What we don't know CAN hurt us. DOMESTIC VIOLENCE, PARTNER-INFLICTED BRAIN INJURY, AND A WAY FORWARD



Who am I? RACHEL RAMIREZ

- Ohio Statewide DV coalition staff
- •18 years in DV work
- Trauma-informed capacity building

 Now a passionate advocate for survivors of domestic violence impacted by brain injury



The Center on Partner-Inflicted Brain Injury

LEADING THE CHARGE TO RECOGNIZE BRAIN INJURY CAUSED BY DOMESTIC VIOLENCE

<u>https://www.odvn.org/wp-</u> <u>content/uploads/2021/11/Promising-</u> <u>Practices-Partner-Inflicted-Brain-</u> <u>Injury.pdf</u>

What do you think?

The organization I work for is adequately prepared to address brain injury caused by violence.





Think it through!

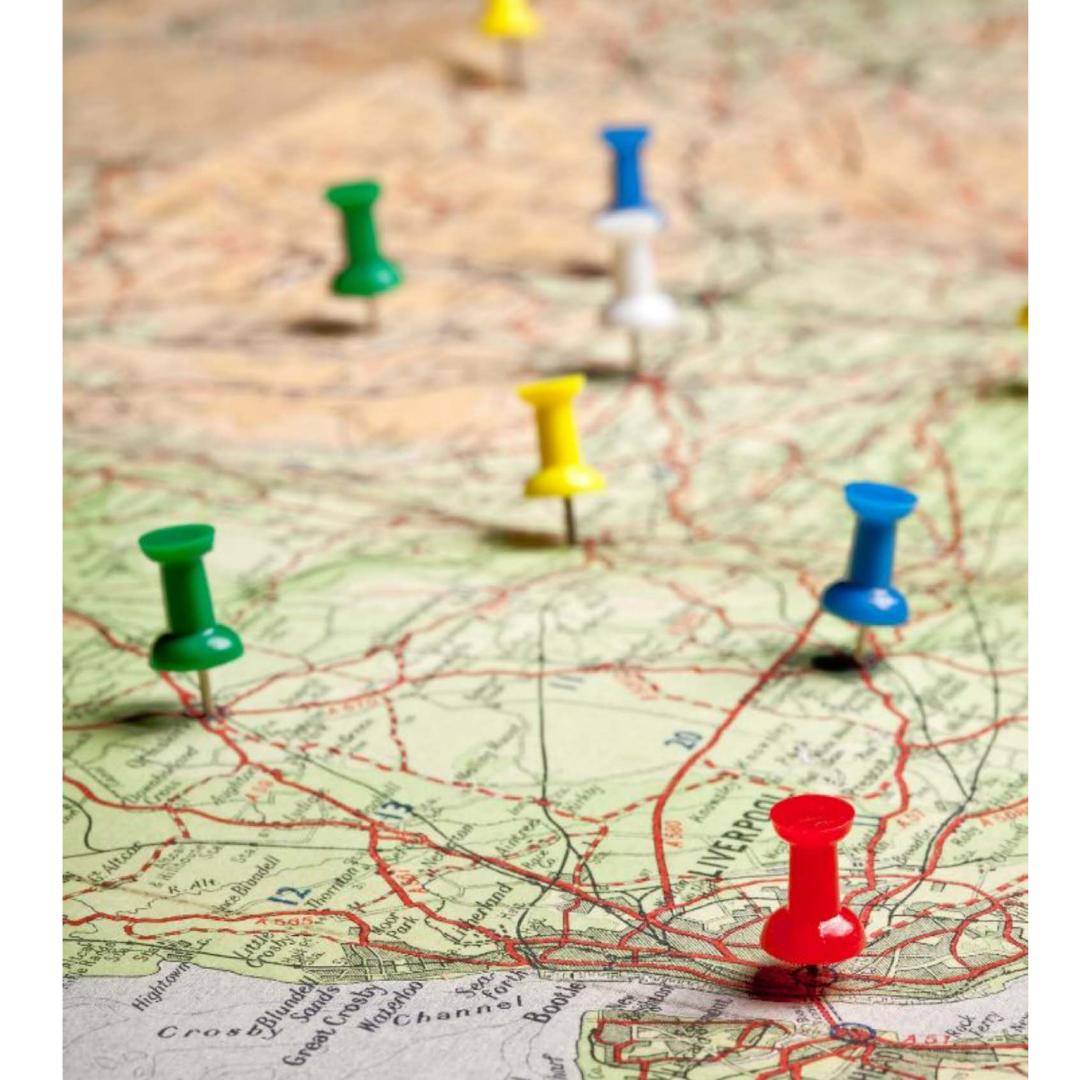
What does your organization need to be more prepared?

Fact #1 This is terrible violence to experience, and hard stuff to dig into.

Fact #2 Seeking help is an amazing act of strength, courage, and resistance.

Our time together...

- The Brain
- The Big Picture
- Partner-inflicted brain injury
- Signs and symptoms
- Misidentification and finally an answer
- Supporting survivors
- Ohio's CARE approach and tools



Our life consists of things...

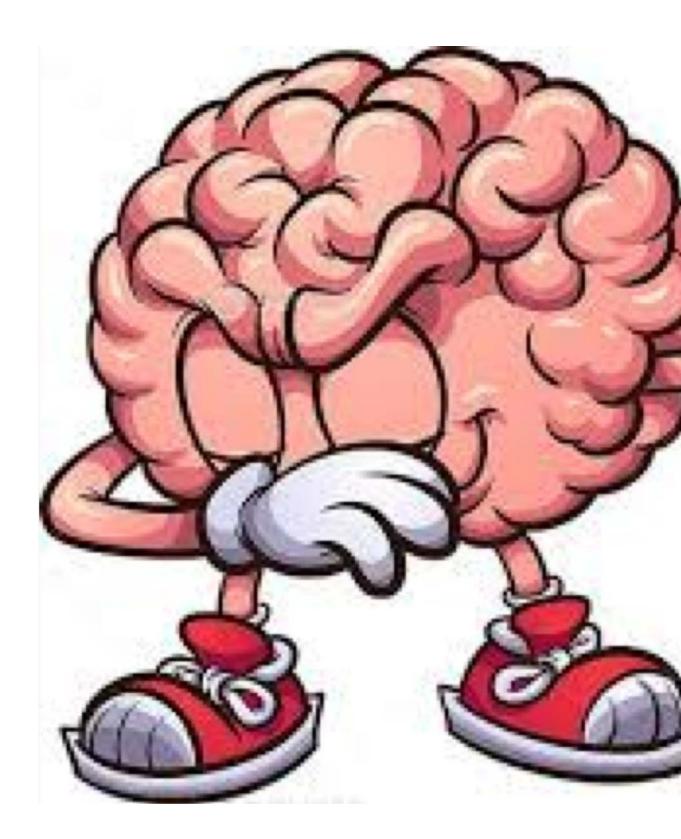
• We want or like to do.

• We need to do.

• We are expected to do.

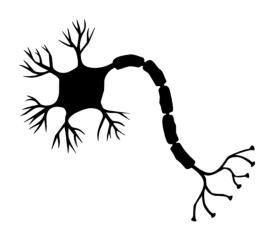


And our amazing brain makes all of that possible.





Basic Brain Organization





Brain Cells = Neurons

Neurons connect



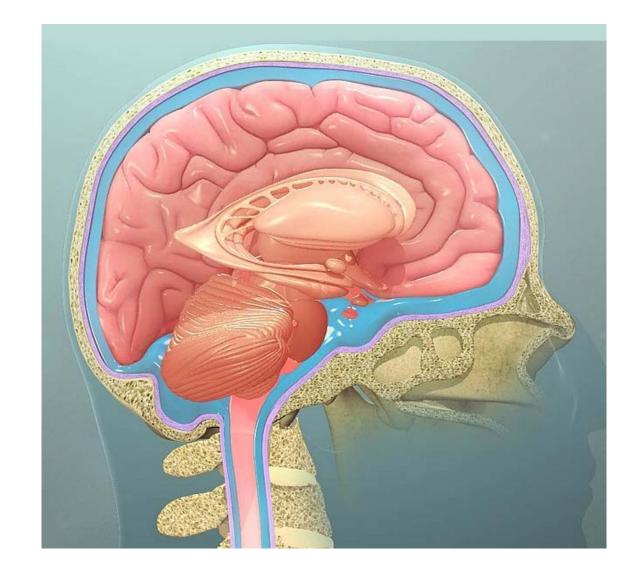
And form efficient pathways

Ahealthy brain is like a city with zero traffic jams



The brain needs nutrients & protection





Blood vessels bring oxygen & nutrients

Protected by the skull, tissues, and fluid

Frontal

Judgement Movement Memory Personality Executive function*

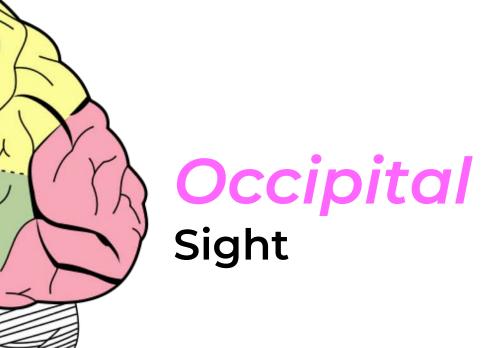
Temporal

Language Hearing Processes and integrates memory Comprehension

Brain Stem

Heart rate Swallowing Breathing

Brain Functions Parietal Sensation



Cerebellum Coordination Balance

Problem solving Time management **Starting tasks** Organizing Planning Managing emotions **Controlling impulses** Social and sexual behavior **Self-awareness** Prioritizing

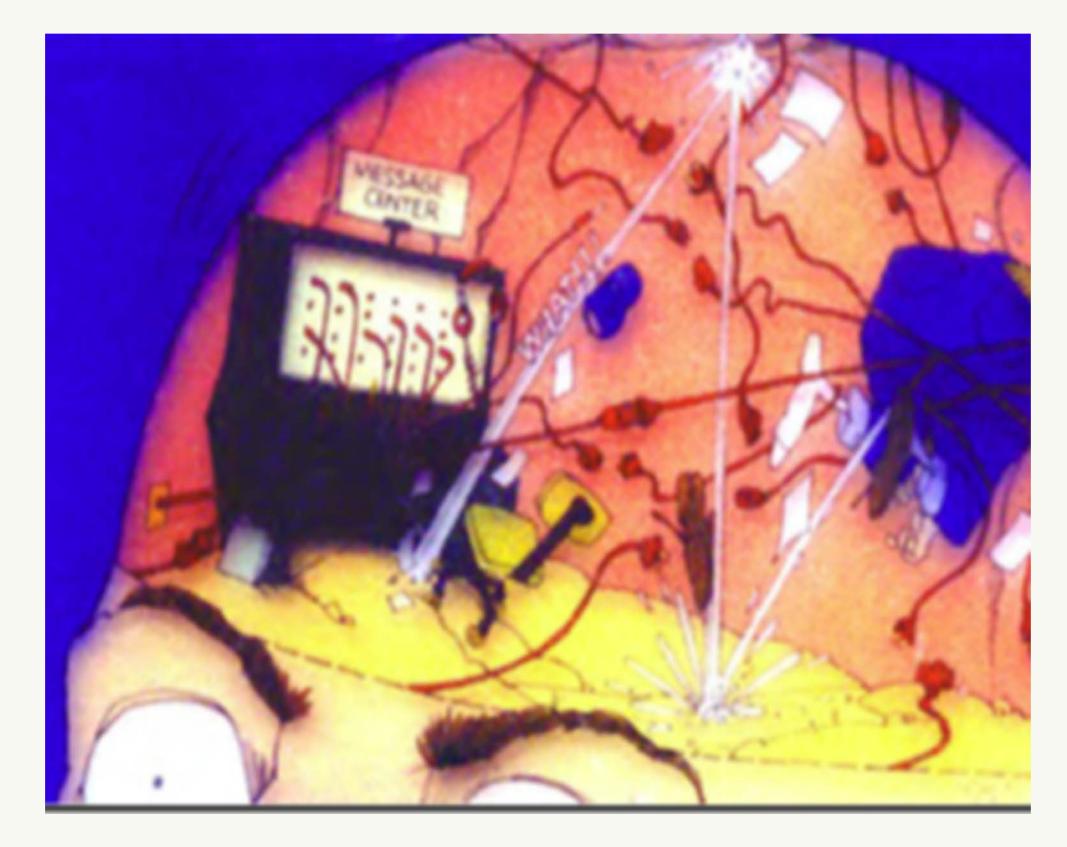
Executive Functioning: Mental skills that include working memory, flexible thinking, and self control Essential for everyday tasks



When the brain is healthy...



When the brain gets hurt...



DOMESTIC VIOLENCE

The dynamics of abuse and the trauma it Causes



What is domestic violence?

A pattern of assaultive and coercive behaviors.



Coercive Control My body My movements My thoughts My feelings about myself and others Mental health Substance use Physical health Reproductive coercion

Gaslighting

That didn't happen. And if it did, it wasn't that bad. And if it was, that's not a big deal. And if it is, its not my fault. And if it was, I didn't mean it. And if I did, you deserve it.



Gaslighting the attempt of one person to overwrite another person's reality.



Trauma is...

An event, series of events, or set of circumstances that overwhelms your ability to cope.

Trauma Impacts us...

With physical, emotional, physiological, and cognitive impacts.

How trauma can affect people

Decreases ability to:

- Manage and regulate feelings
- Self-soothe
- Trust others
- Thoughtfully plan
- Have energy to get things done
- Tell stories

INCREASES CHANCES OF..

- Tension, anxiety, panic, emotional volatility
- Avoidance, constriction, and disassociation
- Use of drugs, alcohol, or other addictions to manage symptoms

Intersections



Traumatic stress

Brain Injury

Historical and cultural trauma

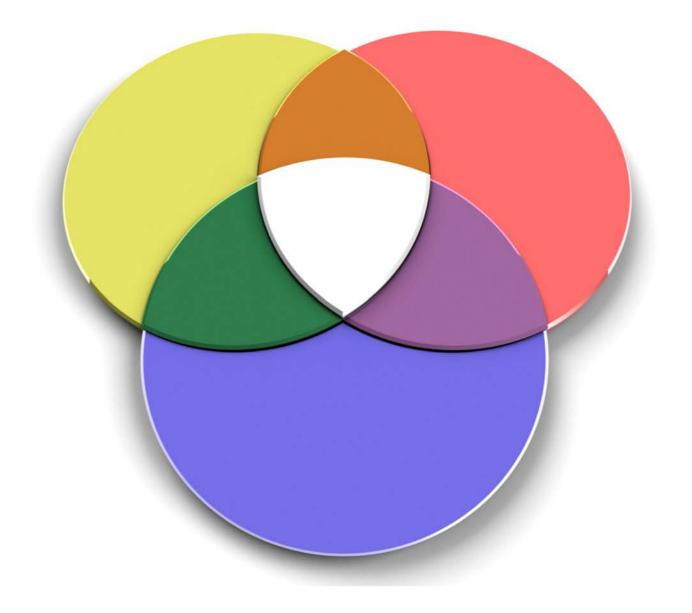
Cultural forces and pressures

Unequal access to resources

Social determinants of health

Stigma

Systemic prejudice, discrimination and oppression

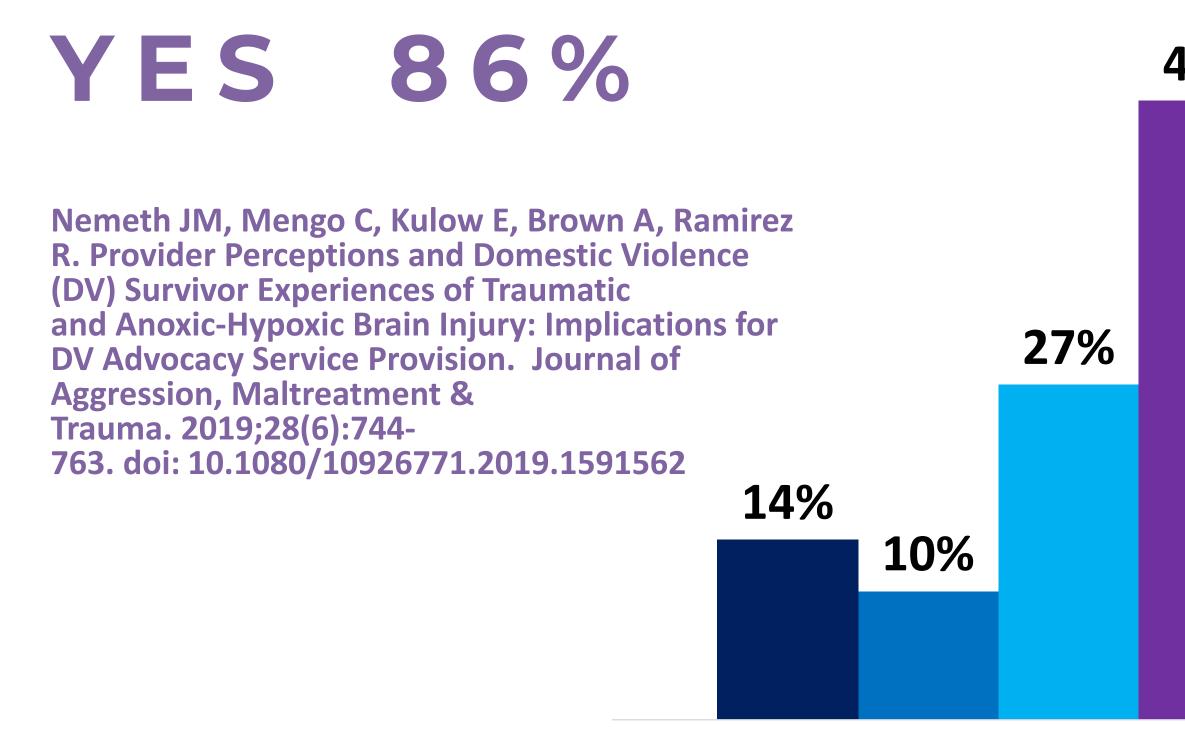


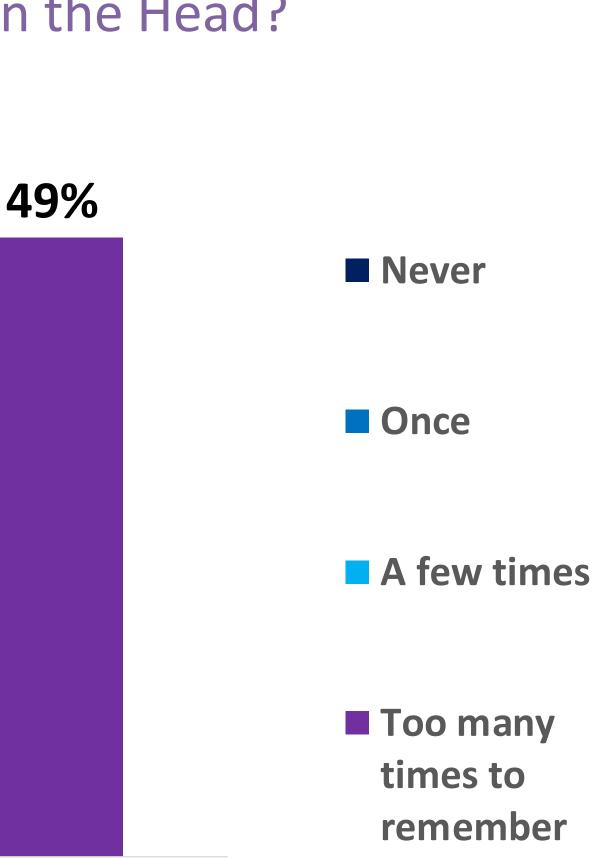
WHAT WE LEARNED **IN OHIO**

https://www.youtube.com/watch?v=s0SJZjlog00



Have You Ever Been Hit or Hurt in the Head?





How many times?

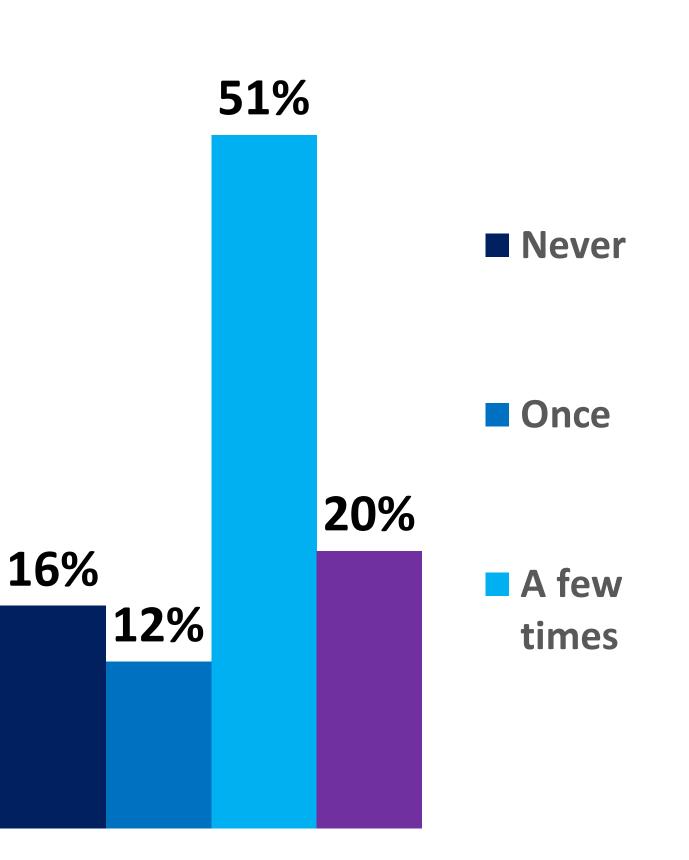
Too Many to Count 49%

Nemeth JM, Mengo C, Kulow E, Brown A, Ramirez R. **Provid Brain Injury: Implications for** DV Advocacy Service Provision. Journal of Aggression, Maltreatment & Trauma. 2019;28(6):744-763. doi: 10.1080/10926771.2019.1591562er Percepti ons and Domestic Violence (DV) Survivor Experiences of Traumatic and Anoxic-Hypoxic

Have You Ever Been Choked or Strangled?

YES 83%

Nemeth JM, Mengo C, Kulow E, Brown A, Ramirez R. Provider Perceptions and Domestic Violence (DV) Survivor Experiences of Traumatic and Anoxic-Hypoxic Brain Injury: Implications for DV Advocacy Service Provision. Journal of Aggression, Maltreatment & Trauma. 2019;28(6):744-763. doi: 10.1080/10926771.2019.1591562



What do you think??

 Brain injury was on the radar for most of the domestic violence service providers we talked to.





One administrator shared:

Staff was not recognizing brain injury.

"I mean, I've been here 28 years and we've truly only had a handful of true TBI clients." One administrator shared:

Victims might be hiding symptoms.

""Victims often try to compensate without telling people what's happening with them, often, you know, try to keep it to themselves or hide it."

Seizures



Staff 1: We have a lot that come with seizures. That's pretty common for us. Staff 2: That really is. Facilitator: How common is that? Staff 1: Oh my, gosh. It seems like a lot more than the general population would be. Staff 2: I think there's been three since I've been here and I started in January, so that's a pretty common thing. Staff 1: I've been here a little over two years, and I think at one point...we had three clients who reported seizures. Interviewer: At the same time?

Staff 1: Yes.

Interviewer: How many beds is this facility? Staff 1: Twelve, maybe fourteen.

What causes concussions or TBIs?

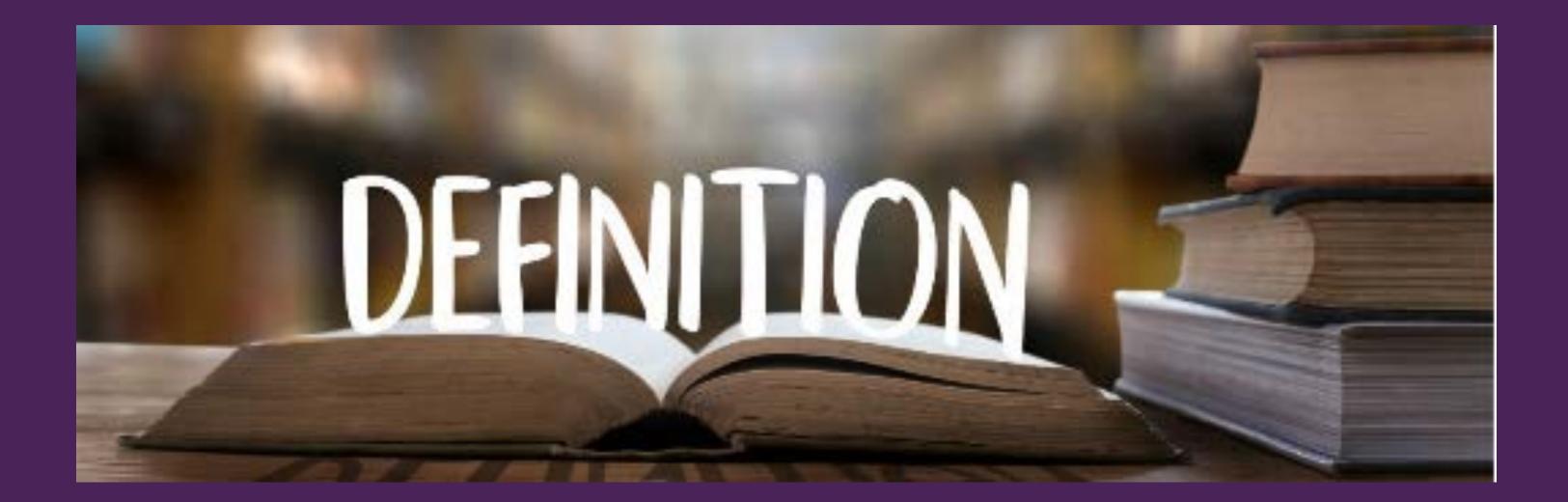
For every] NHL player

5,500

survivors of DV sustain a brain injury each year Brain Injury Caused by Domestic Violence

Multiple traumatic events within an ongoing traumatic environment







Brain Injury Caused By Violence When person's brain is hurt through intentional strangulation and/or blows to the head by another person. This can cause a traumatic brain injury, concussion, or other type of brain injury.

Barriers?

What type of response do people in your agency have when someone comes to services with these characteristics?

What additional barriers do these symptoms create to getting your agency's services?

When the brain is hurt?

- Traumatic Brain Injury (TBI)
- Strangulation
- Changes in Normal Cognitive Function

ΤBI

Traumatic **Brain Injury is:**

ullet

Blow to the head and brain disruption

- Blow, bump or jolt to the head
- Stretches, pulls, and damages tissue lacksquare
- Inflammation causes widespread damage ullet
- Neurons cannot regrow \rightarrow slowly form new ulletconnections
- "When you've seen one brain injury, you've ulletseen one brain injury."

Strangulation

Indicates significant safety and lethality risks

- Pressure is applied to survivor's neck ullet
- Restricts oxygen and nutrients to brain \rightarrow • results in hypoxic-anoxic brain injury
- Causes damage very fast with little • pressure
- Altered consciousness + no access to medical care + lack of screening anywhere
 + lack of visible injuries = minimization & brain injuries go undetected and unidentified

Brain Injury Changes How Survivors Think, Feel & Act

Thinking/ Cognitive



Emotional

Cognitive Symptoms

Survivors may struggle with:

Poor memory

- Poor comprehension lacksquare
- Getting started on tasks
- Maintaining attention \bullet
- Problem-solving lacksquare
- Challenges with risk assessment ${\bullet}$
- Executive functioning

Which may look like:

- "Not following through with plans Not interested or engaged
- •
- They don't care
- They are unmotivated or lazy
- Mentally fatigue easily \bullet
- Missing deadlines, appointments Not completing tasks or forms
- Losing train of thought or not following conversations

Physical Symptoms

Survivors may struggle with:

- Sensitivity to light & sound lacksquare
- Vision problems lacksquare
- Poor sleep quality lacksquare
- Seizures lacksquare
- Headaches
- Dizziness
- Poor balance
- Fatigue ullet
- Difficulty swallowing* \bullet
- Neck pain*

Which may look like:

- \bullet
- hearing \bullet
- \bullet

Pain and discomfort Difficulties falling asleep, staying asleep & waking up Problems with eyesight or Getting easily distracted Difficulties concentrating Feeling overwhelmed Bothered by noise or lighting Tripping/bumping into furniture Too tired to participate in normal activities

Emotional Symptoms

Survivors may struggle with:

- Becoming easily frustrated ullet
- More aggressive lacksquare
- Feeling anger and rage ullet
- Mood fluctuations lacksquare
- More impulsive lacksquare
- Exacerbated mental health challenges
 - Anxiety
 - PTSD
 - Depression

Which may look like:

- thinking

"Non-compliant" Say or do things without Troubles getting along with staff or other residents • Challenging others May not follow directions Talk about hopelessness
Withdrawal or isolation • Threats to harm others or self

PTSD and Brain Injury

PTSD and Brain Injury share the following symptoms:

- Fatigue
- Sleep Problems
- Trouble with Memory and Attention
 - Feeling Depressed
 - Feeling Anxious
 - Irritability
 - Cognitive Problems

Acute and Chronic?

ACUTE CONDITIONS

 Health conditions that happen, heal and go away. Most often it doesn't continue to impact your life.

CHRONIC CONDITIONS

• Health conditions that happen (and sometimes develop over a period of time), heal some, but need to be managed.

Lasting Effects

Mild is still important

75% of BI = mild

Every BI looks & heals differently

Can impact so many different

Multiple Brain Injuries Survivors at greater risk for multiple BI

Compounds symptoms Slows recovery

Recovery after a head injury:

Affected by various factors

- Response after the injury
- Number of brain injuries
- Other bodily injuries
- Psychological factors
- General life stress
- Biological sex-women tend to have extended recovery time

Body and Brain Responses

- Individualized
- Immediate symptoms Right after the injury
- Brain injury symptoms
- Trauma-related symptoms
- Secondary symptoms

Once trying to get back to life

Long term impact

Can last weeks, months, years, or forever

PERSISTENT SYMPTOMS **NO KNOWN CAUSE**

- Physical
- Emotional/Mood
- Sleep Disturbance

Post-Concussive Syndrome

Thinking/Remembering

Addressing Head Injuries

Head Injury impacts survivors' daily activities

And makes it difficult for survivors to take care of themselves & those they care about

Words to Remember

People will forget what you did, people will forget what you said, but they will never forget how you made them feel.

Accommodations

Provides support in a way that takes into account a person's unique needs.

Creates opportunities to address potential barriers to success.

Website

CARE tools at www.odvn.org

Promising Practices on Brain Injury

- Overview of partner-inflicted brain injury
- CARE Promising Practices for Addressing Brain Injury Caused By Violence
- CARE Organizational Promising Practices, **Policies and Procedures**

JUST BREATHE WORKBOOK



Survivor Education: Better understanding & acknowledgement Normalize brain injury

- Key information about lacksquarebrain injury
- Can be used to start a \bullet conversation
- Or can be left out for \bullet survivors

ullet

 \bullet

- \bullet

Addresses:

TBI and strangulation Physical, cognitive & emotional symptoms Next steps

Danger signs and when

to see a doctor

Survivor Tools: Promote wellness & mental health Help with organization and remembering

Just Breathe Invisible Injuries Brain injury basics Promote wellness • & mental health Problems & strategies • Symptom logs Addresses: • \bullet Safety planning • • Coping Goals and planners strategies • • Self care plan • Tips for motion

& relaxation

Advocate Tools: CHATS

CHATS

- Identify possible head injuries by asking about:
- Choking or strangulation
- Hits to the head
- After your head was hurt (alterations in consciousness)
- Troubles a survivor is struggling with
- Severity of injury and impact and desire to seek additional care

Additional questions on:

Suicide Substance use Other health issues

Advocate Tools: Head Injury

Head Injury Accommodations

- Common Brain Injury Accommodations
- Connection challenges
- Physical Health Challenges
- Emotional Challenges
- Thinking/Cognitive Challenges

CARE and Trauma Informed Practices

CARE WORKS AND IMPROVES TRAUMA-INFORMED PRACTICES

in the areas of Head trauma **Strangulation Mental Health Substance Use** Suicide

Because advocates directly address & accommodate brain injury!





Next Steps OHIO'SAFTER VIOLENCE

Collaboration On Strangulation and Traumatic Brain Injury Survivorship



Resources

Especially to Christina Debroski for bringing OT strategies to domestic violence programs

THE OHIO STATE UNIVERSITY

Dr. Julianna Nemeth Assistant Professor, College of Public Health nemeth.37@osu.edu

OCCUPATIONAL THERAPY



Contact Us

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