



NATIONAL CENTER ON
**DOMESTIC VIOLENCE,
TRAUMA, AND
MENTAL HEALTH**

Advocating at the Intersections of Domestic Violence, Trauma, and Substance Use Coercion

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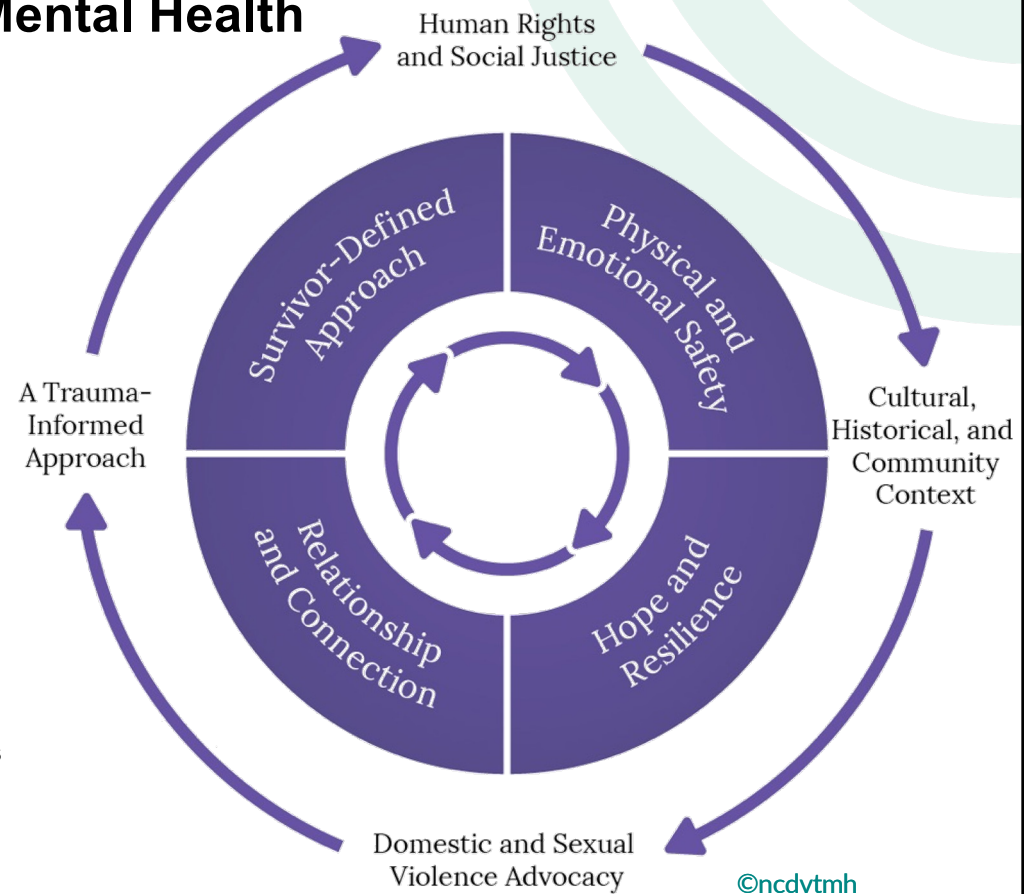
www.NationalCenterDVTraumaMH.org

NCDVTMH is a Special Issue Resource Center Dedicated to Addressing the Intersection of Domestic Violence, Trauma, Substance Use and Mental Health

- Training and Technical Assistance
- Research and Evaluation
- Policy Development and Analysis
- Public Awareness



NCDVTMH is supported in part by grant #90EV0530 from the Administration on Children, Youth and Families, Family and Youth Services Bureau, U.S. Department of Health and Human Services. Points of view in this document are those of the presenters and do not necessarily reflect the official positions or policies of the U.S. Department of Health and Human Services.

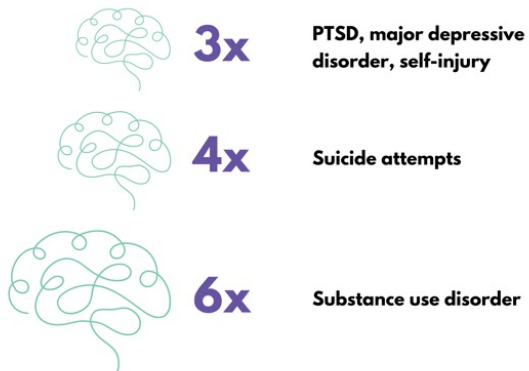


What's the connection?



Domestic and sexual violence (DSV) can have traumatic mental health and substance use effects

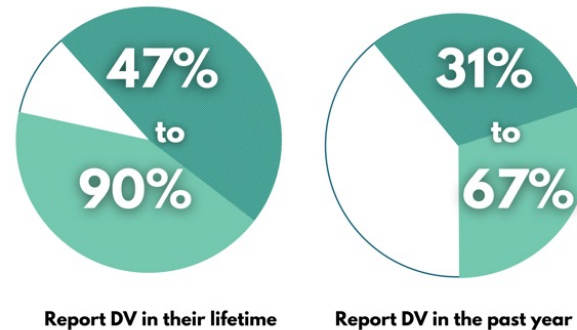
Victimization by an intimate partner increases one's risk for depression, PTSD, substance use, and suicidality



2019 Information Memorandum by the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, and Administration for Children and Families, with



High rates of domestic violence (DV) among women accessing substance use disorder treatment



2019 Information Memorandum by the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, and Administration for Children and Families, with

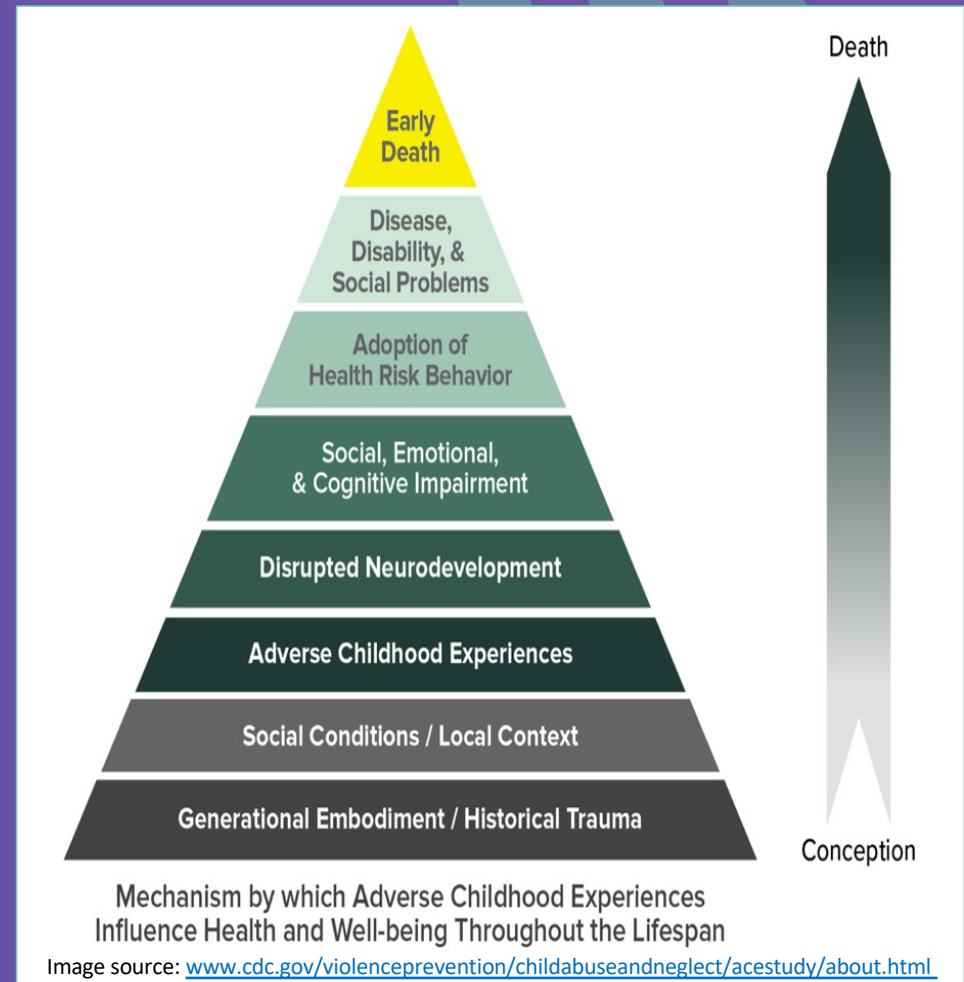


Cumulative Trauma

Many survivors of DSV have also experienced other kinds of trauma and forms of oppression

Adverse Childhood Experiences have been linked to an array of health risks, including substance use

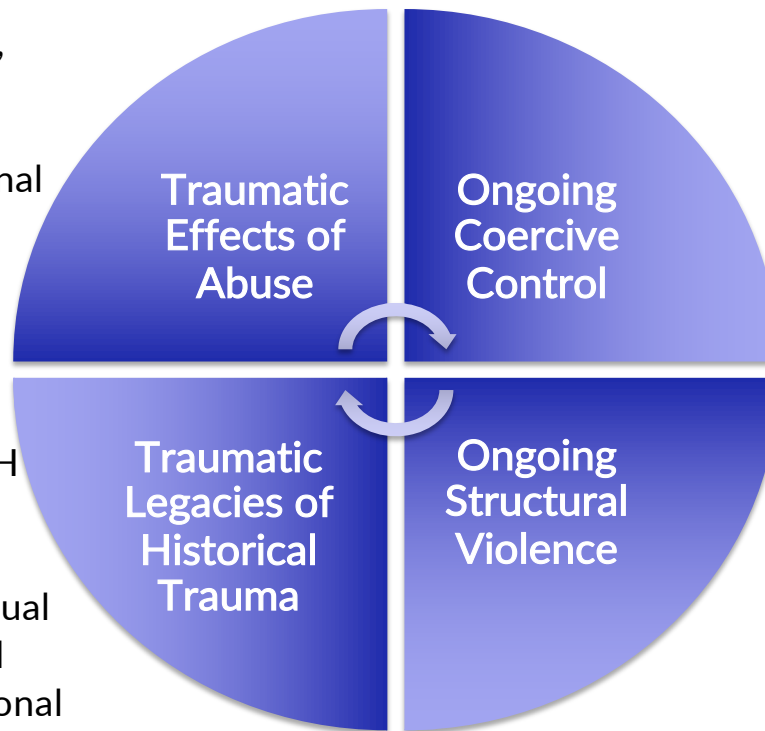
(Felitti et al., 1998)



DV, SU and Trauma in a Broader Social Context

- Health
- Mental Health, Suicide
- Substance Use
- Intergenerational
- Interpersonal
- Economic

- Health and MH
- Economic
- Social
- Cultural, Spiritual
- Environmental
- Transgenerational



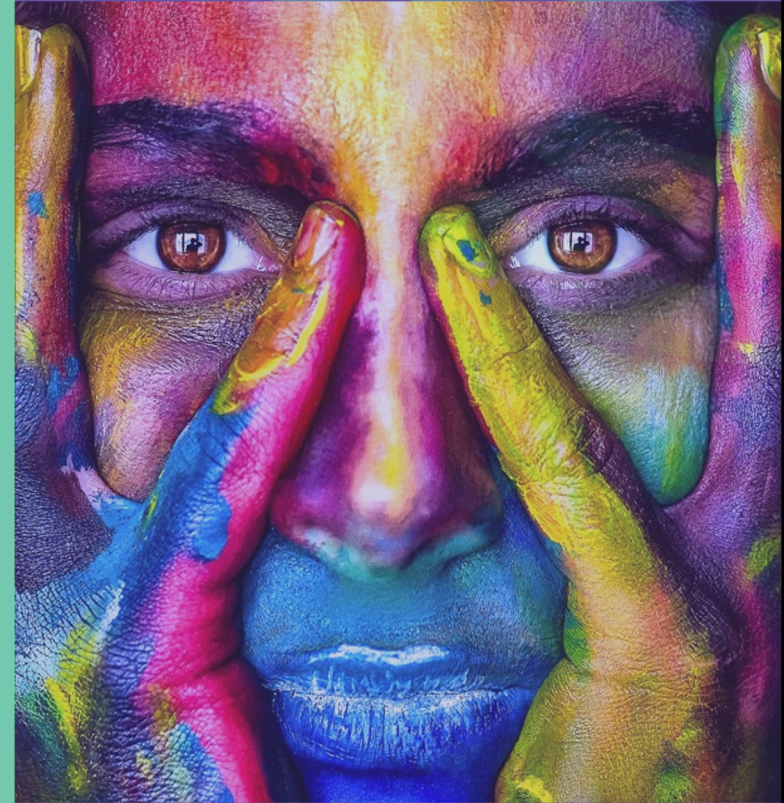
- Undermining Sanity and Sobriety
- Jeopardizing health and wellbeing
- Controlling Access to Resources

- Policies that perpetuate structural violence and discrimination



Women often differ from men in their:

- | *Introduction* to substances
- | *Risk factors* for developing substance use disorders (SUD)
- | *Negative effects* of substance use
- | *Access* to resources
- | *Recovery* needs



Substance use coercion is very common

Domestic violence often includes substance use coercion

Substance use coercion refers to coercive tactics focused on substance use, as part of a broader pattern of abuse and control



A survey of 3,056 callers to the National Domestic Violence Hotline found:

of callers had experienced at least one form of substance use coercion



over
1 in 4

had used substances to reduce the pain of domestic violence



over
1 in 4

had been pressured or forced to use substances or made to use more than they wanted

Mental Health and Substance Use Coercion Surveys Report from the National Domestic Violence Hotline and



Substance use coercion blocks access to help

Substance use coercion isolates survivors from sources of help

Substance use coercion refers to coercive tactics focused on substance use, as part of a broader pattern of abuse and control

A survey of 3,056 callers to the National Domestic Violence Hotline found:



of callers who had sought help for substance use said their partner tried to prevent or discourage them from getting help

24%

were afraid to call the police for help because their partner said they would be arrested or not believed

38%

said their partner threatened to report their substance use to authorities to keep them from getting things they wanted or needed (e.g. protection order or child custody)

Mental Health and Substance Use Coercion Surveys Report from the National Domestic Violence Hotline and



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Substance Use Coercion: In a Survivor's Words

“He threatened countless times to call the sheriff and the pastors and report my drinking. He discouraged me from getting help for my drinking. After I got help for drinking, if/when I drank again he would say, ‘See, you failed at this too.’ He would leave bottles all around when I was in recovery.”

Survey Participant

(Warshaw et al., NCDVTMH, 2012)

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What kinds of substance use coercion tactics have survivors in your programs experienced?



Common Tactics of SU Coercion

- | Introducing to substances, escalating pattern of use
- | Forcing or coercing partner to use, or to use unsafely
- | Exposing to cues associated with use to provoke a setback in recovery goals
- | Using the threat of or actual withdrawal to intimate or coerce
- | Coercing partner to engage in illegal acts
- | Threatening disclosure of substance use history and disclosing private health information to harm and isolate
- | Sabotaging treatment, stalking when accessing Medication Assisted Treatment, stealing medications
- | Blaming abuse on substance use and benefiting from lack of services
- | Leveraging stigma and oppression



EFFECTS OF
SUBSTANCE USE COERCION
ON SURVIVORS

- **Adversely impacts mental and physical health and well-being**
- **Increases isolation and entrapment**
- **Creates barriers to economic stability**
- **Jeopardizes custody**
- **Undermines recovery**
- **Prevents access to treatment**
- **Increases overdose risk**

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How can we help?

We can best support survivors by approaching substance use like any other safety concern, through:

- | Empowerment
- | Voluntary services
- | Supporting survivors' self-defined goals
- | Resource access
- | Safety planning

Eradicating stigma is key



Setting the Table for Conversations About Substance Use



How do we build safety for survivors to be able to discuss substance use with us?



Uprooting Stigma: Reflective Practice

- | What experiences have influenced my views on substance use and people who use substances?
- | How do these views show up in my advocacy?
- | How does substance use stigma show up in our program?
- | What would it look like to approach substance use with connection, empowerment, and healing?



Conversation Starters: Substance Use Coercion

If it is safe for someone to talk about substance use, here are some ways we can open conversation:

- “Many people have shared with us that their partner or ex-partner pressured them to use substances, or use in ways that they didn’t want to. I wonder if this is something you’ve experienced?”
- “Sometimes people who have been hurt by a partner find themselves using substances to deal with the pain. This is a pretty common reaction. If this is something you can relate to, know that we’re here to support you.”



Asking about substance use coercion if an abusive partner uses substances

- “Does your partner force you to use when they use? Have they ever spent all of your money on drugs or alcohol without your consent? Does your partner’s use affect your use?”
- “Has your partner ever forced or coerced you into doing something illegal (e.g., dealing, stealing, trading sex for drugs) or other things you felt uncomfortable with in order to obtain alcohol or other drugs?”

NCDVTMH (Warshaw & Tinnon), 2018

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Validate and Affirm

- “*It is never your fault* when someone harms you, even if you are drinking or using – regardless of what your partner or society says. Substance use does not justify violence against you on any level. You deserve to be treated with dignity and respect, no matter what.”
- “*Your partner might find other people to agree that substance use gives them a right to control or abuse you.* Undermining your credibility with other people is a way to strengthen their control because it makes it difficult for you to get support, be believed, and trust what you know to be true.”
- “*I believe you, you are not alone.*”

NCDVTMH (Warshaw & Tinnon), 2018

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Actively Listen and Offer Strengths-Based Support

- “How does your partner’s behavior affect how you think or feel?”
- “What are some of the ways you get through this? What do you find works the best?”
- “What are some of the ways that you protect yourself and your children?”
- “We can talk about some safety strategies and resources if that would be helpful.”



NCDVTMH (Warshaw & Tinnon), 2018



Consent Matters: Ask Permission

Unless the person has directly requested this kind of support, ask for permission before:

- | Offering information or feedback related to substance use
 - “I have some information you might find useful, would it be alright to go over it together?”
- | Asking additional follow up questions about substance use
 - “Would it be alright if we took a moment to talk a little more about substance use right now?”



IMPROVING DV and SUBSTANCE USE SERVICES

**“ Harm reduction has always
been our way of life.
Working with people where
they are, without judgment
or stigma, is how we keep
our communities safe. ”**

- National Indigenous Women's Resource Center

Substance Use Coercion as a Barrier to Safety, Recovery, and
Economic Stability: Implications for Policy, Research, and Practice
2019 Technical Expert Meeting Report by the

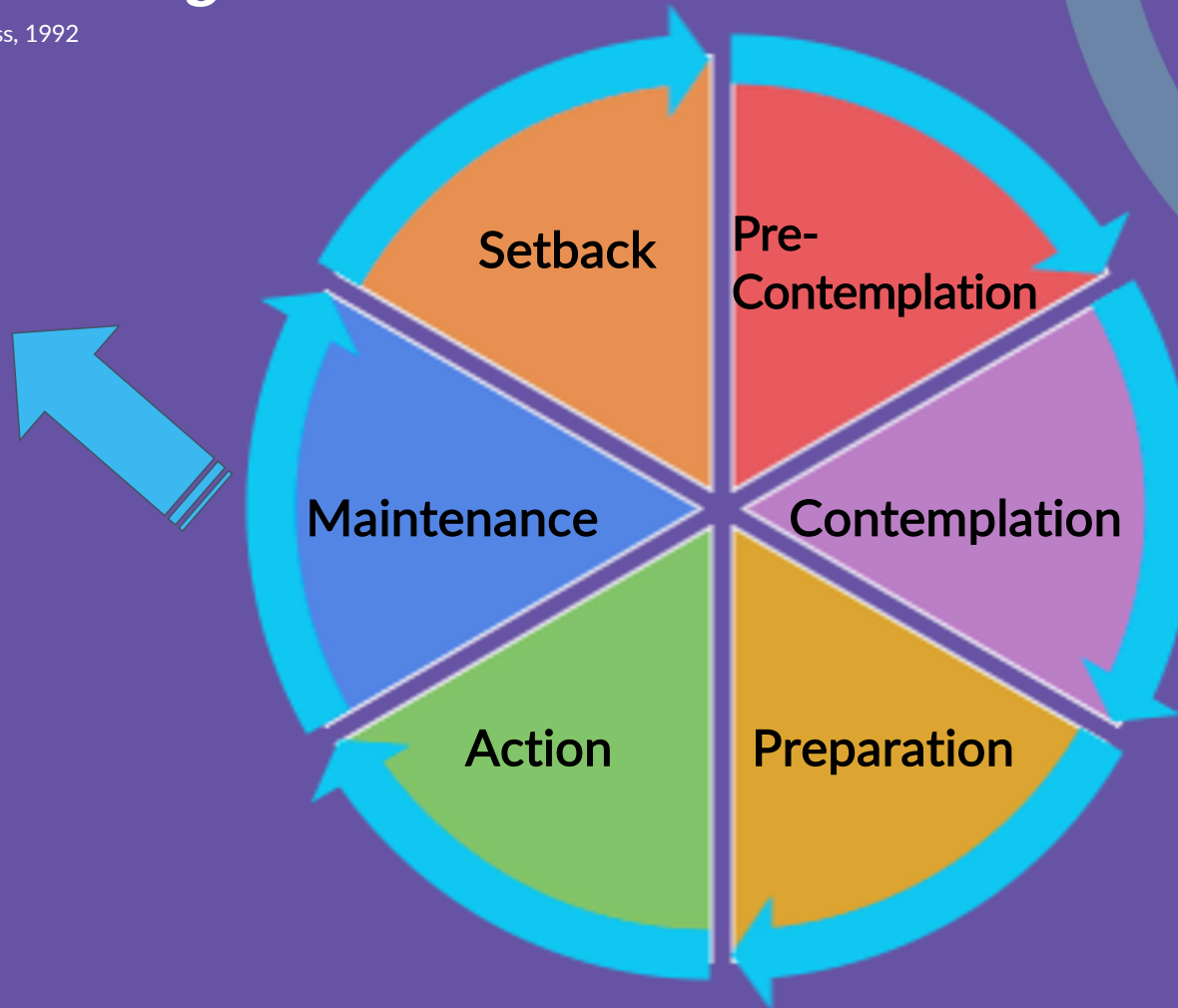
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Stages of Change

Prochaska, DiClemente, & Norcross, 1992

Permanent
Exit



Meeting People Where They Are

Stage	How Advocates Can Help
Pre-Contemplation	Build relationship. Focus on their self-defined needs and access to desired resources.
Contemplation	Gentle curiosity and reflective listening. Remain neutral regarding any potential change. Support skill building.
Preparation	Help to brainstorm options, craft potential solutions, and connect with resources to support change.
Action	Affirm any positive step as defined by the individual. Normalize missteps. Help re-work strategies and solutions as needed.
Maintenance	Help to make any adjustments needed to maintain gains long-term.
Setback	Provide emotional support and help neutralize any feelings of shame. Help refine strategies and connect with desired resources.

Safety
planning is
important
at every
stage 🌸



PERSONAL

Health, housing,
resources, skills,
self-efficacy,
hopefulness,
personal values.

SOCIAL

Family,
intimate relationships,
kinship,
social supports.



CULTURAL

Community-level
presence and
access to pathways
of healing that are
culturally resonant.

COMMUNITY

Anti-stigma,
recovery role models,
peer-led support
groups.



Many pathways, many seasons

- | Natural
- | Cultural Healing Practices
- | Mutual Aid Groups
- | Medication-Assisted
- | Faith-Based
- | Treatment (IP/OP)
- | Family-Based
- | Harm Reduction
- | Moderation
- | Tech-Based
- | Fitness-Based
- | Body-Work
- | Quantum
- | ...and more!



Where trauma breaks meaning, culture makes meaning



Image Source: Community art by people who access www.streethealth.ca services



Substance Use Support Resources

White Bison: <https://whitebison.org/>

National Harm Reduction Coalition: <https://harmreduction.org>

Harm Reduction Works: <https://linktr.ee/hrw>

IHS's Treatment Locator: www.ihs.gov/findhealthcare/

SAMHSA's Treatment Locator: www.samhsa.gov/find-treatment

SAMHSA's List of Virtual Recovery Resources:
www.samhsa.gov/sites/default/files/virtual-recovery-resources.pdf



Indigenous Harm Reduction Informational Resources

Indigenizing Harm Reduction led by Victoria Wynecoop-Abrahamson LSW (Spokane|Coeur d'Alene) at NIWRC's Women are Sacred conference

| Indian Country Harm Reduction ECHO Program:

www.indiancountryecho.org/program/harm-reduction

| Indigenous Harm Reduction Team (I-HEART): <https://www.ihrt.ca/>

| Indigenous Harm Reduction by First Nations Health Authority:

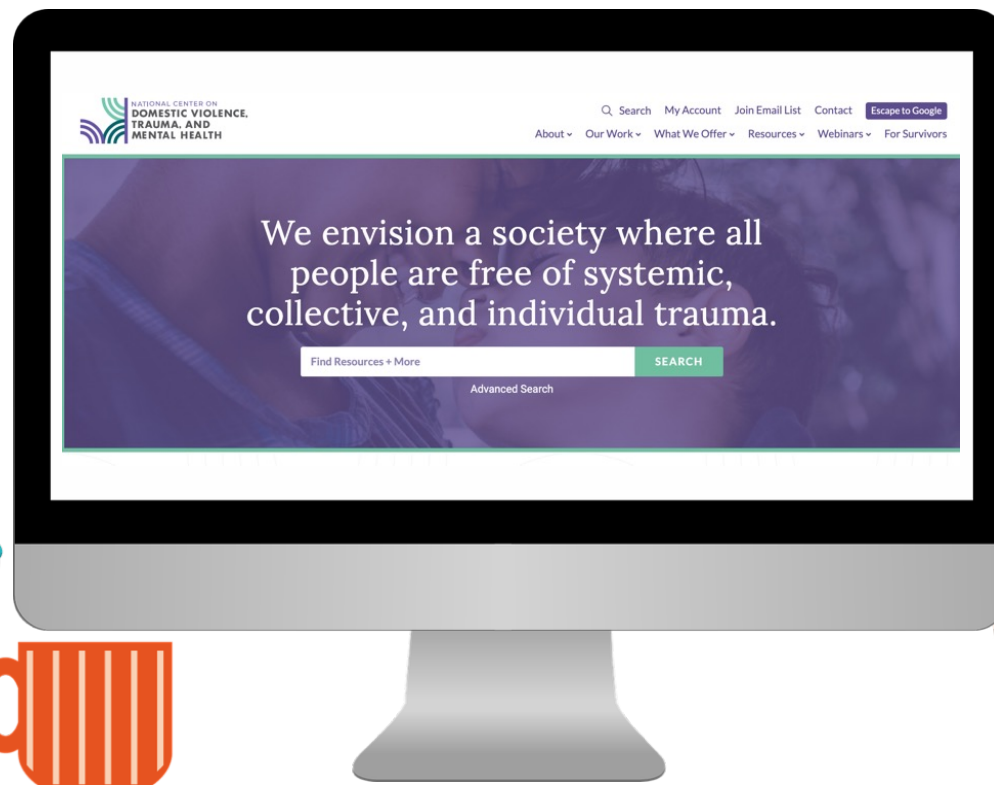
www.fnha.ca/WellnessSite/WellnessDocuments/FNHA-Indigenous-Harm-Reduction-Principles-and-Practices-Fact-Sheet.pdf

| Culture Saves Lives: www.icad-cisd.com/pdf/Publications/Culture-saves-lives-promising-practice.pdf



Additional Resources

www.NationalCenterDVTraumaMH.org





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COMMITTED TO SAFETY FOR ALL SURVIVORS:

*GUIDANCE FOR DOMESTIC VIOLENCE PROGRAMS
ON SUPPORTING SURVIVORS WHO USE SUBSTANCES*

GABRIELA A. ZAPATA-ALMA, LCSW, CADC





Advocating at Complex Intersections: Domestic Violence, Substance Use Coercion, and Child Protective Services

Domestic Violence and Substance Use: What Are the Connections?

Being abused by an intimate partner can have traumatic effects, including using substances to cope with emotional and physical pain. At the same time, using substances can increase targeting and victimization by an abusive partner, which often includes substance use coercion.

What is Substance Use Coercion?

Substance use coercion is a pattern of domestic violence (DV) where substance use is leveraged as part of the abuse. These tactics include an abusive partner's efforts to intentionally:

- Coerce or force a survivor to use substances
- Blame abuse on substance use
- Escalate substance use to instigate problems
- Use withdrawal to intimidate or coerce
- Sabotage treatment and recovery, including controlling medications used in recovery
- Isolate from sources of safety and stability
- Undermine parent-child attachment
- Leverage legal systems against survivors

**EFFECTS OF
SUBSTANCE USE COERCION
ON SURVIVORS**

- Adversely impacts mental and physical health and well-being
- Increases isolation and entrapment
- Creates barriers to economic stability
- Jeopardizes custody
- Undermines recovery
- Prevents access to treatment
- Increases overdose risk

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The pervasive stigma and criminalization of substance use strengthens the effectiveness of these tactics. For more information on substance use coercion, check out <http://www.nationalcenterdvtraumamh.org/publications-products/su-coercion-reports>.

**ADDRESSING
SUBSTANCE USE COERCION**

“ In order for services to be effective, safe, and accessible to survivors, practitioners and policy makers need to understand the ways that substance use coercion impacts survivors and their children. ”

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Where Does Child Protective Services (CPS) Fit In?

It is a common tactic of substance use coercion to either threaten CPS involvement or engage CPS systems in attempts to harm and control survivors and their children. At the same time, studies suggest that the simple presence of DV or substance use can increase findings of child abuse or neglect; this risk was largest when both DV and substance use were present.^{1,2}

Published January 2023

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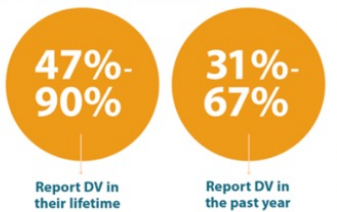




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7 Common Practices in Substance Use Disorder Care That Can Hurt Survivors *and What You Can Do Instead*

High rates of DV among women accessing substance use disorder treatment



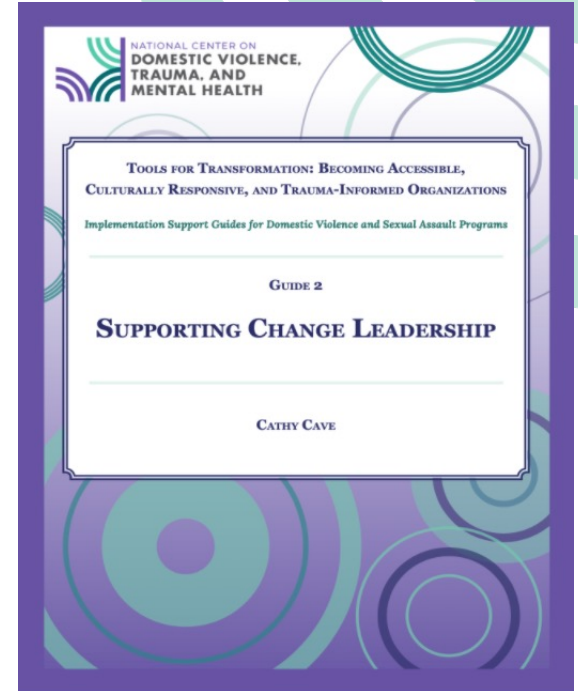
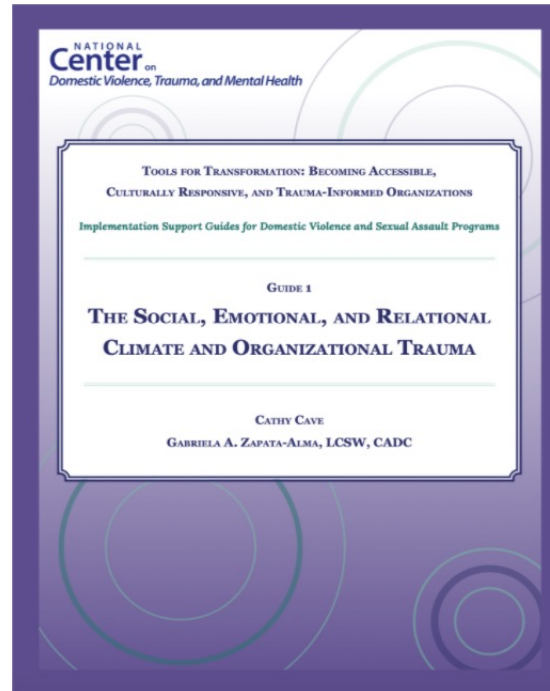
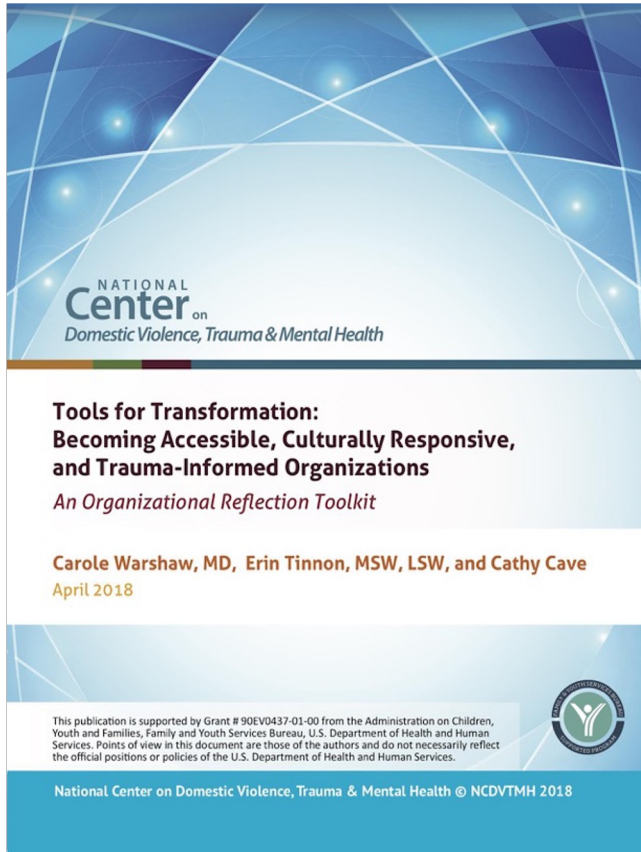
➤ Keep in Mind ➤

- **Use a universal precautions approach:** It can be difficult and dangerous for a survivor to talk about intimate partner violence (IPV). Trauma-informed approaches are essential even if someone has not disclosed abuse.
- **Avoid labeling:** Many people will not identify with terms such as *survivor*, *abuse*, *victim*, or *intimate partner violence*.
- **Not just intimate partners:** Abuse may come from another social contact.
- **Not just physical or sexual violence:** Learn more about the many forms of abuse and coercion at www.nationalcenterdvtraumamh.org.

➤ 1) Practices Surrounding Program Intake and Exit ➤

Risks and Barriers:

- **Delays in service access:** Survivors need to be able to access resources when there's a window of safety. Delays often mean the window of safety will close.
- **Strict treatment schedules** can increase the risk of stalking and victimization.
- **Administrative discharge due to missed appointments:** A survivor may miss appointments in order to protect themselves or due to a partner's interference.
- **Administrative discharge due to toxicology screening results:** Substance use may be a direct result of the abuse someone faces or coercion to use by a partner. Regardless, this is neither trauma-informed nor considered best practice.
- **Administrative discharge due to inability to pay:** Financial abuse is common and using health



When You Can Talk Privately

“People have shared with us that their (ex-)partner pressured them to use substances, use in ways that they didn’t want to, or used their substance use as a way to control them. Using substances is a common way to deal with physical and emotional pain. If you can relate to any of this, know that we’re here to help.”

Substance Use Coercion

Common Forms of Substance Use Coercion

Introduction to or **escalation** of substance use

Forced use or withdrawal

Self-medication to cope

Sabotaging treatment access or recovery efforts

Using **stigma** to isolate, discredit, or threaten

Blaming abuse on use

Validate and Affirm

- None of this is your fault
- You deserve to be treated with dignity and respect, no matter what
- I believe you
- You are not alone

“Would it be helpful to talk about some **safety strategies** and **resources**?”

Safety Plan: Access and Recovery

Collaboratively Strategize:

- Safe communication (telehealth, phone, mail, etc.)
- Stalking risk and appointment schedule
- Staying connected to services if pressured by a (ex-)partner to leave
- Maintaining control of medication(s), including MAR/MAT
- Threats to disclose or subpoena protected health information
- Legal documents that enable a (ex-)partner or social contact to exert control over the person

Connect

National Domestic Violence Hotline: 1 (800) 799-SAFE and 1 (800) 787-3224 (TTY)
RAINN National Sexual Assault Hotline: 1 (800) 656-HOPE
StrongHearts Native Helpline: 1 (844) 7NATIVE
Love is Respect (for teenagers): 1 (866) 331-9474 and 1 (866) 331-8453 (TTY)

Available in English and Spanish



When You Can Talk Privately

"How does your partner support your mental health? People have shared that sometimes their partners say hurtful things or try to make them think they are 'losing their mind.'

Partners might make it hard to connect with people you trust or might only be supportive during hard times. If you can relate to any of this, we're here to help."

Mental Health (MH) Coercion

Common Forms of MH Coercion

Undermining a survivor's sanity

Provoking, threatening, or forcing unnecessary commitment

Interrupting healthy routines

Interfering with MH care: controlling medications, diagnosis, or overall engagement

Using stigma to isolate, discredit, or threaten

Blaming abuse and control on MH

Validate and Affirm

- None of this is your fault
- You deserve to be treated with dignity and respect, no matter what
- I believe you
- You are not alone

"Would it be helpful to talk about some **safety strategies and resources?**"

Safety Plan: Access and Autonomy

Collaboratively Strategize:

- Safe communication and appointments (telehealth, phone, mail, etc.)
- Staying connected to services if others attempt to interfere
- Maintaining control of medication(s)
- Ways to protect confidentiality and protected health information
- Legal documents that enable a (ex-)partner or social contact to exert control over the person
- Maintaining autonomy and preventing unnecessary commitment

Connect

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Available in English and Spanish



UNDERSTANDING
SUBSTANCE USE COERCION
IN THE CONTEXT OF
INTIMATE PARTNER VIOLENCE:
IMPLICATIONS FOR POLICY
AND PRACTICE

SUMMARY OF FINDINGS

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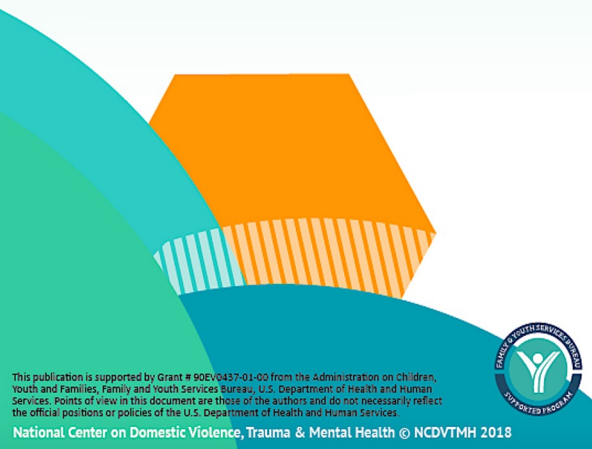
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**Coercion Related to Mental Health and Substance Use
in the Context of Intimate Partner Violence:**

*A Toolkit for Screening, Assessment, and Brief Counseling
in Primary Care and Behavioral Health Settings*


Carole Warshaw, MD and Erin Tinnon, MSW, LSW

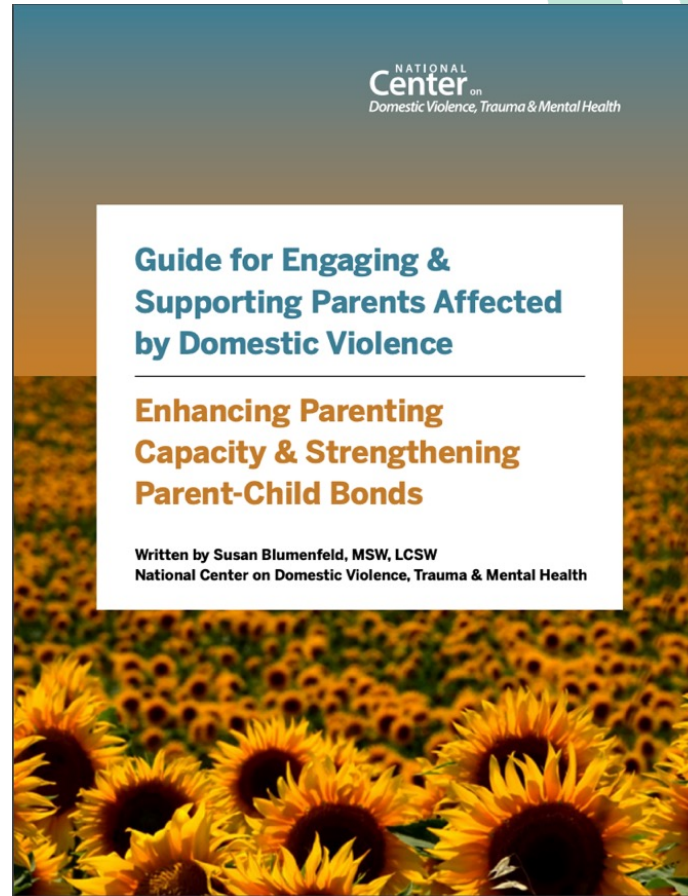
March 2018



This publication is supported by Grant # 90EV0457-01-00 from the Administration on Children, Youth and Families, Family and Youth Services Bureau, U.S. Department of Health and Human Services. Points of view in this document are those of the authors and do not necessarily reflect the official positions or policies of the U.S. Department of Health and Human Services.

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Thank You!



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Question and Answer

