WIDENING THE LENS: The Bi-directional Pathways between Domestic Violence and Social Factors

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JSI Research & Training Institute, Inc. is a research and consulting organization dedicated to promoting and improving the health and well-being of underserved and vulnerable people and communities in the United States and across the globe.

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Over 12 million people in the United States experience physical violence, rape, or stalking at the hand of an intimate partner every year. Domestic violence (DV) leads to multiple negative outcomes for survivors that extend beyond the immediate physical impacts to include long-term physical and behavioral health conditions as well as adverse social outcomes. DV is increasingly viewed as a critical social issue based on a greater understanding of its prevalence and evidence of its connection to a range of other social factors.

However, the relationship between DV and other social factors is often considered from a narrow perspective that doesn’t reflect the real-world interaction between issues, and as a result, may encourage responses that are similarly narrow and lacking emphasis on prevention. This brief provides a synthesis of the research underlying these relationships, a discussion of this web’s implications, and a series of recommendations for decision makers, policy developers, and organizational leaders working to prevent DV in their communities.

A Focus on the Individual Woman’s Perspective

Violence may occur in any type of intimate relationship. Even so, abuse by men against women remains most prevalent; as a result, the majority of available research cited herein focuses on the perspective of women in heterosexual relationships. However, while more limited in availability, research suggests that similar risks and outcomes exist in all types intimate partner relationships.

Additionally, DV affects whole families as well. Children who are exposed to DV experience a wide range of negative health, educational, and other social outcomes and are at greater risk of experiencing violence in their own future relationships. Social factors such as housing insecurity also have effects that ripple out beyond individual survivors to their families and communities. However, in order to maintain a research focus, this brief looks primarily at the impacts on individuals with the hope that readers will consider the broader, real-world implications beyond the data.

Exploring the Web of Bi-directional Pathways

The majority of existing literature focuses on the relationship between single social factors and DV and examines this relationship’s causation in one direction, without recognizing that DV can be both a risk factor and an outcome. In reality, the relationships between DV and social factors are complex, interacting with one another to form a web of links to and from DV and to overarching structural factors. For illustrative purposes, the figure on page 2 and the following discussion focus on economic insecurity, housing insecurity, and substance misuse given the frequency with which these factors emerge in the research base, but this is by no means an exhaustive review of all DV-related factors.
CAUSE & EFFECT: The Interconnection of Social Issues and Domestic Violence

One in three women will experience domestic violence (DV) in her lifetime. DV does not occur in isolation; pathways exist to and from a whole spectrum of social issues. Individuals, families and communities experience these issues as deeply entwined and simultaneous, which calls for an integrated approach to addressing DV. The graphic below depicts three pathways from a much broader set of social issues.

Broader structural factors, such as discriminatory policies and cultural norms, shape the expression of these social issues and their relationship with DV. This results in disparities and inequities based on race, ethnicity, geography, socio-economic status, sexual identity, among many others. It’s time for leaders from multiple sectors to look at the whole picture and work together to develop bold response strategies that account for the complexity and scale of the issues.
ECONOMIC INSECURITY

Economic insecurity increases women’s risk of experiencing DV, and DV also creates and compounds situations of economic insecurity.

Economic Insecurity → DV

DV is three times more likely to occur among couples with high levels of financial stress.\(^8\) Longer periods of male unemployment, which increase couples’ financial insecurity and worsen financial stress, are also associated with an increased risk of male-to-female partner violence.\(^9\) Economic insecurity also increases the risk of continued DV; three in four survivors will stay with abusive partners out of financial necessity.\(^10\) Economically insecure women often feel unable to leave abusive relationships because they may rely on their partners for financial contributions to the household and cannot afford to lose their jobs.\(^11,12\)

DV → Economic Insecurity

DV reduces women’s ability to build and maintain economic independence, trapping them in situations of economic insecurity. DV is a primary reason for unemployment among survivors, almost all of whom report absenteeism, tardiness, and/or eventual job loss because of worsened job performance due to abuse.\(^13,14\) Annually, in the U.S., survivors lose a total of eight million days of paid work, or the equivalent of about 32,000 jobs, as a result of abuse.\(^15\) Survivors who work in supportive workplaces are still likely to leave their jobs because of the trauma they experience following DV.\(^16\) Additionally, virtually all DV survivors experience economic abuse, i.e. the control of their finances by their abusive partners.\(^17\) Abusive partners also limit survivors’ access to personal advancement, such as education or employment opportunities.\(^18\) Without sufficient income or economic freedom, survivors often find themselves with limited ability to escape their abusers.

HOUSING INSTABILITY

Women who are housing insecure face an increased risk of DV, and DV is a leading cause of housing instability among survivors.

Housing Instability → DV

Regardless of their prior history of DV, those who experience housing instability face a higher risk of rape, physical violence, or stalking by a partner than those who are housing secure.\(^19\) Homeless women are especially susceptible to DV and are more likely than homeless men to experience DV and up to four times more likely than stably housed women to experience violence in general.\(^20\) A key challenge survivors encounter is finding safe and affordable housing, and a third of survivors return to an abusive relationship because they cannot find housing.\(^21,22\) While women may seek safety after
experiencing DV by turning to shelters, women will leave abusive partners an average of seven times before permanently leaving the relationship.\textsuperscript{23} Returning to an abusive environment further increases women’s risk of experiencing violence, in some cases more so than if they had never left.\textsuperscript{24}

**DV → Housing Instability**

As many as 57\% of all homeless women report that DV was the immediate cause of their homelessness, and three out of four survivors experience the loss of a home or car because of DV.\textsuperscript{25,26} Abusive partners ruin survivors’ rental histories by damaging property, instigating repeated police involvement at the home, and/or violating lease and voucher policies. Survivors often face housing discrimination and can lose their subsidized, affordable housing because of abusive partners’ behavior.\textsuperscript{27} Survivors are twice as likely as non-survivors to experience identity theft, which can ruin their credit and create challenges in the search for safe housing, even long after experiencing DV.\textsuperscript{28,29} While many survivors will turn to emergency shelters or transitional housing programs to seek safety from their abusers or from the loss of a home, shelters do not have the resources to meet the needs of every survivor. Over two-thirds of the service requests shelters cannot meet are for housing, creating a significant barrier to regaining safe housing away from an abusive partner.\textsuperscript{30}

**SUBSTANCE MISUSE**

An estimated two-thirds of all DV incidents involve substance use by at least one person in a relationship, and experiencing DV increases the risk of future substance use among survivors.\textsuperscript{31,32}

**Substance Misuse → DV**

Substance use may precipitate and/or exacerbate violent behavior among abusive partners and spur episodes of DV. Men with alcohol use disorders are two to four times more likely to abuse their partners than men without these disorders, and same-day alcohol use by men is associated with 20\% of all DV incidents.\textsuperscript{33,34} Additionally, same-day heavy substance use by men is associated with an eleven-fold increase of DV perpetration.\textsuperscript{35}

Substance use among women increases their odds of experiencing DV; for example, women who frequently use marijuana or crack are more than four times as likely to experience DV than women who do not partake in frequent drug use.\textsuperscript{36,37} This relationship may exist, in part, because substance use can weaken women’s ability to detect partners’ escalating language or behaviors and to take steps to protect themselves from subsequent abuse.\textsuperscript{38} Survivors with substance use disorders face added challenges in seeking and receiving DV support. Survivors who
use substances may be hesitant to involve authorities for fear of legal repercussions, including arrest and loss of child custody. Some crisis centers and DV programs have restrictions in place that prohibit them from serving survivors who use substances, further reducing access to critical resources. With few places to turn, women who use substances are at greater risk of repeat violence.

**DV → Substance Misuse**

Survivors are six times more likely to develop substance use disorders than women who have not experienced DV and up to 90% of women with substance use disorders have previously experienced DV. Substance use coercion by abusive partners is common, with up to two in five survivors reporting experiencing this coercion within violent relationships. Survivors often develop various symptoms of trauma, including physical pain, sleeping disorders, and mental health disorders. To help manage trauma, they may turn to legal, illegal, and prescribed substances as a coping mechanism, which increases the risk of developing long-term substance use disorders.

**Several of Many: No Pathway Exists Alone**

The pathways above are described in isolation to illustrate the strength of their bidirectional relationships with DV; however, in reality these pathways are intertwined with one another. Housing insecurity, for instance, is associated with negative employment outcomes and risk of substance use; while unemployment, underemployment, and substance use are all causes of housing insecurity. Similarly, substance use

**Refocusing the Lens: Social Factors in a Broader Ecological Context**

The social factors identified in this brief are deeply embedded within a larger context shaped by cultural, historical, and political forces such as racism, sexism, discrimination, and social norms. As a result, DV disproportionately affects certain populations such as women of color: DV is three times more likely to occur within African American and Latino relationships than white relationships. Inequities perpetuate these disparities, including but not limited to: discriminatory housing policies that lead to housing insecurity and racially biased educational, employment, and criminal justice policies and practices that disparately affect economic opportunity (e.g., women of color are more likely to be arrested than white women, leading to criminal records that stifle economic opportunity and increase DV risk). Differential access to services and bias among providers leads to underutilization of services and unequal treatment of women of color both prior to and following DV episodes when compared to white women. In order to understand the relationships between DV and social factors and effectively intervene, this broader context must be carefully considered.
is associated with both negative economic and housing outcomes. Therefore, it is important to consider these factors together given that they exist simultaneously in the real world. Both prevention and response strategies will be more effective by considering the multiple needs of survivors.

**Complex Issues Require Comprehensive Solutions: Achieving a Wider Approach**

Considering the larger context in which DV and related social factors exist is critical in order to develop responses to DV that are commensurate with its scope and systemic nature. Responding to individual episodes of DV is not sufficient to create change at a population level; instead, investments must be made in the implementation and evaluation of comprehensive approaches that involve multiple sectors working both to provide support for survivors and to address the social factors that increase their risk of DV. Some key action steps toward this type of comprehensive approach include:

- **Develop partnerships:** In order to address the interplay of multiple issues, organizations and government agencies that work on DV and related factors should initiate new cross-sector partnerships. Partners should start by reflecting on shared outcomes and clients and a commitment to testing new approaches together.

- **Share data:** There are numerous, valid concerns about collecting and sharing sensitive information related to DV survivors. Yet without an accurate picture of the scope of the issue and experience of survivors, generating political will to address the issue and to design approaches that take best advantage of existing resources is difficult.

- **Identify focused leadership:** To move the needle on complex social issues, committed leadership can create a venue for collective focus and decision making and hold parties accountable for following through on commitments.

- **Identify and secure flexible funding:** Existing categorical funding does not allow for the sort of nimble and nuanced response necessary for cross-sector collaboratives. In the same way that multiple funders, including health care, have been pooling and aligning funding to address homelessness and increase affordable housing, funding from multiple sources that supports collective response would accelerate efforts to reduce rates of DV.
Support research and evaluation: Numerous gaps remain regarding what is known about the intertwined, bi-directional pathways between DV and social factors. In particular, research and evaluation is needed that clarifies the complex interplay of multiple social factors and what actually works at a community scale to prevent DV.

Engage survivors and the community: Any effort to develop a cross-sector response to the complex factors related to DV should prioritize the meaningful engagement of survivors, their families, and communities. This is critical for truly understanding the issues and building long-term commitment to change at all levels.

Conclusion

It is natural to consider domestic violence as an event or series of events that occur between individuals. However, taking that portrait perspective leads to focusing on after-the-fact responsive strategies and misses evidence of the patterns and relationships between DV and other social factors such as economic insecurity, housing instability, and substance misuse. Taking a landscape perspective, looking through a wider lens, facilitates seeing complicated causal pathways and developing the types of comprehensive strategies that address not only the violence but also social factors that are closely interrelated with violence in the real world. The research exists to establish those relationships, and intervention and investment strategies that reflect a wider-lens perspective need to be further developed, evaluated, and scaled-up when successful.
CASE STUDIES

Moving from Single- to Multi-Issue Approaches: Examples from the Field

Below are short descriptions of initiatives that are currently applying cross-sector collaborative principles in their approaches to addressing DV and related social issues.

STRENGTHENING HOUSING AND ECONOMIC SECURITY TO PREVENT RE-VICTIMIZATION: DOMESTIC VIOLENCE HOUSING FIRST

The District Alliance for Safe Housing (DASH) program in Washington, D.C., implements the Domestic Violence Housing First (DVHF) model, which focuses on getting survivors into stable housing as quickly as possible following an episode of DV, as well as providing them with economic resources that enable them to maintain their financial security. DASH collaborates with over 24 different partners throughout the area to provide DV survivors with a continuum of resources. Partners include local housing facilities, farmers’ markets, restaurants, service and social clubs, and other community-based organizations. Through these partnerships, DASH has been able to secure resources for survivors whose credit and rental histories have been damaged because of DV and provides access to a number of safe housing options, including long-term apartment-style shelter and transitional-to-permanent housing. Survivors also have access to DASH’s flexible funding program and can use these flexible funds to cover an array of needs, including childcare, transportation, costs associated with custody hearings, moving needs, and more. Among 55 survivors who received flexible funds, at the six month follow up:

- 100% felt “better off” after going to DASH for funds
- 94% were housed, and among these, 76% up-to-date on rent
- 91% reported experiencing no further domestic violence
- 90% reported feeling “more hopeful” about the future after going to DASH

Similar DVHF models are being implemented across the country in places like Washington, Oregon, and California. For additional information on DASH, visit: https://www.dashdc.org/

ESTABLISHING SECURITY AND SELF-SUFFICIENCY: NORTH SAN DIEGO COUNTY’S COMMUNITY RESOURCE CENTER (CRC)

With a focus on ending hunger, homelessness, and domestic violence in its community, CRC provides numerous services to women and their families that help them pursue safety, stability, and self-sufficiency. In partnership with community organizations, corporations, governments, schools, and volunteers, CRC offers a range of services to women at risk of DV and survivors including emergency shelter, transitional housing, case management,
counseling for women and their children, legal advocacy, job assistance, and tax assistance, among many others. As a direct result of CRC efforts from 2016-17:

- 173 individuals found shelter through CRC programs
- 96% of those in shelter did not return to their abusers
- 86% of program participants increased or maintained their incomes
- 87% of survivors who received counseling had reduced symptoms of depression and anxiety

CRC works in partnership with multiple, diverse sectors in San Diego County to provide comprehensive, effective services to all community members, including those affected by DV. For additional information on CRC, visit: http://crcncc.org/

AN EMERGING INITIATIVE: BUILDING RECOMMENDED PRACTICES AROUND SUBSTANCE USE DISORDERS FOR SERVICE PROVIDERS IN OHIO

Funded by Ohio State University's (OSU) Opioid Innovation Fund (OIF), a team of OSU researchers and the Ohio Domestic Violence Network (ODVN) are working to understand the challenges that DV residence programs face in providing services to survivors with opioid use disorders. The university-community partnership is conducting a needs assessment that will engage 60 DV agency staff and 150 survivors through a combination of focus groups and phone interviews. They seek to understand the challenges that DV residential program staff face and the support they need when serving survivors with opioid use disorders. This research will also explore the differences in opioid use and overdose experiences among diverse Ohio settings and examine prevalence among survivors in residential programs. This cross-sector partnership will offer service providers with key insights on effectively supporting survivors with needs across health care, residential, and related sectors, and addressing their opioid burden, paving the way for future initiatives working to address the multiple social factors shaping women’s lives so they can access adequate care.

For additional information on OSU's OIF, visit: https://oaa.osu.edu/opioid-innovation-fund
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