Does Interpersonal Violence Cause Co-Occurring Issues?

Both service providers and the people who seek their help are often confused about cause and effect when an individual struggles with multiple issues. To what extent does the experience of interpersonal violence contribute to mental health issues, substance use disorders, homelessness or other issues? Do these issues make a person more vulnerable to interpersonal violence?

About one in three girls and one in six boys are sexually abused before the age of 18. Both female and male survivors have been found to suffer long-term effects from such abuse, including more suicide attempts, alcohol and drug problems, psychiatric issues and learning disabilities – problems which often persist into adulthood (ICASA, 2001).

Depression, post-traumatic stress disorder, anxiety and panic disorder are common among people seeking services from domestic violence shelters (Warshaw et. al., 2003). However, some experts believe that many behaviors and responses seen as “symptoms” by service providers are directly related to traumatic experiences that can cause mental health, substance abuse and physical health concerns (NCTIC, n.d.). Shirley Moses, Shelter Manager at Alaska Native Women’s Coalition in Fairbanks, AK, believes survivors of sexual assault or domestic violence are often misdiagnosed as having mental health or psychiatric disorders, because the symptoms of trauma can masquerade as mental illness. She says mental health problems can also be “situational,” brought on by domestic violence or sexual assault, and other traumas:

“You might see someone who is losing her kids because she is sleeping half the day or she’s not able to cope anymore. She’s closing down, and they are thinking she’s mentally ill or she’s not trying to take care of herself or she’s not able to provide. And they don’t look at, why is she doing this?” (Moses, 2010)

The Women’s Action Alliance’s experience with a domestic violence shelter program over a fifteen-month period indicated 60-75% of the women seeking shelter services had developed problems with their original coping mechanism, alcohol and drugs (Roth, 1991). The Minnesota Coalition for Battered Women (1992) notes abused women may use alcohol or drugs for a variety of reasons, including coercion by an abusive partner, substance dependence, cultural oppression, over-prescription of psychotropic medication or, for women recently leaving a battering relationship, a new sense of freedom.

Domestic violence and poverty also are interwoven, says Jill Davies in a policy and practice paper Policy Blueprint on Domestic Violence and Poverty:

“Efforts to escape violence can have devastating economic impacts. Leaving a relationship might mean a woman will lose her job, housing, health care, child care, or access to the partner’s income. Often, criminal and civil legal remedies are
necessary to safely leave a relationship. Criminal remedies typically have no monetary cost to the victim, but may take time away from work or job training, sometimes resulting in lost wages or loss of employment. The pursuit of civil legal strategies, such as divorce or custody actions, often drains family financial resources. Unable to afford litigation, some battered women concede financial and property demands in order to settle the case, further undermining their families’ security” (Davies, n.d.).

Domestic and sexual violence can push victims into a cycle of poverty. Experiencing interpersonal violence can lead to job loss, poor health, and homelessness. It is estimated that victims of intimate partner violence collectively lose almost 8 million days of paid work each year because of the violence perpetrated against them by current or former partners or dates (Cawthorne, 2008).

The Adverse Childhood Experiences (ACE) Study provides data linking adverse childhood experiences such as sexual abuse and witnessing domestic violence as factors contributing to psychiatric illness, substance abuse and other health problems (Felitti et al, 1998). However, the extent to which these and other issues make a person more vulnerable to interpersonal violence requires more study by feminist researchers.

It is important to emphasize that people who experience interpersonal violence neither “ask for” nor deserve violence or abuse – no matter what else is going on. The most important message you can give a person whose experience includes multiple abuse issues is, “This is NOT your fault.” This message is especially important if individuals were under the influence of alcohol or drugs, were experiencing psychiatric symptoms, or were coping with other co-occurring issues at the time an abuser took advantage of and hurt them.

“A survivor of multi-abuse trauma shares how she often blamed herself for violence:

“Because I was addicted, I already blamed myself for the sexual assault that happened when I was in my teens, so it was real easy for me to continue blaming myself when I had a partner who abused me as well.”

Along with a non-judgmental, non-blaming message, it is also important to offer a message of hope. While we can acknowledge that co-occurring issues may make it harder for people to get safe, sober or whole, people experiencing multiple abuse issues must be

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reminded that they are in control of their own decisions. They have options and advocates to support their safety, autonomy and justice. We can listen, believe them, validate the choices they make, and help them feel connected.

References


Foley, K., Triple Play Connections, Seattle, WA. Personal interview with Debi Edmund, July 2010.


