to domestic violence as another form of power and control — getting someone hooked on a substance, then

Substance use preceded **47%** of domestic assaults, but only 31% of non-domestic assaults (Rand, Sabol, et al., 2010)

**OVER 80%** of men who killed or abused a female partner were problem drinkers in the year before the incident (Sharps, et al., 2003)

**OVER 2/3** of men who killed or attempted to kill their partner were intoxicated at the time. **MORE THAN 1/4** of lethal offenders used both alcohol and drugs during the incident (Sharps, et al., 2003)

withholding it unless they do XYZ, for example. The person hooked is then dependent on the substance and the person with the substance, using it to manipulate them into doing whatever they want (Jenni White, personal communication, 2016).

Subsequently, those who experience violence are also at greater risk for substance abuse after leaving an abusive relationship as a coping mechanism to deal with trauma. "Victims of IPV (intimate partner violence) are 70 percent more likely to drink alcohol heavily than the non-experienced IPV cohort" (Soper, 2014).

As the community addresses domestic violence, it must also be understood in the context of substance abuse. As part of *Intersections*, DVN will bring together domestic violence advocates, service providers, and experts in substance abuse. Much of this group's focus will center around substance abuse as a tool of control, the role of substance abuse in violent relationships, and prevention work on these issues.

By bringing together service providers, experts in a variety of fields, and the community, DVN will facilitate discussions and action plans on the following topics:

- Chemical dependency as a tool of abuse
- Self-Medication associated with domestic violence
- The role of alcohol and domestic violence and sexual assault
- Advocating for those with substance abuse issues
- Risk factors for substance abuse



## MENTAL HEALTH AND DOMESTIC VIOLENCE

When an individual experiences domestic violence, a host of mental issues can arise both during periods of abuse and after leaving a violent relationship. For many experiencing abuse, they mask the abuse by pretending it has not occurred and put on a brave face for the world. “Over the years, most of the clients I have worked with say that mental abuse is the most difficult to overcome. Bruises will heal, but being told daily, weekly, or monthly that you aren’t good enough, not worthy of love, and all of the terrible things abusers say; those are the wounds that stay with someone,” said Jennie Reister, Outreach Services Director at The Julian Center.

Similarly, those in abusive relationships often experience mental health issues which are suppressed or ignored because of threats made by the abuser. For years, advocates have anecdotally reported that clients experience symptoms of PTSD, anxiety, or depression as a result of the trauma associated with abuse, which is then used as a tool of control.

One of the questions asked as part of the Mental Health Coercion Survey (2016) follows:

“Has your partner or ex-partner ever threatened to report to authorities that you are ‘crazy’ to keep you from getting something you want or need (e.g., custody of children, medication, protective order)?” Slightly over half of the survivors who responded

to this question (50.2% or 1,197 survivors) said, ‘Yes.’ This figure is particularly astonishing given that survey participants were not prescreened for a mental health history (White-Domain & Phillips, 2016).

The threat of losing children or presenting a weakened case in the criminal justice system are just a few of the barriers associated with seeking mental health services by those who experience domestic violence. For many, these are powerful motivators for staying in abusive relationships and compound untreated mental health issues.

Those in violent relationships feel the effects of abuse and trauma for years to come. It is not uncommon for survivors of violence to experience anxiety, post traumatic stress disorder (PTSD), depression, and dissociation (Barnett, 2005). For many, leaving an abusive relationship is the first step to ending the violence, but healing from these experiences is a journey. Survivors often seek the assistance of mental health counselors, therapists, and other professionals to process trauma. Because of this critical need, it is important that mental health providers help address the effects of abuse in conjunction with other issues clients are working through. It becomes critical for these professionals to screen for domestic violence and be prepared to assist any needs outside of therapy which may be present.

Similarly, service providers, law enforcement, and those who serve survivors of violence should understand the effects of trauma and those who have experienced it. While many agencies have moved to a trauma informed care model, there is still much to understand about the effects of trauma on individuals. Being sensitive and prepared to serve clients in a way that shows dignity and respect to their trauma is crucial to their long-term mental health.

As DVN leads a community conversation on the intersection between domestic violence and mental health issues, the following topics will be explored:

- Barriers to seeking mental health services
- Trauma Informed Care
- Depression, Anxiety, PTSD, and Dissociation
- People who batter and abuse and mental health
- Best practices in screening for domestic violence for mental health service providers



## SUICIDE AND DOMESTIC VIOLENCE

While experts easily agree that substance abuse, mental health issues, economic status, and childhood experiences intersect with domestic violence, often suicide is overlooked as having a correlative relationship with abuse. Similarly to domestic violence, suicide is an issue in society which hides in the darkness, rarely discussed, but quietly impacting members of the community. The most recent research shows that suicide was the tenth leading cause of death for all ages in 2013 (CDC, 2015). While the rate of suicide is high, incidents of suicide or attempted suicide are higher for those who experience domestic violence, with 23 percent of survivors having attempted suicide, compared to 3 percent among populations with no prior domestic violence exposure (Domestic Shelters, 2016).

It is equally important to note that there is a strong connection between suicide and exposure to domestic violence in childhood. "Those who grow up with domestic violence are 6 times more likely to commit suicide and 50% more likely to abuse drugs and alcohol" (CDVA, 2014). Since youth are the population group most at risk for suicide, it is important that prevention efforts acknowledge and focus on the role domestic violence may play in suicide.

A clear correlation is drawn between incidents of domestic violence and suicide attempts; however, the vast majority of domestic violence programs and suicide prevention efforts do not connect the two, leaving those who fall into these categories with little understanding of their connection. "When each field isn't educated about the other, the results can be deadly" (Clay, 2014). Within the community, both domestic violence and suicide prevention have been addressed independently, but *Intersections*

seeks to bring these two efforts together. It is the goal to not only understand the intersections of domestic violence and suicide, but to promote the tools and resources available to the community for both domestic violence and suicide prevention.

Throughout the implementation of *Intersections*, DVN will bring together agencies and community members who work on these issues in order to find common ground and collaborate on finding opportunities to work together and serve those who are at risk for both.

As DVN leads a community conversation on the intersection between domestic violence and suicide, the following topics will be explored:

- Understanding suicide as a community issue
- Intersection between suicide and domestic violence
- Services available to those who attempt suicide
- Suicide prevention steps for service providers
- Youth and suicide



## CLOSING

*Intersections: Engage, Collaborate, Transform* is an innovative Community Wide Plan with the goal of ending domestic violence by learning and understanding how a variety of social issues contribute and compound domestic violence.

- *Intersections* will engage with agencies who address individual risk factors and collaborate on strategies to engage the community about domestic violence in conjunction with these issues.
- *Intersections* will provide opportunities for agencies serving those who experience violence to connect, learn, and build partnerships with providers who specialize in areas associated with risk factors.
- For those who experience violence, receiving a combination of services, including responding to the immediate crises associated with violence and working with agencies to reduce risk factors which may be present, offer the best chance at healing and recovery.

By engaging with organizations in fields not traditionally connected to domestic violence services, it is the hope that, by facilitating collaboration, the community can work together to transform the lives of those who experience abuse.



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