Domestic Violence & Trauma: Addicted Women & their Children

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Relationship
between
substance use
and domestic
violence is
misunderstood
and often leads
to added
trauma for
women and
children.

OBJECTIVES FOR WORKSHOP

- Identify relationship and attachment disturbances addicted women and children incur due to physical/sexual abuse and domestic violence histories.
- Recognize gender specific issues related to women's substance use, abuse, and addiction.
- Develop trauma-informed strategies useful to addicted women's treatment and long-term recovery.

A Bio-Psycho-Social View



of

Domestic Violence & Addiction on Women and children

Domestic Violence

- Bio Physical contact that damages
- Psycho obsessive jealousy, verbal aggression, intimidation, harassment, humiliation, stalking
- Social isolation, control, "oppression"

A victim is battered every 9 seconds. 2 million women are severely beaten.

What's love got to do with it?

Ike Turner, Sr. --

"Now, you listen to me. I MADE you. You were nothing before you met me, and you'll be nothing without me.





ABUSE PREVALENCE

At least 25% of American women have been sexually assaulted at some point in lifetime

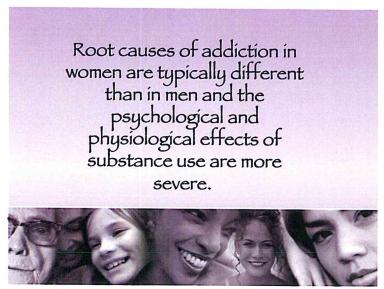
1/2 of all victims report drinking at the time of assault — increasing risk & perception issues regarding choice

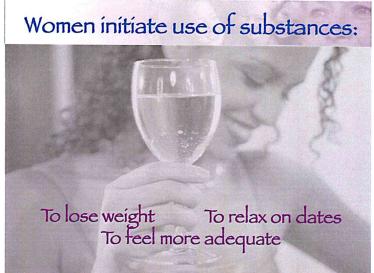
AOD connections

ADDICTION HAS NO "TYPE"

A woman's
perspective of self
and relational violence
clearly impacts their
use of substances
and appearance of
behavioral addictions.











To join their partners

"Once Were Warriors"

Women escalate use of substances:

Following depression

To decrease stress

To sleep at night

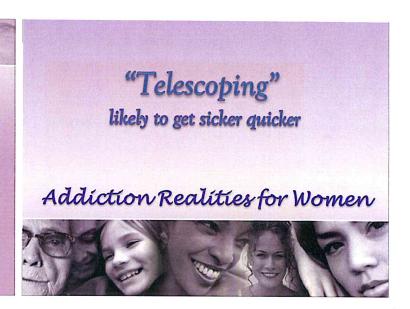
To deal with trauma



National Women's Health Report

Use Patterns

- More likely to abuse licit drugs and obtain them from "legitimate" sources.
- higher incidence of medical management of co-occurring disorders.
- More frequently involved in multiple substance abuse then men.
- Older women more likely to use drugs in isolation and in private.



Family Dynamics

- FOO used/use drugs as primary coping strategy.
- Likely to be in relationship with drug-using partner
- Often have a history of over responsibility in FOO
- · Experienced greater disruption in their families.



Risk Factors

- · Physical or sexual abuse history
- Victim of past violence
- · Panic and/or depression
- Post-traumatic stress disorder

Pomestic Violence & Addiction

Nearly 75% of wives of alcoholics have been threatened and 45% have been assaulted by their partners

(AMA, 1994)

pomestic Violence & Addiction

59% of women with drinking problems themselves experienced severe intimate partner violence in past year. (vs. 13% with no drinking problem)

(Weinsheimer et al, 2005)

Pomestic Violence & Addiction

Illicit drug use rates among women in violent relationships are 2-3 times those of women in general population

(Cunradi, 2000)

Domestic Violence & Addiction

Estimates

46% of males in treatment were batterers

60% of females in treatment were victims of battery

42% of DV service recipients indicated they abuse alcohol or other drugs

(Bennett & Lawson, 1994)

Pomestic Violence & Addiction

Rates of sexual and physical abuse reported by women in addiction treatment run as high as 75-90%

(Covington, 2000; Kubbs, 2000; Finkelstein et al., 2004)

DV & Addictions

- Addicted women's violence histories include being more likely to:
 - be victim or observer of violence as child.
 - live with men who are substance abusers



Victims & Risk Potential

- AOD/MH problems may inhibit victim's accurate assessment of danger level with batterer.
- Victim may incorrectly assume an ability to defend self and children or to have power to change batterer.
- Victim's judgment may be impaired, thus, interfering with ability to implement safety plan or fulfill parenting role.

Addicted Victims & Risk Potential



"Once Were Warriors"

Clip 3

Addicted Women & Violence

Particularly when impaired, addicted womentertaliate for being battered -- increasing their risk for more serious injury.



Coping by Doping

- The strongest predictor of PTSD from DV use of disengagement coping strategies to handle the trauma.
- AOD may be used to medicate the physical and emotional pain or to cope with the fears of being battered.
- AOD use may be encouraged or even forced by the partner as a mechanism of control -- abstinence may be sabotaged.

Family Violence Realities

Domestic
violence and
addiction
rarely have
only one
victim.





Family Wolence Realities



Children are in the same room or an adjacent room in 90% of Domestic Violence cases.

Family Violence Realities

- ⇒43% of female victims of domestic violence livein homes with children under the age of 12.
- ⇒ 39% of the women who reported assaults in a Canadian violence against women survey indicated that they were a child witness to Violence.
- ⇒ Estimate 3.3 million to 10 million children Witness domestic violence each year.

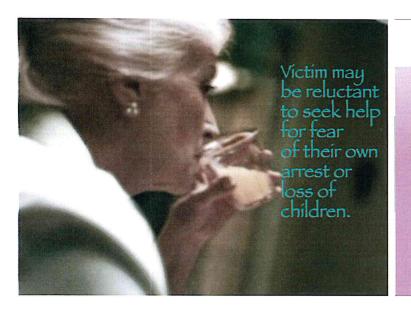
Family Violence Realities



Children who witness violence show more anxiety, aggression, depression, lower self-esteem, less empathy, and behavioral problems.



Violence impact on families "Once Were Warriors"



Family Violence Realities

- Difficulty expressing feelings
- Non acceptance of feelings by significant others & self
- Childhood neglect or emotional abandonment
- Intimacy issues



Addicted Women & Trauma

"PTSD and addiction are a marriage made in the avoidance of unbearable affect."

Margaret Cramer, 2002

PTSD & Addictions

The odds of a woman with PTSD also having a substance abuse problem is 3x greater than a woman without PTSD.

Chilcoat & Menard, 2003

27% of women with a lifetime history of PTSD report drug abuse or dependency as an issue

TRAUMA

Traumatic events impact the psychological structure of the "self," the function of one's body, the ability to attach to others, and the meaning a person attributes to safety within their community

Trauma is psychological

People are traumatized when they face life events where they are helpless to effect the event or it's outcome.

Typical Responses: chronic tension, confusion, isolation, & "learned helplessness."



Trauma is physiological



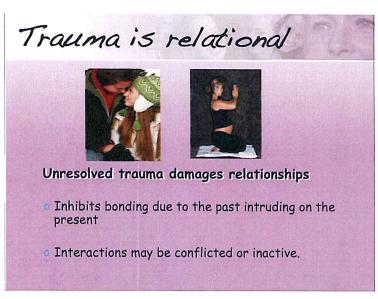
- o Body reality:
 - undischarged energy
 - stored at the cellular level
- be carried through to their completion

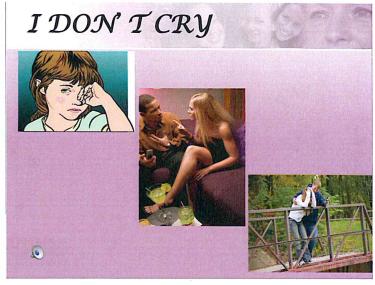
Trauma is spiritual

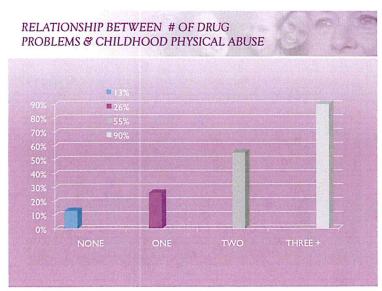
Unresolved trauma damages the Spirit

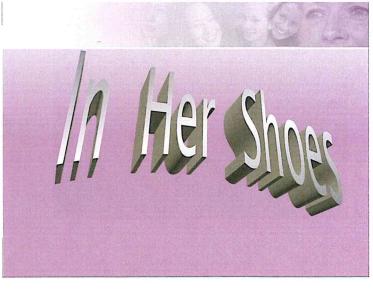
- Extracts the joy and possibility from life experiences
- Creates a splitting and numbness from self
- Existential existence has cracks











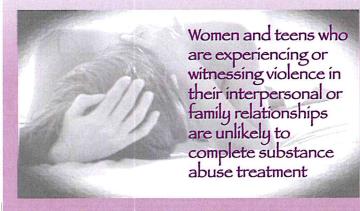


Women's Response to Treatment

Reasons cited for not entering or leaving treatment early:

- * care of dependent children
- * non support of family
- * lack of access to care (insurance, transportation, \$)
- mistrust of social service system (and counselors)
- * insensitivity to women's issues

DV impact on treatment



A Dying Bull Kicks Hardest!



Once were Warriors - Clip 5

Barriers

For effective assessment, intervention and treatment of substance abuse in women



Balancing Policy and Practice in DV

DV Agency policies supporting a substance-free environment must be balanced with a multi-step approach providing opportunities for substance abusing women to safely discuss their daily struggles with sobriety, their compulsion to use and their parenting concerns.

- · Help battered women and their children achieve both justice and freedom from abusers and perpetrators
 Help addicted women understand their
- addiction as another abuser



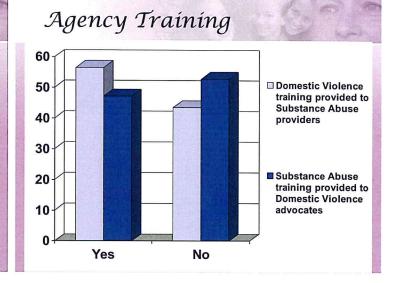
"It was easier just to stay stoned and numb and not have to deal with it. The drugs made me forget about all the abuse and set aside the fear and the terror I had from the abuse and that was my only escape. It was a way to get away from my husband and not feel trapped."

- Have you ever felt a need to CUT DOWN on your drinking or drugging.
- Have you ever been ANNOYED at others' criticism of your use of drugs or alcohol.
- Have you ever felt GUILTY later about your behavior when you were using.
- Have you ever had a "EYE OPENER" drink in the morning just to get the day started.



Recommendations for DV Programs

- Assess personal and family history of substance abuse (past & present)
- Have groups that focus on addiction and shame reduction.
- Have recovering women on staff.
- Have addiction education on site.
- Develop action plans with survivors that support sobriety without punitive program responses for relapse.
- Educate advocates on relapse realities for addicted survivors



Balancing Policy and Practice in SA

SA Agency policies supporting a safe environment to recover must be balanced with a multi-step approach providing opportunities for battered women to safely discuss their daily struggle with abusers, the impact of violence and coercion on recovery, clarification about anger and violence, and parenting concerns

help recovering women and their children achieve sobriety and freedom from batterers using addiction as an excuse to justify or excuse abuse.

DV Assessment

REMEMBER to ask routinely about possible spousal/partner abuse

A ASK, in private, questions about violence

D DOCUMENT answers & observations in clinical record

A ASSESS safety

R REVIEW options





"I believe I need more than just a 12-step program. You can talk about all these wonderful spiritual things, but if you don't have any food and you don't know where you're going to sleep, and you're running for your life, you don't have time for any of that stuff. You're just stuck on survival."



Recommendations for SA Programs

- Assess for physical, sexual, & verbal abuse.
- Maintain a firm position on violence (I.e., survivor is not responsible & has no control).
- Have single gender groups for women.
- Have classes on Violence education, safety planning, & self-protection for all female clients.
- Train staff to understand coping and survival strategies and their relationship to recovery strategies and relapse.

Elements Supporting Efficacy of Treatment

- Provision of Childcare
- Provision of Prenatal services
- Family Involvement
- Female only services
- Wrap-around services
- Mental health services
- · Comprehensive programs





Recommendations for Therapists

- ✓ Assess for personal and family history of substance abuse and domestic violence (past & present).
- ✓ Meet separately with individuals and subsystems if violence in suspected. Safety comes first.
- ✓ Become educated about the addictive, relapse, and violence cycles.
- ✓ Conceptualize systems hierarchies within the context
 of violence, addiction, and powerlessness.
- ✓ Maintain firm position on "power over" strategies.

Core Issues Seen in Survivors

- Tendency to reenact or repeat self-defeating behavior
- Alienation from self and others.
- Unusual thinking and behavior at times
- Numbness in affect
- Difficulty with touch



Readiness for Change Pre-Contemplation Relapse

Contemplation

Preparation

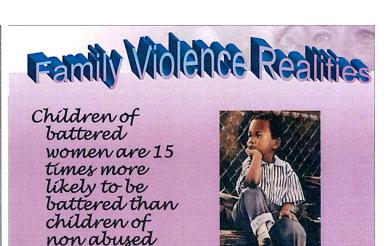
Maintenance

Action

The Journey to Self

An addicted woman or child who has suffered violence in life has a journey to take to find the self-their spirit, their support, their strength, and their life.

Once Were Warriors - Clip 5



mothers.

Assessing Child Damage from Battering

- Exposure to threats or acts of violence prior to and post-separation (or new relationships)
- > Previous injury to child during assault on victim
- Role-modeling of violent response to feelings or desire to control
- Attempts to undermine the mother-child relationship
- Rigid, authoritarian or neglectful, irresponsible parenting style
- Psychological abuse and manipulation
- > Threats of abuduction or abandonment

Relapse & Recovery

RISK FACTORS FOR RELAPSE IN SURVIVORS

- · Memories begin to surface
- Affects associated with abuse begin to emerge
- Life experiences are met without the aid of addictive behaviors
- Addictive behaviors surface other than the identified addiction

NYPD Blue

Classification System

Active Addiction ...Repressed Abuse

- → No abuse memories or PTSD symptoms
- → Focus on sobriety

NOT ON ABUSE

Classification System

Active Addiction ... Active Abuse

- Ointerfering PTSD symptoms
- OUtilize a dual diagnosis approach

SOBRIETY & ABUSE

Classification System

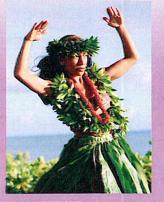
Active Abuse ... Reactive Chemical Abuse

- symptoms → Focus on ABUSE with ABSTINENCE during treatment

FTSD TX Approaches

- EMDR (Shapiro)
- · Prolonged Exposure Therapy (Foa, et al)
- TREM (Harris)
- Seeking Safety (Najavits)
- ATRIUM (Miller)
- Beyond Trauma (Covington)
- Internal Family Systems (Schwartz)
- Integrative Body Psychotherapy (IBP)
- Somatic Therapy
- Self-defense training

SACRED DANCE



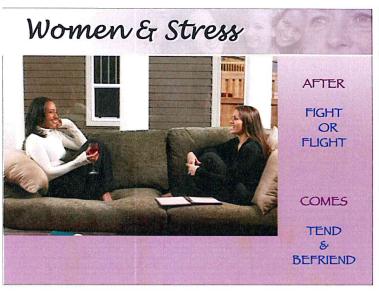
Reconnection to Body Permission to Play Sense of Spontaneity Sense of Struggle Sense of Intimate Connection Sense of Freedom

Mills & Daniluk, 2002

The Warriors Path

- Pay Attention
- Take Responsibility
- Face Fear
- Don't Quit
- Keep Agreements
- Stand up to Tyrants
- Keep a sense of humor
- Love one another
- Honor connections to source

Adapted from Dawn Callan, 1995





Re-Attachments







Risk for Child in Contact with Batterer

- Level of physical danger to victim
- Level of psychological cruelty to victim or children
- Level of manipulative control or coercion used previously
- Level of entitlement
- Refusal to accept end of relationship
- Level of risk to abduct child

- History of
 - Using children as weapons
 - Physical abuse towards children
 - Sexual abuse or boundary violations with child
 - Placing children at risk during previous abuses of victim
 - Neglectful or severely underinvolved parenting
- Substance Abuse History
- Mental Health History

Resiliency in Children

Critical factors affecting adjustment

A secure parent-child attachment support from other adults

- Unconditional love
- · Limit setting that nurtures
- Encouraging responsibility in action



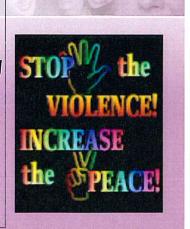
Resiliency in Children



Children who grow up in families with a history of substance abuse do better when parents or other significant adults provide consistent and supportive direction and discipline.

Stop

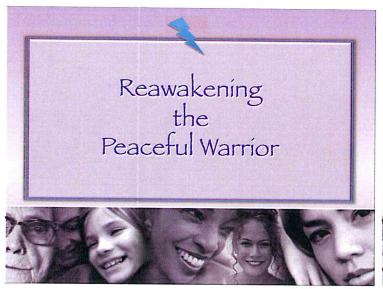
Hurtful Teasing
Bullying
Intimidation
Harassment
Assault
Violence



OWW - Final clip



Remember to not become another oppressive agent that interrupts an addicted woman's journey to safety, independence, sobriety, and protection of her children.



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