

Domestic Violence and Alcohol Briefing

There is no doubt that there are links between domestic violence and alcohol use but the exact nature of these links remains complex. Alcohol use cannot cause a person to be violent or abusive, put simply, the majority of domestic violence is perpetrated in the absence of alcohol and the majority of higher level alcohol users do not abuse their partners (Strauss & Gelles, 1990). However, there is some evidence to suggest that domestic violence can cause alcohol use in those on the receiving end of domestic violence or exacerbate existing use.

Perpetrators/Abusers

Some studies have found that perpetrators are more likely to drink or have problematic use of alcohol than the general population (National Alcohol Harm Reduction Strategy 2004, Humphreys & Regan 2005). Some studies have also found that they are more likely to physically assault their partners after drinking (Humphreys & Regan 2005) or that the perpetrator's use of alcohol, particularly heavy drinking, is likely to result in more serious injury to their partners than if they had been sober (Brecklin, 2002).

Findings from a review of the British Crime Surveys revealed that 44% of domestic violence offenders were under the influence of alcohol when they committed acts of physical violence. (Budd 2003.) This does not mean, however, that the use of alcohol causes domestic violence – it seems that the relationship is complex. Emerging research from Dobash and Dobash (forthcoming) looked at the similarities and differences between men who had abused their female partners and those who had murdered them (lethal and non-lethal violence). One of the findings was that those who had used lethal violence were less likely to be drunk at the time, as compared to those who had used non-lethal.

No evidence exists to support a “loss of control caused by intoxication” explanation to violence. If anything, research and case examples show that abusive men exert a huge amount of power and control towards their partners, even when inebriated and rarely extend their use of violence towards workers who intervene. Some studies have linked some types of substance use to aggression or violence (for e.g. prolonged misuse of amphetamine) but this can only go some way towards explaining why any substance can only be considered a contributing factor. Aggression is only one part of the pattern of power and control that women are subjected to by their abusive partners – it can go no way at all towards explaining the psychological, financial and sexual aspects of domination, e.g. why he isolates her, why he is usually charming towards others, restricts the money she has access to, etc. Reducing substance use (including alcohol) may reduce levels of physical injury but has not been shown to reduce the actual occurrence of domestic violence (Jacobs 1998).

A couple of small scale studies in the UK showed that the majority of women interviewed about the role of alcohol in their partner's abuse had also experienced domestic violence when their partner had not been drinking (Galvini 2004, Pillar to Post 2004). Women report that the level of aggression of their partner depends on a number of variables in addition to the alcohol e.g. pre-drinking mood, aggression and worries; environmental factors; personality specific factors; and individual goals of drinking. It is equally important to emphasize that even if his substance use ceases, his violence and abuse usually continues (Taylor 2003).

Agencies should be aware that abusive men whose partners misuse substances may minimise or excuse their violence on those grounds or may do similar with their own alcohol use e.g. ‘I'm not usually like that, but I was off my head’. It is essential that alcohol abuse is not seen as an excuse for domestic violence, as the Stella Project states: “If someone

wishes to feel more powerful and they expect that substance use will facilitate this transformation, more often than not, the substance complies.”

Possible reasons for links to physical assault:

- Drink may be used as part of the “self-talk” that some abusive men use to get themselves in a place where they feel able to physically assault their wives/female partners.
- Drink may be used as a ready-made excuse – i.e. he knows he will be able to say after the assault that he didn’t know what he was doing as he was drunk.
- Some perpetrators may need the excuse of drink (or drugs) to be able to carry out their physical violence.
- He may drink to cope with feelings of guilt or failure for using abusive behaviour.
- “Taproom” culture – all men drinking together may be an important element in how abusive men use this space to fuel their beliefs and/or attitudes to women.
- Less inhibitions when drunk – this may have a part to play in that some abusers may cause more damage than they intended to, as it may be more difficult to stop or limit behaviour. Some may be less aware of personal boundaries when drunk, being more likely to argue or push a point home using violence.

Alcohol is often part of a pattern of coercion, as the perpetrator may:

- Threaten to disclose their partner’s misuse to the authorities, particularly where there are children in the family who the mother fears will be taken away.
- Limit access to information or treatment.
- Use their partner’s earnings to buy alcohol.
- Take out frustrations and aggression on a partner during a detoxification phase.
- Perpetrators may spend the family’s money on alcohol denying women money for vital goods or services.

Survivors/Victims

Although alcohol cannot cause men to be abusive, being on the receiving end of abuse can cause women to turn to alcohol (or other substances – Humphreys and Regan 2005) or to increase their existing use of alcohol (Downs et al 1993). The Humphreys & Regan research showed that almost two thirds of survivors drawn from domestic violence agencies began their problematic substance use following their experiences of domestic violence.

Furthermore, abused women are more likely to use substances, including alcohol, than women in the general population (Stark and Flitcraft 1996, Maryland Dept. of Health 2001) and many women who access drug and alcohol services will have current or past experience of domestic violence. One counselling service for minority ethnic communities found that 40% of Asian women who sought treatment for alcohol misuse with them were experiencing domestic violence (Shaikh and Nez 2000).

Most women use a substance of some kind (illegal or legal, such as cigarettes, tablets, herbal remedies or drink) to cope with the emotional and physical pain of experiencing domestic violence or as a safety strategy (Stark and Flitcraft 1996, Ettorre 1997, Jacobs 1998, Raine 2001, The Stella Project 2004). Most often this tends to be legal substances – due to their easy availability and the general acceptance we afford these substances, as opposed to the illegal ones (From Pillar to Post 2004).

Ironically, the substance that makes her feel safe can effect her functioning and co-ordination, she may be less able to defend herself or develop/use safety related strategies. This can result in the abuser being able to cause more serious injury.

Other reasons for her alcohol use include:

- Self-medication - no access to or prevented from accessing medical help or treatment.
- Drinking in preparation when she knows a beating will happen to deaden the pain (one woman in a local study attributed this to saving her life on more than one occasion - in From Pillar to Post, 2004).
- To cope with or block out feelings of guilt and shame.
- As a distraction.
- Forced or coerced use by partner, this can be initial or ongoing (although this is more likely with illegal substances). This may be to keep her docile or to medicate her injury so that she doesn't go to public agencies such as GP or A&E and as such could access help for the domestic violence (From Pillar to Post, 2004).
- Some women are introduced to substances by their abusive partners as a way of increasing control over them (Swan et al 2000, Stella Project 2004). Perpetrators may then control or withhold substances as a means of abuse. When a woman's partner is also her supplier, it will be particularly difficult for her to end the relationship.
- When a woman seeks support, information or treatment for her substance misuse, her partner may become even more abusive, or may actively prevent or discourage her attendance at a substance misuse service or sabotage any of her attempts to stop using (Taylor 2003, Stella Project 2004).

However, it is also important not to assume that the relationship between a woman's alcohol use and her experiences of domestic violence are linked; abused women may use for reasons outside of, or predating the domestic violence.

All of the points in this section are relevant for children and young people whose mothers are experiencing domestic abuse. Furthermore, children who experience domestic violence are at an increased risk (amongst other negative coping strategies) of alcohol misuse later in life (Mullender and Morley 1994, Hester and Harwin 1999).

Key Points on Interventions Perpetrators

- When a perpetrator enters treatment it can create a false sense of security for their partner who may expect the violence to stop or decrease because of the treatment.
- His detoxification and recovery stages are often the most dangerous time for his partners (abuse continues and can escalate). Women have reported that even if the physical violence decreases, there is a corresponding increase in other forms of coercive control – threats, manipulation, isolation (Minnesota Coalition for Battered Women 1992).
- Alcohol treatment alone cannot address the causes of domestic violence. It should never be assumed that by working with a perpetrator's substance use the violent behaviour will also be reduced. However, any domestic violence intervention with an abuser who has an alcohol problem is more likely to be effective if the two issues are addressed simultaneously.
- It is therefore vital to include assessments of whether someone may be a perpetrator of domestic violence in any assessments and interventions in relation to substance use.

Survivors

- Women with problematic alcohol use who also experience domestic violence are particularly likely to feel isolated and doubly stigmatised. The stigma of alcohol use may act as a real barrier in people seeing her experience of domestic violence or in offering support. Abused women using alcohol are less likely to be believed or taken seriously, and more likely to be blamed for the violence (Aramburu & Leigh 1991). They are at greater risk of losing residency of any children or being deemed an unfit mother.
- The primary presenting issue often masks additional needs for instance if a woman presents with alcohol problems, any domestic violence issues are usually submerged and vice versa. This may be partly due to the secrecy and shame that surrounds both issues as well as fear of being misunderstood or excluded from services.
- It remains that this group of women are particularly vulnerable to long-term experiences of violence in that they have fewer options as to where to go to find help, support or safety and have an increased vulnerability to violence and coercion (e.g. prostitution risk).
- Studies suggest that outcomes for the survivor are more likely to be positive if the domestic violence and substance use are addressed at the same time. It is therefore important to ensure a woman is referred to appropriate services in order to address both her domestic violence and alcohol use support needs.
- Mental health problems such as depression, trauma symptoms, suicide attempts and self-harm are frequently symptoms of abuse that exist alongside alcohol use and also need to be addressed.

Conclusions

Although problematic alcohol use does not cause domestic abuse, a very significant number of people using domestic violence survivor agencies, perpetrator programmes and substance use programmes face the dual problems of domestic violence and substance use.

For many survivors and perpetrators of abuse, the patterns of substance use are linked to the violence and abuse, which they are either perpetrating or experiencing. This link should not be understood as a causal relationship, but one where the practice issues of safety planning, and identifying the strategies of power and control need to be addressed.

There has been only marginal development of the practice and policy linking domestic violence and substance use. The majority of service users who have domestic violence and substance use problems are primarily using either substance use agencies or domestic violence agencies and not receiving appropriate intervention for 'the other' issue.

The two issues need to be approached in an integrated, holistic way with similar understandings of the intersection of both issues. Joint working across the domestic violence and alcohol/ substance use sectors is therefore a logical way forward.