

VA



U.S. Department
of Veterans Affairs

Inviting Dialogue on Healthy Relationships and Intimate Partner Violence in the Age of COVID.

Kathryn Doyle, Ph.D.

IPVAP-C; Phoenix VAHCS

Beth Goldstein, LCSW

IPVAP-C; Northern AZ VAHCS

Chris Guerrero, LCSW

IPVAP-C; Southern AZ VAHCS



What is a Healthy Relationship?





Intimate Partner Violence (IPV) Defined

Sexual:

Threatening or forcing a partner to take part in a sex act when he or she does not consent, coercion, Etc.

Psychological: humiliating, name calling, criticism/contempt, controlling what partner is “allowed” to do/wear; withholding information, isolating partner from friends/family, denying access to money or other resources without appropriate reason

Physical:

Hitting, kicking, choking, throwing things, breaking valuable items, threats of violence, etc.

IPV

Stalking:

Repeated following, harassing, or unwanted contact resulting in fear for self or others



Abusive Relationship Dynamics

- Can occur in a relationship with very little physical violence.
- Individuals may be isolated from others.
- Partners can interfere with healthcare.
- Poorly compliant patients may be suffering abuse.

McCloskey et al., 2007.

POLL Question





Stats related to COVID and IPV

NATIONAL DOMESTIC VIOLENCE HOTLINE

COVID-19 SPECIAL REPORT

On March 16, 2020, the National Domestic Violence Hotline (The Hotline) began collecting data to track how COVID-19 impacts victims and survivors of domestic violence. We know any external factors that add stress, isolation, and financial strain can create circumstances where a survivor's safety is further compromised—this pandemic has elements of all three. Even more concerning, shelter-in-place orders meant that many would be in closer and more frequent proximity to their abusers. This report is reflective of data collected March 16 to May 16, 2020.

thehotline.org • 1.800.799.7233

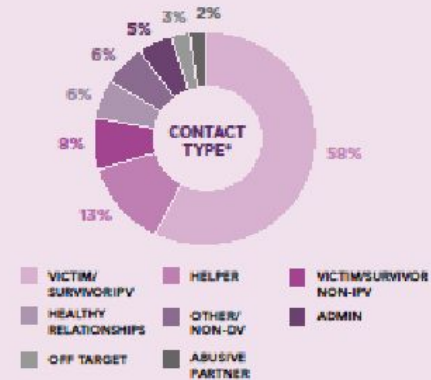
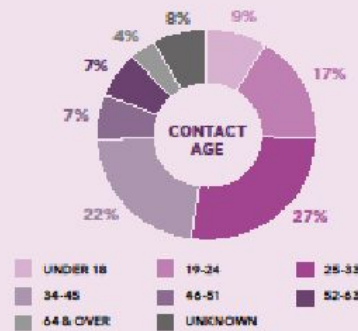
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6,210

INCREASE IN TOTAL CONTACTS RECEIVED

TOTAL CONTACTS ANSWERED CITING COVID-19

TOTAL CONTACTS ANSWERED

Phone	35,937
Chat	24,145
Text	2,331
Total	62,413



CONTACT TYPE DEFINITIONS

- **Victim/survivor intimate partner violence (IPV):** A contact who has experienced abuse by an intimate partner and is looking for information, resources, emotional or other support regarding the abusive relationship.
- **Healthy relationship inquiry:** A contact discussing intimate partner relationships who is not experiencing a pattern of abusive behaviors.
- **Victim/survivor non-IPV:** A contact who has experienced abuse from anyone other than an intimate partner (i.e. parent, sibling, caretaker), and is looking for information, resources, or support regarding the abuse.
- **Other:** A contact who is not currently experiencing violence and has needs outside the scope of healthy relationships or intimate partner violence services.
- **Abusive partner:** A contact who engages in a pattern of behavior to establish power and control over an intimate partner.

*Excludes hang-ups, prank calls and wrong numbers. Contacts may report one or more types of abuse.

Comments shared from thehotline.org

“A caller said they could not file paperwork to remove the abuser from their home, because courts are closed due to COVID-19.”

“A chatter stated that they have known for a long time that there were red flags in the relationship, but things are escalating with the pandemic, and they can’t even go to therapy.”

“A chatter mentioned that the abuser was using the virus as a scare tactic to keep the survivor away from their kids.”

“A caller was experiencing an escalation of abuse. They had tested positive for COVID-19, and the abuser was using isolation to keep them from contacting family. The abuser threatened the survivor with deportation (survivor is currently in the process of becoming a US citizen).”

Local stats

Domestic violence calls to Phoenix Police were up 21% from March 20 to March 27 compared with the same week in 2019, according to the Phoenix calls for service database. For victims of domestic abuse, coronavirus stay-at-home order may make life riskier, not safer, Molly Bohannon and Shaena Montanari, Special to the Republic, April 10, 2020.

Domestic violence-related calls in Phoenix have doubled since the start of the pandemic, according to the Phoenix Police Department. Also, domestic violence-related deaths in Arizona have increased 140% compared to last year. BY [ARIZONA DEPARTMENT](#)

[OF HEALTH SERVICES](#) |

UPDATED: NOVEMBER 4, 2020 AT 8:53 PM



MEDIA COVERAGE OF IPV IN COVID-19 ERA

THE INTERPRETER

A New Covid-19 Crisis: Domestic Abuse Rises Worldwide

Movement restrictions aimed to stop the spread of the coronavirus may be making violence in homes more frequent, more severe and more dangerous.



THE CORONAVIRUS CRISIS

Global Lockdowns Resulting In 'Horrifying Surge' In Domestic Violence, U.N. Warns

April 6, 2020 - 4:36 AM ET

SCOTT NEUMAN



Weather Coronavirus News Tips Local Dining Livestream

Home / Community / Article

Alaska domestic violence calls increase during COVID-19, fear of isolation rises

Domestic violence during coronavirus pandemic: 3 deadly incidents on Memorial Day weekend

Authorities are investigating what they say are three deadly domestic violence incidents in three days.



What are your thoughts about how COVID has:

- A. Made otherwise healthy relationships become strained?
- B. Increase the experiences of IPV in already struggling relationships?





COVID-19 SPECIFIC IPV DYNAMICS

Individuals are experiencing loss of normal support system, childcare, and contact with others who could notice IPV and/or express concern

Amidst the COVID-19 pandemic, partners may:

- Withhold necessary items (e.g., hand sanitizer, soap, cleaning supplies)
- Share misinformation about the pandemic to control or frighten
- Prevent partners from seeking medical attention if they have COVID-19 symptoms or other acute and chronic illnesses
- Escalate control and isolation tactics (e.g., use COVID-19 as a scare tactic to prevent a partner from seeing their kids, accuse the partner of trying to infect them with COVID-19 for assisting or visiting family members or friends)
- Escalate control by either requiring or preventing a partner from conducting essential activities outside of the home



PATHWAYS LINKING PUBLIC HEALTH CRISES & IPV

- Economic insecurity and poverty-related stress
- Quarantines and social isolation
- Reduced health service availability and access to first responders
- Inability or limited options to temporarily escape abusive situations
- Disease-specific sources of coercive behaviors by abusive partners

Peterman et al. 2020. Pandemics and Violence Against Women and Children.



IPV RISK FACTORS UNIQUE TO COVID-19

Heightened economic distress

Loss of income and/or employment

Heightened emotional distress

Depression/anxiety/suicidality/substance abuse

Loss of childcare and school supports

More opportunities for relationship conflict

More time spent together, boundary conflicts

Disagreements about COVID-19 precautions

Loss of personal time, privacy, and self-care

Telemedicine instead of face-to-face sessions

Less time for mental health support activities



Factors to Consider

556,106 COVID-19 deaths were reported as of 04/08/2021 according to the Centers for Disease Control and Prevention

(<https://covid.cdc.gov/covid-data-tracker/#datatracker-home>) (**Loss and grief**)

The University of Arizona (n.d.) identified the Arizona unemployment rate at 6.9% in February 21'. A 40.8 % change y/y. (**Financial hardship**)

A study (New York University, 2021) of 5850 individuals identified 64 percent of participants experiencing depression were more likely to increase alcohol consumption while 41% of those experiencing anxiety were more likely to increase alcohol consumption during COVID. (**Increase of substance use**)

A study by Madowitz & Boesch (2020) found roughly 865,000 women left the labor force in September 2020 placing most of the labor force participation strain on women. (**Homeschooling/Childcare**)

Arizona (Engstrom, 2020) ranks 47th among all 50 states and the District of Columbia in the rate of available mental health care providers. The state's ratio of 790 people for every 1 provider compares with Massachusetts' leading rate of 180 to 1. (**Access to resources/ Feelings of despair**)



Resources at VA

Intimate Partner Violence Assistance Program Coordinators:

Kathryn Doyle, Phoenix VAHCS

602-277-5551 ext. 2680

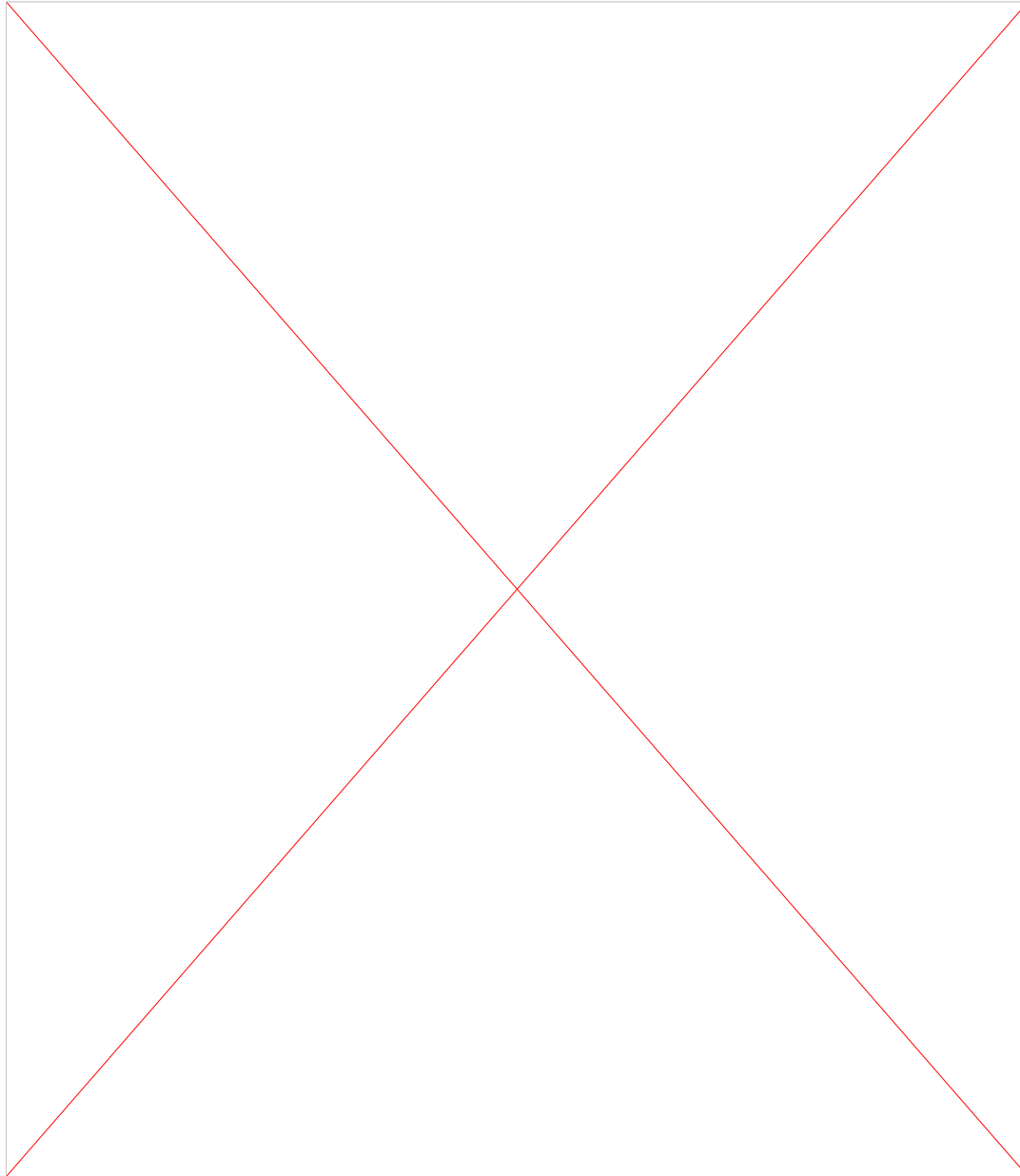
Beth Goldstein, Northern Arizona VAHCS

928-445-4860 ext. 4835

Chris Guerrero, Southern Arizona VAHCS

520-792-1450 ext. 1-1272

RISE Program



Program Fact Sheet

Who the group is for: Veterans struggling with aggression and anger in intimate relationships or who want to prevent relationship conflict from escalating in the future.

Who the group is not for: Basic anger management issues.

What we do in the group: This is a comprehensive program to stop abuse and improve relationships.

Sessions focus on:

- Understanding abusive behavior and taking responsibility for abuse
- Understanding and exploring core themes that underlie trauma and abusive behavior (the roots of abusiveness) such as power and control issues and difficulties trusting others
- Learning ways to deescalate situations that may lead to conflict and aggression
- Learning how to view situations in a less hostile or threatening manner
- Managing stress more effectively
- Communicating in more assertive ways
- Emotional expression

Other key points:

- Group is two hours a week for 12 weeks, comprised of 5-8 Veterans who all start and end the program together and is facilitated by co-therapists (often a male and female).
- Groups are intensive and therapy-based, meaning all group members actively participate in group discussions.
- The group is typically acceptable for court-ordered domestic violence treatment but it is up to the Veteran and the judge or probation officer to determine that.
- Interested Veterans will complete a motivational intake assessment to determine interest in the group, ensure the group will meet the Veteran's needs, and to complete self-report measures. The same self-report measures are completed at session 12.
- An important component of the SAH program is telephone outreach to affected partners to offer hotline numbers and safety planning.

SAH Program Sessions:

- Session 1: Introduction and Welcoming
- Session 2: Trauma and Relationships
- Session 3: Conflict Management I: Understanding Anger
- Session 4: Conflict Management II: Time Outs
- Session 5: Coping Strategies I: Anger-Related Thinking
- Session 6: Coping Strategies II: Dealing with Stress
- Session 7: Communication Skills I: Roots of Your Communication Style
- Session 8: Communication Skills II: Active Listening
- Session 9: Communication Skills III: Assertive Messages
- Session 10: Communication Skills IV: Expressing Feelings
- Session 11: Communication Skills V: Common Communication Traps
- Session 12: Reviewing Treatment Gains and Planning for Future



National resources

National Domestic Violence Hotline

English and Spanish (24 hour)

800-799-SAFE and 800-787-3224 (TDD)

•National Center for PTSD, IPV website

<http://www.ptsd.va.gov/public/pages/domestic-violence.asp>

• SafeLink

877-785-2020 and 877-521-2601 (TTY)

•Jane Doe, Inc.: Coalition Against DV

877-785-2020

www.janedoe.org/safety.htm

•The Parental Stress Line (hotline)

800-632-8188

•Futures Without Violence

www.futureswithoutviolence.org