

A Life Course Framework for Preventing Domestic Violence

Wednesday, January 22, 2020

11 AM - 12:30 PM PT/2 PM - 3:30 PM ET

AKJ: Hi everyone! We will be getting started in about 10 minutes!

AKJ: Welcome everyone!

TV: You can download the PowerPoint slides for this session re.: http://www.preventconnect.org/wp-content/uploads/2019/12/A-Life-Course-Framework-to-Preventing-Domestic-Violence-slides.pdf.

TV: For audio over the phone, please call 866-866-2244, passcode 9053509#.

TV: Contact Adobe Connect support at https://helpx.adobe.com/adobe-connect/connect-support.html.

TV: 866-866-2244, passcode 9053509#.

TV: CDC Violence Prevention technical packages: https://www.cdc.gov/violenceprevention/pub/technical-packages.html.

TV: A Life Course Framework for Preventing Domestic Violence: https://blueshieldcafoundation.org/publications/report-life-course-framework-for-preventing-domestic-violence.

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MO: For the rates of DV, what types of DV would it include, only IPV or any type of DV? And is it any kind of abuse including emotional, verbal, financial, sexual., physical, etc. or is it only specific types of DV?

WC: Does witnessing parental IVP as a child only increase chances of committing violence as an adult? Or does it also portray the message that being abused is normal, and raise the risk of victimization as an adult?

DL: He is referring to the IPV measured by NISVS https://www.cdc.gov/violenceprevention/datasources/nisvs/index.html.

EF: being exposed to DV as a child increases likelihood of violence perpetration AND victimization.

DL: @Whitney - we will be talking about this very soon.

MO: Thank you!

TV: Text Chat Question: What risk factors for perpetration are you addressing in your prevention work?

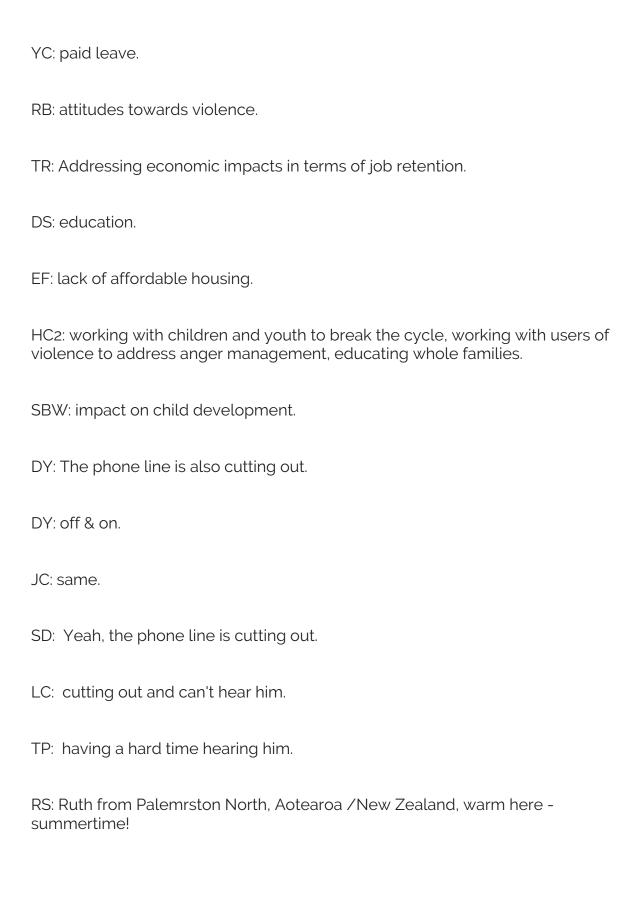
AF: audio regularly cutting out for me. Others?

JP: Yes, cutting out.

EF: built environment, economic mobility, and neighborhood cohesion, supporting nurturing fatherhood.

DH: yes, audio in and out.

TV: The phone line may work better for those with audio cutting out: 866-866-2244, passcode 9053509. VK: risk factors include: anger issues. AK: Addressing harmful cultural norms through community connection. YK: lack of awareness in youth. LM: childhood exposure to inter-parental violence and experiencing abuse. AF: thanks tori. CS: talking about the cycle of violence and reflecting on impact on self and wishes to reduce impact on others. AB: connectedness to a caring adult. MC: we are often looking at early lifetime exposure, substance abuse, lifelong violence. SA: I inquire about violence when I hear about romantic relationships in conflict. AB: poor neighborhood support and cohesion. LC: rigid gender norms. LM: cultural norms and relationship expectations. VK: consumption of alcohol.



JL: Cutting in and out pretty bad. LM: Is this only considering physical abuse or other forms as well? TP: is there research on children witnessing/being exposed to other types of parental abuse (emotional, psychological, etc)? TV: Text Chat Question: What ecological risk factors for violence do you see in your communities? MC: victimization by peers, antisocial peers, peer aggression, parent-child boundary violations seem most prevalent in our community. EWR: gang associations. JC: bullying. WC: college town, a lot of party/social pressures to enter dangerous situations and to stay in them. AE: gang / gun violence. TP: cultural norms. AZ: Mental illness of both parents and child. TAI: Military towns and PTSD. DR: homelessness. SBW: high rates of poverty and unemployment; community violence.

KN: poverty and generational DV.

SBW: How widely disseminated are those findings in law enforcement circles if you know? And what has been the result in mandatory arrest policies?

MG: I did not catch what RCT's are...sorry.

LCP: RCT=randomized control trials.

MG: Thanks!

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AZ: missed everything about blind spots of conjoint trx.

BMcG: We get that a lot in faith-based communities - those seeking help want the marriage to stay intact and the violence to end

WC: How can we tell if the victim truly wants to be in couples therapy, or if they're being forced to say that due to coercion and gas lighting...?

BW: Does anyone know of any domestic violence shelters that have separate facilities to provide and oversee programs for abusers to provide more intensive and individual therapy for abusers?

TV: Text Chat Question: What policies, practices, or approaches of deep prevention do you see in your work? How can these elements help in building partnerships and breaking silos?

MG: Will we also have access to the text chat information?

TP: I run the parenting program in the non-residential side of the dv shelter where I work. I am curious about infant mental health and increasing secure attachments between mother/baby dyad as a protective factor for kids exposed to DV.

LM: We are shifting from a sprinkling approach to a saturation approach; focusing on 5 communities rather than our 27 in the service area.

AT: forming programs for youth focusing on healthy relationships.

SBW: Our community here in Durham has been developing more trauma-focused and client-driven interdisciplinary solutions to working with DV survivors and their families.

TV: Yes, we will publish the text chat on the website and you will receive an email when the recording and the text chat are available.

BW: If anyone has any information about my question you can email me later at <u>brigittew@myharmonyhouse.org</u>.

SD: intergenerational community mobilization.

VK: We do Community Chai as an outreach for South Asian Population (Chai literally means tea).

AK: I second what Sarah said! Community action.

BW: We are doing green dot with our college campuses and have a prevention coordinator at our shelter now as well.

WC: Excited to bring this info to TPO office, which has a lot of exposure to the abusers.

TV: Text Chat Question: How will you apply key findings from "A Life Course Framework to Preventing Domestic Violence" to your work?

SBW: Sharing the findings about mandatory arrest policies with my colleagues in law enforcement and legal circles

CB: We work with Pasifika communities to co-develop leaders that work with the whole community.

ER: I can explore the possibilities with the Child Life SW at the hospital I work with

TR: Thank you for this valuable information

CB: Pasifika = Pasific Island ethnicities

MG: Develop needs assessment for our service area and formalize strategic planning for capacity building.

CB: Thank you!

AG: Thank you

JC: thank you - will we get confirmation of attendance

TP: Thank you for the valuable information! :)

SBW: Thanks for another great presentation!

EO: thank you.

GR: thank you!