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# **DOMESTIC VIOLENCE**

## **VICTIM**

**C16**

**Michael Yeager is not the author of these materials  
Materials taken from a variety of sources referenced herein.**

The cycle of Domestic Violence shows how domestic violence often becomes a pattern made up of three stages.

### **Tension Building**

criticism, yelling, swearing, using angry gestures, coercion, threats

### **Violence**

physical and sexual attacks and threats

### **Seduction**

apologies, blaming, promises to change, gifts

*Sweet Baby Syndrome (How he gets to come back)*

1. *Honeymoon Syndrome*: also known as "Hearts and Flowers" any bribe that will get her to return to him.
2. *Super Dad Syndrome*: he tells her that he will be a great dad if she returns. This works especially if he has neglected the children in the past.
3. *Revival Syndrome*: this is not really a valid revival or salvation since he has probably only gone to church a few times. "I have been going to church every Sunday since you left." "I have accepted Christ into my life." He puts the responsibility for his battering on God.
4. *Sobriety Syndrome*: "If he can stop drinking he will stop beating me." Drinking does not cause beating -- if it did, then they would beat strangers on the street.
5. *Counseling Syndrome*: "I have gone to counseling, I won't do it anymore." Long term counseling is needed and less than 1% voluntarily go into counseling.

It also explains how three dynamics: love, hope and fear, keep the cycle in motion and make it hard to end a violent relationship.

### **Love/Hope/Fear**

#### **Love...**

for you partner, the relationship has good points, it's not all bad

#### **Hope...**

that it will change, the relationship didn't begin like this

#### **Fear...**

to be alone, that he will hurt you or your children

### **Progression of Violence**

*Pre-battering violence*: verbal abuse, hitting objects, throwing objects, breaking objects, and making threats. When abusers hit or break objects or make threats, almost 100% resort to battering.

*Beginning levels*: pushing, grabbing, restraining.

*Moderate levels*: slapping, pinching, kicking, pulling out clumps of hair.

*Severe levels*: choking, beating with objects, use of weapons and rape. One in three women in a battering relationship are raped. There are two kinds of rape in domestic violence -- one, with weapons, and two, she submits out of fear that if she were to say "No" he would get angry and beat her.

## TEN STRENGTHS OF TRAUMA BONDS

1. WHEN THE TRAUMA CYCLES ARE REPEATED SO INTENSITY AND FORGIVENESS BECOME REINFORCING
2. WHEN THE VICTIM BELIEVES IN THEIR UNIQUENESS
3. WHEN THE VICTIM MISTAKES INTENSITY FOR INTIMACY
4. WHEN THE TRAUMA ENDURES OVER TIME
5. WHEN THERE ARE INCREASING AMOUNTS OF FEAR
6. WHEN THE FEAR INDUCED NEUROCHEMICAL REACTIONS OCCUR EARLIER IN LIFE AND EFFECT THE ORGANIC DEVELOPMENT OF THE BRAIN
7. WHEN THE TRAUMA IS PRECEDED BY EARLIER VICTIMIZATION
8. WHEN THE VICTIM IS SURROUNDED BY REACTIVITY AND EXTREME RESPONSES
9. WHEN THE BETRAYAL OF POWER RELATIONSHIPS IS GREATER
10. WHEN THE BETRAYAL OF TRUSTED RELATIONSHIPS IS GREATER

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## TRAUMA BONDS

### DEFINITION:

Dysfunctional attachments that occur in the presence of danger, shame or exploitation

### CLINICAL PATTERS:

Abusive/conflictual titles like "War of the Roses" or "Fatal Attraction"; systematic setups like Lucy & Charlie Brown' abuse cycles such as found in domestic violence; misplaced loyalty as in cults, incest or hostage situations; depression; rage or debilitating resentment; co-dependency.

### PRESENTING SYMPTOMS:

- obsessing about people who have hurt patient and are gone
- seek people who patient knows will cause him/her pain
- going overboard to help people who have been destructive to patient
- being a "team" member when obviously things are becoming destructive
- attempts to be liked by people who clearly are exploiting patient
- trusting people who have proven unreliable
- unable to retreat from unhealthy relationships
- wanting to be understood by those who are incapable or don't care
- staying in conflict with others when could have walked away
- continued efforts to convince people who are destructive and not willing to listen
- loyalty to people who have betrayed the patient
- attracted to untrustworthy people
- keeping secrets of people who have hurt patient
- continued contact with abuser or perpetrator

### CLINICAL STRATEGIES:

- no contact contracts
- teach strategies for detachment
- support self-help groups that can provide perspective
- teach concepts of "bonds" and systematic repetition
- explore payoffs of bonds
- disrupts beliefs around "uniqueness"
- support grief through ritualization around change

### KEY RESOURCES:

Feinauer, 1989; Gutheil, 1991; Herman, 1992; Parker and Parker, 1986; Russell, 1984; Terr, 1983; Van Der Kolk, 1988

# TRAUMA SPLITTING

## DEFINITION:

Ignoring traumatic realities by "splitting off" experiences and not integrating into personality or daily life.

## CLINICAL PATTERNS:

Avoiding reality through excessive daydreaming; compartmentalizing parts of self to reduce tension; fantasy addictive responses such as romance addiction or artistic or mystical preoccupation; living double life; extreme procrastination; disassociative disorders including multiple personality disorder.

## PRESENTING SYMPTOMS:

- disassociative episodes - feeling separate from body as a reaction to a flashback
- avoiding stories, parts of movies or reminders of experiences
- withdrawal or lack of interest in important activators because of experience
- experience confusion often
- living in a "fantasy " world when things were tough
- tendency to be preoccupied with something else than what you need to be
- lost in fantasies often rather than deal with real life
- living a "double life"
- having a life of "compartments" that others do not know about
- being a daydreamer
- avoiding thoughts or feelings associated with trauma experiences
- inability to recall important details of experiences
- procrastinating, interfering with life activities
- tendency to be accident prone
- hooked on "romance" as a way to avoid problems
- a problem with "putting off" important tasks
- loving romance fantasies
- sometimes live in an "unreal" world
- use of marijuana or psychedelics to hallucinate
- difficulty concentrating

## CLINICAL STRATEGIES:

- assess for multiple personality disorder/disassociative disorders
- assess for fantasy addictive responses
- strategies for integration of realities/selves
- teach how to retain focus within reality framework
- connect trauma issues with disassociative or addictive patterns

## KEY RESOURCES:

Bliss, 1986; Braun, 1986; Briere, 1992; Fog, 1992; Herman, 1992; Kluft, 1985; Kluft, 1987; Lew, 1988; Putnam, 1989; Putnam, 1991; Ross, 1989; Van Der Kolk, 1987; Young, 1991; Young, 1988

# TRAUMA BLOCKING

## DEFINITION:

Efforts to numb, block out or overwhelm residual feelings due to trauma.

## CLINICAL PATTERNS:

Compulsive overeating; excessive sleeping; alcoholism; depressant drugs; satiation addictive responses.

## PRESENTING SYMPTOMS:

- difficulty staying awake
- always looking for something to do - uncomfortable being at rest
- feeling anxious and "behaving" to make feelings go away
- getting "lost" in work
- using depressant drugs as a way to cope
- "bingeing" when things are difficult
- wish to "slow down" one's mind
- drinking to excess when life is too hard
- preoccupied with food and eating
- using drugs to escape
- eating excessively to avoid problems
- using TV, reading and hobbies as a way to numb out
- working so won't have to feel

## CLINICAL STRATEGIES:

- differential diagnosis of addiction
- confront patterns of blocking behavior
- initiate addiction treatment
- teach concepts of multiple addiction
- establish relapse prevention plan
- introduce twelve step support
- create alternative ways for anxiety reduction
- initiate trauma resolution strategies
- connect addiction relapse with trauma work

## KEY RESOURCES:

Buchanan, 1992; Edwall, Hoffman & Harrison, 1989; Evans and Shaefer, 1987; Evans and Sullivan, 1990; Hagan, 1988; Huebner, 1993; Kovach, 1986; L'Abate, et al; Ladwug and Anderson, 1989; Miller, Downs and Gondoli, 1989; Rohsenow, Corbett and Devine, 1988; Root, 1989; Shaefer, Sobieraj and Hollyfield, 1988; Sullivan, 1988

# TRAUMA REACTIONS

## DEFINITION:

Physiological and/or psychological alarm reactions from unresolved trauma experiences.

## CLINICAL PATTERNS:

Flashbacks; intrusive thoughts; insomnia; triggered associations; troubling dreams; physical symptoms; hyper vigilance; living in extremes; manic-depressive cycles; borderline personality

## PRESENTING SYMPTOMS:

- recurrent and intrusive recollections of experiences
- sudden "real" memories (vivid, distracting)
- startled more easily than others
- distressing dreams about experiences
- distress when exposed to reminders of experiences like anniversaries, places or symbols
- physical reactions to reminders of experiences (breaking out in cold sweat, trouble breathing, etc.)
- periods of sleeplessness
- extremely cautious of surroundings
- distrustful of others
- flashback episodes - acting or feeling as if the experience is happening in the present
- outbursts of anger or irritability

## CLINICAL STRATEGIES:

- cognitive reframing of trauma experiences
- teach PTSD concepts
- controlled breathing
- developing meaning from victimization
- systematic desensitization
- deep muscle relaxation
- guided self-dialogue
- covert modeling
- distraction techniques
- hypnotic desensitization
- implement relapse prevention and other skills
- stress management strategies
- therapeutic story telling
- re-experiencing the trauma in a safe environment
- thought stopping strategies
- role playing
- diaries and self-monitoring

## KEY RESOURCES:

Briere, 1992; Courtois, 1988; Dolan, 1991; Grove and Panzer, 1991; Murray, 1991

# TRAUMA SHAME

## DEFINITION:

Profound sense of unworthiness and self-hatred rooted in traumatic experience.

## CLINICAL PATTERNS:

Shame cycles; self-mutilation; self-destructive behavior; expressing self-hatred through suicidal ideation; shame based personality; depression; co-dependency personality disorder.

## PRESENTING SYMPTOMS:

- feeling bad about oneself because patient felt experiences were his/her fault
- feeling lonely and estranged from others because of experiences
- engaging in self-destructive behaviors
- engaging in self-mutilating behaviors (cutting on self, burning self, etc.)
- enduring physical or emotional pain most people would not accept
- avoiding mistakes at "any cost"
- feel should be punished for past behavior; unable to forgive oneself
- feeling bad when something good happens
- suicidal thoughts, suicidal threats, attempted suicide
- inability to experience certain emotions (love, happiness, sadness, etc.)
- feeling as if the patient must avoid depending on people
- dim outlook on future
- feeling unworthy, unlovable, immoral or sinful because of experiences
- trying to be perfect
- a sense that others are always better than patient
- avoiding experiences that feel good

## CLINICAL STRATEGIES:

- bibliotherapy on shame
- shame reduction strategies
- teach visualization and affirmation
- intense family of origin work
- restructure faulty or shaming beliefs
- teach nature of shame cycle

## KEY RESOURCES:

Bradshaw, 1988; Carlsen, 1988; Fossum and Mason, 1986; Harper and Hoopes, 1990; Kaufman, 1989.



## **HOW TO MAKE A DECENT DECISION**

DECISION TO MAKE	CHOICE/ALTERNATIVE #1	CHOICE/ALTERNATIVE #2

CONSEQUENCES		CONSEQUENCES		CONSEQUENCES	
PROS	CONS	PROS	CONS	PROS	CONS

Family Value:

Your Decision:

The consequences of Your decision:

## **STRATEGIES FOR TRAUMA BOND DISRUPTION**

### **TRAUMA BONDS CAN BE DISRUPTED -**

1. When healthy bonds are available
2. When a group or community can debrief or de-role victim
3. When victim can identify cycles of abuse
4. When the victim is taught how to psychologically distance from intensity
5. When victim learns boundary setting strategies
6. When the victim understands role of carried "shame"
7. When the victim can reframe interactions of trauma
8. When victim can identify roles of victim, victimizer, and rescuer
9. When metaphors exist for victim to use in the "moment"
10. When victim accepts trauma bond's systemic nature - it's not about fault

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## **STATEMENTS OF PERSONAL RIGHTS**

### **PHYSICAL BOUNDARY - protects my body**

I have the right to determine when, where, how and who is going to touch me and how close they are going to stand to me.

### **SEXUAL BOUNDARY - protects the sexual aspects of my body**

I have the right to determine with whom, where, when and how I am going to be sexual.

### **EMOTIONAL BOUNDARY - protects my feelings**

My reality (what I look like, think, feel, do or don't do) is more about me and my history than what you are saying or doing or have said or done. Conversely, your reality is more about you and your history than what I have said or done. I am not responsible for your reality, but I am responsible for offending the other person in a major way, the one doing becomes accountable for the effects on the other person.

### **INTELLECTUAL BOUNDARY - protects my thinking**

I have the right to think what I want to think, I need only face the consequences of my own thinking. I have the right to decide if information is true, not true, or questionable and to choose to act or not to act on the basis of my decision. I need only face the consequences of my choices and actions.

### **SPIRITUAL BOUNDARY - protects my spiritual life**

I have the right to think and believe the way I choose about God or my Higher Power. I know faith or lack thereof is mine and I do not have to justify it to anyone. I am responsible to live within the bounds of my spiritual beliefs and accept the consequences when I do not. I have a personal relationship with God of my understanding.

### **FINANCIAL BOUNDARY - protects my financial life**

I am responsible for my finances. My worth as a person has nothing to do with how much or how little money I have. My relationship with money is simply as a medium of exchange. I know that there is always enough. I love me for who I am rather than what I have.

## **CHARACTERISTICS OF ASSERTIVENESS**

1. Knowing what I want and need.
2. Believing it is okay to want what I want and need what I need, respecting my own needs.
3. Asking 100% of what I want 100% of the time.
4. Being aware that my wants and needs may cut across another's wants and needs.
5. Believing it is okay for others to want what they want and need what they need, that is, respecting other's needs.
6. Willingness to negotiate with others to get all persons' needs met.
7. Ability to say NO without feeling guilty and the ability to accept NO from others without feeling resentment.
8. Ability to fill my own needs (get what I want) when others choose not to help me.
9. Ability to be in charge of my own life; i.e. to be my own authority.
10. Confidence in myself and my ability to cope with life.

## CONFRONTATION MODEL

The following model is an excellent way to express your feelings, your wants and needs, and your intentions to someone in your life:

**When you...**

**I think...**

**I feel...**

**I wanted...**

**I intend...**

Example:

**When you...**yell at me in front of other people.

**I think...**that you don't respect me.

**I feel...**angry, embarrassed, hurt and lonely.

**I want/need...**to feel respected at all times.

**I intend...**not to go in public with you if this behavior continues.

**Metropolitan Police Department  
Domestic Violence Division  
Nashville, Tennessee**

**Personalized Safety Plan**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Complaint #: \_\_\_\_\_ Officer: \_\_\_\_\_

**The following steps represent my plan for increasing my safety and preparation in advance for the possibility for further violence. Although I do not have control over my partner's violence, I do have a choice about how to respond to him/her and how to get myself and my children to safety.**

Step 1: Safety during a violent incident. Women cannot always avoid violent incidents. In order to increase safety, battered women may use a variety of strategies. I can use some or all of the following strategies:

- A. If I decide to leave, I will \_\_\_\_\_. (Practice how to get out safely. What doors, windows, elevators, stairwells or fire escapes would you use?)
- B. I can keep my purse and car keys ready and put them (place) \_\_\_\_\_, in order to leave quickly.
- C. I can tell \_\_\_\_\_ about the violence and request they call the police if they hear suspicious noises coming from my house.
- D. I can teach my children how to use the telephone to contact the police and the fire department.
- E. I will use \_\_\_\_\_ as my code for my children or my friends so they can call for help.
- F. If I have to leave my home, I will go \_\_\_\_\_ (decide this even if you don't think there will be a next time).
- G. I can also teach some these strategies to some/all of my children.
- H. When I expect we are going to have an argument, I will try to move to a space that is lowest risk, such as \_\_\_\_\_. (Try to avoid arguments in the bathroom, garage, kitchen, near weapons or in rooms without access to an outside door.)
- I. I will use my judgment and intuition. If the situation is very serious, I can give my partner what he/she wants to calm him/her down. I have to protect myself until I/we are out of danger.

Step 2: Safety when preparing to leave. Battered women frequently leave the residence they share with the battering partner. Leaving must be done with a careful plan in order to increase safety. Batterers often strike back when they believe that a battered woman is leaving the relationship. I can use some or all of the following safety strategies:

- A. I will leave money and an extra set of keys with \_\_\_\_\_ so that I can leave quickly.
- B. I will keep copies of important documents or keys at \_\_\_\_\_.
- C. I will open a savings account by \_\_\_\_\_, to increase my independence.

D. Other things I can do to increase my independence include:

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E. The domestic violence program's hot line number is \_\_\_\_\_ and I can seek shelter by calling this hot line.

F. I can keep change for phone calls on me at all times. I understand that if I use my telephone credit card, the following month the telephone bill will tell my batterer those numbers that I called after I left. To keep my telephone communications confidential, I must either use coins or I might get a friend to permit me to use their telephone credit card for a limited time when I first leave.

G. I will check with \_\_\_\_\_ and \_\_\_\_\_ to see who would be able to let me stay with them or lend me some money.

H. I can leave extra clothes with \_\_\_\_\_

I. I will sit down and review my safety plan every \_\_\_\_\_ in order to plan the safest way to leave the residence. \_\_\_\_\_ (domestic violence advocate or friend) has agreed to help me review this plan.

J. I will rehearse my escape plan and as appropriate, practice it with my children.

Step 3: Safety in my own residence. There are many things that a woman can do to increase her safety in her own residence. It may be impossible to do everything at once, but safety measures can be added step by step. Safety measures I can use include:

A. I can change the locks on my doors and windows as soon as possible.

B. I can replace wooden doors with steel/metal doors.

C. I can install security systems including additional locks, window bars, poles to wedge against doors, and electronic system, etc.

D. I can purchase rope ladders to be used for escape from second floor windows.

E. I can install smoke detectors and purchase fire extinguishers for each floor in my house/apartment.

F. I can install an outside lighting system that lights up when a person is coming close to my home.

G. I will teach my children how to use the telephone to make collect calls to me and to \_\_\_\_\_ (friend/minister/other) in the event that my partner takes the children.

H. I will tell people who take care of my children which people have permission to pick up my children and that my partner is not permitted to do so. The people I will inform about pick-up permission include:

_____	(school)
_____	(daycare staff)
_____	(baby-sitter)
_____	( Sunday school teacher)
_____	(teacher)
_____	(others)

\_\_\_\_\_

I. I can inform \_\_\_\_\_ (neighbors)  
\_\_\_\_\_ (pastor) and  
\_\_\_\_\_ (friend) that my partner no longer resides with me  
and they should call the police if he/she is observed near my residence.

Step 4: Safety with an Order of Protection. Many battered women obey protection orders, but one can never be sure which violent partner will obey and which will violate protection orders. I recognize that I may need to ask the police and the court to enforce my protection order. The following are some steps that I can take to help the enforcement of my protection order:

A. I will keep my protection order \_\_\_\_\_ (location). (Always keep it on or near your person. If you change purses, that's the first thing that should go in.)

B. I will give my protection order to police departments in the communities where I usually visit family or friends and in the community where I live.

C. There should be a county registry of protection orders that all police departments can all to confirm a protection order. I can check to make sure that my order is in registry. The telephone number for the county registry of protection order is \_\_\_\_\_.

D. For further safety, if I often visit other counties, I might file my protection order with the court in those counties. I will register my protection order in the following counties:  
\_\_\_\_\_ and \_\_\_\_\_.

E. I can call the local domestic violence program if I am not sure about B, C, or D above or if I have some problem with my protection order.

F. I will inform my employer, my minister, my closest friend and \_\_\_\_\_  
and \_\_\_\_\_ that I have a protection order in effect.

G. If my partner destroys my protection order, I can get another copy from the  
\_\_\_\_\_ (courthouse) by going to the \_\_\_\_\_ (name and  
location of court).

H. If my partner violated the protection order, I can call the police and report a violation, contact my attorney, call my advocate, and/or advise the court of the violation.

I. If the police do not help, I can contact my advocate or attorney and will file a complaint with the chief of the police department.

J. I can also file a private criminal complaint with the district judge in the jurisdiction where the violation occurred or with the district attorney. I can charge my battering partner with a violation of the Order of Protection and all the crimes that he commits in violating the order. I can call the domestic violence advocate to help me with this.

Step 5: Safety on the job and in public. Each battered woman must decide if and when she will tell others that her partner has battered her and that she may be at continued risk. Friends, family and co-workers can help to protect women. Each woman should consider carefully which people to invite to help secure her safety. I might do any or all of the following:

A. I can inform my boss, the security supervisor and \_\_\_\_\_ at work of my situation.



- B. I can ask \_\_\_\_\_ to help screen my telephone calls at work.
- C. When leaving work, I can \_\_\_\_\_
- D. When driving home, if problems occur, I can \_\_\_\_\_
- E. If I use public transit, I can \_\_\_\_\_
- F. I will go to different grocery stores and shopping malls to conduct my business and shop at hours that are different than those when residing with my batterer partner.
- G. I can use a different bank and take care of my banking at hours different from those I used when residing with my batterer partner.
- H. I can also \_\_\_\_\_

Step 6: Safety and drug or alcohol use. Most people in this culture use alcohol. Many use mood-altering drugs. Much of this use is legal and some is not. The legal outcomes of using illegal drugs can be very hard on a battered woman, may hurt her relationship with her children and put her at a disadvantage in other legal actions with her battering partner. Therefore, women should carefully consider the potential cost of the use of illegal drugs. But beyond this, the use of any alcohol or other drug can reduce a woman's awareness and ability to act quickly to protect herself from her battering partner. Furthermore, the use of alcohol and other drugs by the batterer may give him/her an excuse to use violence. Therefore, in the context of drug or alcohol use, a woman needs to make specific safety plans. If drug or alcohol use has occurred in my relationship with the battering partner, I can enhance my safety by some or all of the following:

- A. If I am going to use, I can do so in a safe place and with people who understand the risk of violence and are committed to my safety.
- B. I can also \_\_\_\_\_
- C. If my partner is using, I can \_\_\_\_\_
- D. I might also \_\_\_\_\_
- E. To safeguard my children, I might \_\_\_\_\_

Step 7: Safety and my emotional health. The experience of being a battered and verbally degraded by partners is usually exhausting and emotionally draining. The process of building a new life for myself takes much courage and incredible energy. To conserve my emotional energy and resources and to avoid hard emotional times, I can do some of the following:

- A. If I feel down and ready to return to a potentially abusive situation, I can \_\_\_\_\_
- B. When I have to communicate with my partner in person or by telephone, I can \_\_\_\_\_
- C. I can try to use "I can..." statements with myself and to be assertive with others.
- D. I can tell myself \_\_\_\_\_ whenever I feel others are trying to control or abuse me.
- E. I can read \_\_\_\_\_ to help me feel stronger.

F. I can call \_\_\_\_\_, \_\_\_\_\_ as other resources to be of support to me.

G. Other things I can do to help me feel stronger are \_\_\_\_\_ and \_\_\_\_\_

H. I can attend workshops and support groups at the domestic violence program or \_\_\_\_\_ or \_\_\_\_\_ to gain support and strengthen my relationship with other people.

Step 8: Items to take when leaving. When women leave partners, it is important to take certain items with them. Beyond this, women sometimes give an extra copy of papers and an extra set of clothing to a friend just in case they have to leave quickly.

Money: Even if I have never worked, I can legally take ½ of the funds in the checking and savings accounts (this may be untrue in certain states, so be sure to check). If I don't take any money from the accounts, he can legally take all money and/or close the accounts and I may not get my share until the court rules on it, if ever.

Items with asterisks on the following list are the most important to take. If there is time, the other items might be taken, or stored outside the home. These items might be placed in one location, so that if we have to leave in a hurry, I can grab them quickly. When I leave, I should have:

- \*Identification for myself
- \*Children's birth certificate
- \*My birth certificate
- \*Social security cards
- \*school and vaccination records
- \*money
- \*checkbook, ATM cards
- \*credit cards
- \*keys - house/car/office
- \*driver's license and registration
- \*medication
- Welfare identification, work permits, green cards
- passport, divorce papers
- medical records - for all family members
- lease/rental agreement, house deed, mortgage payment book
- bank books, insurance papers
- small salable objects
- address book
- pictures, jewelry
- children's favorite toys and/or blankets
- items of special sentimental value