



Intimate Partner Violence, Combat Stress & Co-occurring Conditions

THIS PROJECT WAS SUPPORTED BY GRANT NO. 2015-TA-AX-K058 AWARDED BY THE OFFICE ON VIOLENCE AGAINST WOMEN, U.S. DEPARTMENT OF JUSTICE. THE OPINIONS, FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS EXPRESSED IN THIS PUBLICATION/PROGRAM/EXHIBITION ARE THOSE OF THE AUTHOR(S) AND DO NOT NECESSARILY REFLECT THE VIEWS OF THE DEPARTMENT OF JUSTICE, OFFICE ON VIOLENCE AGAINST WOMEN.

Agenda

Context of intimate partner violence (IPV)

Risk factors

Co-occurring conditions and IPV

Insights video and discussion



Contexts of IPV

Violence in exercise of coercive control (Battering)

- Patterned set of behaviors
- Coercion and intimidation distinguish it from non-battering
- Entrapment essential goal

Non-battering use of violence (Situational)

- NOT part of an attempt to establish an ongoing position of dominance in a relationship or in response to being battered

Contexts of IPV (Cont'd)

Pathological violence

- Substance abuse
- Psychological problems (e.g., depression, mental illness, PTSD, TBI)

Violent resistance

- Broader strategy by victims to stop or contain abuse, including violence directed at the abuser
- Battered Women's Syndrome
- Imperfect self-defense

All IPV can lead to serious bodily injury or death

Most significant risk factors for lethality?

Threats to kill

Alcohol / substance abuse

Access to a gun

Unemployment

Pet abuse

Past acts of domestic violence?

Depression, Suicide, and IPV

Suicidal thinking and behaviors is one of the main risk factors for lethal IPV

Veterans are twice as likely to die from suicide as non-veterans

Combat-related guilt and combat stress reactions can lead a depressed veteran to consider hurting or killing themselves

Combat exposure, PTSD, depression, substance abuse, and/or TBI increase the risk of suicide

Veterans are more likely than the general population to use firearms as a means for suicide

Substance Use Disorder and IPV

Both IPV perpetration and victimization are often co-occurring for people seeking alcohol and drug treatment

IPV perpetrators 2-3 times more likely to use illicit drugs and abuse or be dependent on alcohol or other drugs, or have serious mental illness [Lipsky et al., 2011]

While NOT causal, alcohol consumption (particularly binge drinking) linked to severity of IPV perpetration (Fals-Steward, 2003; Gerlock, 2012: NRI-04-040)

More alcohol consumption before violent IPV incidents among veterans and servicemembers [Marshall et al., 2005]

Traumatic Brain Injury (TBI) and IPV

Traumatically induced disruption of brain function and disturbance of consciousness caused by an external injury to the head, possibly resulting in function/disturbance in impairment of cognitive, emotional, and physical functioning

- Sleep problems
- Poor impulse control
- Increased verbal/physical aggression
- Irritability, anger, and impatience



TBI Symptoms vs. IPV Tactics

TBI SYMPTOMS

- Depression
- Memory Problems
- Pain, Headaches
- Sleep Disturbance
- Impulsiveness
- Irritability
- Aggression
- Rage, Mood Swings

IPV TACTICS

- Social Isolation (Victim from Family/Friends, Economic Control)
- Emotional Abuse (Suspicion, Jealousy, Accusations)
- Intimidation/Threats
- Physical/Sexual Assaults

TBI Symptoms and IPV Tactics

Wife of a combat veteran:

“I know he got blown up over there. I can understand him forgetting things. I even understand him getting angry. I just don’t understand...anytime when I take a weekend to work at the arts and crafts fairs he calls me all day long. He calls me awful names. He accuses me of having affairs and sleeping with other men. Now just when am I supposed to do that...In between selling a bracelet and an earring?”

TBI Symptoms and IPV Tactics

Case Example

Wife of a combat veteran:

“I know he got blown up over there. I can understand him forgetting things. I even understand him getting angry. I just don’t understand...anytime when I take a weekend to work at the arts and crafts fairs he calls me all day long. He calls me awful names. He accuses me of having affairs and sleeping with other men. Now just when am I supposed to do that...In between selling a bracelet and an earring?”

In this example, she identifies the general problems with memory and anger that can be associated with a TBI.

But, she correctly points out how a TBI doesn’t seem to explain his Ongoing name-calling, accusations, and constant monitoring of her through the phone calls. This is an example of IPV.

Post-traumatic Stress Continuum

Combat and Operational Stress

- Expected and predictable emotional, intellectual, physical and/or behavioral reactions of those exposed to stressful events in war or military operations.

Acute Stress Response

- Includes most components of PTSD, but lasts 2 days-4 weeks
- Presence of dissociative symptoms (numbing, detachment, decreased awareness of surroundings)

Problems with threat appraisal (impulsive/reactive violence)

Heightened arousal may prevent cognitive reappraisal of threat and consideration of alternative ways of behaviorally responding;

Physiological arousal creates a + feedback loop, strengthening hyper-arousal and perceived threat, creating an *“Active Threat Schema”* [Bell & Orcutt, 2009; Teten, et al., 2009]

PTSD and IPV

Most military servicemembers and veterans with PTSD **do not become abusive or violent**

Veterans with PTSD report significantly higher rates of generally violent behaviors and aggression than veterans without PTSD

Studies have consistently found veterans with PTSD to have higher incidence of IPV perpetration than veterans without PTSD

Correlation vs. Causation

PTSD Symptoms vs. IPV Tactics

PTSD SYMPTOMS

- **Avoidance (Self-imposed Social Withdrawal)**
- **Negative Cognitions & Mood (Anger, Inability to experience Positive Emotions)**
- **Re-experiencing (Flashbacks & Nightmares)**
- **Arousal (Hypervigilance, Irritability, Reckless Behavior)**

IPV TACTICS

- **Social Isolation (Victim from Family/Friends, Economic Control)**
- **Emotional Abuse (Suspicion, Jealousy, Accusations)**
- **Intimidation/Threats**
- **Physical/Sexual Assaults (outside of Flashbacks & Nightmares)**

Risk Factors for Recidivism

- Access to lethal weapons
- Threats to kill partner
- Threats of suicide
- History of physical, sexual, or emotional abuse toward intimate partners
- History of violent behavior toward family members (including children), acquaintances, and strangers
- Relationship instability, especially recent separation or divorce
- Presence of other life stressors, including employment/financial problems or recent loss
- Evidence of mental health problems and/or substance abuse

Risk Factors (Cont'd)

- Childhood history of witnessing or being a victim of family violence
- Resistance to change and lack of motivation for treatment
- Antisocial attitudes and behaviors
- Attitudes that support violence toward women
- A pattern of coercive control
- Stalking
- Strangulation
- Forced sex

Military & Veteran Issues

Majority of servicemembers in the ages at highest risk for IPV (18-29)

Constant mobility and geographic separation isolate victims, sometimes creating physical distance from family and support

Deployments and reunification create unique stress

Many have extensive firearms and hand-to-hand combat training; Some have combat experience

Medical and psychological sequelae from war zone deployment

Insights into Military Personnel & Veterans

VIDEO AND FACILITATOR'S GUIDE

PART 1 – *From Childhood to Warrior*

Brief review of Hector's childhood and the violence he was exposed to

Why do some men who are exposed to IPV as children become perpetrators themselves and others don't?

Messages that Hector might have gotten about masculinity and women from his father and the military

PART 2 – *Relationships*

What might be the significance of Hector taking the car keys and leaving after an argument? What did he get out of this behavior? What was the impact on his ex-wife?

When the police were called, it seemed to validate Hector's belief that both parties were responsible. How common is this dynamic?

Why might Hector's ex-wife be reluctant to tell the authorities about the IPV or the preceding incident?

What do you think about Hector's statement that he "went totally military?" What are other examples of intimidating behaviors used by men in the military? In general?

PART 3 – *Terror and Consequences*

Given Hector's explanation on of events the night he assaulted his ex-wife, what risk factors made him particularly dangerous?

What observations do you have about the interventions by law enforcement, the jail staff, the courts, and the VA?

PART 4 – *Aftermath and Change*

Given Hector's explanation on of events the night he assaulted his ex-wife, what risk factors made him particularly dangerous?

What observations do you have about the interventions by law enforcement? the jail staff? the courts? the VA?

What were some of the effects of Hector's violence and other abusive behavior on his ex-wife? What are some of the effects on other victims/survivors of IPV?

Why was Hector reluctant to take responsibility for his behavior?

Resources

BWJP's Military & Veterans Advocacy Webpage
www.bwjp.org/military.aspx

- *Intimate Partner Violence: Insights into Military Personnel and Veterans* (Video and Facilitator's Guide)
- e-Learning Course - *Safety at Home – Intimate Partner Violence, Military Personnel, and Veterans*
- *Offender Intervention with Military Personnel and Veterans*
- Webinars & Archived Recordings
- Legal and Advocacy listservs

Resources

BWJP - www.bwjp.org

- Firearms
- Protection Orders & Full Faith & Credit
- Child Custody
- Probation

Domestic Abuse Intervention Programs (DAIP) - www.theduluthmodel.org

- Non-violence programs
- Coordinated Community Response (CCR)

Aequitas - www.aequitasresource.org

- Prosecutors

Questions and Answers



Contact Information

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