



## The Intersection of Domestic Violence and Suicide

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 About the Presenter(s)

Rachel Ramirez, MA, MSW, LISW-S, RA

- The Founder and Director of The Center on Partner-Inflicted Brain Injury
- 13 years at ODVN
- Training and DV programming capacity building, especially on trauma-informed care
- Bilingual licensed independent social worker and registered advocate with senior standing
- FUN FACT....




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### Dynamics of DV

- Can affect people of any age, race, gender identity, ethnicity or sexual orientation
- Can occur in any relationship regardless of socio-economic status, education level, [or] cultural background

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### Types of abuse

- **Physical**
  - Severity varies
  - Violence directed at the head, neck and face (such as punches and strangulation) that can cause brain injuries
- **Sexual**
  - coerced sex
  - rape
  - birth control sabotage
- **Psychological**
  - threats/intimidation
  - humiliation
  - Stalking
  - "gaslighting"
  - isolation

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### What are local DV programs?

- Provide
  - Shelter
  - Outreach
  - Housing assistance
  - Counseling\*
  - Support
  - Case management

To ALL survivors of domestic violence and their families

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### Intersection of DV and Suicide

Individuals who call suicide crisis lines who are also experiencing IPV/DV

Individuals who call DV hotlines who report suicidality as a concern

**73%** of DV hotline callers reported that their partner did things to make them feel like they were "going crazy," including:

- Coercing them into overdosing
- Trying to have them committed to a psychiatric unit

\*2012 Warshaw et al. 2014

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**But we might not know it!**

- Suicide lines often aren't prepared to ask about and respond to DV
- Domestic violence hotlines often aren't prepared to ask about and respond to suicide

**YOU DON'T KNOW WHAT YOU DON'T -KNOW- UNTIL YOU KNOW IT**

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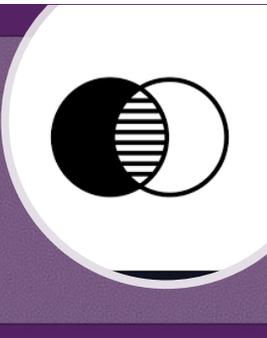
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**How strong is the correlation?**

**3 to 4** times higher risk for suicide  
(Dillon et al., 2013)

Higher for African American women, individuals who are transgendered, bisexual, undocumented and those who are on public assistance and also experiencing DV\*\*  
(Waters/NCAVP, 2019)



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**DV and the pandemic**

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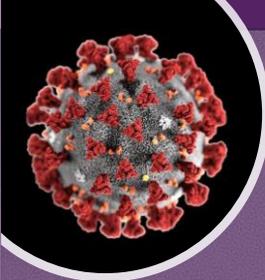
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**Stay at home orders and closure of public spaces**

- Huge implications for domestic violence victims
- Can put them and their children in more danger
- Abusers can manipulate this in numerous ways
- Decreases a victim's opportunities for safety and to get help
- Victims have fewer safe spaces
- Increased stress and tension
- Increases control and isolation
- Fear of infection becomes another barrier

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**"Post Disaster" Call Volume**

- Hotlines see an increase in call volume following natural disasters
- Less avenues where people can get help and support—both formally and informally
- Rates of DV can increase
- Rates of suicide may also increase
- Why?
  - Stress
  - Economic impact
  - Greater isolation
  - Lack of resources
  - Harder to get help or services for help are limited

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**Preparing your organization to address DV**

- 1.) Knowledge of DV
- 2.) Supportive supervision
- 3.) Cultivate relationships with local DV hotlines and organizations
- 4.) Practice models of trauma informed care and vicarious trauma
- 5.) Organizational support around self-care and staff resilience

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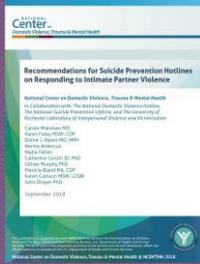
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Recommendations

- A supportive approach
- Assessment of risk
- Assisting callers at imminent risk
- Continuity of care




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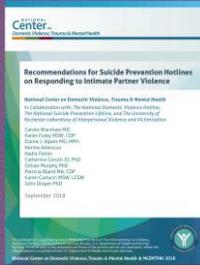
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Step one

Assure its safe to talk




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Imminent danger

Focus on helping them escape and/or calling the police

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911 and Emergency Services

- Each person's experience with the police is different
  - Personal experiences
  - DV responses in the past
  - Members of marginalized communities
- Police isn't seen as a resource to increase safety for everyone
- Acknowledge this reality by:
  - Asking about 911 as a possible safety strategy
  - Following the caller's lead




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Assessing Domestic Violence Lethality Risk

- Be cautious about engaging assistance from a potential abuser"
- Be aware of callers that might be perpetrators of IPV
- If it's safe to talk:
  - Explore the role DV may play in the thoughts of suicide
  - Is there any suicide-related coercion?
  - Ask about support system
  - Ask if it's okay to ask questions about the relationship
  - "Do you feel safe in your current relationship? Is there anyone in your life who makes you feel afraid?"

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### Questions you can ask

- Does your partner try to control what you do, who you talk to, where you go?
- Does your partner try to put you down, humiliate you?
- Has your partner ever physically hurt you?
  - Hit, slap, kick, choke/strangle, sexual assault, threaten, etc.
- Does your partner ever prevent you from accessing treatment or taking medications you've been prescribed?
- Does your partner ever pressure or force you to use alcohol or other drugs?

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### Imminent Domestic Violence Risk

- Adopting a domestic violence lethality assessment is helpful if caller reports an escalation in violence or serious threats.
- Questions should focus around:
  - Caller's level of fear
  - Escalation in frequency and severity of behavior
  - History of choking/strangulation
  - Access to weapons
  - Increasing mental instability, depression, suicidality of abusive partner




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### Domestic violence lethality assessments

- Different tools have been created to assess for risk of severe domestic violence and/or homicide
- They ask questions that have been proven to increase risk for homicide
- Most widely used lethality assessment tool is called the Danger Assessment by Jackie Campbell
  - Involves using a calendar to track abuse and identify possible escalation
  - 20 questions associated with increased risk




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Questions?

THANK YOU!

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