

**TITLE: BEST PRACTICES FOR SUPPORTING SURVIVORS WHO ARE ALSO
PERPETRATORS OF SUBSTANCE ABUSE**

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Best Practices for Supporting Survivors Who Are Also Perpetrators of Substance Abuse

Background

The complex relationship between trauma, substance abuse, and perpetration of harm creates unique challenges for individuals and service providers. Substance abuse often serves as a maladaptive coping mechanism for trauma survivors, while simultaneously increasing the risk of perpetrating harm (van der Kolk, 2014). This dual role complicates the process of seeking and providing help.

Statistics

The prevalence of substance abuse among survivors and perpetrators of violence is significant:

- 60% of survivors of intimate partner violence report using substances to cope with trauma (Ogden et al., 2022).
- 40-60% of victims of domestic violence and sexual assault seeking services report a substance use problem (CDC, 2020).

- More than 90% of addicts seeking treatment report being sexually assaulted at some point in their life (CDC, 2020).
- 94% of perpetrators of intimate partner violence report substance use during incidents (Roman-Lazarte et al., 2024).

These statistics highlight the interconnected nature of trauma, substance abuse, and violence, emphasizing the need for comprehensive support services.

Barriers to Accessing Services

Survivors who are also perpetrators face numerous obstacles in seeking help. These include but not limited to:

- Shame and guilt: Internalized feelings of worthlessness and self-blame can prevent individuals from seeking support (Herman, 2015).
- Fear of judgment and legal consequences: Concerns about prosecution or loss of custody may deter help-seeking behavior (Substance Abuse and Mental Health Services Administration [SAMHSA], 2014).
- Lack of trauma-informed care: Many treatment programs fail to address the underlying trauma, focusing solely on substance use (Covington, 2008).
- Limited access to resources: Financial constraints and geographical barriers can limit access to appropriate services (World Health Organization [WHO], 2021).
- Stigma and discrimination: Societal attitudes towards substance abuse and violence can create additional barriers to seeking help (Link & Phelan, 2001).

Recommendations for Support

Effective support for this population requires a multifaceted approach. The following are suggested as approaches necessary to support them.

- Trauma-informed care: Implement practices that recognize the impact of trauma and promote healing (SAMHSA, 2014).
- Harm reduction approach: Focus on minimizing negative consequences of substance use rather than demanding immediate abstinence (Marlatt et al., 2011).
- Empathy and understanding: Cultivate a non-judgmental, supportive environment that acknowledges the complexity of individuals' experiences (Rogers, 1951).

- Accountability and responsibility: Encourage individuals to take responsibility for their actions while providing support for change (Kellogg, 2003).
- Collaboration with medical professionals and legal services: Develop integrated care models that address multiple needs simultaneously (WHO, 2021).
- Prioritizing self-care and self-reflection: Promote practices that support emotional regulation and personal growth (van der Kolk, 2014).

Ethical Dilemmas

Service providers must navigate complex ethical considerations. This is necessary in order to safeguard this population as well as the integrity of support staff. The following are suggested ethical considerations needed when dealing with issues concerning this population.

- Balancing support with accountability: Determining how to provide compassionate care while holding individuals responsible for harmful behavior (Kellogg, 2003).
- Navigating scope of service and mandatory reporting: Understanding legal obligations while maintaining trust with clients (SAMHSA, 2014).
- Managing personal biases and judgment: Recognizing and addressing one's own prejudices and assumptions (American Psychological Association [APA], 2017).

Myths/Misconceptions

Addressing common misconceptions is crucial for effective support and pave the way for effective support system and also remove barriers that hinder the accessibility of support systems by survivors who are also perpetrators of substance abuse. These myths and misconceptions include but not limited to:

- Substance use excuses harmful behavior: While substance use may contribute to violence, it does not absolve responsibility (WHO, 2021).
- Survivors who perpetrate harm are solely responsible for their actions: Recognizing the impact of trauma without excusing harmful behavior (Herman, 2015).
- Treatment for substance use and trauma is only for “victims”’: Acknowledging that perpetrators may also be survivors in need of support (Covington, 2008).

Social Justice/Human Rights Lens

A comprehensive approach must consider broader societal factors that brings to the fore issues of human rights and social justice.

- Recognize intersecting experiences of trauma and perpetration: Acknowledge the complex interplay of victimization and perpetration (Crenshaw, 2013).
- Address systemic issues like poverty, discrimination, and toxic masculinity: Tackle root causes of violence and substance abuse (WHO, 2021).
- Prioritize survivor autonomy and agency while holding perpetrators accountable: Balance empowerment with responsibility (Herman, 2015).
- Provide accessible and inclusive services for all genders and identities: Ensure equitable access to support regardless of demographics (APA, 2017).

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Best Practices for Supporting Survivors Who Use Substances

Background

Substance use is a global issue affecting millions, with a significant correlation between substance use and trauma experiences. Research indicates that up to 80% of survivors of intimate partner violence report substance use (Warshaw et al., 2014). This high prevalence underscores the need for integrated approaches that address both trauma and substance use simultaneously.

Statistics

The prevalence of intimate partner violence (IPV) and its connection to substance use is alarming:

- 1 in 4 women and 1 in 7 men experience intimate partner violence (Chen et al., 2023).
- 1 in 3 women and nearly 1 in 6 men experience some form of intimate partner sexual violence during their lifetimes (Chen et al., 2023).
- 40-60% of survivors report using substances to cope with trauma (Najavits et al., 2017).

These statistics highlight the interconnected nature of trauma and substance use, emphasizing the need for comprehensive support services.

Barriers to Accessing Services

Survivors who use substances often face multiple barriers when seeking help:

- Stigma and shame associated with both victimization and substance use (Gilchrist et al., 2019)
- Fear of judgment from service providers and society (Macy et al., 2013)
- Lack of trauma-informed care in substance use treatment settings (Covington, 2008)
- Limited access to resources, particularly in rural or underserved areas (Browne et al., 2016)
- Discrimination based on race, gender, sexual orientation, or socioeconomic status (Lipsky et al., 2016)

Recommendations for Support

To effectively support survivors who use substances, service providers should consider:

- Implementing trauma-informed care principles throughout all services (Elliott et al., 2005)

- Adopting a harm reduction approach that meets survivors "where they are" (Marlatt et al., 2012)
- Practicing empathy and understanding to build trust and rapport (Macy & Goodbourn, 2012)
- Collaborating with medical professionals to address physical health needs (Warshaw et al., 2014)
- Prioritizing self-care for service providers to prevent burnout and secondary trauma (Saakvitne & Pearlman, 1996)

Ethical Dilemmas

Service providers may encounter various ethical challenges:

- Balancing support with boundaries to maintain professional relationships (Reamer, 2018)
- Navigating scope of service and knowing when to refer to specialized care (NASW, 2017)
- Managing personal biases and ensuring equitable treatment for all survivors (Dane, 2000)

Myths/Misconceptions

Common misconceptions that need to be addressed include:

- Substance use is a moral failing rather than a complex health issue (NIDA, 2021)
- Survivors who use substances are weak or lack willpower (Najavits, 2002)
- Abstinence is the only solution for substance use problems (Marlatt & Witkiewitz, 2002)

Social Justice/Human Rights Lens

Adopting a social justice and human rights perspective involves:

- Recognizing substance use as a coping mechanism in response to trauma (van der Kolk, 2014)
- Addressing systemic issues like poverty and discrimination that contribute to both victimization and substance use (Alexander, 2012)
- Prioritizing survivor autonomy and agency in decision-making processes (Goodman et al., 2016)
- Providing accessible and inclusive services that consider diverse cultural backgrounds and lived experiences (Serrata et al., 2020)

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