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BREAKING THE CYCLE; DOMESTIC VIOLENCE, SUBSTANCE USE AND BRAIN CHEMISTRY

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TODAY'S FOCUS

PROCESS OF
SUBSTANCE USE TO
ADDICTION

BRAIN CHEMISTRY
ADDICTION AND
TRAUMA

UNDERSTANDING
THE NEUROSCIENCE
OF ABUSE

EMOTIONAL
REGULATION AND
DYSREGULATION

CONNECTION
BETWEEN TRAUMA
AND ADDICTION

RESOURCES AND
QUESTIONS



REVIEW OF SUBSTANCE USE DISORDER CRITERIA

During 2020-2024, the majority of both domestic and non-domestic relationship incidents had Not Applicable for the data element of Offender Suspected of Using at 84.3% and 90.8%, respectively. When considering all incidents, domestic relationship and non-domestic, the percentage of alcohol use that was reported in relation to the offense almost doubled in incidents involving domestic relationships (12.5% as opposed to 6.6%).

Domestic Relationships and Violent Crimes, 2020-2024 U.S. Department of Justice—Federal
Bureau of Investigation Released February 2026

SUBSTANCE USE DISORDER CRITERIA

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DSM-TR-5 : substance use disorder is now classified as mild, moderate or severe.

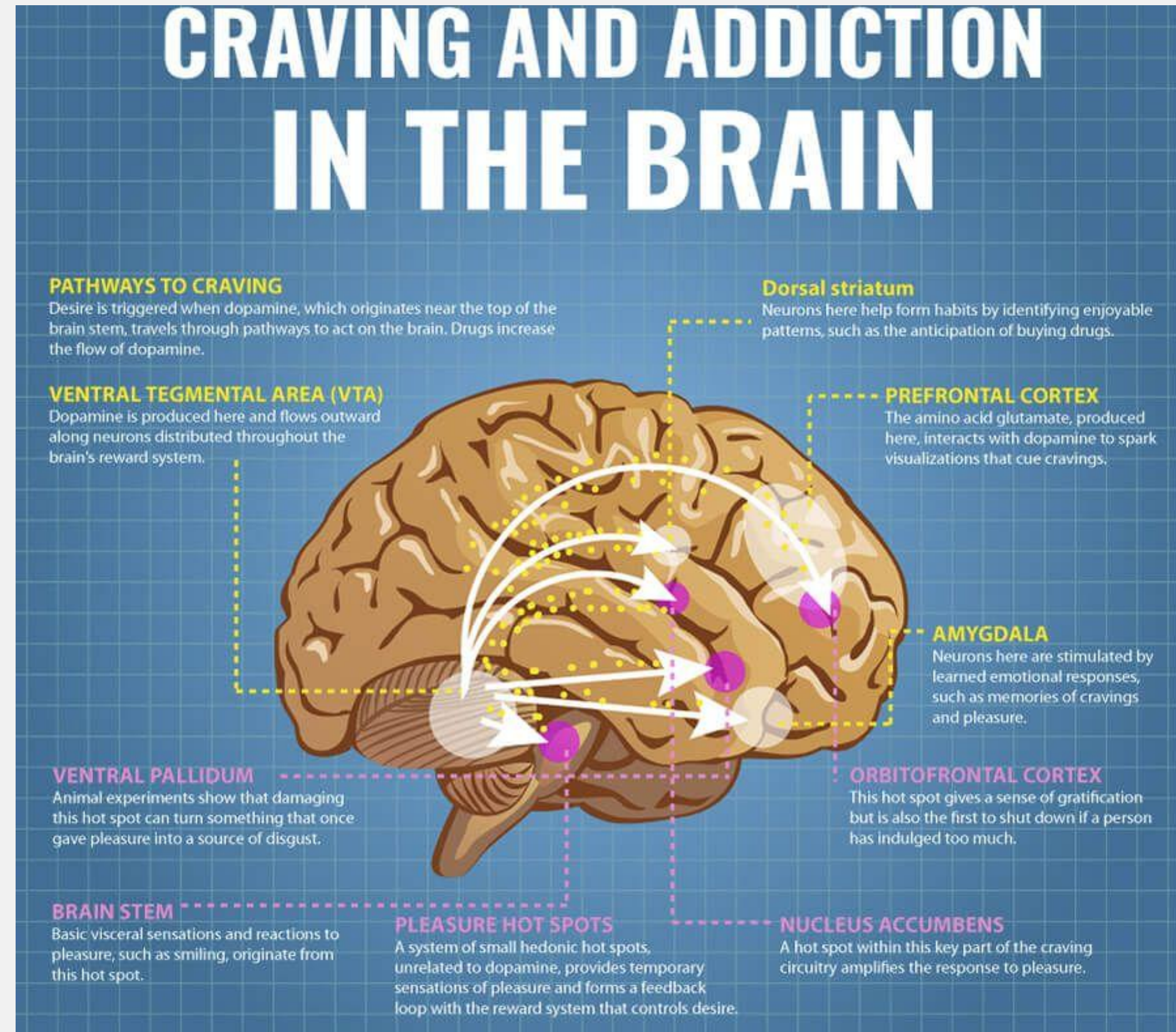
- Using larger amounts or longer duration than intended
- Persistent desire or unsuccessful efforts to cut down or control use
- A great deal of time spent obtaining, using or recovering from effects
- Craving
- Recurrent use in situations where it is physically hazardous
- Use despite problems with friends, family or work/school
- Giving up or reducing important activities due to use
- Continued use despite physical/mental harm
- Tolerance-needing more or noticing less effect
- Withdrawal-symptoms or using to avoid them
- Recurrent use leading to clinically significant impairment or distress

Severity Levels: Within a 12 month period

- Mild | 2-3 Criteria met
 - Moderate | 4-5 Criteria met
 - Severe | 6 or more criteria met
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CRAVING AND ADDICTION

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Pathways to Craving:

- Desire is triggered when dopamine travels through the pathways to act on the brain- drugs increase flow of dopamine

Prefrontal Cortex:

- Amino acid, glutamate, produced interacts with dopamine to spark visualizations that cue cravings

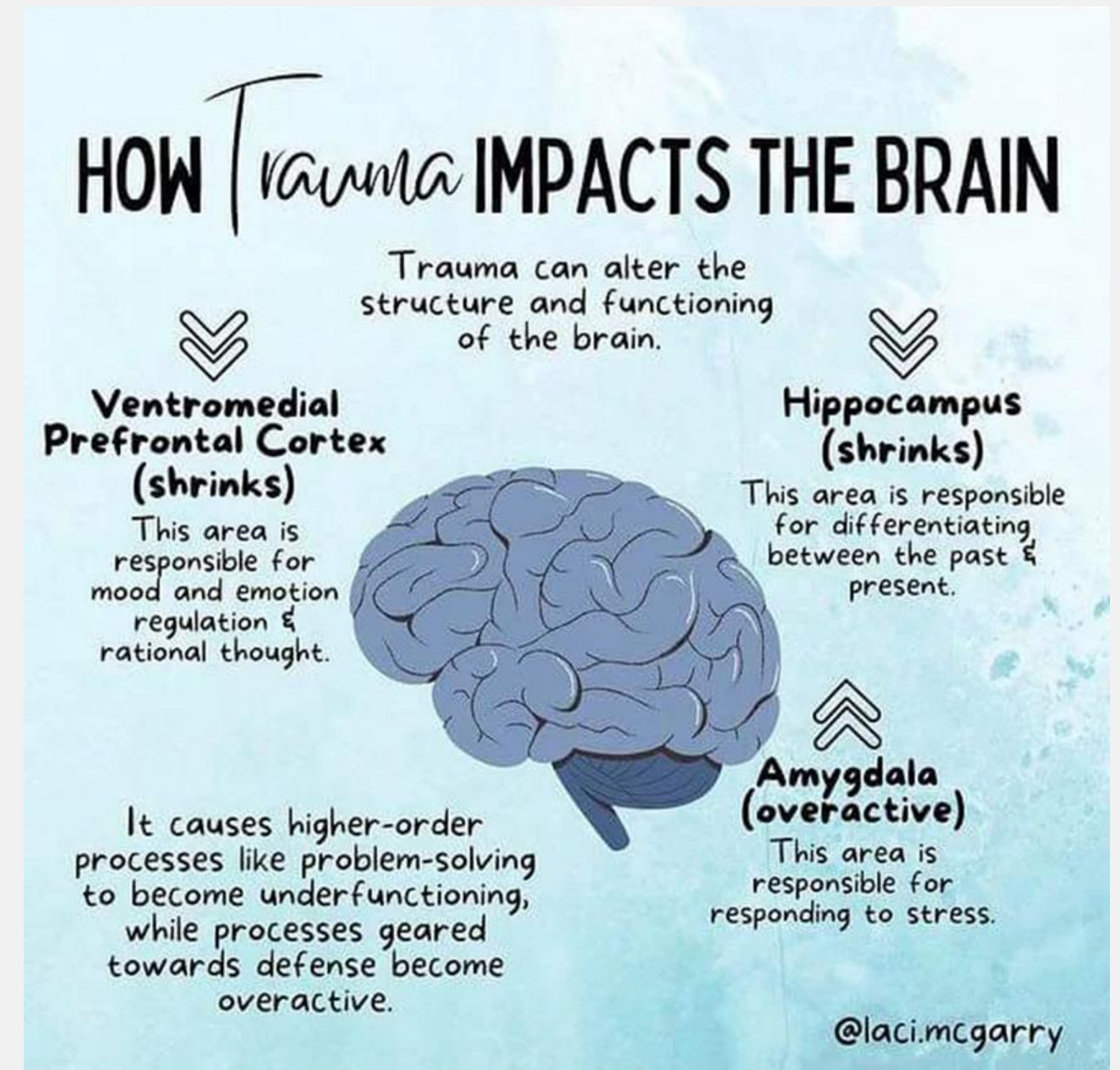
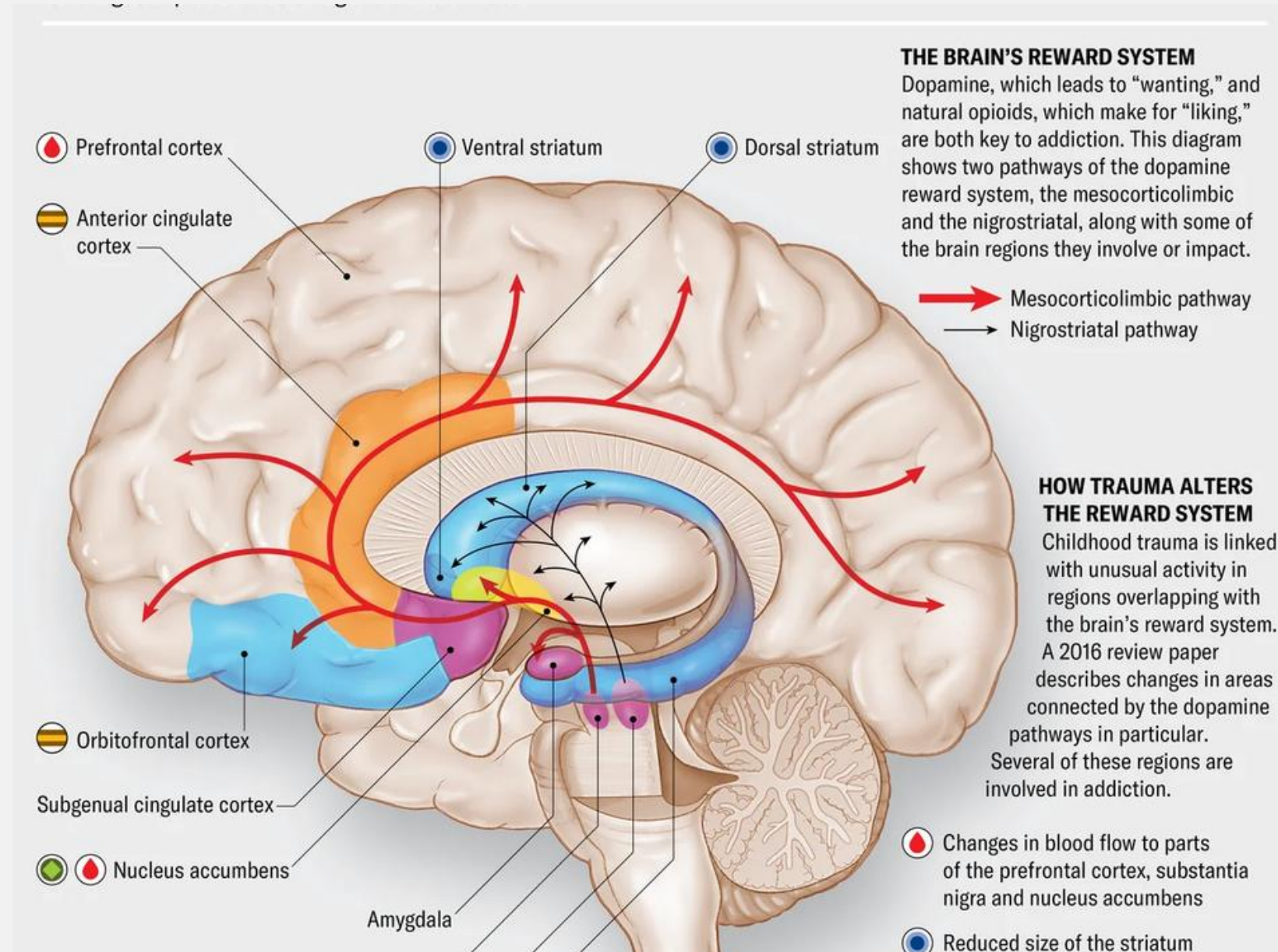
Nucleus Accumbens:

- Key part of the craving circuitry- amplifies the response to pleasure



THE CONNECTION BETWEEN TRAUMA &

TRAUMA|ADDICTION



Trauma and addiction overlap in the brain:

Both can change

- Brain structure
- The reward system
- Decision making
- Trauma can increase the vulnerability to addiction and can further disrupt the same systems
- Trauma puts the brain into survival mode
 - The amygdala can become more sensitive to potential danger-the brain remaining on high alert even when there is no danger and the individual is safe
 - Increases fight, flight, freeze or fawn responses
 - Greater sensitivity to stress

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T r a u m a & A d d i c t i o n

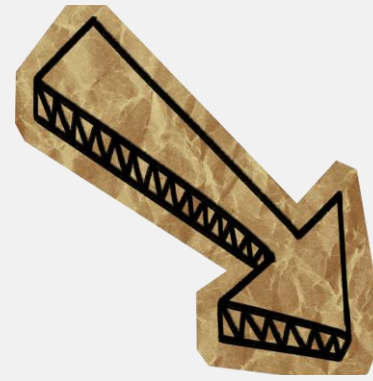
Dysregulation

The system becomes dysregulated, repeatedly activating the stress hormones (cortisol), Chronic stress can make daily ordinary life feel overwhelming and emotionally uncomfortable

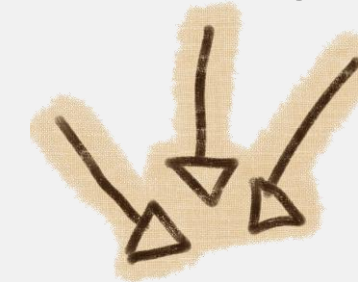
Trauma memories & addiction cues can be linked-

Trauma changes what the brain perceives is dangerous

Trauma can disrupt the work of the hippocampus in storing how memories are processed and contextualized



Substances can be reinforcing temporarily reducing anxiety and other emotional discomfort and give a sense of, control regulation and calm



Reward System gets stimulated- dopamine reward circuitry gets activated
The brain learns "this makes me feel different"- want to replicate that feeling when distressed

This leads to temporary relief and the brain learns the behavior- often the individual is not seeking a high-but relief



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Trauma, Addiction and Domestic Violence

- Domestic Violence keeps the brain in the survival mode- due to the nature of multiple threats, events, unpredictability and coercive control
- The brain learns “ I am not safe and have to consistently watch out”
- Stress Response System is activated
 - Hypervigilance
 - Anxiety and irritability
 - Sleep Disruption
 - Difficulty concentrating
 - Startle responses
 - Unable to relax
 - Emotional reactive



During 2020-2024, the majority of both domestic and non-domestic relationship incidents had Not Applicable for the data element of Offender Suspected of Using at 84.3% and 90.8%, respectively. When considering all incidents, domestic relationship and non-domestic, the percentage of alcohol use that was reported in relation to the offense almost doubled in incidents involving domestic relationships (12.5% as opposed to 6.6%).

T r a u m a , A d d i c t i o n a n d D o m e s t i c V i o l e n c e

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- The prefrontal cortex no longer functions as it should; this involves judgement, planning, impulse control and evaluating consequences. It is riding shotgun to the amygdala-which perceives threats in the brain.
- Under chronic stress the brain places its priority on immediate safety
- Addiction can become a form of self regulation-especially since the prefrontal cortex is taking a back seat due to their trauma and domestic violence

----->>>At this point the intersection happens- trauma->addiction-> domestic violence

The brain learns from that relief of substances and is reinforcing- If I do ----- then --- happens and I get relief. This process can continue until tolerance kicks in, it takes more of the substance to produce the same effect- and it continues to more trauma and violence

- Trauma reminders can often trigger cravings → way to escape → seeking relief

**Trauma Trigger-> Stress Response-> Craving-> Using->
Temporary Relief**



T r a u m a , A d d i c t i o n a n d D o m e s t i c V i o l e n c e

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Domestic violence can complicate recovery because of what the individual is dealing with simultaneously:

- Trauma symptoms
- Addiction
- Triggers
- Fear of Perpetrator
- Isolation
- Shame
- Threats or coercive control
- Housing |financial instability
- Legal involvement
- Children



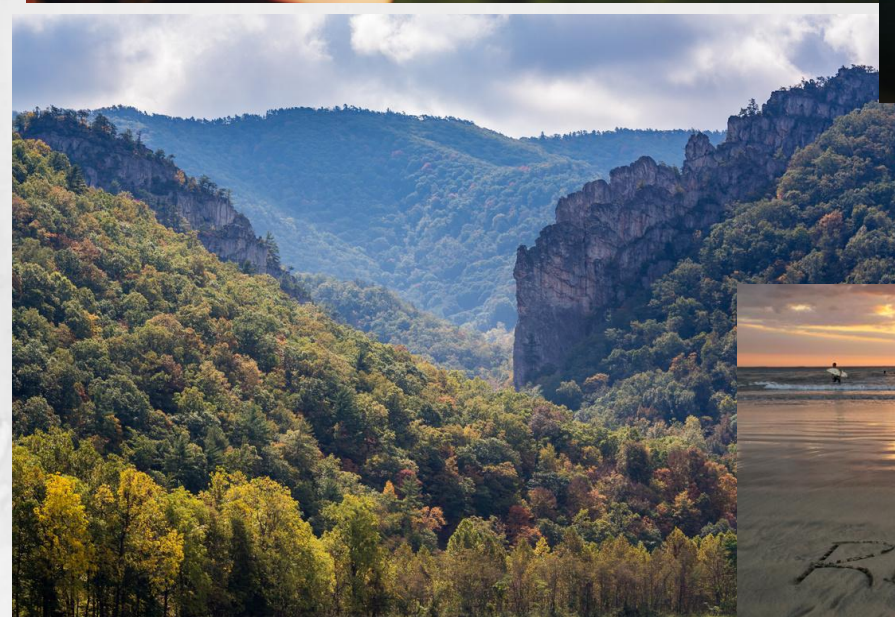
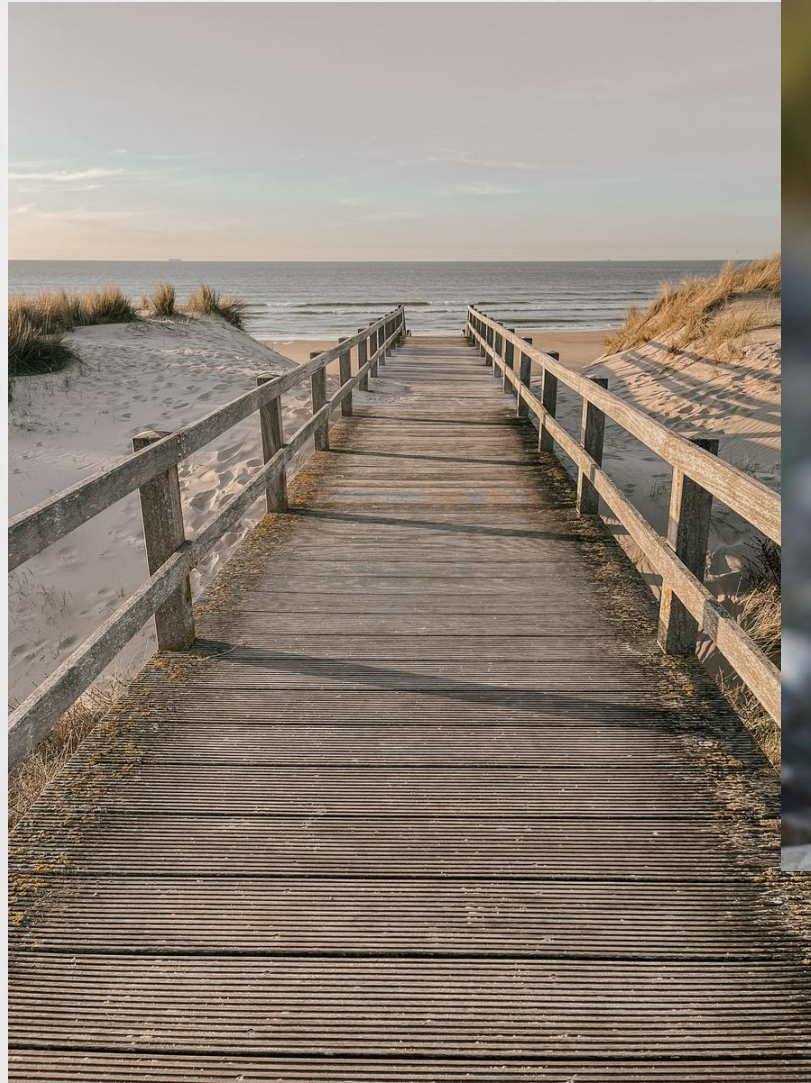
Research suggests that domestic violence can also harm witnesses. A disturbing finding suggests that children who grow up around domestic violence suffer similar risks to their mental health and well-being as those who experience domestic violence directly.

JAMA (Journal of American Medical Association) Association of Childhood Trauma Exposure With Adult Psychiatric Disorders and Functional Outcomes

[William E. Copeland, PhD₁](#); [Lilly Shanahan, PhD₂](#); [Jennifer Hinesley, PsyD₃](#)

WELLNESS AND RESILIENCE

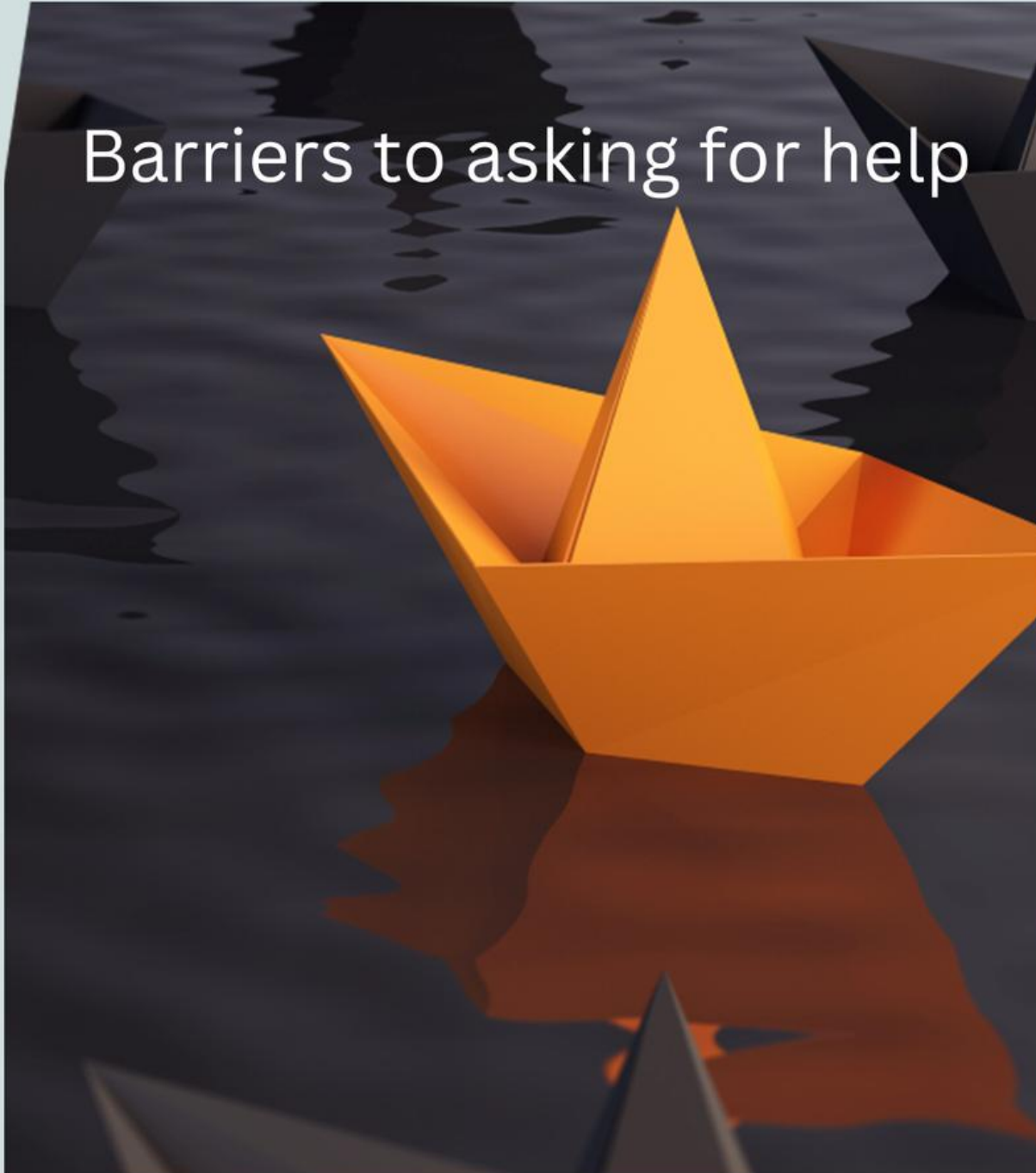
WHAT IS YOUR DEFINITION?



WELLNESS AND RESILIENCE

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Barriers to asking for help



- If I need help, I am not competent
- Leaders handle their problems privately
- Concerns regarding privacy or confidentiality
- Reputational harm
- Therapy means something is ***seriously*** wrong
- I should be able to fix my own problems
- If I slow down and ask for help, everything will fall apart (work, home, personal, professional)
- Therapy is selfish or too indulgent

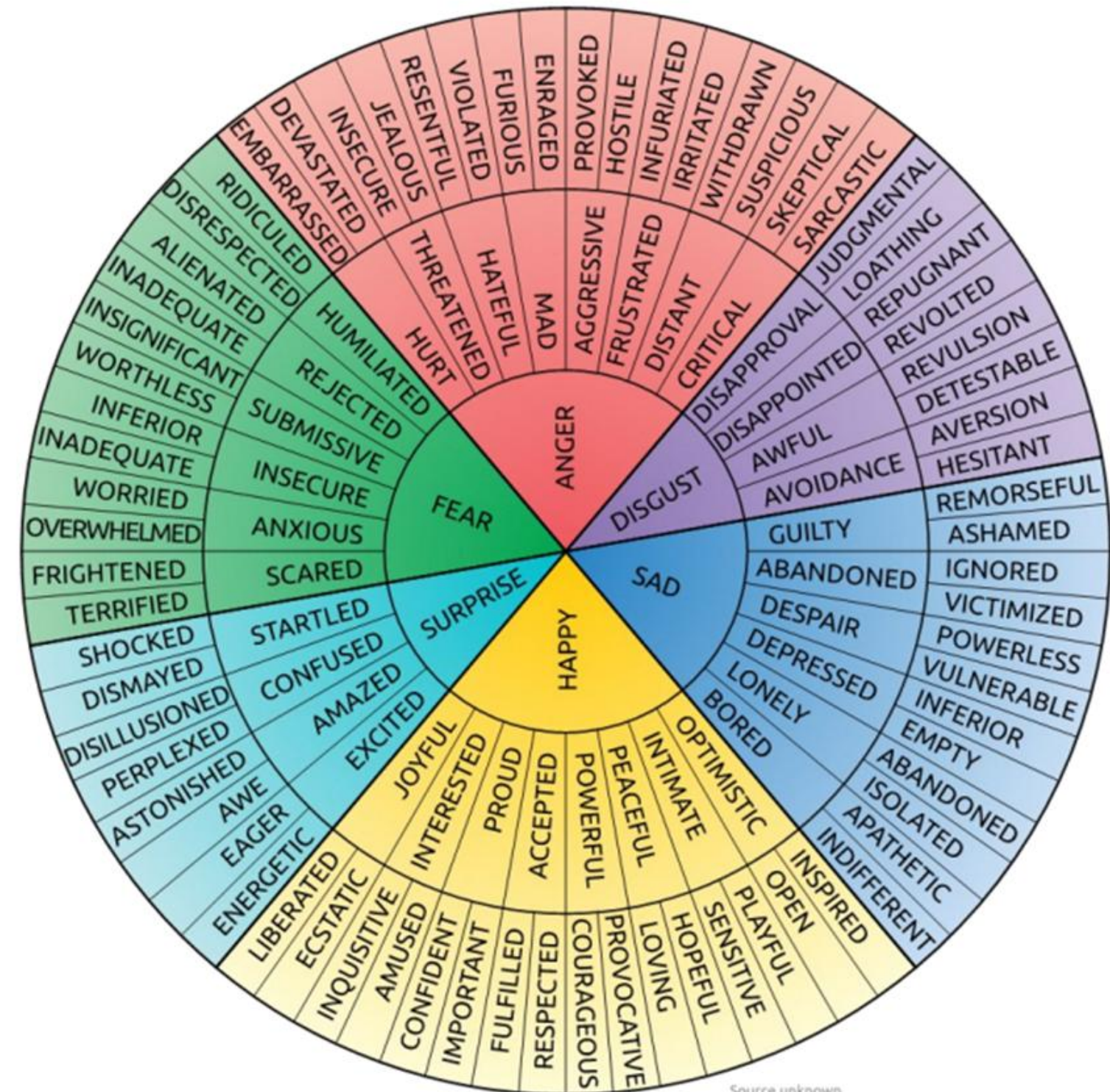
WELLNESS AND RESILIENCE

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THE IMPORTANCE OF EMOTION IDENTIFICATION

- Our brain needs a word to connect to what we are feeling
- It allows us to identify/prioritize what is important
- Allows us to respond to danger
- Social connection & communication
 - Recognizing emotion in others-including facial expressions, tone of voice
- Motivational compass-guiding behaviors and guiding away from danger
- Memory & learning
- Emotional Regulation

Wheel of Emotions



Emotional Regulation| The ability to monitor, evaluate, and modify emotional reactions to achieve goals, cope with challenges, and adapt to situations

- **Adults have an expectation from society and each other that they handle their emotions, effectively and appropriately**
- **This also includes emotional awareness, naming the emotion you are feeling and how to navigate these feelings**
- **Some individuals due to stress, trauma, anger, mental health challenges can struggle to emotional regulate and can often over or under react**
- **When feelings build up over time; which means they have not addressed/processed these feelings-often dysregulation can occur**

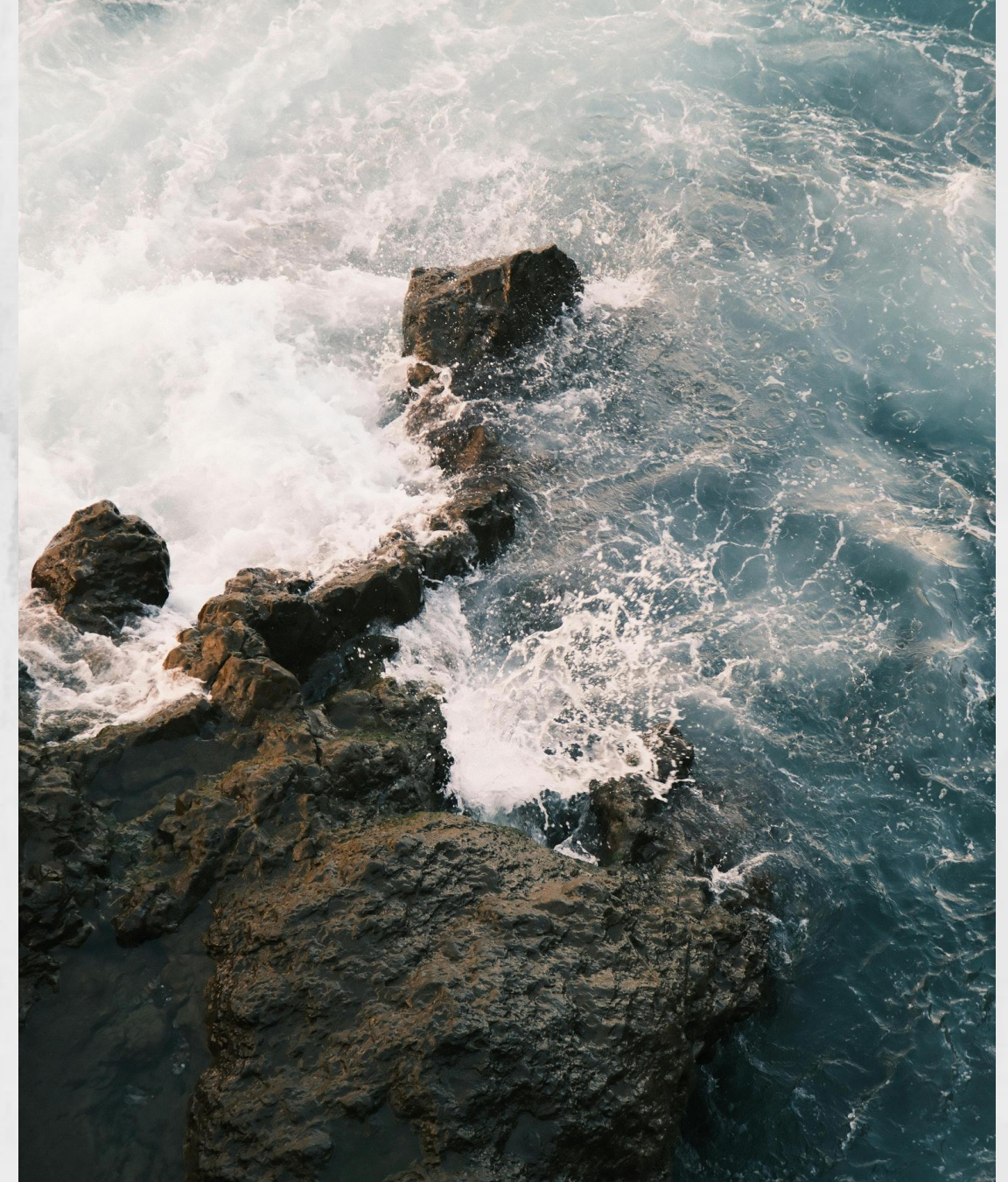
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EMOTIONAL REGULATION

- Labeling feelings can help distance yourself from a situation
 - Feelings can be transient data; they give you more information about differentiating between your thoughts and feelings
 - Negative thoughts or getting caught up in emotional contagion can crowd your mind and make it difficult to truly examine your feelings
 - Clients can remind you of either a positive or negative situation/interaction with a person - pay attention to that as your emotions will follow
 - Labeling feelings can also help identify why you might be struggling with the situation: Does this remind you of a person/place that you have a negative relationship with, vicarious trauma or just having an off day
-

Signs of Emotional Dysregulation

- Intense emotional outbursts
- Intense rapid mood swings
- Disproportionate responses to situations
- Emotional shut down
- Poor impulse control
- Difficulty calming down (regulating)
- Poor relationships in all areas of life
- Chronic irritability or anxiety
- Over Reacting

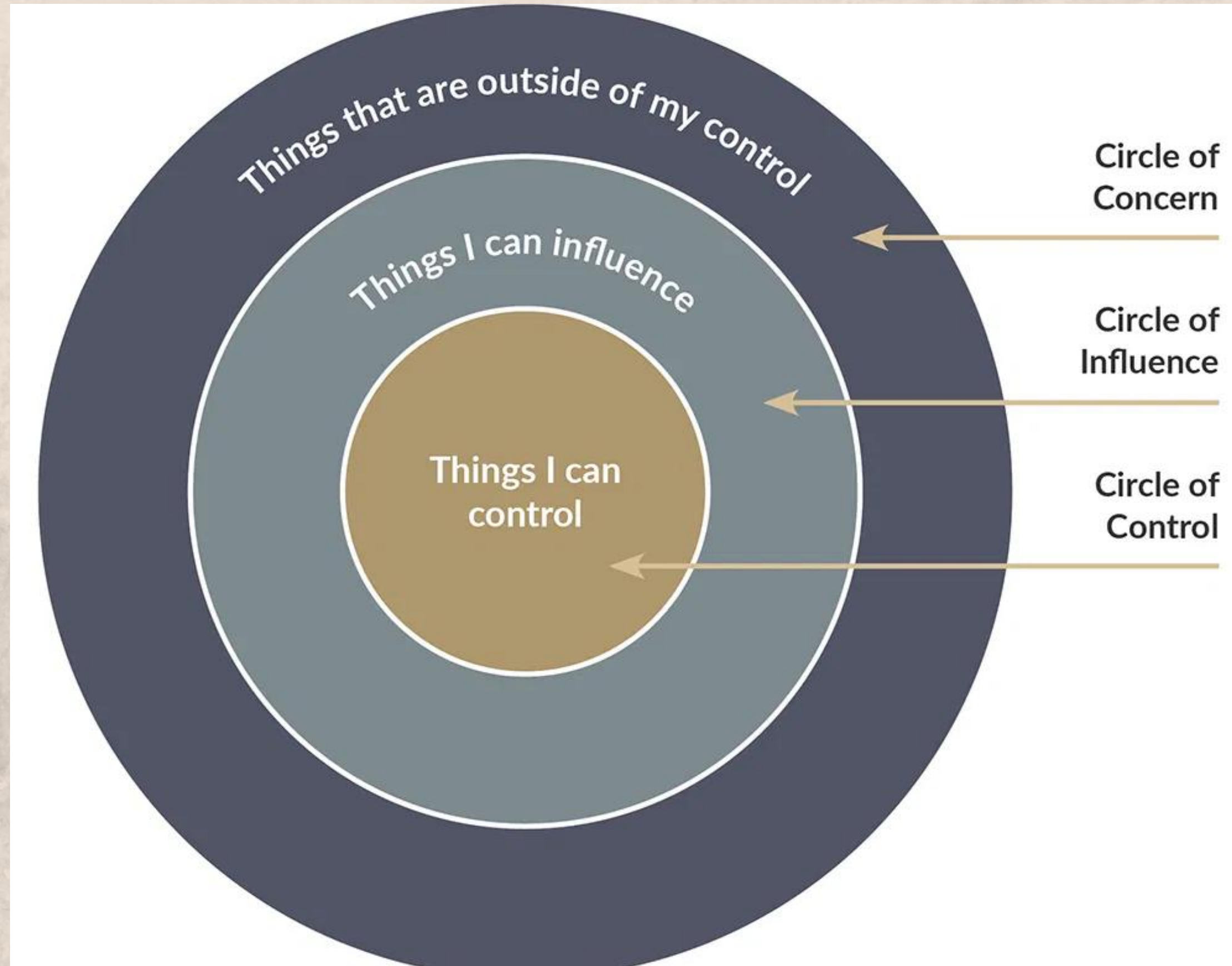


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Circles of Control

Stephen Covey

7 Habits of
Highly Effective
People



CONTACT INFORMATION



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R E S O U R C E

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National Domestic Violence Hotline

1.800.799.SAFE or Text:88788

- **[Domestic violence programs and services sponsored by Virginia's judicial system](#)** offer people who are navigating Virginia's judicial system information about programs such as **[I-CAN! Virginia](#)**, which is a free online service that guides people (in English or Spanish) through the process of preparing court forms to get protective orders. The Virginia judicial system website also has links and information about Hope Cards, which are easy-to-carry laminated cards with a civil protective order's essential details. Judges issue these legal orders to protect people's safety, and they may determine how or if an abuser can contact the person being mistreated. Additional resource materials include the following:
 - Information about a confidential mail-forwarding service
 - A guide to protective orders
 - A directory of batterer intervention programs
 - A notification program that allows participants to stay informed about an offender's custody status
- **[Virginia Statewide Hotline](#)** allows people seeking help to connect with multilingual trained advocates 24/7 via phone, chat or text. Advocates listen with respect and are ready to give information about domestic violence, make a report or find available local resources. 1.800.838.8238 (interpretation available in 200+ languages)
- **[Virginia Anti-Violence Project](#)** works to end violence against and within LGBTQ communities in Virginia. It offers support and advocacy for LGBTQ people seeking help, including emergency housing, talking through healthy and unhealthy relationships, and more. LGBTQ-identified persons who have experienced violence or trauma can contact Virginia AVP using a form or by calling or texting (804) 925 9242.