



MENTAL HEALTH

Current research indicates that IPV survivors' experiences can often trigger a vast array of physical, emotional, and mental health conditions including depression, anxiety, and PTSD, as well as suicidal and homicidal ideations.⁵ Physical interpersonal violence has been directly related to mental health disorders, suicidal behavior, and substance abuse in females more often than males according to a recent study of IPV survivors.³ The World Health Organization reported "intimate partner violence is a major contributor to women's mental health problems, particularly depression and suicidality."⁷

DEFINITION

Mental illness is defined by the American Psychiatric Association as "health conditions involving changes in thinking, emotion, or behavior (or a combination of these)... associated with distress and/or problems functioning in social, work or family activities."¹

PREVALENCE

- 51-91% of women experiencing abuse have PTSD, compared to the general population at 10.4%;
- 35-70% of female IPV survivors experience depression, compared to 12% of the general population, and
- 13.5% of female IPV survivors abuse substances compared to 2.8% of general population.⁶

INTERVENTIONS

- Screen using recommended abuse screening questions – ask each patient, including those with a mental health concerns, and regardless of the absence of abuse indicators.

If patient screens positive:

- Validate patients' feelings. Employ trauma-informed approaches.
- Refer patient to appropriate IPV support for safety planning, counseling, advocacy, legal assistance and support groups, etc.

A word about trauma-informed care and IPV service providers:

While most IPV service providers and advocates are not mental health providers, the majority recognize the lingering effects of current and past victimization, understand the neurobiology of trauma, and employ trauma-informed practices that lessen the likelihood of retraumatization. Agencies may vary approaches (e.g., power and control paradigm, social services models of care, cognitive restructuring therapy, assertive communication, problem-solving, body awareness, education about women's issues, gender socialization, self-esteem building, concrete plan development, trauma therapy, and grief-resolution-oriented counseling).² None of these approaches expressly exclude individuals with mental health concerns.



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RESOURCES

- Maryland Network Against Domestic Violence – for list of IPV victim service agencies in Maryland
www.mnadv.org
- Pro Bono Counseling – Pro-bono counseling for Marylanders with limited resources
http://probonocounseling.org/about_us
- Maryland Community Service Locator – Crisis Intervention – find resources in Maryland
http://www.mdcscl.org/avjsc/csl_hotlines_ci.asp
- National Center on Domestic Violence, Trauma and Mental Health
<http://www.nationalcenterdvtraumamh.org/>
- National Domestic Violence Hotline 24-Hour Hotline 1-800-799-SAFE (7233)
<http://www.thehotline.org/>

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