Intimate Partner Violence and Traumatic Brain Injury

Traumatic brain injury among survivors of intimate partner violence has been called a “secret epidemic”. Up to 92% of victims of relationship violence suffer physical injuries to the head, neck or face during an assault according to several studies, including one recently published in the Journal of Forensic Nursing. Almost half report losing consciousness. Many survivors of intimate partner violence also report being strangled – another possible cause of brain injury.

As many of 90% of women abused by their partners who seek help at hospitals or transition houses exhibit symptoms of concussion. A concussion is a type of brain injury caused by a blow or jolt to the head, or by a hit to the body that causes the brain to move rapidly back and forth within the skull. Hitting up against the skull can cause damage to the brain tissue and tearing of blood vessels.

Traumatic brain injury (TBI) can be caused by:

• Forcefully striking someone on the head, especially with a hard object
• Slamming someone’s head against something
• Pushing someone to cause them to fall
• Violently shaking someone back and forth
• Strangling someone
• Forcing someone under water, or forcing liquid into them (cutting off oxygen to the brain).

My mother never played a violent sport or fought in a war. But the assaults she endured on her head and body were at least as acute as those experienced by athletes and soldiers, and the effects were the same.

Maria E. Garay-Serratos
Chief Executive of Sojourner Center

Traumatic brain injury can have wide-ranging physical and psychological effects. Some signs or symptoms may appear immediately after the traumatic event, while others may appear days or weeks later. There are no clear diagnostic tests for TBI, and doctors typically rely on the patient’s description of her symptoms to make a diagnosis.

Common symptoms include:

• Headache
• Confusion
• Memory loss
• Fatigue
• Nausea
• Depression
• Anxiety
• Seizures
• Blurred vision
• Sleep disturbances
• Difficulty concentrating
• Mood changes
• Difficulty controlling emotions

Many of these injuries may not be immediately apparent, and often go unreported or undetected. Clients should always be advised to see a doctor after a serious blow to the head, after being violently shaken, or after being strangled.

A brain injury such as a mild concussion may have temporary effects. A more serious TBI can result in long-term complications, or even death. In one study, 60 percent of the women with IPV-related TBI continued to experience TBI-related symptoms three months after the injury (Monahan & O’Leary, 1999). Repeated TBIs can have a cumulative effect, increasing the damaging effects and the risk of permanent injury.
"Due to the prevalence of TBI among DV survivors, it is crucial that DV service providers begin to factor knowledge of TBI into their treatment approaches. TBI can make it difficult for women to leave their abusive partners because of cognitive, behavioral, and social consequences. TBI complications may make it seem as though a client is being disrespectful or difficult, for instance if she is constantly losing personal belongings or forgetting appointments, but these behaviors can be symptomatic of brain injury.”

Effects of traumatic brain injury on domestic violence survivors
Elizabeth Marie Martin

One commonly used screening tool is HELPS.
HELP involves asking the following five questions:
1. Were you HIT in the head, or did you hit your head?
2. Did you seek EMERGENCY room treatment, or see your doctor?
3. Did you LOSE consciousness or become dazed?
4. Are you having PROBLEMS with headaches, dizziness, depression, concentration or memory?
5. Did you experience SICKNESS or other physical problems following the injury?

Karen Mason, the Executive Director of the Kelowna Women’s Shelter, is studying traumatic brain injury in victims of intimate partner violence with neuroscientist Paul van Donkelaar. In a 2017 TEDxKelowna talk, Ahead of the Game (https://youtu.be/NivqBkFILo), they pointed out that “we still don’t have a really good handle on how traumatic brain injury affects women who have experienced intimate partner violence”.

Mason is advocating for special training for frontline workers on how to recognize the signs of concussion, and how best to support women who have experienced a TBI. That would allow anti-violence workers to add what she calls a “brain-injury-informed approach” to their existing trauma-informed approach to working with survivors.

“For every NHL player who suffers a concussion playing the sport he loves, 7000 women suffer the same injury at the hands of the men they love.”
Karen Mason

A woman with a TBI may have issues with memory, problem solving, judgement, planning, and organization. She may be less able to make informed choices about whether to leave or return to her abusive partner, and may have less ability to respond to safety, health, and parenting concerns. This may leave her more vulnerable to further injuries.

It is important to understand the challenges clients with TBI may face, in order to help them identify and overcome these obstacles. They may be unaware they have TBI, and just consider themselves “forgetful”, depressed, or unable to “get it together”.

When working with a client with a TBI:
• Focus on one task or message at a time
• Break conversations down into pieces
• Repeat key points or instructions
• Allow her time to process information
• Check for understanding
• Write important information, and/or provide hand-outs
• Encourage her to write things down
• Develop checklists
• Keep meetings and the providing of information brief
• Provide a structured, one-on-one environment
• Minimize distractions
• Incorporate short breaks

Additional Resources:
Domestic Abuse and Traumatic Brain Injury

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https://scholarworks.uni.edu/cgi/viewcontent.cgi?article=1128&context=hpt

Shining a Light on Traumatic Brain Injury and Domestic Violence
Everyday Health

TBI Screening Tool
https://www.brainline.org/sites/default/files/TBI-Screening_v2.pdf