Screening for Domestic Violence and Substance Abuse:
She’s Got All Kinds of Troubles

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WELCOME

- Attendee Introductions
- Presenter Introduction
GROUP EXERCISE

1. What % of men and what % of women report using alcohol at the time the violence occurs?

2. What is the incidence of substance abuse by batterers seen in the criminal justice, mental health or social service settings?
GROUP EXERCISE  cont.

3. Women are more likely than men to abuse substances for what purposes?

4. What are the 5 keys linking substance abuse with partner abuse?
GROUP EXERCISE cont.

5. According to one study, what % of domestic violence homicides occur after separation?

6. What % of assaults occur after separation?

7. What % of adult males in substance abuse treatment are batterers?
“AODA increases risk of men's violence but is not the cause of violence.”

— Bennett, Larry W., In Brief: Substance Abuse and Woman Abuse by Male Partners, 2/23/98
I want to recognize the work of Patti Bland, MA, LCDC, with the Alaska Network on Domestic and Sexual Assault in Juneau, AK (pjmbland@hotmail.com or pbland.andvsa@ala.com). Parts of my presentation today are based on her materials and information.

Materials and information from other sources and experts are cited throughout my presentation.
OUR GOALS

- Break isolation and foster cooperation among systems/providers addressing concerns about safety and sobriety

- Identify:
  - What works well
  - Our challenges and barriers
  - How our work overlaps
  - How we can better collaborate to help one another and those we serve
TOOLS TO USE

- Cooperation
- Respectful disagreement
- Down-to-earth problem solving skills
- Good humor
- Hope
- Listening
- Questioning
KEY POINTS

- Every person has a different experience
- Asking why someone stays or continues to use in order to cope with violence is counterproductive; instead ponder, “Why do abusers feel entitled to abuse and why do they get away with violent behavior?”
KEY POINTS cont.

- Knowledge of both 'specialized' services and 'mainstream' agencies is essential.
- Service barriers exist for people of color, gays, lesbians, teens, older adults, poor people, non-English speaking, deaf, rural, religious and chemically dependent people, as well as others.
A successful culturally competent intervention incorporates:

- Awareness of one’s own biases, prejudices and knowledge about the people we serve and their culture.
- Recognition of professional power (power differential between you and the client) in order to avoid imposing one’s own values on others.
OVERVIEW

- Domestic violence and substance abuse
  - Definitions and Statistics on Domestic Violence, Substance Abuse and Addiction
  - Power and Control Issues
  - What Causes Domestic Violence
  - When Domestic Violence and Substance Abuse Co-occur
  - Abuser’s and Victim’s Rules
  - Why Men Batter
  - Research on Abusive Men
OVERVIEW cont.

- Working with Abusive Men
- 5 Things to Say to an Abuser
- Separation Violence
- Coping Abuse
- Adult Victim Survival Skills
- Screening
  - Sample Screening Questions
  - Sample Framing, Direct, Indirect Statements
  - Avoid Revictimizing
OVERVIEW cont.

- Sample Screening Questions if Partner is User or Abuser
- Screening Questions for Abusive Men
- Statements Indicating Domestic Violence
- Working with Battered Women
- What a Battered Woman Faces if She Leaves
- 5 Things to Say to a Battered Woman
- Safety, Sobriety, and Children’s Welfare
OVERVIEW cont.

- Asking About Abuse
- If She Says, “Yes” About Domestic Violence and Substance Abuse
- If She Says, “Yes” About Domestic Violence
- Advocacy Based Counseling
- Validation
- Supporting Domestic Violence Victims
OVERVIEW cont.

- Discussing Domestic Violence or Substance Abuse
- Be Positive
- Documentation
- Talking to People with Domestic Violence/Substance Abuse Issues
- The Communication Process
- Explore Options
- Safety/Sobriety Plan
OVERVIEW cont.

- Escaping Violence; Escaping Chemical Dependency
- Community Partners
- Where Do We Go From Here?
- How Do We Get There: Responding Better to Domestic Violence
DEFINITIONS

- Domestic violence is a pattern of coercive behaviors, marked by physical, emotional or sexual abuse used by one person in an adult or adolescent intimate relationship to gain power and control over the other.

DEFINITIONS cont.

- Substance abuse is a destructive pattern of drug use which leads to clinically significant impairment or distress. Often the substance abuse continues despite significant life problems.
  - When a person exhibits tolerance and withdrawal the person has progressed from abuse to addiction.
DOMESTIC VIOLENCE AND SUBSTANCE ABUSE

- A correlation between substance abuse and domestic violence occurs in 44% to 80% of reported domestic violence incidents depending on cited research. (Mackey, 1992)

- No known causal link.

- Presence of both increases severity of injuries and lethality rates. (Dutton, 1992)
DOMESTIC VIOLENCE AND SUBSTANCE ABUSE cont.

- 1 in 4 women will be assaulted by an intimate partner. (U.S. Department of Health and Human Services)

- Over $\frac{1}{2}$ of reported domestic violence cases involve drinking. (Drug Strategies, 1998)

- Nearly 75% of wives of alcoholics have been threatened and 45% have been assaulted by their partners. (American Medical Association, 1994)
DOMESTIC VIOLENCE AND SUBSTANCE ABUSE cont.

- One study found in 94% of domestic violence calls to police — assailant used ETOH alone or ETOH with cocaine, marijuana or other drugs within 6 hours of the assault.
  - 92% of assailants and
  - 42% of victims had used alcohol or other drugs on the day of the assault. (Brookhoff et al, 1997)
DOMESTIC VIOLENCE AND ADDICTION

- Both
  - Involve power and control dynamics.
  - Impact entire families, often harming 3 or more generations.
  - Thrive in silence and isolation.
  - Carry great societal stigma and shame.
DOMESTIC VIOLENCE AND ADDICTION cont.

- Involve denial systems including:
  - Minimizing and rationalizing

- Despite some similarities, domestic violence and addiction are different problems requiring different interventions.
DOMESTIC VIOLENCE AND ADDICTION cont.

- Denial serves different purposes:
  - Victims fear for their safety or may be coerced into denying the truth
  - Batterers avoid accountability and may falsely blame their behavior on their partner, substance abuse or anger.
  - Alcoholics/addicts fear they won’t survive without using and deny to avoid pain.
ACTIVE FORMS OF ABUSE

- Domestic Violence
- Child Abuse and Neglect
- Sexual Assault
- Childhood Sexual Abuse
- Physical Abuse
- Oppression
- Emotional/Psychological/Verbal Abuse
POWER AND CONTROL TACTICS

- Isolation
- Emotional Abuse
- Economic Abuse
- Sexual Violence
- Physical Violence
- Using Children
- Threats/Coercion

- Intimidation
- Minimizing, Denying, and Blaming
- Using Male Privilege
POWER AND CONTROL

- Coercion & Threats
- Intimidation
- Emotional Abuse
- Isolation
- Minimizing, Denying & Blaming
- Using Children
- Economic Abuse
- Male Privilege
GROUP EXERCISE

Identify the power and control tactics you have seen in your practice.
WHAT CAUSES DOMESTIC VIOLENCE?

Learned Behavior:
- Observation
- Experience
- Re-enforcement/Gets away with it
- Exists in virtually all cultures, although it may manifest itself in different ways.

Not Caused by:
- Illness
- Genetics or gender
- Alcohol/drugs
- Anger
- Stress
- Victim’s behavior
- Relationship problems
WHEN DOMESTIC VIOLENCE AND SUBSTANCE ABUSE CO-OCCUR

- Two Sets of Rules May Exist:
  - Abuser’s Rules
  - Victim’s Rules
ABUSER'S RULES

- Based on:
  - Fear
  - Domination
  - Guilt
  - Shame
VICTIM’S RULES

- If I don’t talk no one will know how I feel and I won’t get hurt.
- If I don’t ask I can’t get rejected.
- If I am invisible I won’t be judged and I’ll be ok.
- If I am careful no one will get upset.
- If I stop feeling I won’t have pain.
- I MUST MAKE THINGS AS SAFE AS POSSIBLE!
GROUP DISCUSSION

In addition to domestic violence and chemical dependency, discuss the challenges of mental health issues, sexual assault, poverty, homelessness, other forms of abuse, and other forms of oppression.
WHY MEN BATTER

Men batter women and use power and control tactics because:

- It’s a learned behavior.
- It works.
- They can.

In order to stop, they will have to:

- Change their behavior and learn differently.
- No longer get away with it.
Men who put down their intimate female partners were 14 times as likely to use violence against them.

Men who limited their wives’ contact with others were 10 times as likely.

Men who kept their wives from other men were 7 times as likely.

Men who prevented their wives from having knowledge or access to income were 7 times as likely.
Men who checked on their female partners’ whereabouts were over 5 times as likely.

Men, who as children, witnessed their fathers beat their mothers were almost 4 times as likely.

In one study looking at drug and alcohol’s effect on threats, physical violence and stalking:

- 33% of the men used neither substance
- 19% used alcohol only
- 18% used only illicit drugs
- 30% used both alcohol and illicit drugs
Men were significantly more likely to use physical abuse when they used both drugs and alcohol on a daily basis.

Men were not quite as likely to use physical violence when they just used alcohol on a daily basis.

Narcissists are no more aggressive than other men unless they feel insulted or criticized, and then they respond “much more aggressively than normal.” It is when their egos are threatened that they become violent.

— Baumeister, R. F. “Violent Pride: Do People Turn Violent Because of Self-Hate, or Self-Love?” 284 (4) Scientific American 98, April 2001
Men in the substance abuse milieu reported not only significantly more severe substance abuse problems, but also more frequent partner sexual abuse.

These findings indicate the need for:
- Routine screening for family violence and substance abuse in both treatment milieus.
Informed and up-to-date staff in both settings who are sufficiently prepared for the therapeutic challenges such men present.

More study of how treatment for dual-problem men may be coordinated by the violence and substance abuse communities.

WORKING WITH ABUSIVE MEN

- Substance abuse providers working with abusive men must:
  - Establish policies and procedures that address the safety of the victims — the safety of the victim supercedes the interests of the abusers in treatment.
  - Collaborate with other interrelated agencies such as domestic violence programs and the criminal justice system to assess the lethality of the abuser.
WORKING WITH ABUSIVE MEN cont.

- Understand the laws on domestic violence and the operation of the legal system.
- Take appropriate actions to provide victims with information that could affect their safety.
- Have abusers pay for some portion of their treatment as an indicator of accountability.

5 THINGS TO SAY TO AN ABUSER

- “I’m afraid you’ll really hurt her badly or kill her next time.”
- “I’m afraid you’ll hurt your children.”
- “It will only get worse.”
- “I’m here for you when you’re ready to change.”
- “No one, including you, has the right to abuse another person.”
65% of homicide victims were physically separated from their abusers prior to death.

Over 17% of domestic violence homicide victims had protection orders against their abusers at the time of killing. (Florida Mortality Review, 1997)
Up to 75% of domestic violence assaults reported to police are made after separation. (U.S. Department of Justice, 1995)

59% of domestic violence victims are stalked by intimate partners. (National Institute of Justice and Centers for Disease Control, 1998)
COPING ABUSE

- Substance Abuse
- Gambling
- Eating Disorders
- Compulsive Spending
- Excessive Working
- Sexually Acting Out
- Compulsive Shopping/Shop-Lifting
ADULT VICTIM SURVIVAL SKILLS

- Fighting back and defying the perpetrator.
- Pleasing, placating, and complying.
- Not telling anyone about the abuse lest it get worse.
- Not leaving for fear of the abuse getting worse.
- Leaving to try and make it better.
ADULT VICTIM SURVIVAL SKILLS cont.

- Avoiding perpetrator; working separate shifts.
- Protecting children by sending them away.
- Searching for help, getting a protection order, trying to find help for the perpetrator.
- Dropping search for help as a way to protect self.
ADULT VICTIM SURVIVAL SKILLS cont.

- Being devious as a way to survive; lying to the abuser and others.
- Encouraging abuser to drink until they pass out so no one gets hurt.
- Reasoning with the abuser or expressing disapproval.
- Lying about the abuser’s criminal behavior.
ADULT VICTIM SURVIVAL SKILLS cont.

- Trying to improve the relationship.
- Creating internal space through fantasy that the abuser can’t touch.
- Having sex to placate the abuser and protect children from violence.
- Drinking and using drugs to numb one’s own pain.

— Ganley, A. and Schector, S., 1996
ROUTINE SCREENING

- When you recognize **active abuse**, routinely look for other active abuses.
- When you spot a **coping abuse**, look for other coping abuses.
- Also look for **survival skills** that may include forms of coping abuse.
- Also look for **active abuse** in both the past and present.
SAMPLE SCREENING QUESTIONS

“People I see often report feeling ‘stress in their relationship’.

Ask:

- “How does your partner show disapproval?”
- “When was the last time you felt threatened or controlled by your partner?”
- “How often, if ever, do you feel scared or hurt by your partner?”
“Domestic violence is a major problem for many women. Because it is such a common experience, I am asking you whether you feel safe at home.”

“We recognize many families referred to us are dealing with stress in the home. We are committed to your safety as well as that of your children. We are asking each woman we see the following questions so we may better meet their needs...”
SAMPLE DIRECT QUESTIONS

- “Is your partner jealous?”
- “Has your partner complained about your weight now that you are pregnant?”
- “I’m concerned someone is harming you. Has someone been hurting you?”
- “Do you feel isolated by your partner?”
- “Do you ever feel afraid of your partner?”
“You mentioned your partner loses his temper with the kids. Can you tell me more about that? Have you ever felt afraid for yourself or your children — can you tell me more about that?”

“All couples argue sometimes. Does your partner’s behavior ever frighten you? Has it gotten worse since your pregnancy?”
AVOID REVICTIMIZING

- People **do not** choose to be victims of violence nor do they choose to develop the disease of addiction.
- Think before speaking. How would you like to be spoken to?
- Remember to offer:
  - respect, not rescue
  - options, not orders
SAMPLE SCREENING QUESTIONS IF PARTNER IS USER OR ABUSER

- “Many women tell me their partners don’t want to drink/drug/smoke alone. How often do you find yourself using when you don’t really want to?”

- “Has your partner ever used food or rent money to drink or score drugs?”
SCREENING QUESTIONS FOR ABUSIVE MEN

- “In the past few years, have you ever hit, slapped, kicked, pushed, shoved, or otherwise physically hurt a family member or a person with whom you were in a relationship?”
- “In the past year, have you forced anyone in your family, or anyone with whom you have been in a relationship, to participate in sexual activities against their will?”
- (If yes to either above): “Do you think that you may do it again?”

STATEMENTS INDICATING DOMESTIC VIOLENCE

- **Abuser**
  - “I guess I get a little physical sometimes.”
  - “I’ve given her a little push now and again.”
  - “I only get a little rough when I’m drinking. I’d never touch her when I’m sober.”

- **Victim**
  - “He really loves me. He never hurts me on purpose. He only did it because he was drunk.”

GROUP EXERCISE

- Develop three questions for screening:
  - **Group 1** — as AODA counselors to screen for domestic violence abusers.
  - **Group 2** — as AODA counselors to screen for domestic violence victims.
  - **Group 3** — as domestic violence advocates to screen for AODA.
WORKING WITH BATTERED WOMEN

- The potential for violence should always be considered.
- The guarantee of safety in an abusive relationship can never be based upon a promise from the batterer.
- If she is still in the abusive relationship, she does not have freedom of choice. She may deny or minimize the ensuing danger.
WORKING WITH BATTERED WOMEN cont.

- Talk with her separately from her abuser.
- Family or couples counseling is not safe for a battered woman until the violence has been addressed.
- Tell her that the violence is not her fault. A secure sense of connection with caring people is the foundation of her regaining control over her life.
WORKING WITH BATTERED WOMEN cont.

- Codependency concepts are not appropriate in trying to understand why women remain in abusive relationships.

- Assess for safety. Help her to determine a safety plan for herself and her children (if appropriate).
WORKING WITH BATTERED WOMEN cont.

- Tell her about her options and resources — legal, domestic violence services, protective intervention, etc.

- Develop ways in which you can advocate for her safety.
WHAT A BATTERED WOMAN FACES IF SHE LEAVES

Fear
- The highest risk for serious injury or death to a battered woman is when she is leaving or has left her abusive partner. (Hart, B., 1988)

Economics
- Up to 50% of all homeless women and children in the U.S. are fleeing domestic violence. (Schneider, E. Legal Reform Efforts for Battered Women, 1990)
Economics cont.

- Abusive partners harass 74% of employed battered women at work, either in person or over the telephone, which results in their being late to work, missing work altogether, and eventually, 20% lose their jobs. (Zorza, J. “Battering Women: A Major Cause of Homelessness,” Clearinghouse Review, 1991)
WHAT A BATTERED WOMAN FACES IF SHE LEAVES cont.

Economics cont.

- In their first year after a divorce, a woman’s standard of living drops by 73%, while a man’s improves by an average of 42%. (Action Notes, 1989)
Children

- Of the domestic violence related child abductions, most are perpetrated by fathers and their agents. Battering men use custodial access to the children as a tool to terrorize battered women or to retaliate for separation. (Finkelhor, D., Hotaling, G., and Sedlak, A., Protective Services Quarterly, 1993)
Injuries that battered women receive are at least as serious as injuries suffered in 90% of violent felony crimes, yet under state laws, they are almost always classified as misdemeanors. (Zorza, J. “The Gender Bias Committee’s Domestic Violence Study,” 1989.)
Poor Criminal Justice Response cont.

- The average prison sentence of men who kill their women partners is 2 to 6 years. Women who kill their partners are sentenced on average to 15 years, despite the fact that most women who kill do so in self-defense. (National Coalition Against Domestic Violence, 1989.)
5 THINGS TO SAY TO A BATTERED WOMAN

- “I am afraid for your safety.”
- “I am afraid for the safety of your children.”
- “It will only get worse.”
- “I am here for you when you are ready to leave.”
- “You don’t deserve to be abused.”
SAFETY, SOBRIETY, AND CHILDREN’S WELFARE

“What have you done to keep safe/sober up until now?”

“What have you been able to do to care for yourself and the welfare of your children?”
SAFETY, SOBRIETY, AND CHILDREN'S WELFARE cont.

- "What has worked well for you and the children? What has given you problems?"
- "Many people tell me they have tried_________. How often has this worked for you?"
ASKING ABOUT ABUSE

- Never ask about domestic violence or substance abuse in front of others.
- There is no “typical” victim or abuser — provide universal screening.
- Normalize questions; find a way to ask what feels comfortable for you.
ASKING ABOUT ABUSE

cont.

- Be culturally sensitive:
  - Listen
  - Use an interpreter when needed
  - Pose questions sensitively
IF SHE SAYS, “YES” ABOUT DOMESTIC VIOLENCE AND SUBSTANCE ABUSE

- Offer alternatives to couples counseling or anger management.

- Explore safety plans that do not require a mandatory protection order or shelter stay.
IF SHE SAYS, “YES” ABOUT DOMESTIC VIOLENCE AND SUBSTANCE ABUSE

- Include as recovery options: gender specific treatment, support groups and programs addressing both domestic violence and substance abuse

- But before you do any of this...
IF SHE SAYS, “YES” ABOUT DOMESTIC VIOLENCE cont.

- What safety precautions can be taken?
- Ask:
  - “Where is partner now? Returning when?”
  - “Do you feel safe to go home today?”
  - “What is the plan if future violence occurs?”
  - “Do you feel comfortable calling 911 in an emergency?”
  - “If one thing could be done to support you, what would it be?”
IF SHE SAYS, “YES” ABOUT DOMESTIC VIOLENCE cont.

- Refer her to a local domestic violence advocate for safety planning and documentation.
  - Be aware of local and federal confidentiality laws, child abuse and neglect reporting laws, risks when domestic violence is present, e.g., keeping address from batterer, etc.
Acknowledging that harm has been done:

- "Abuse is never the victim's fault."
- "Your children's safety is important and so is your safety."

Believe active abuse is traumatic and painful.
Believe victims do their best to survive.

Credit each individual for finding a way to cope and offer options to make coping and surviving for she and her children safer.
You hear her.

Make her as comfortable as possible; assure confidentiality of records, when applicable.

Affirm autonomy and her right to control her decision-making.
VALIDATION cont.

- Validate her concerns and use supportive statements.
  - “No one has the right to hurt you or your children.”
  - “It is never your fault when someone harms you, even if you were drinking or using. You did not cause this to happen. An abuser chooses to be violent.”
  - “You did not deserve this and neither do your children.”
“I’m so glad you found a way to survive. Drinking or drugging can kill pain for a while but there are safer ways of coping that can cause you less grief.”

“You deserve a lot of credit for finding the strength to talk about this. Your safety can improve your children’s safety and well-being, too.”
SUPPORTING DOMESTIC VIOLENCE VICTIMS

- Validate the victim’s experience
- Build on the victim’s strengths
- Help victims regain control over their own lives
- Help victims explore their options

DISCUSSING DOMESTIC VIOLENCE OR SUBSTANCE ABUSE

- Conversations must be respectful, private and confidential.

- Children should not be present.

- Communication should be age and developmentally appropriate as well as culturally relevant.
DISCUSSING DOMESTIC VIOLENCE OR SUBSTANCE ABUSE

- Use an interpreter when necessary.
- Discussion about either domestic violence or substance abuse may lead to clinical suspicion of co-occurrence.
Women may find it easier to talk about stress in their relationships or their partner’s substance use before talking about domestic violence or their own use.

They may also be willing to discuss concerns about their children.
BE POSITIVE

- Emphasize the benefits of reducing or stopping use of alcohol/drugs as soon as possible.
- If she is pregnant, convey the message that *any* substance use is not safe during pregnancy.
- Explore options.
- Explain any legal ramifications.
- Tailor resources to meet her needs.
Tapes of 911 Calls (excited utterances may be “forgotten”).

Get initial statements when possible (if person is coherent enough).

Memory may be impaired making later efforts impossible due to blackout or euphoric recall.
Ask kids and other witnesses what happened.

Photograph victim, scene and any injuries.

Note: Abuser may have injured knuckles, etc.
TALKING TO PEOPLE WITH DOMESTIC VIOLENCE/SUBSTANCE ABUSE ISSUES

- Know yourself
- Know your own limits
- Have a plan
- Be clear
- Establish rapport (normalize the conversation: “I talk to everyone about this.”)
GROUP EXERCISE

Create lists of words or phrases that:

- **Group 1** — could be perceived as judgmental by a battered woman.
- **Group 2** — excuse battering behavior.
THE COMMUNICATION PROCESS

- Obtain a history — collateral interviews when possible, what has happened before?

- Observe patterns of behavior — is what they say different from what they do? Listen: are they merely repeating you? Avoid judgmental words or words that interpret feelings/thoughts for people.
Be simple and concrete.

Ask open ended questions and look for visual cues:

- “Can you tell me about it?”
- “Can you show me?”
- What did that make you want to do?

Avoid “why?”
THE COMMUNICATION PROCESS cont.

- Integrate awareness of domestic violence and addiction into your work. Person may have difficulty with abstract concepts, including feelings.

- Utilize the individual’s personal strengths.
  - Role plays, drawings, music
THE COMMUNICATION PROCESS cont.

- Provide structure, not control — respect and value are more likely, to elicit cooperation.
  - Encouraging their participation in developing strategies is more likely to affix tasks in memory, leading to accurate recall.
THE COMMUNICATION PROCESS cont.

- Identify cues for shut-down or agitation.
  - Validate their experiences and frustrations.
  - Listen and acknowledge their struggles.
  - Provide acceptance.
  - Notice if person is over-stimulated, tired, or sensitive.
The Communication Process cont.

- Check for comprehension — Ask person to walk you through their statements. Check for consistency and retention of information.

- Review — Keep your words few. Double check periodically. Make sure person is linked with a domestic violence advocate or substance abuse counselor if needed or wanted.
EXPLORE OPTIONS

- Inform her of domestic violence shelter/program, legal, housing, healthcare, welfare, etc., options.

- Ask what was tried in the past and what worked; explore consequences of those choices.

- Help her prioritize; what is important for safety now?
EXPLORE OPTIONS cont.

- Write things down, break tasks into manageable pieces.
- Help her mobilize her support system; the batterer has probably isolated her.

SAFETY/SOBRIETY PLAN

- **Strategize** Steps to reduce risk/use
- **Develop** Options to keep safe/sober
- **Identify** Trusted allies/safe sponsors
- **Plan** Means to escape abuser/drugs
- **Discuss** Referral resources
- **Avoid** Danger/persons, places, things
- **Tools** One day at a time

Caution: Written materials and referrals may place domestic violence victims in danger.
ESCAPING VIOLENCE; ESCAPING CHEMICAL DEPENDENCY

- Survivors do leave.
- Substance abusers do enter recovery.
- People escape both abuse and addiction when it is safe to do so.
- Offer supportive options for those seeking safety and sobriety.
COMMUNITY PARTNERS

- Battered women’s advocates are your local domestic violence experts.
- Refer victims to your local domestic violence program.
- Refer abusers to local battering intervention programs.

National Domestic Violence Hotline
- 800-799-7233 (SAFE)
- 800/787-3224 TTY
COMMUNITY PARTNERS cont.

- Chemical dependency professionals are your local chemical dependency experts.
- Refer victims and abusers to local chemical dependency programs.
- Local/State/National Alcohol and Drug Help Line
GROUP DISCUSSION

- Do you know what is available in your community?
- Where can domestic violence materials be placed safely in your agency for victims?
- Where can you place materials for abusive men?
WHERE DO WE GO FROM HERE?

- Planning for the future.
- Fostering cooperation: What do we want to see happen right now?
- Determining a starting place.
HOW DO WE GET THERE: RESPONDING BETTER TO DOMESTIC VIOLENCE

- Develop a relationship with your local domestic violence agency and battering intervention program.
- Have a key staff member of your program actively involved with the local domestic violence coordinating council.
- Make literature on domestic violence available, including referral information and posters.
Join your state domestic violence coalition.

Develop policies in your program which address screening for domestic violence and what to do with domestic violence perpetrators.

Consider conducting groups (sexually segregated) at your facility where the myths, dynamics, and statistics of domestic violence can be discussed.
RESPONDING BETTER TO DOMESTIC VIOLENCE cont.

- Indicate to your clients that domestic violence can be talked about here.
- Take domestic violence into account in developing policies regarding:
  - conjoint marital/couple/family counseling (not recommended in most domestic violence cases)
  - referral for domestic violence services
- Provide safety planning.
RESPONDING BETTER TO DOMESTIC VIOLENCE cont.

- Consider using an ongoing domestic violence consultant from the local program/agency.
  - “Trading” of consultants between agencies
  - Cross-training
  - Focused training on service areas which both have in common: group counseling, support groups, and case management.

— “Substance Abuse Treatment and Domestic Violence: Treatment Improvement Protocol (TIP),” Series 25, 1997, Substance Abuse and Mental Health Services Administration
INDIVIDUAL EXERCISE

Create an Action Plan for how you will:

- incorporate what you’ve learned today into the training at your agency, or
- build a relationship with a local domestic violence program or battering intervention program.
QUESTIONS?

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