



Domestic Violence Association of Central Kansas

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DVACK Newsletter September 2015

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Making the Cut!

The first ever DVACK Cut-A-Thon left Hair Affaire stylists' night busy and fun! Between the 39 scheduled appointments, 11 walk-ins, and 50/50 raffle, Salina's Hair Affaire Beauty Salon raised an astounding \$690.80 for DVACK and its clients! DVACK is thankful for Hair Affaire's generosity, creativity, and determination to better this community.

**Back-2-School
September Savings at
the Bargain Basket!**



50 % OFF ALL CLOTHING
Excludes blue tags and brand new department store tagged items.

DVACK is hiring part-time and full-time positions! Bring a resume to the Salina office, or call to inquire.

Future Leaders or Victims? Victim Prevention on College Campuses

With the start of a new school year, DVACK advocates used the month of August to connect and share knowledge with college students about domestic and sexual violence. As vulnerable targets for dating abuse and sexual violence, college students can be further trapped and isolated by these abusive relationships due to obstacles, such as the closed environment of campuses, distance from family support, and fear of parents finding out (Sexual Assault Prevention & Awareness Center, University of Michigan 2015). The scope of dating abuse and domestic and sexual violence on college campuses is large and devastating, as statistics from the National Coalition Against Domestic Violence (2007) reveal:

- **21%** of college students report having experienced dating violence by a current partner. **32%** experienced dating violence by a previous partner.
- **13%** of college women report they were forced to have sex by a dating partner.
- Among college students who were sexually assaulted, **35%** of attempted rapes occurred on dates, **22%** of threatened rapes occurred on dates, and **12%** of completed rapes occurred on dates.
- **60%** of acquaintance rapes on college campuses occur in casual or steady dating relationships.
- Over **13%** of college women report they have been stalked. Of these, **42%** were stalked by a boyfriend or ex-boyfriend.
- Nearly **one third** of college students report having physically assaulted a dating partner in the previous 12 months (Break the Cycle, Inc., 2005).
- As many as **one quarter** of female students experience sexual assault over the course of their college career (Break the Cycle, Inc., 2005).
- Approximately **90%** of victims of sexual assault on college campuses know their attacker (Break the Cycle, Inc., 2005).

DVACK advocates presented at Kansas Wesleyan University's Merchant and Discovery Fairs and K-State's Lights On Fair, teaching students about consent, warning signs of unhealthy relationships, Title IX, the cause of rape, and how to help a friend who has been victimized. Sexual Assault Advocate, Amanda Olivier, trained campus Resident Advisors (RAs) on identifying dating violence, identifying victims of sexual assault, and, as RAs, how they must respond. To practice identifying warning signs, violence, and victims, Amanda and RAs role played scenarios and responding.

As meaningful, life-changing, and character-shaping as college can be, it is important students are educated on preventing, identifying, and stopping dating abuse and sexual violence to better ensure every student receives a rewarding and enriching college career.

Trauma & The Brain

Overwhelming our capacity to adapt to, process, or retell a situation, traumatic events and experiences rock our foundation and disempower our sense of control, safety and understanding. **Trauma** is a neurological, emotional, and psychological response to fear, horror, or helplessness that dysregulates brain chemistry and structures. When the “fear center” of the brain, the **amygdala**, is activated by trauma, a bomb is set off in the body in the form of an adrenaline rush that signals one’s survival instinct to fight, flight, or, most commonly, freeze. Though the amygdala is vital for survival, as it records one’s senses during a traumatic event and then sends automatic triggers to prevent life-threatening events from happening again, its activation interferes with memory formation (Kansas Coalition Against Sexual and Domestic Violence 2015; *Neurology of Trauma*, Dr. Janine D’Anniballe 2015).

First, an **adrenaline rush** releases chemical regulatory steroids that kill cells and affect memory. Increasing health problems and susceptibility to illness, these steroids shift T-cells back into one’s bones instead of blood cells, where they are needed to fight infections. Second, when the amygdala is activated, it interferes with the functioning of an important brain structure that stores memories of an event called the **hippocampus**, which can shrink and be severely impaired by childhood sexual abuse (KCSVD 2015).

Disrupting memory formation, a trauma victim cannot recall specific details or sequences of events from the traumatic experience. Thus, when a victim is interviewed, they may seem fumbled, appearing as if they are lying or making their victimization up. However, a victim may not remember where or what time an event occurred because memories attach to the senses, not the “narrative.” This is why re-experiencing similar sights, smells, or sounds from a traumatic event can trigger a victim and send them back into a trauma response (*Neurology of Trauma*, Dr. Janine D’Anniballe 2015, KCSVD 2015).

During trauma, the majority of the brain shuts down, and the amygdala’s heightened emotional state inhibits functioning of the **prefrontal cortex**, which delegates logic, reasoning, and basic movement. Therefore, in a crisis, it is difficult to think clearly and logically. A domestic violence relationship is ongoing crisis. In its emotional state, the amygdala is constantly firing, trying to protect the victim. In order for a victim to calm down, feel safe, think logically, and make a plan or get help, the amygdala must first feel a sense of **safety, validation, and empathy** (KCSVD 2015, National Domestic Violence Hotline 2015).

Validating a victim is essential to their healing and often involves taking a political stance because victims have historically been held responsible for the trauma they endured. This is, in part, due to the effects of trauma—chronic pain, depression, anxiety, fear, anger, PTSD, dependency, high-risk behavior, learned helplessness, etc.—that tend to be socially chastised and off-putting. One way to take a stand and validate a victim’s experience is to shift the question from “What is wrong with you?” to “**What happened to you?**” Failure to understand and address trauma leads to re-traumatization, victim-blaming, and refusal of services. It is our duty to recognize and understand trauma and its ill effects and to create a safe, empathetic, human-to-human connection that is necessary for survivors to heal (KCSVD 2015, NDVH 2015).

Common Triggers for Survivors:

*Smells	*Court Dates
*Sights	* Family Events
*Sounds	*Anniversary Dates
*Pregnancy	*Encountering Bad Boundaries
*Holidays	
*Media (TV violence)	

*More than half of women seen in mental health settings are being or have been abused by an intimate partner (Domestic Violence and Mental Health Policy Initiative 2015)

*Women who have experienced domestic violence are more prone to having PTSD than women who have not (National Domestic Violence Hotline 2015)

*Of domestic violence victims surveyed, up to **84%** suffered from Post-Traumatic Stress Disorder, **77%** from depression, and **75%** from anxiety (National Domestic Violence Hotline)

*More than **80%** of women seeking treatment reported experiencing physical/sexual abuse during their lifetime (Stephanie Covington, 2010)

***44-56%** of women seeking treatment for a substance use disorder had a lifetime history of PTSD (Stephanie Covington, 2010)

* **10.3-26.2%** of women with a lifetime diagnosis of alcohol dependence also had a history of PTSD (Stephanie Covington, 2010)

How to be Trauma-Informed:

- *Create a safe, trusting environment
- *Bear witness to the survivor’s pain
- *Listen to and believe their story
- *Acknowledge the injustice committed against them
- *Empathize
- *Focus on understanding the whole individual and context
- *Focus on their strengths and resiliency