

# 10 item checklist about the intersection of domestic violence, substance abuse and mental health issues

by David Mandel, MA, LPC

Domestic violence frequently co-occurs with mental health and substance abuse issues. A batterer may be diagnosed correctly or inappropriately with mental health issues. A domestic violence survivor may also have a substance abuse problem. A child who has been exposed to batterer's behaviors may have mental or behavioral health issues. Frequently our response to these issues are "siloed," meaning we prioritize one over the other or even completely ignore one issue to focus on another. For instance substance abuse and mental health counselors may not screen for domestic violence or if domestic violence perpetration is identified as an issue it may be seen as a symptom of the substance abuse. A survivor's recovery plan may be developed without consideration of how the perpetrator might try to sabotage her recovery. Or a child's behavioral health issues are not evaluated in the context of historic and current domestic violence.

The following is a 10 item checklist to help begin the conversation about the intersection of domestic violence, substance abuse and mental health issues. I share this list with the idea that raising our awareness by asking questions about the connection between different issues can be a huge step forward in our ability to help families.

1. What is the relationship between domestic violence, substance abuse, mental health issues?
2. How have the batterer's behavior created or exacerbated mental health/behavioral health and/or substance abuse issues for the adult survivor and/or child?
3. What is the relationship between the batterer's abusive behavior and any of his mental health and/or substance abuse issues?
4. How is the batterer interfering with/supporting the treatment and recovery of family members?
5. How are family members more vulnerable to the batterer because of their mental health and/or substance abuse issues?
6. How is child welfare and others assessing for domestic violence when the presenting issue is adult or child behavioral/mental health/ substance abuse?
7. What are important case or treatment plan steps when domestic violence is co-occurring with substance abuse and/or mental health issues?
8. What are skill level/policy/practices of substance abuse and mental service providers regarding assessing for domestic violence, safety planning and the integration of co-occurring issues into their treatment plan?
9. What information do mental health and substance treatment providers have access to regarding the domestic violence?
10. What is the training and skill level of mental health or substance abuse evaluators/assessors regarding domestic violence in general and more specifically regarding the co-occurrence of domestic violence with substance abuse and/or mental health issues?

## **Introduction to Intersections: Domestic Violence, Substance Abuse & Mental Health**

Many child welfare cases involve multiple issues, including substance abuse, domestic violence, and

mental health issues. Often these are seen as "co-occurring" and families are sent to different service providers for each issue. But, research shows us that they are often points of intersection related to each other. This free webinar explores these intersections and looks at how perpetrators can use substances or mental health conditions as another means of control; how adult and child survivors turn to substances to cope; and the impact of domestic violence on victims' ability to secure treatment.

**Presenter:** Kyle Pinto, MSW, LGSW, has been a National Trainer with the Safe & Together Institute since 2012. He facilitates training and consultation services around the Safe and Together model for child welfare, fatherhood and home visiting professionals. Kyle is a social worker and community educator who has worked throughout the child welfare, criminal justice and domestic violence fields for over ten years.

## Some thoughts on the intersection of substance abuse, mental health and domestic violence

- Codependency is not a useful or accurate concept for describing domestic violence victims.
- For victims: "Denial" has different and similar functions when it relates to domestic violence versus substance abuse
  - Different: avoiding new violence and abuse; protecting children; protecting from revictimization by others;
  - Similar: avoid feeling shame;
    - A victim's recovery or mental health is her responsibility. She is not responsible for her partner's violence or cessation of violence.
      - A domestic violence perpetrator's substance abuse or mental health issues can be an aggravating factor to his abuse and control but is a separate issue. That said, his violence and abuse is unlikely to get better without his being in recovery and/or treatment.
        - Inpatient/outpatient substance abuse and mental health programs often do not screen at all or well for domestic violence so their formulation of the case may be limited/lacking inclusion of issues of safety, e.g. She is an addict and domestic violence victim.
          - If victim's partner is in recovery or treatment he may remain abusive and controlling. Cessation of use does not guarantee a cessation of abuse. In fact, he may use his recovery as a justification for control e.g. "I need to go to my meetings, put my recovery in front of everything else." "We need to save money etc so I fix my mistakes."
          - A victim who is addict or has mental health issues may be more vulnerable to a domestic violence perpetrator because of her addiction/diagnosis. She may
            - Not be able to call police to protect herself from the violence
            - She may lack supports from family and friends due to substance abuse or mental health related

behavior, eg . lying, stealing, unreliability

- May not be believed about abuse and violence because of her history of substance abuse or mental

health issues

- Is perceived as a “less worthy” victim
- Self blame and the blame from others makes it less likely she will reach out around the violence.
- May not be able to access traditional domestic violence services because she is actively using or has

left/kicked out of shelter due to her substance use or mental health

- He may attend the same 12 step meetings or be able to keep track of her through his friends in the meetings.

DavidMandel&AssociatesLLC|[www.endingviolence.com](http://www.endingviolence.com)March2010