How the Survey was Developed

In 2014, The Center for Violence-Free Relationships, a domestic violence (DV) and sexual assault service organization, built a network of domestic violence service providers in the state of California through the use of a shared database. This network was developed to help the service organizations share tools and increase their evaluative capacity.

After being in operation over 30 years, many of the organizations had grown tired of mainly offering intervention focused services and felt the need to learn how to better prevent domestic violence. In an effort to pivot to prevention, the organizations wanted to use their shared database to learn more about the history and needs of domestic violence survivors through a statewide survey. The survey was developed with representatives from five of the network members at an in-person meeting in February 2018.

What We Surveyed

A comprehensive 21 question survey incorporating evidence based assessments was developed. The survey is intended to be administered in interview format with adult domestic violence victims while receiving at least their second in-person contact. The survey was administered in English and Spanish.

The survey measures at what age victims were first concerned about an unhealthy relationship and what was the result of that concern. It contains the Adverse Childhood Experiences (ACE) survey. It asks what was the prompt that first brought them to seek domestic violence services. It contains the five Primary Care PTSD Screen questions, and lastly the survey asks the survivors in text boxes to list their strengths and from where do they find support.

During the survey drafting special consideration was given to the effect the questions might have on the respondents. The survey had to be sensitive to the traumas the respondents have experienced, and we had to weigh the need in the field for data on domestic violence survivors.

Who Administered the Survey

The survey was administered for one quarter in the spring of 2018. Service providers in all seven network partner organizations administered the survey. The network partners include: The Center for Violence Free-Relationships in Placerville, Tahoe Safe Alliance in North Lake Tahoe, Rainbow Services in San Pedro, WEAVE in Sacramento, One Safe Place in Redding, RISE in San Luis Obispo, and NEWS in Napa.

Domestic Violence, PTSD, and Early Childhood Experiences: What Service Providers Need to Know

- Domestic Violence Victims are almost 5 times more likely to have experienced complex childhood trauma than the original ACE Study respondents - Page 2

- There is at least a 19 percentage point increase in every childhood trauma type for domestic violence victims - Page 2

- Domestic Violence Victims are 14 times more likely to have 6 or more ACEs than the general population. 6 or More ACEs is associated with a decrease in lifespan by 20 years. - Page 3

- 69% of respondents were concerned about an unhealthy relationship before the age of 25 - Page 3

- 1/3 of survivors mention children when describing their motivation for seeking services. - Page 3

- 70% of domestic violence victims probably have PTSD at the time of accessing domestic violence intervention services - Page 4
Domestic Violence Victims are almost 5 times more likely to have experienced complex childhood trauma (score of 4 or more) than the original ACE Study respondents.

The Adverse Childhood Experiences Study assessed the rates of exposure to ten different types of childhood trauma in over 17,000 Kaiser Patients. This study was able to "repeatedly reveal a graded dose-response relationship between ACEs and negative health and well-being outcomes across the life course." Information on the original ACE study can be found at on the CDC's website at https://bit.ly/2bE4USy. Survey respondents were asked to complete the ACE questionnaire as a part of the survey. In reviewing the ACE score data for the 520 respondents, there were some significant findings in this data:

- Exposed to physical domestic violence as children. This could show that childhood trauma is more predictive of later becoming a victim of domestic violence than actual exposure to domestic violence. It is important to note that the ACE question is only about physical domestic violence and does not take into account the trauma related to repeated exposure to verbal and emotional domestic violence.
- The two types of trauma with the largest variance between the original ACE study and this survey are Emotional Abuse and Emotional Neglect with at least 40 points of difference. This might point to the fact that early emotional abuse and neglect are the highest risk factors for later domestic violence victimization. This finding is significant when it comes to the intervention and prevention of domestic violence. Children's domestic violence prevention and intervention programs are typically focused on the domestic violence. What would happen if instead programs targeted all children dealing with any trauma exposure?

<table>
<thead>
<tr>
<th></th>
<th>Original ACE Study</th>
<th>Domestic Violence Survivors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Abuse</td>
<td>11%</td>
<td>58%</td>
</tr>
<tr>
<td>Physical Abuse</td>
<td>28%</td>
<td>47%</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>21%</td>
<td>41%</td>
</tr>
<tr>
<td>Emotional Neglect</td>
<td>15%</td>
<td>55%</td>
</tr>
<tr>
<td>Physical Neglect</td>
<td>10%</td>
<td>29%</td>
</tr>
<tr>
<td>Parental Separation</td>
<td>23%</td>
<td>58%</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>13%</td>
<td>37%</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>27%</td>
<td>55%</td>
</tr>
<tr>
<td>Mental Illness</td>
<td>19%</td>
<td>43%</td>
</tr>
<tr>
<td>Household Member in Prison</td>
<td>5%</td>
<td>23%</td>
</tr>
</tbody>
</table>
Domestic Violence Survivors are 14 times more likely to have 6 or more ACEs than the general population. 6 or More ACEs is associated with a decrease in lifespan by 20 years.

Survey respondents were asked, “When was the first time you were concerned about an aspect of an intimate relationship being abusive? How old were you at the time?” Two thirds of respondents stated they were children or young adults at the time, and almost half of respondents said that at that first realization they didn't do anything about it. One respondent said, “I didn’t do anything about the relationship because at the time it seemed normal.” This same normalization was repeated by multiple respondents.

There was a large variation in the number of years since their first realization and their current age while accessing domestic violence services. It had been less than 10 years since this first concern for only 38% of the respondents.

Respondents were asked, "What primarily prompted you to seek domestic violence services the first time?" The responses varied and a clear trend didn’t emerge. However respondents were also asked, "What was it about this primary incident that motivated you to seek domestic violence services?" In reviewing these text responses, one third of the responses mention their children.

For one survivor her motivation for seeking services was "for my children, I was not about to let them go through all the domestic violence I have gone through since I was a child."
70% of domestic violence victims probably have PTSD at the time of accessing domestic violence intervention services, according to the PC-PTSD-5 at a follow-up in-person contact.

Respondents were asked to complete the five question Primary Care Post Traumatic Stress Disorder Screen developed the U.S Department of Veterans Affairs. More information on the screen can be found at https://bit.ly/2H5zS4f. It is important to note that this survey was not administered to domestic violence victims during their first in-person contact with a domestic violence agency, but instead at a second or later contact. Many of the respondents completed the survey months into their utilization of domestic violence services. Despite this later assessment, 70% of respondents had at least three of the five PTSD symptoms. The prevalence of PTSD in VA primary care patients was 24.5%. Domestic violence victims were 2.8 times more likely to have PTSD than the VA primary care sample. With such high rates of PTSD, should domestic violence organizations dedicate more resources to mental health services? Should advocates spend more time on coping skills even if clients present with urgent needs like housing and safety?

Survey respondents were asked, “What do you consider your positive personal strengths?” These text responses were analyzed for common themes and key words. The word cloud to the left shows the themes with larger words meaning more representation in the answers.

“I am hard working. I don’t give up. I thought I wouldn’t be able to do it on my own because that is what he made me believe but yet here I am making it on my own.”

Survey respondents were asked, “With whom or where do you find support?” These text answers were also analyzed for common themes and key words. The word cloud to the right shows the themes with larger words meaning more representation in the answers.

“I find support here at [the domestic violence agency] because they accept me even if I have made mistakes. I feel like they do not judge me so I try my best not to disappoint them.”

The network of domestic violence service providers that developed this survey will be meeting in June 2018, to develop a Theory of Change on how to use this data to make a pivot from intervention to prevention in domestic violence organizations. This Theory of Change and the interventions, indicators, and outcomes associated with it will then be tested across the seven network partners in the fall of 2018 and refined in January 2019. Look for the report on this project at The Center’s website www.thecenternow.org in March 2019.