Questions Asked During Live Webinar Broadcast on 08/23/2017

Co-Occurring Interrelational Domestic Violence and Substance Use Disorders
Presenter: Terry Gray

Can you say more about engagement of the frontal lobe?
A: The frontal lobe is the area of the brain where data input is sorted and processed in order for us to develop and implement conscious behavior. All psychoactive chemicals inhibit this process.

Are there any specific training programs you can refer us to that are appropriate for training of police departments?
A: I am not aware of any "pre-developed programs". Most local DV shelters would be happy to have the opportunity to lead such a training.

How can you incorporate 12-steps to helping to resolve domestic violence issues?
A: I think one can add or substitute "domestic violence" or the term "abuse" for alcohol or drug and follow the steps.

How do you build empathy between the DV couple?
A: A first step is to humanize the partner. Require them to respond only to their name. I tend to require a couple to spend 30 minutes each day describing their activities of the day and their feelings about the day.

How or where can one get DV training for certification in DV?
A: There are a couple of organizations that offer SPECIFIC training and certification in their model. Duluth is one. Men against Violence is another. I do not know of any formal system of training or certification for DV as yet.

What is the involvement of family members in treatment for DV and SUD from Terry's approach? What if any documentation does the adult partner provide regarding diminishing of substance use and changes in the DV patterns?
A: At present involvement of family members is voluntary, although some judges may strongly suggest that it occur. This issue is being fought out in various courts. In Canada, partner and family involvement is mandatory.

What do you think of the Emerge program for abusers in Boston?
A: I am not familiar with Boston, but Tucson has an Emerge program. It does many remarkable things, but some areas are too rigid for my taste. I believe that DV treatment needs to be open and able to innovate and I'm not sure Emerge agrees. In Tucson, they want to mandate the treatment models used and to monitor groups by actually sitting in them. I worry about confidentiality and freedom of expression which tend to limit therapeutic process.

Also, Terry, I live in Denver and many clients are having serious problems with Cannabis dependence since it is so strong here now that it is legal. What are your thoughts about Medical Marijuana and use by addicts?
A: That is a loaded topic. I see too many young people using that as an excuse to get high. I don't believe we have adequate information on the actual effective uses for cannabis, especially when smoked. Marijuana is a psychoactive drug that alters thought, perception, emotion, decision-making and behavior. Use with extreme caution.
Do you facilitate integrated SUD and Domestic Violence Groups?
A: Yes. If you mean mixed gender, I have found that men and women can have a profound effect on one another if disparate perspectives can be allowed and managed. I have also taken a lot of flak from courts, shelters, and other providers for doing so. I believe that all too often we encourage ongoing biases by maintaining forced separation.

Who was the researcher mentioned?
A: Donald Dutton and Michael P. Johnson most emphatically.

[An attendee shared the following resources for assessment instruments]
It would be helpful to have some recommended, validated Domestic violence screens/ assessment instruments recommended. Here is 2009 review of instruments document:
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2688958/
And a 2016 article from nursing on Intimate Partner Violence:

[After Terry’s comment about the lack of men’s shelters, attendees shared the following comments]

I thought I would share this regarding DV shelter for men.


Also, there is a professor at the University of Michigan who has specialized in researching domestic violence, including violence towards men https://ssw.umich.edu/faculty/profiles/emeritus/saunddan

There has been a men's shelter north of Boston, MA in the past, but it is questionable if it is still extant.

Hooray for these excellent suggestions. I caution when reviewing assessment tools as these are often biased against men and certain ethnic groups. Many are designed for a specific population or a specific location. Tools are only as good as you implement them. Thank you to everyone.