INTIMATE PARTNER VIOLENCE AND SUBSTANCE MISUSE

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Overview of presentation

• Prevalence

• Impact

• Implications for drug treatment services
Prevalence and gender

While pooled prevalence rates across studies suggest that similar proportions of males and females perpetrate (22% for men and 28% for women) and are victims of physical intimate partner violence (IPV) (19% for men and 23% for women) (Desmarais et al., 2012a; 2012b), females are more likely to experience sexual violence, severe physical violence or be murdered by their intimate partner than men (WHO, 2013; Chermack et al., 2008; Archer, 2000).
Prevalence among substance misusers

- Systematically, studies demonstrate a higher rate of IPV victimisation among female substance abusers in treatment (**40-70%**) (El Bassell et al., 2001; Gilchrist et al., 2007, 2011a; Panchanadeswaran et al., 2008; Wagner et al., 2009) than the general population (**13-41%**) (Feder et al., 2009)

- Among men in substance misuse treatment, 24% had been physically assaulted by their partners in the past year (Gilchrist et al., 2011b)
Prevalence among substance misusers

Among the female partners of men entering treatment for both IPV and substance-related problems, 55% of female IPV victims reported engaging in some form of severe violence towards their partner (Wupperman et al., 2009)

Among men seeking or receiving substance abuse treatment, 38%-40% had physically or sexually abused their partners (Frye et al., 2007; El-Bassel et al., 2007; Gilchrist et al., 2011b) – rates around four times higher than reported by males in the general population (O’Farrell et al., 2003)
Perpetrator subgroups

Two broad of male IPV perpetrators (Gilchrist et al., 2003):

**Antisocial/narcissistic**, hostile/controlling to women

**Borderline/emotionally dependent**, high levels of anger & distress

**Characterological and situational perpetrators** (Babcock, Canady, Graham, & Schart, 2007):

**Characterological** - violence is part of an overall effort to dominate and control a partner

**Situational** - reciprocal violence and where violence serves to exert control over specific interactions, rather than as part of an overarching pattern of domination
Impact - victims

- IPV victimisation is associated with higher risk of depression, PTSD, substance abuse, chronic pain, gastrointestinal and gynaecological problems (Campbell et al. 2002; Golding, 1999)

- Female substance abusers who are IPV victims are more likely to experience mental health problems (Gilchrist et al., 2007, 2012); sex trading (Gilchrist et al., 2005) and report high-risk sexual (Mosack et al., 2010; El-Bassel et al., 2002) & drug-taking behaviours (Braitstein et al., 2003; Wagner et al., 2009) which may be due to the negative influence/control of the perpetrator (Wagner et al., 2009)

- Female substance abusers who are IPV victims may be at greater risk of unplanned pregnancies, sexually transmitted diseases, HIV & hepatitis C
Impact - Children

Around 40% of men who perpetrate IPV are also violent towards their children (Slep & O’Leary, 2005).

Around 50% of children born to substance abusers do not live with their parents (Gilchrist & Taylor, 2009). IPV contributing factor in child protection.

Witnessing IPV as a child is associated with IPV perpetration in adulthood (Gil-Gonzalez et al., 2007; Dube et al., 2002).

Children of substance abusers experience greater mental and physical health problems and substance abuse (Kernic et al., 2003; Merikangas et al., 1998).

Addressing IPV in substance abuse treatment could break the generational cycle of IPV and substance abuse.
Perpetrators of IPV are also more likely to experience mental health problems especially depression and anxiety (Stith et al., 2004; Rhodes et al., 2009)

Perpetrators attribute their depression & anxiety to their IPV perpetration (Gerlock, 1999)
IPV among female drug users in Barcelona (n=118) (Gilchrist et al., 2012)

57% (67/117) had experienced intimate partner violence in last year of current/ most recent relationship

22% (26/117) severe physical and sexual abuse
21% (24/117) physical abuse and other type of abuse
15% (17/117) emotional abuse or harrassment only
## Univariate analysis

<table>
<thead>
<tr>
<th>Mental Disorders, Substance Use Disorders (SUD) &amp; lifestyle factors associated with IPV (Gilchrist et al., 2012)</th>
</tr>
</thead>
</table>

### Lifetime Mental Disorders

<table>
<thead>
<tr>
<th>Condition</th>
<th>All n=118(%)</th>
<th>Intimate Partner Violence n=50(%)</th>
<th>OR (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any major depression</td>
<td>68 (58.6)</td>
<td>23 (46.9)</td>
<td>2.42 (1.13, 5.20)</td>
</tr>
<tr>
<td>Post traumatic stress</td>
<td>32 (27.1)</td>
<td>12 (24.0)</td>
<td>1.35 (0.59, 3.10)</td>
</tr>
<tr>
<td>Antisocial personality</td>
<td>27 (22.9)</td>
<td>8 (16.0)</td>
<td>2.08 (0.83, 5.24)</td>
</tr>
<tr>
<td>Borderline personality</td>
<td>39 (33.1)</td>
<td>10 (20.0)</td>
<td>3.05 (1.31, 7.11)</td>
</tr>
<tr>
<td>Self harm</td>
<td>24 (20.9)</td>
<td>7 (14.3)</td>
<td>2.13 (0.80, 5.62)</td>
</tr>
<tr>
<td>Attempted suicide</td>
<td>33 (28.7)</td>
<td>8 (16.3)</td>
<td>3.20 (1.29, 7.94)</td>
</tr>
</tbody>
</table>

### Substance Use Disorders

<table>
<thead>
<tr>
<th>Condition</th>
<th>All n=118(%)</th>
<th>Intimate Partner Violence n=50(%)</th>
<th>OR (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean number SUD (SD)</td>
<td>2.6 (1.5)</td>
<td>2.70 (1.59)</td>
<td>0.92 (0.72, 1.17)</td>
</tr>
</tbody>
</table>

### Adverse experiences

<table>
<thead>
<tr>
<th>Condition</th>
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<th>Intimate Partner Violence n=50(%)</th>
<th>OR (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childhood abuse</td>
<td>82 (71.3)</td>
<td>28 (57.1)</td>
<td>3.38 (1.45, 7.85)</td>
</tr>
</tbody>
</table>

### Social Factors

<table>
<thead>
<tr>
<th>Condition</th>
<th>All n=118(%)</th>
<th>Intimate Partner Violence n=50(%)</th>
<th>OR (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lives with substance user</td>
<td>25 (21.9)</td>
<td>5 (10.4)</td>
<td>3.74 (1.29, 10.84)</td>
</tr>
</tbody>
</table>
IPV and HIV

Although not significantly different, a greater proportion of female drug users who had experienced recent IPV were HIV+ve (30%) compared to those who had not experienced recent IPV (24%)

“an abuser will never use a condom, you are his possession, you are his, he will do what he wants with you …if you don’t have sex he will do it anyway ….if you don’t want to (have sex) you will get a beating” (ID 32) (Gilchrist et al., 2012)

In a study of male substance abusers seeking treatment in Catalunya, those who were HIV+ve were over 3 times more likely to have perpetrated physical or sexual IPV in the previous year of their current/most recent relationship (Gilchrist et al., 2011b)
Perpetration of IPV by male substance users in Catalunya, Spain (Gilchrist et al., 2011b)

34% (75/219) perpetrated sexual violence, physical violence or injury against their current or previous partner in the last year of their relationship:

- 23% physical assault
- 19% sexual coercion
- 13% injurious behaviour
- 68% psychological aggression (not included in above total)
Substance misuse services’ response to IPV perpetration – the research

- Substance misusers who perpetrate IPV are rarely referred to perpetrator programmes (Klostermann, 2006; Timko et al., 2012).

- Moreover, when they are referred, treatment completion is low (Klostermann, 2006; Eckhardt et al., 2008), and referrals to separate programmes for substance misuse and IPV are ineffective (Schumacher et al., 2003).
## Main IPV theories and corresponding treatment responses

<table>
<thead>
<tr>
<th>Who</th>
<th>Treatment approach</th>
<th>Treatment focus</th>
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<tbody>
<tr>
<td>Perpetrator</td>
<td>Feminist psycho-educational group approach</td>
<td>Attitude readjustment</td>
</tr>
<tr>
<td>Perpetrator</td>
<td>Cognitive behavioural approach</td>
<td>Anger management, communication skills</td>
</tr>
<tr>
<td>Couples</td>
<td>Couples therapy</td>
<td>Focus on man as perpetrator</td>
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<tr>
<td>Victim</td>
<td>Advocacy, safety planning</td>
<td>Facilitating access and use of community resources, safety planning advice</td>
</tr>
<tr>
<td>Victim</td>
<td>Psychosocial approach</td>
<td>Training on strategies to prevent IPV, safer relations, conflict resolution, communication &amp; assertiveness skills</td>
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Interventions for female victims

- A recent meta-analysis found that **advocacy and CBT interventions reduced physical and psychological IPV among female victims** but not sexual or any IPV (Tirado, Gilchrist et al., 2014)

- Few RCTs have been conducted among female **substance** users that have experienced IPV; most focus on addressing trauma associated with abuse (e.g. Seeking Safety)
- Successful in reducing trauma symptoms and drug use (Hien et al., 2010)

- **Relapse prevention and relationship safety** intervention reduced drug use and the experience of intimate partner violence (IPV) among women on methadone (Gilbert et al., 2006)
Interventions for perpetrators

- A recent systematic review found reductions in alcohol consumption and reductions in IPV among people who had attended couples-based and individual alcohol treatment, however, issues with study design “precluded attributing changes to treatment” (Wilson et al., 2014).

- Two meta-analyses on the efficacy of psycho-educational perpetrator programmes found poor effect sizes ranging from $d = 0.00$ to $0.26$ (Babcock et al., 2004; Feder & Wilson, 2005)
  - Stuart et al. (2012) added a brief alcohol intervention to a standard batterer intervention that resulted in reduced drinking and IPV perpetration, although these improvements were not sustained at 12 months.
Interventions for perpetrators

- A recent Cochrane review of Cognitive Behavioural Therapy (CBT) for male perpetrators found a small effect size for CBT compared to no intervention (Relative risk of violence was 0.86; 95% CI 0.54, 1.38) (Smedslund et al., 2011).

- Two small studies included substance using men and report promising results (Easton et al., 2012; Kraeenen et al., 2013)
Conclusions and recommendations

High prevalence of IPV and childhood victimisation among substance abusers seeking treatment

To reach greater numbers of men and women with substance abuse problems, IPV perpetrator and victim interventions could be integrated into ‘mainstream' substance misuse treatment, but remains an urgent need to determine “what works for whom”

Few studies of IPV perpetrator behavioural interventions have been conducted, & even fewer among those who are not court mandated (i.e. voluntary treatment) or who are substance misusers