

VA



U.S. Department
of Veterans Affairs

US Department of Veterans Affairs' Response to Intimate Partner Violence

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IPVAP – The Plan

Brief Timeline

- May 2012 – VA Chartered the DV/IPV Task Force
- Dec 2013 – The VHA Plan for Implementation of the DV/IPV Assistance Program was finalized (14 recommendations)
- Jan 2014 – National DV/IPV Program Manager hired
- Summer 2015 – Rapid implementation begins, 6 sites: Baltimore, Salem, VA, Cincinnati, Kansas City, Philadelphia, Portland
- Jan 2017 – Dr. LeAnn Bruce hired as National IPV Program Manager
- Summer 2017- Rapid Implementation Conclusion
- Feb 2018 - Directive 1198 submitted to OGC for concurrence
- Apr 2018 – Received \$17m in funding



IPVAP - The Purpose

Vision

Veterans, their families and Caregivers who receive care from VHA and VHA employees will not experience or use violence or abuse and will be free from the negative consequences resulting from such violence.

Mission

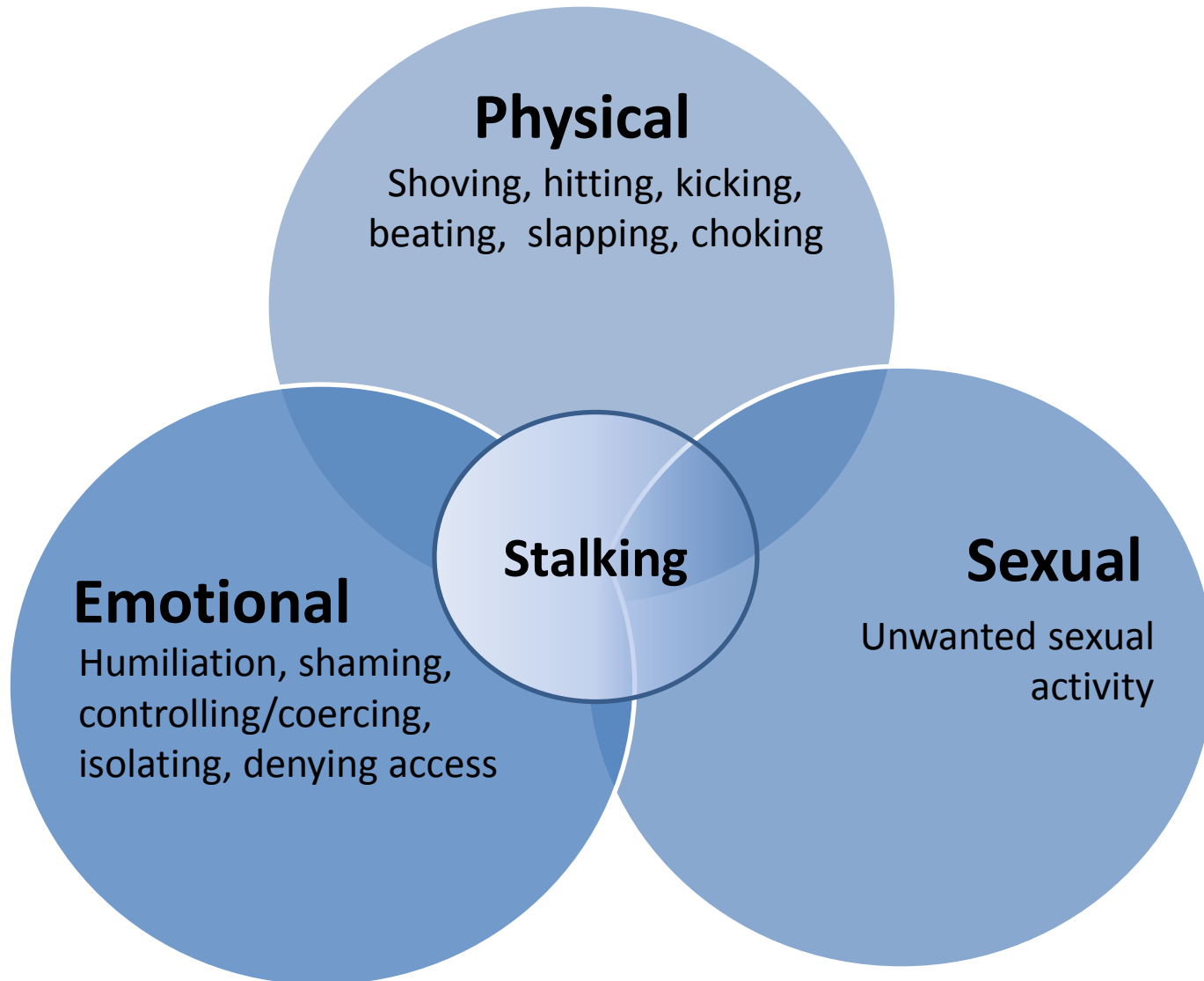
To implement a comprehensive person-centered, recovery-oriented assistance program for Veterans, their families and Caregivers and VHA employees who use or experience intimate partner violence.

What is IPV?

Intimate Partner Violence: “describes physical, sexual, or psychological harm or stalking behavior by a current or former partner that occurs on a continuum of frequency and severity ranging from emotional abuse to chronic, severe battering or even death. It can occur in heterosexual or same-sex relationships and does not require sexual intimacy or cohabitation.” (CDC 2016).



Types of Intimate Partner Violence





IPVAP Overview

Veterans have higher rates of Mental Health and Substance Use disorders, Post-Traumatic Stress, and Traumatic Brain Injury than civilians and have higher risk for suicide, with most at-risk between 18-44 years.

Unique Veteran Experiences

- Post-Traumatic Stress
- Military Family Life Stress
- Separation & Isolation
- Mental Health Concerns
- Alcohol and/or Drug Use
- Loss of Trust/Moral Distress
- Traumatic Brain Injury
- Increased Anger
- Decreased Frustration Tolerance
- Separation from service/Reintegration to civilian life

Leading to Increased Risk

- Divorce/"Broken" families
- Domestic Violence/Intimate Partner Violence
- Loss of support
- Homelessness
- Joblessness
- Poverty
- Increased healthcare needs
- Justice involvement
- Suicide and/or Homicide



IPV in Healthcare

Why IPV in Healthcare?

- Patients believe healthcare providers should screen for DV/IPV (Burge et al 2005)
- Providers can discuss abuse and violence in the context of health care to help patients understand the connection between abuse and their physical/mental health and well-being. (de Boynville 2013)
- Universal screening and education for IPV in the healthcare setting is supported by:
 - VHA DV/IPV Task Force Recommendations
 - Health Resources and Services Administration
 - Centers for Disease Control and Prevention
 - United States Preventative Services Task Force
- Senate Report 115-130
- Other VHA Directives such as Women's Health & MST
- Pending VHA Directive 1198



Comprehensive & Integrated

Raising Awareness

- IPV campaigns, awareness events, materials
- Staff training & education

Building Community Partnerships

- Out-reach events
- Building partnerships & resources

Serving those who experience IPV

- Implementing routine screening
- Establishing intervention plan & resources

Serving those who use IPV

- Implementing screening/identification plan
- Establishing intervention plan & resources

Serving VA Staff

- Building internal collaborations with Employee Assistance, Workplace Safety, etc.



Healthcare Response: VA Services

Experiencing IPV

- Health/Mental Health services
- Homeless Services
- Referral to community partners
 - Support groups
 - Legal services
 - Advocacy services
 - Emergency DV Shelters

Using IPV

- Health/Mental Health services
- Homeless Services
- Referral to community partners
 - Court-ordered programs
- Veterans Justice Outreach
- Strength at Home Group Therapy



Experience IPV: SAFER

Screen with E-HITS

Acknowledge and validate

Focus on safety using danger assessment items

Educate

Referral and documentation options

SAFER Protocol developed by VHA DV/IPV Assistance Program Pilot Project Team.



Experience IPV: Intervention



Provide Education

- Discuss Risks
- Impact on Health & Well-Being

Provide Resources

- National DV Hotline # 1-800-799-SAFE
- IVPAP Coordinator contact

Provide Referrals to Community

- DV Shelters & Coalitions
- Community Based Support Programs

Provide Consultation for intervention

- Full Danger Assessment
- Safety Planning



For those who USE IPV

- Screening & Identification
 - Assessment
 - Referral process
 - Provision of resources
 - Provision or referral to treatment
 - *Trauma-informed*
 - *Veteran-centric*
 - *Recovery-oriented*
 - Collaboration with community partners (law enforcement & courts, support agencies)
- Assess for Post Traumatic Stress Disorder
 - Assess for Substance Use Disorders
 - Assess for Chronic Pain and Physical Illness/Injuries
 - Military Family Stressors
 - Veterans Justice Outreach
 - VHA Pilot Programs (Strength at Home)
 - Community/Court Ordered Intervention Programs



USE IPV: Intervention

Strength at Home is an evidence-based, trauma-informed group treatment program....

- Developed specifically to address Veterans/Service members who use violence and aggression in intimate relationships.
- 12-week therapeutic group intervention with follow-up
- Use of Motivational Interviewing to enhance change process
- Randomized controlled trial: 135 male veterans/service members and 111 female partners
 - SAH participants had greater reductions in physical and psychological IPV use
 - Reduced controlling behaviors involving isolation and monitoring their partners



Importance of Trauma Informed Care

- Addresses violence in all intimate partner relationships configurations (e.g. female Veterans and LGBT Veterans who use violence)
- Is recovery oriented, not shame based
- Is person-centered care and avoids stigmatizing labels (e.g. “batterer”)
- Acknowledges that there is a typology of DV/IPV
- Allows Veterans with mental health or substance abuse issues to still engage in treatment
- Looks at the Person-in-the environment



Active Sites

Arizona - Phoenix

Connecticut - Newington,
West Haven

Florida - Orlando

Georgia - Atlanta

Illinois - Danville, Hines,
North Chicago

Kentucky - Louisville

Maryland - Baltimore

Michigan - Battle Creek

Minnesota - Minneapolis

Mississippi - Jackson

Missouri - Kansas City

New Jersey - East Orange

New York - Albany

N. Carolina - Durham

Ohio - Cincinnati

Oregon - Portland

Pennsylvania - Philly, Butler

South Dakota - Black Hills

Tennessee - Nashville

Texas - Houston, San
Antonio

Virginia - Richmond, Salem



Upcoming Sites

Alabama - Tuscaloosa

California - Fresno, Loma Linda

District of Columbia

Florida - Bay Pines

Michigan - Iron Mountain

Massachusetts - Bedford

Ohio - Dayton

Texas - Central



Collaboration with Veterans Justice

- IPV Coordinator and VJO specialists provided education about the Strength at Home program to local courts
- Provided program as a treatment option to Veterans involved with the legal system due to DV/IPV
- Judges, Veterans court advocates, and other court staff acknowledged opportunity to engage the Veterans and the potential for change
- The involvement of the partner was well appreciated by court DV advocates



What We Have Learned

- Courts appreciated the follow-up not only from VJO, but also from the Strength at Home program
- VJO specialists were trained in the Strength at Home program as group facilitators
- Facilitation of groups in other counties not served by VJO specialist
- Veterans have responded better to smaller and closed group settings
- Veterans feel a connection with other group participants and clinicians
- Experienced accountability from other group participants during course of treatment



VA IPVAP Resources



IPVAP SHAREPOINT:

<http://vaww.infoshare.va.gov/sites/cmsws/IPV/SitePages/Home.aspx>

- VHA Plan for Implementation of the Domestic Violence Intimate Partner Violence Assistance Program
- IPV Documentation_principles_Version_1_04-25-2016
- Past “IPV Monthly Training Calls”
- “DV-IPV Tools” Folder
 - Safety planning worksheets, fact sheets, paper version of the EHITS/DA
- The Toolkit and Supplemental Docs
 - <http://vaww.infoshare.va.gov/sites/cmsws/IPV/Toolkit%20IPV%20Awareness/Forms/AllItems.aspx>



VA IPVAP Resources



[IPVAP VA PULSE PAGE](#)

- Documents
- Blog
- Tools & Resources
- Ask a Question of the VA IPVAP Community
- Resources
- Workgroup Announcements
- Monthly Training Recordings

VAPULSE



VA IPVAP Resources



U.S. Department of Veterans Affairs

Health Benefits Burials & Memorials About VA Resources Media Room Locations Contact Us

VA » Health Care » Patient Care Services » PCS » Intimate Partner Violence (IPV)

Patient Care Services

► PCS
► More Health Care

QUICK LINKS

- Hospital Locator
Zip Code Go
- Health Programs
- Protect Your Health
- A-Z Health Topics

Intimate Partner Violence (IPV)

What Is Intimate Partner Violence (IPV)?

Intimate partner violence (IPV) is a serious, preventable public health problem that affects millions of Americans. The term "intimate partner violence" describes physical, sexual, or psychological harm by a current or former partner or spouse. This type of violence can occur among heterosexual or same-sex couples and does not require sexual intimacy.[^]

Emotional IPV

Emotional IPV is when a person tries to hurt his/her partner's self-worth. It is common for emotional IPV to begin before other types of IPV.

- Examples include:
 - Name calling, putting you down
 - Controlling your money or spending
 - Keeping you from friends and family
 - Bullying, stalking
 - Controlling where you go or what you wear

RESOURCES

- Womens Health - IPV information
- PTSD - Domestic Violence
- NCHPDP - Be Safe Prevent Intimate Partner Violence
- National Domestic Violence Hotline - 1-800-799-SAFE (7233) *
- Understanding Traumatic Brain Injury

[IPVAP PUBLIC VA WEBSITE](#)

- Blog
- Tools
- Resources
- Documents
- Workgroup Announcements
- Ask a Question of the VA IPVAP Community



References

- De Boinville, M., (2013) APSE Policy Brief: Screenings for Domestic Violence in Health Care Settings. Retrieved from http://aspe.hhs.gov/hsp/13/dv/pb_screeningdomestic.cfm.
- Burge, S. K., Schneider, F. D., Ivy, L., & Catala, S. (2005). Patients' Advice to Physicians About Intervening in Family Conflict. *Annals of Family Medicine*, 3(3), 248–254. <http://doi.org/10.1370/afm.287>.
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Questions?

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