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# **Supervised Visitation in the Context of Intimate Partner Violence and Mental Health and Substance Use Series: Part 2**

Presented by Gabriela Zapata-Alma, LCSW, CADC  
Associate Director, National Center on Domestic Violence,  
Trauma, and Mental Health

December 8, 2022



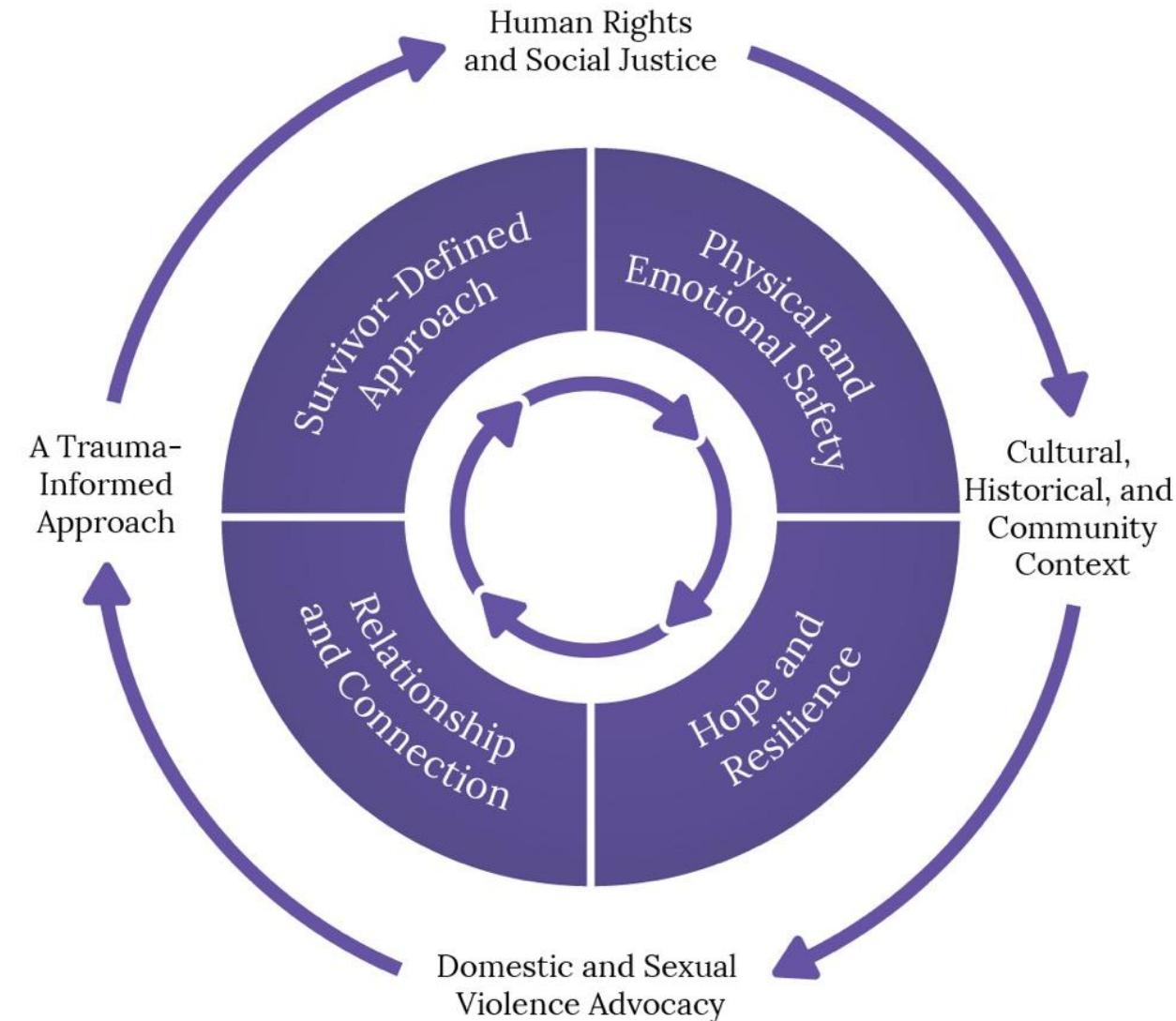
# **Supervised Visitation in the Context of Intimate Partner Violence and Mental Health and Substance Use Series: Part II**

**Gabriela Zapata-Alma, LCSW, CADC  
Associate Director**

# NCDVTMH is a Special Issue Resource Center

## Dedicated to Addressing the Intersection of Domestic Violence, Trauma, Substance Use and Mental Health

- Training and Technical Assistance
- Research and Evaluation
- Policy Development and Analysis
- Public Awareness



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# *In this 2-part series, we will:*

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- | Clarify the relationships between intimate partner violence, mental health, and substance use, including coercion related to mental health and substance use
- | Apply equity-based and trauma-informed lenses to better understand mental health and substance use as threat responses
- | Try out different tools to support reflective practice
- | Work together to identify strategies to build emotional safety into the program environment, services, and relationships

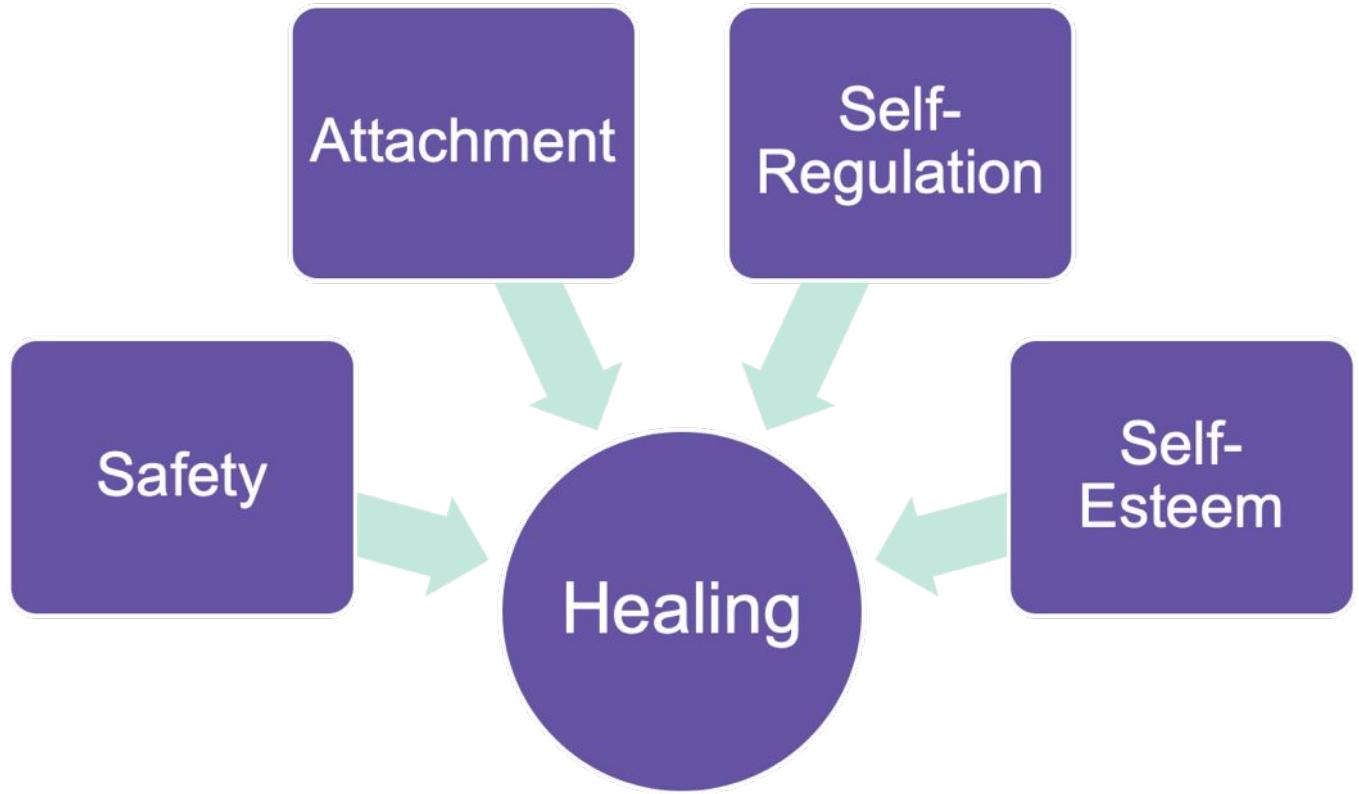


# Reflective Practice with SASS



(Blumenfeld & Baca, NCDVTMH, 2021; Blumenfeld, NCDVTMH, 2014)

# *How does your program support SASS?*



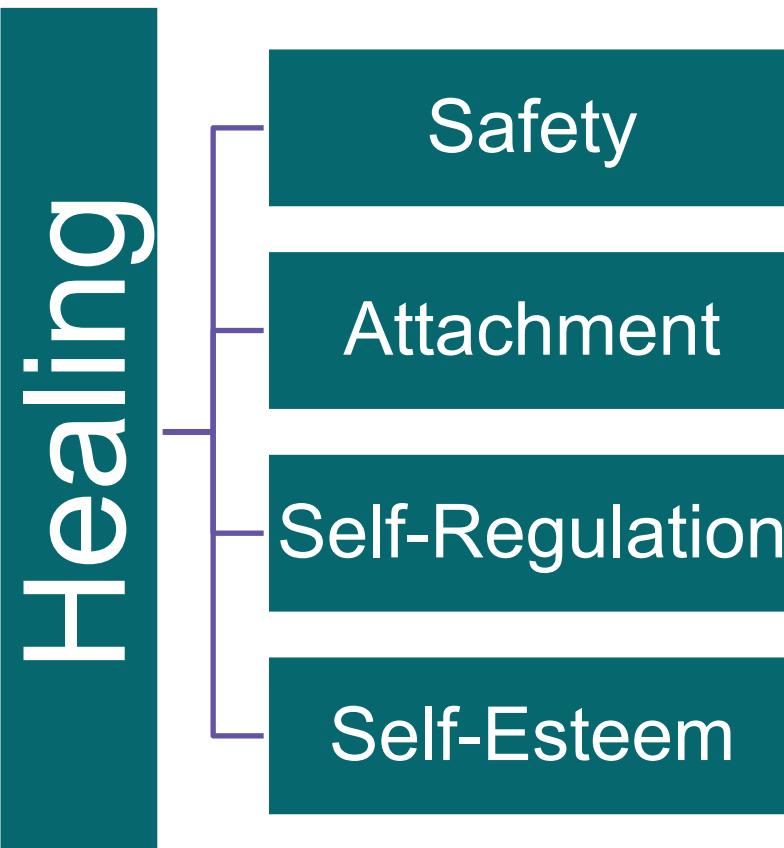
<https://padlet.com/gzapataalma/mwmookfofh4aiwj>

(Blumenfeld & Baca, NCDVTMH, 2021; Blumenfeld, NCDVTMH, 2014)



# Applying SASS in Reflective Practice

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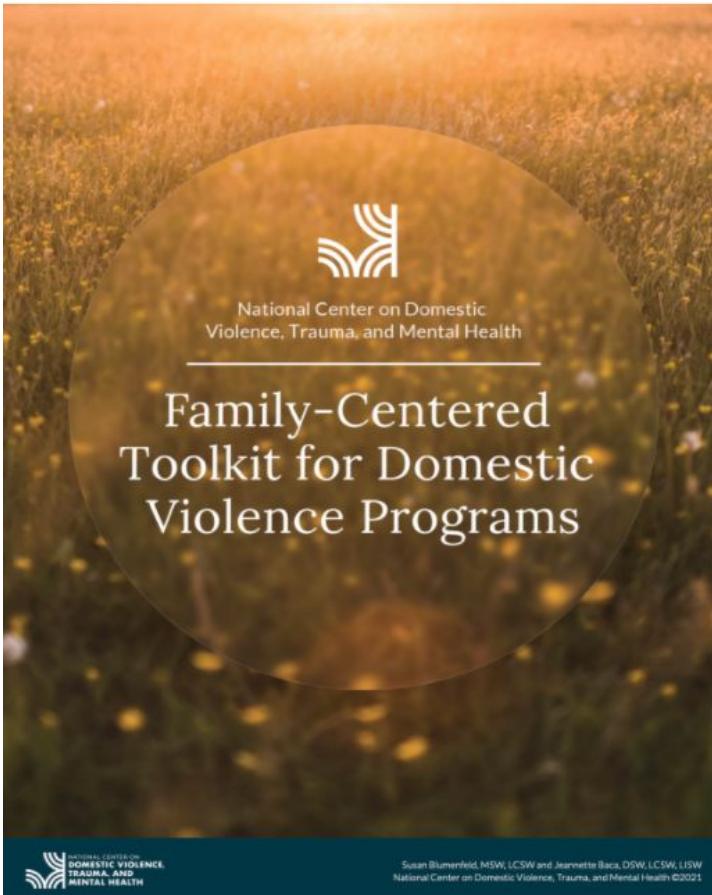


While guarding confidentiality, think of a family you've served...

1. What were some of the family's strengths?
2. How did your program services support this family's SASS?
3. What are some potential ideas for supporting SASS in the future?

# Resource: Activities to promote SASS

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Our Family-Centered Toolkit contains activities across developmental phases, focusing on three core areas:

1. Co-regulating and soothing
2. Moving and playing together
3. Creative and expressive arts

(Blumenfeld & Baca, NCDVTMH, 2021)

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# *Supporting Parents and Children Impacted by Substance Use*

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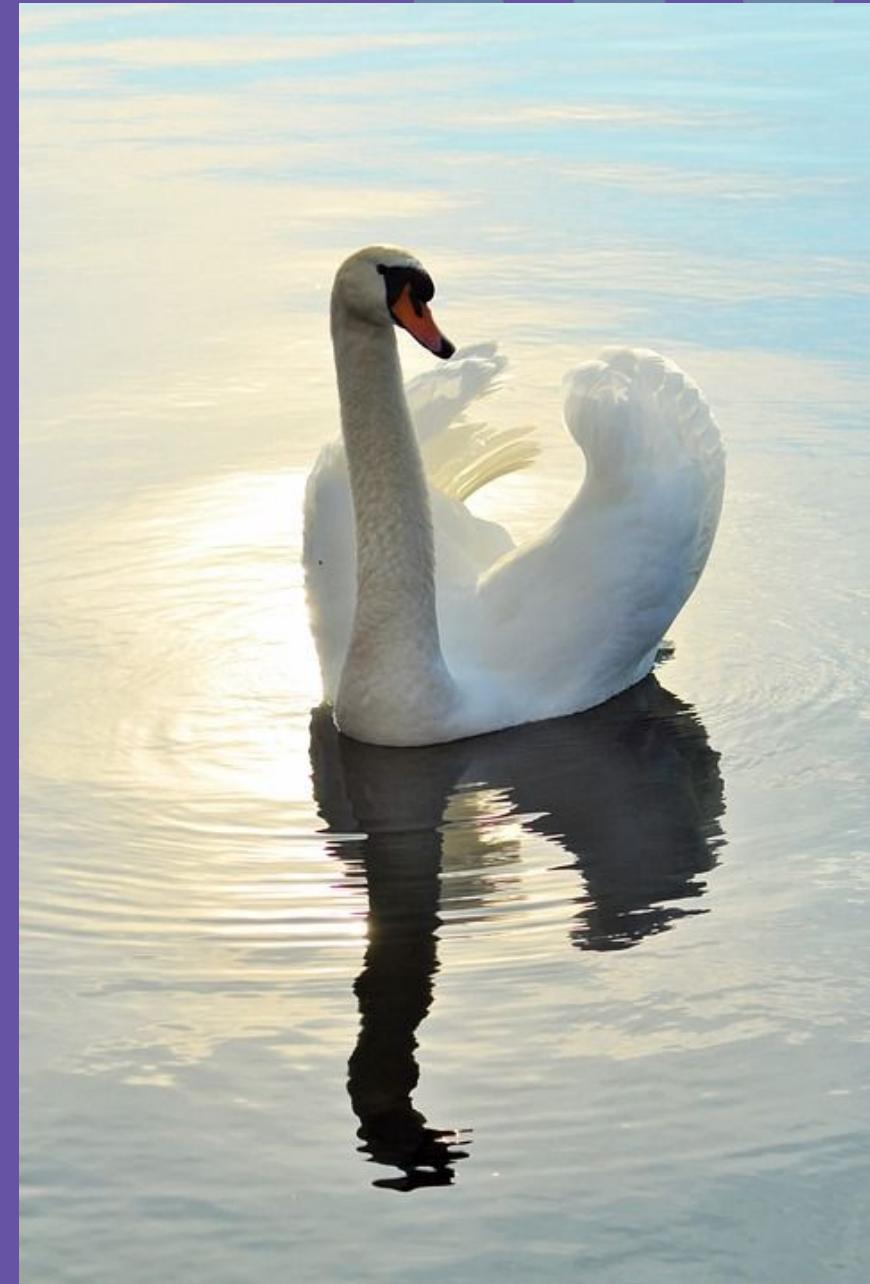
- | Acknowledge the stigma
- | Use respectful and nonjudgmental language
- | Refrain from guilt or shame-based approaches
- | Emphasize the parent's strengths and promote resilience
- | Respect the individual's role as a parent



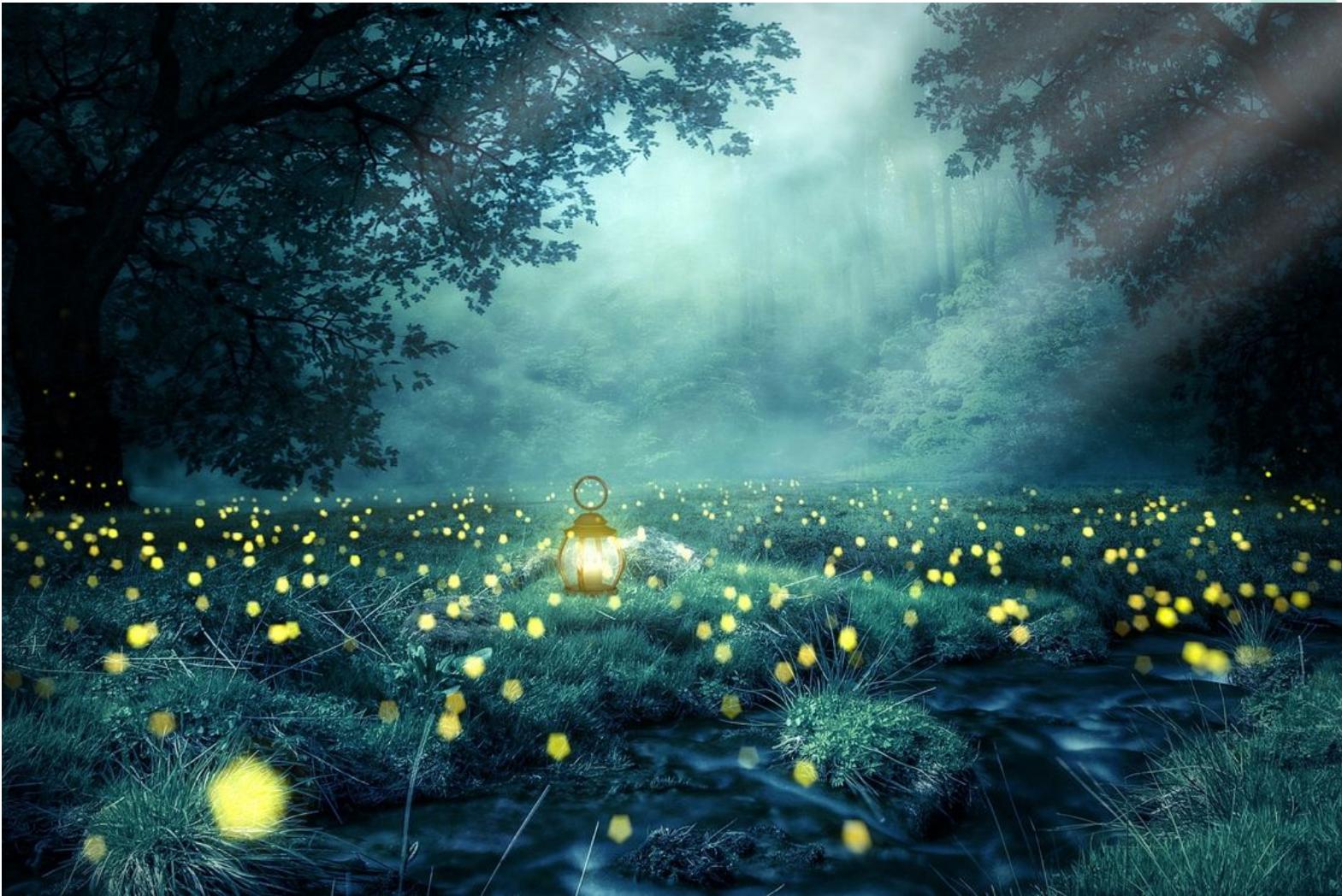
# Reflective Practice

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- | What experiences have influenced my views on substance use and parents who use substances?
- | How do these views show up in my work or program?
- | **What helps me dismantle substance use stigma and focus on parent's strengths?**



# Question and Answer



# Contact Information

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*Associate Director*

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[www.NationalCenterDVTraumaMH.org/  
newsletter-sign-up](http://www.NationalCenterDVTraumaMH.org/newsletter-sign-up)

Twitter: [@ncdvtmh](https://twitter.com/ncdvtmh)

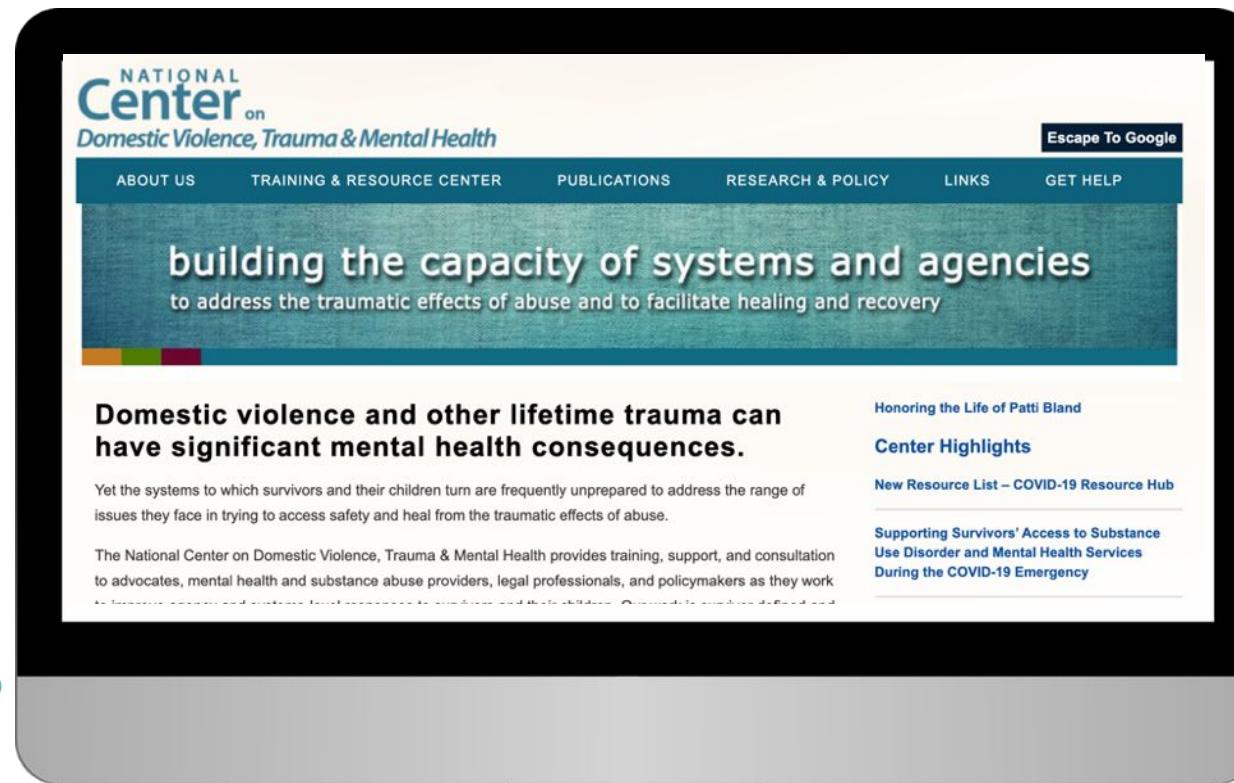
Instagram: [@ncdvtmh](https://www.instagram.com/ncdvtmh)

Facebook: [www.facebook.com/ncdvtmh](https://www.facebook.com/ncdvtmh)



# Additional Resources

[www.NationalCenterDVTraumaMH.org](http://www.NationalCenterDVTraumaMH.org)

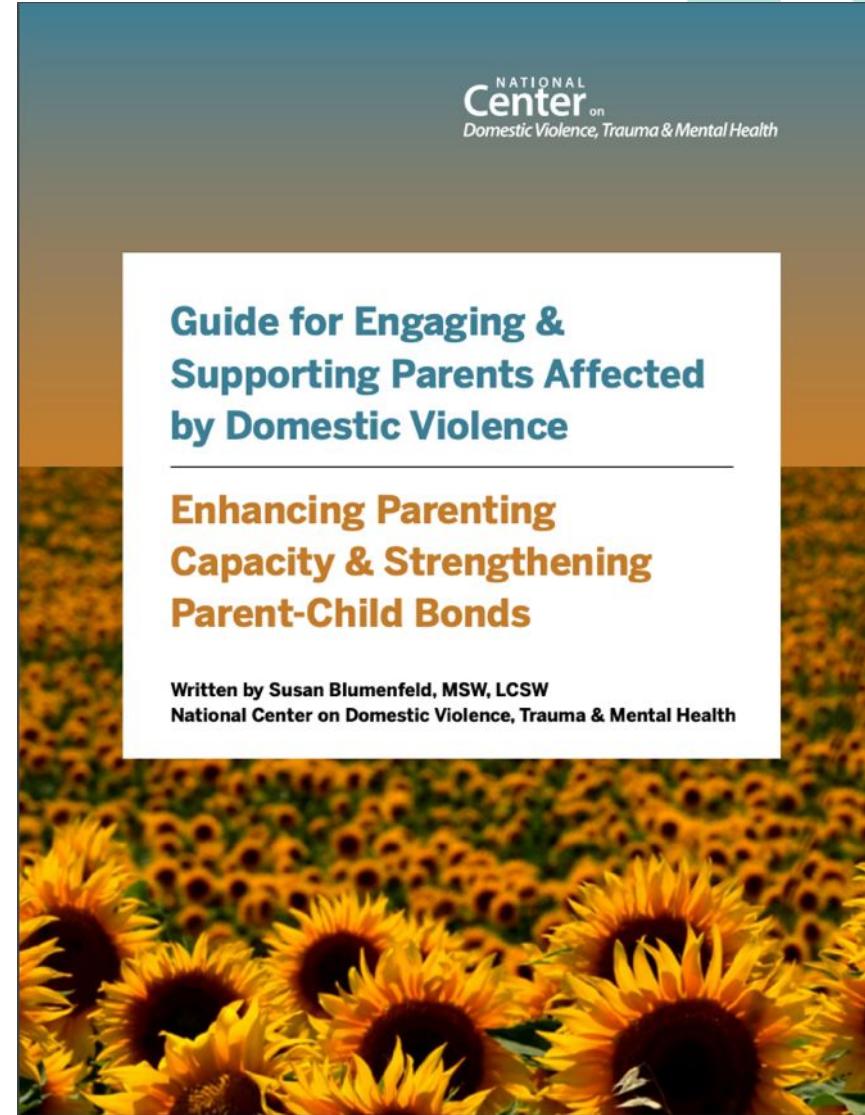
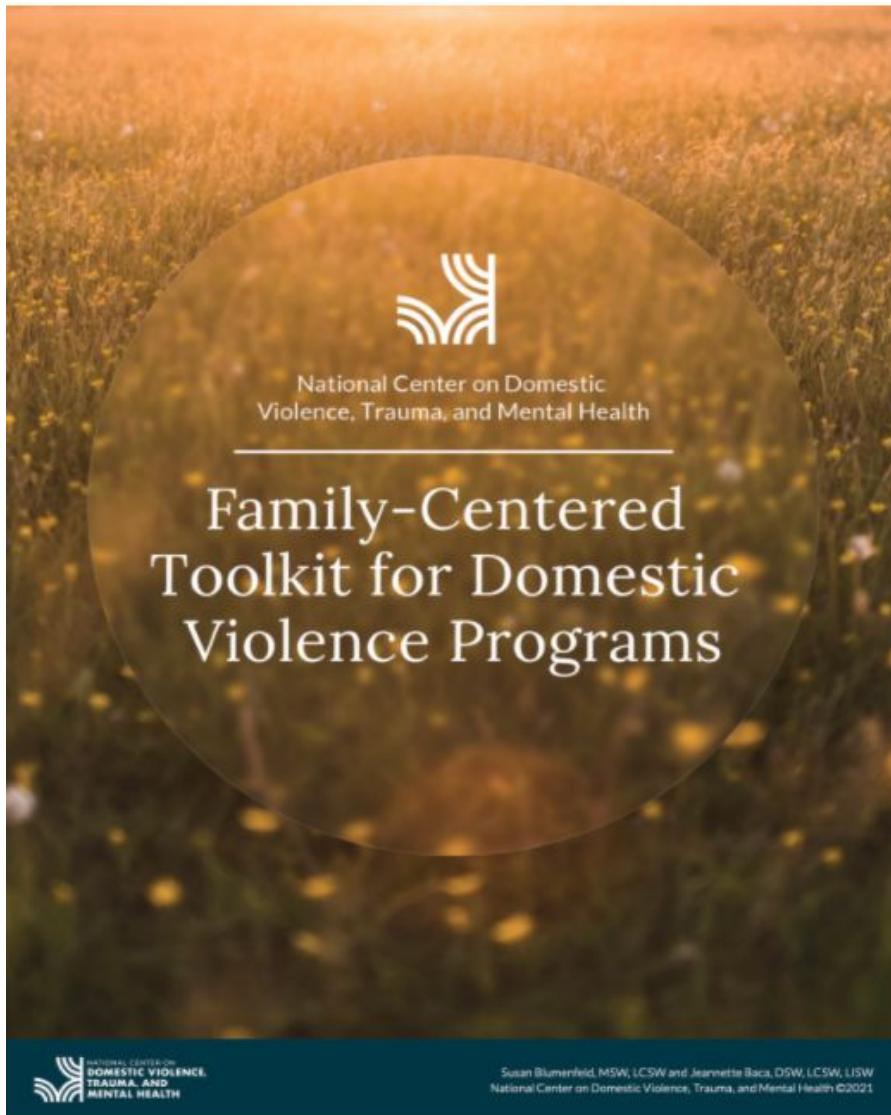




## COMMITTED TO SAFETY FOR ALL SURVIVORS:

*GUIDANCE FOR DOMESTIC VIOLENCE PROGRAMS  
ON SUPPORTING SURVIVORS WHO USE SUBSTANCES*

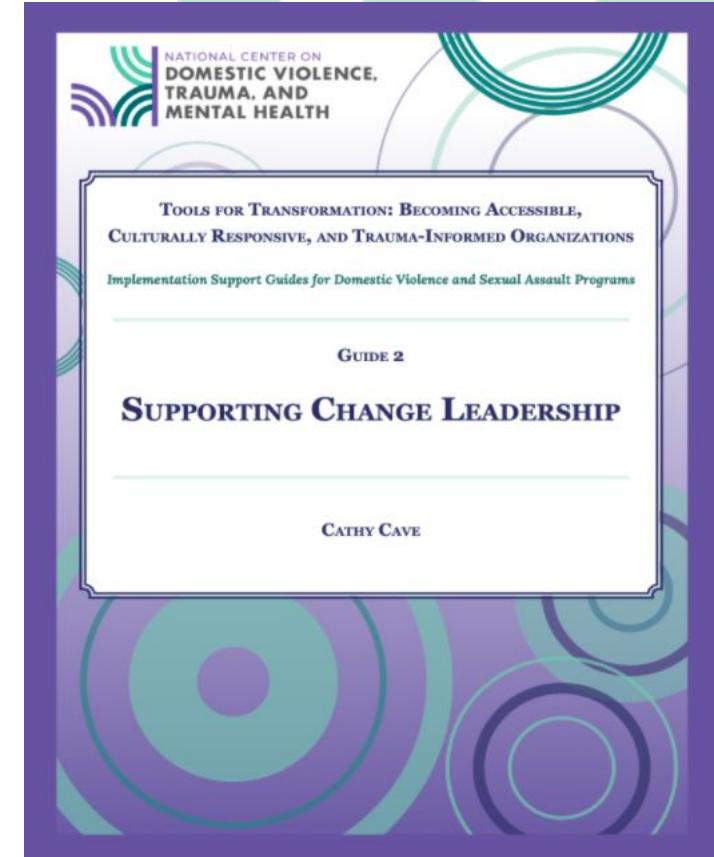
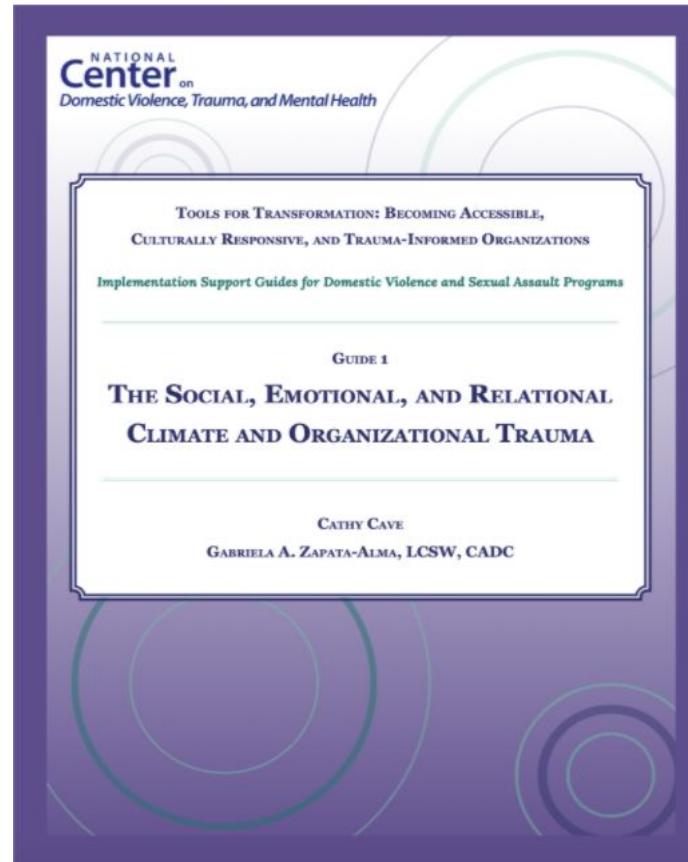
**GABRIELA A. ZAPATA-ALMA, LCSW, CADC**





**Tools for Transformation:  
Becoming Accessible, Culturally Responsive,  
and Trauma-Informed Organizations**  
*An Organizational Reflection Toolkit*

Carole Warshaw, MD, Erin Tinson, MSW, LSW, and Cathy Cave  
April 2018



## When You Can Talk Privately



"People have shared with us that their (ex-)partner pressured them to use substances, use in ways that they didn't want to, or used their substance use as a way to control them. Using substances is a common way to deal with physical and emotional pain. If you can relate to any of this, know that we're here to help."

### Common Forms of Substance Use Coercion

**Introduction to or escalation of substance use**

**Forced use or withdrawal**

**Self-medication to cope**

**Sabotaging treatment access or recovery efforts**

**Using stigma to isolate, discredit, or threaten**

**Blaming abuse on use**

### Validate and Affirm

- None of this is your fault
- You deserve to be treated with dignity and respect, no matter what
- I believe you
- You are not alone

"Would it be helpful to talk about some safety strategies and resources?"

Available in English and Spanish



## Safety Plan: Access and Recovery



### Collaboratively Strategize:

- Safe communication (telehealth, phone, mail, etc.)
- Stalking risk and appointment schedule
- Staying connected to services if pressured by a (ex-)partner to leave
- Maintaining control of medication(s), including MAR/MAT
- Threats to disclose or subpoena protected health information
- Legal documents that enable a (ex-)partner or social contact to exert control over the person

### Connect

National Domestic Violence Hotline: 1 (800) 799-SAFE and 1 (800) 787-3224 (TTY)  
 RAINN National Sexual Assault Hotline: 1 (800) 656-HOPE  
 StrongHearts Native Helpline: 1 (844) 7NATIVE  
 Love is Respect (for teenagers): 1 (866) 331-9474 and 1 (866) 331-8453 (TTY)

## When You Can Talk Privately



"How does your partner support your mental health? People have shared that sometimes their partners say hurtful things or try to make them think they are 'losing their mind.'

Partners might make it hard to connect with people you trust or might only be supportive during hard times. If you can relate to any of this, we're here to help."

### Common Forms of MH Coercion

Undermining a survivor's sanity

Provoking, threatening, or forcing unnecessary commitment

Interrupting healthy routines

Interfering with MH care: controlling medications, diagnosis, or overall engagement

Using stigma to isolate, discredit, or threaten

Blaming abuse and control on MH

### Validate and Affirm

- None of this is your fault
- You deserve to be treated with dignity and respect, no matter what
- I believe you
- You are not alone

"Would it be helpful to talk about some **safety strategies and resources?**"

## Safety Plan: Access and Autonomy



### Collaboratively Strategize:

- Safe communication and appointments (telehealth, phone, mail, etc.)
- Staying connected to services if others attempt to interfere
- Maintaining control of medication(s)
- Ways to protect confidentiality and protected health information
- Legal documents that enable a (ex-)partner or social contact to exert control over the person
- Maintaining autonomy and preventing unnecessary commitment

### Connect

National Domestic Violence Hotline: 1 (800) 799-SAFE and 1 (800) 787-3224 (TTY)  
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# Available in English and Spanish



### High rates of DV among women accessing substance use disorder treatment

47%-90%

Report DV in their lifetime

31%-67%

Report DV in the past year

NATIONAL Center...  
Domestic Violence, Trauma & Mental Health

## 7 Common Practices in Substance Use Disorder Care That Can Hurt Survivors and What You Can Do Instead

### Keep in Mind

- **Use a universal precautions approach:** It can be difficult and dangerous for a survivor to talk about intimate partner violence (IPV). Trauma-informed approaches are essential even if someone has not disclosed abuse.
- **Avoid labeling:** Many people will not identify with terms such as *survivor, abuse, victim, or intimate partner violence*.
- **Not just intimate partners:** Abuse may come from another social contact.
- **Not just physical or sexual violence:** Learn more about the many forms of abuse and coercion at [www.nationalcenterdvtraumamh.org](http://www.nationalcenterdvtraumamh.org).

### 1) Practices Surrounding Program Intake and Exit

#### Risks and Barriers:

- **Delays in service access:** Survivors need to be able to access resources when there's a window of safety. Delays often mean the window of safety will close.
- **Strict treatment schedules** can increase the risk of stalking and victimization.
- **Administrative discharge due to missed appointments:** A survivor may miss appointments in order to protect themselves or due to a partner's interference.
- **Administrative discharge due to toxicology screening results:** Substance use may be a direct result of the abuse someone faces or coercion to use by a partner. Regardless, this is neither trauma-informed nor considered best practice.
- **Administrative discharge due to inability to pay:** Financial abuse is common and using health



## Coercion Related to Mental Health and Substance Use in the Context of Intimate Partner Violence:

*A Toolkit for Screening, Assessment, and Brief Counseling  
in Primary Care and Behavioral Health Settings*

Carole Warshaw, MD and Erin Tinnon, MSW, LSW

March 2018



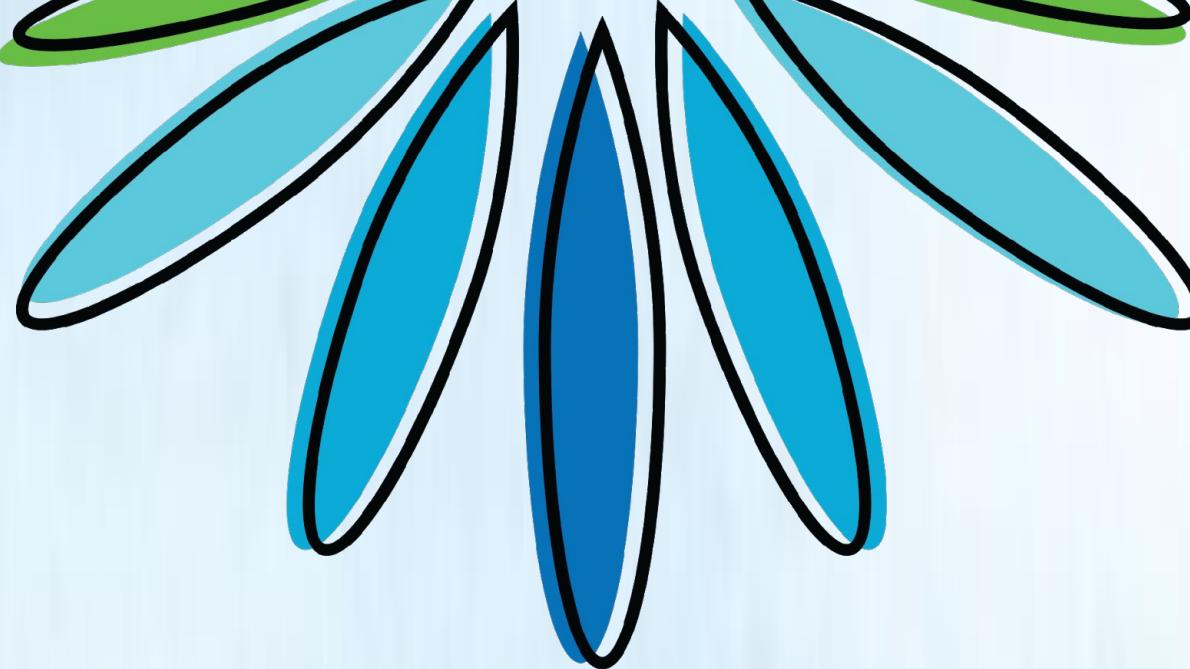
## UNDERSTANDING SUBSTANCE USE COERCION IN THE CONTEXT OF INTIMATE PARTNER VIOLENCE: IMPLICATIONS FOR POLICY AND PRACTICE

SUMMARY OF FINDINGS

NATIONAL Center  
on  
Domestic Violence, Trauma & Mental Health

# Thank You!





**We are here to provide you support - please contact us anytime!**

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