The Far-Reaching Effects of Domestic Violence... On Our Brains, Our Bodies, Our Children and Our Lives

WHAT IS DOMESTIC VIOLENCE?
The Northern Marianas Coalition Against Domestic and Sexual Violence defines Domestic Violence as a pattern of abusive behavior that one intimate partner chooses to use to gain and maintain control over another which can occur in the form of physical, emotional, sexual and/or economic control. Perpetrators of domestic violence are normally called “batterers” because the physical violence is considered battery under most jurisdictions’ laws. Batterers use tactics such as intimidation, threats, isolation, sexual and physical assault, forced use of illicit drugs or substances, insults, excessive monitoring and possessiveness to control and manipulate victims. Victims of domestic violence describe the experience of abuse as being part of a cycle wherein periods of calm (referred to as the “honeymoon period”) escalate to periods of fear and anxiety, which lead to incidents of abuse...and the cycle starts again. During the honeymoon phase, batterers can appear to the model partner – they’re apologetic and remorseful for their actions, they give the victims flowers, candy and sincere apologies, they spend more time with the family and/or children, even attending mass, and less time drinking or staying out with friends, they exhibit more cooperation and other positive behaviors the victim may have been longing for. Soon after, mild insults work their way back into the couple’s interactions. The same or similar threats and/or accusations show back up and tension increases again. Batterers often blame their foul behavior on the victim claiming s/he is the reason for the excessive drinking or if s/he were a better parent, s/he wouldn’t have to yell at the kids.
or s/he’d spend more time with the family if s/he were somehow better or different...or s/he wouldn’t hit them if s/he just did what s/he asked, etc. It can be even more confusing when the batterer claims to only hit because of love.

DOMESTIC VIOLENCE AND MENTAL HEALTH
More than 57 million people in the United States (age 18 and older) suffer from a mental illness. Over 50% of women who live with a mental illness have previously experienced some form of trauma such as physical or sexual abuse (either during childhood or adulthood). Abuse rates are even higher among homeless women with serious mental illnesses. Domestic violence can cause an adverse ripple effect on the emotional and psychological state of any survivor – with or without a mental illness. Panic attacks, post traumatic stress disorder, substance abuse, depression and anxiety are often ignited by domestic violence and/or other severe forms of abuse. Suicidal tendencies, substance abuse and psychotic episodes can all be sparked by violence and maltreatment. Individuals may simultaneously suffer from more than one mental illness temporarily or long term.

DOMESTIC VIOLENCE AND PHYSICAL HEALTH
Domestic violence is often cited as the most common cause of injury to women. In addition to injuries caused by physical acts of violence, victims of abuse have higher incidences of headaches, chronic neck, back and pelvic pain and digestive problems. Statistics also show that women abused by their intimate partners are more vulnerable to contracting HIV or other sexually transmitted infections due to forced intercourse or prolonged exposure to stress. Studies also show a relationship between intimate partner violence and depression and suicidal behavior. Physical, mental and sexual/reproductive health effects are also linked to intimate partner violence including adolescent pregnancy, unintended pregnancy in general, miscarriage, still birth, intrauterine hemorrhage, nutritional deficiency, abdominal pain and other gastrointestinal problems, neurological disorders, chronic pain, disability, anxiety and post-traumatic stress disorder (PTSD), as well as noncommunicable diseases such as hypertension, cancer and cardiovascular diseases. Victims of domestic violence are also at higher risk for developing addictions to alcohol, tobacco or drugs.

DOMESTIC VIOLENCE AND CHILDREN
Domestic violence poses a serious threat to children’s emotional, psychological and physical well-being. In 2009, the American Bar Association stated that between 3.3 million and 10 million children witness domestic violence annually. Not only are children at increased risk of direct injury when they witness and try to intervene in violent situations, but they may also be affected by hearing one parent threaten the other, observing a parent who is out of control or reckless with anger, seeing one parent assault the other or living with the aftermath of a violent assault. Children exposed to domestic violence are also at risk for developmental delays, psychiatric disorders, school difficulties, teen dating violence, aggressive behavior, and low self-esteem. Children may learn that it is acceptable to exert control or relieve stress by using violence or that violence is in some way linked to expressions of intimacy and affection. While being exposed to a traumatic experience can trigger mental health problems, living with a severe mental illness is likely to increase the vulnerability of a person being abused.

Short-term Effects of Domestic Violence on Children:
• Generalized anxiety
• Sleeplessness
• Nightmares
• Difficulty concentrating
• High activity levels
• Increased aggression
• Increased anxiety about being separated from a parent
• Intense worry about their safety or the safety of a parent

Long-term Effects of Domestic Violence on Children:
• Physical health problems such as asthma
• Behavior problems in adolescence (e.g., juvenile delinquency, alcohol, substance abuse)
• Emotional difficulties in adulthood (e.g., depression, anxiety disorders, PTSD)

Exposure to domestic violence has also been linked to poor school performance. Children who grow
The University Center for Excellence in Developmental Disabilities (UCEDD) was on Tinian last week, giving a training workshop that helps emergency first responders better prepare for interactions with Individuals with Disabilities. The Disability Training for First Responders was held at the Northern Marianas College (NMC), Tinian Campus, August 3, 2017.

Participants included members of the Aircraft Rescue and Fire Fighting (ARFF) division of CPA, the Tinian Police Department, the Tinian Health Center (THC), and the Department of Fire and Emergency Medical Services (DFEMS). Upon completion of the training workshop, participants received certificates from the CNMI UCEDD at NMC. There were 19 people who attended the training workshop.

Taught by UCEDD Director Floyd Masga, and assisted by UCEDD Program Manager Jennifer-Eileen Castro, the objectives of this training included:

(1) To identify barriers that first responders face in serving people with disabilities and to provide and demonstrate effective methods to overcome these barriers;

(2) to provide first responders with the information and methods that will help to ensure effective and appropriate communication between first responders and people with disabilities;

(3) and to provide first responders with guidance on how to identify characteristics or behaviors of people with disabilities that could mistakenly be viewed as threatening, and to identify best practices to avoid escalating the situation.

Overall, the participants were very satisfied with the Disability Training, and said that they learned a lot from the workshop, which would help them in their respective jobs. One of the firefighters suggested that “This training should be mandatory for all 1st responders.”

Another participant said they “would like to have more courses on disabilities (sign language, laws-rules and regulations for disability).”

Marjorie Daria, Resident Director of the Tinian Health Center, said, “Offering trainings like these can help first responders communicate better with people with disabilities. This can lead to better care and better outcomes for everyone involved. I think that although training for First responders is a priority, anyone who isn’t a first responder and is likely to deal with anyone with disabilities, should take advantage of this learning opportunity to better their skills.”
The Transition Training was focused on Kids in high school aged 16 to 19 and with an Individualized Education Plan under the IDEA. These kids are from all the public schools including Marianas High School, Kagman High School, and Saipan Southern High School. These kids met at Pacific Islands Club on September 19, 2017 for their transition training with Jim Arinovski of Island Training Solutions, the Office of Vocational Rehabilitation (OVR), the Workforce Investment Agency, the Public School System, the Special Education Program, the Council on Developmental Disabilities (CDD), the University Center for Excellence in Developmental Disabilities (UCEDD), and the Northern Marianas Protection & Advocacy Systems Inc. (NMPASI). The Tinian Training was on the 20th, and 22nd on Rota. The idea is to give these kids the information that they need to pursue college or work after high school. A resource directory was given to everyone who attended, and information on OVR, and the Center for Living Independently, and NMC’s Disability Support Program. This was a great way to allow our kids to start taking over their own lives and live it the way that they see it fit. We will repeat this training every year.

**TRANSITION CONFERENCE:**

**Accommodation -** it talks about what you need in school or college. Assistive Technology Device - is something that assists you with problems. And we explained what would we do if a student ask for help. And then we would have a break for two minutes. Then get back to work and talk about different things.

**What I learned today was that we learned how to install Apps into our device. We also learned that Self-Advocacy wasn’t just to stand up for ourselves. It was also about how to stand up for ourselves. We also learned how to use some of the Apps that is usually installed in the devices. The things that we also learned was how to use proper body language in an interview. We also learned that OVR helps people with disability to protect them from going in colleges. Job readiness was the one that we learned how to get ready or be prepared in the future if we are willing to attend a job. We also learned how to self-advocate again. Self-advocate is like how to speak up for ourselves.**

**I learned how to ask for help when I’m going to apply for a job.**

**We learned how self-advocate like how to speak up and stand up for ourselves. Self-advocate is important to know because in the future without self-advocate or self-advocacy, we won’t be able to tell the boss that I or we have a disability. But if we learn how to self-advocate, we can be able to tell the boss or manager or instructor that I or we have a disability. When we do that, they can give the accommodation we need.**
"I learned yesterday and today about Self-Advocacy and AT Accommodations in Post-Secondary Education, Assistive Technology Apps, Post Secondary Education, Job Exploration, and Employment, Employers Expectations and Work Readiness and Basic Interviewing Skill. I really enjoyed the presentations and the people who presented. I hope to go attend more workshops in the near future."  

"This conference at Pacific Islands Club made me more open to those who help and support disability. It will open an everlasting memory that I won't ever forget. I learned a lot about assistive technology, social understanding, and disability support program. The Pre-Employment Transition Services Conference encouraged me to connect with others, explore life, prepare for the future, and gave me hope to succeed in life. No matter how many times I failed, it will never stop me from trying again and again and again and again."  

"Today, we learned about self-advocacy of Mrs. Monica and Jan. We did the driver seat activity and a scenario we did as a group. We waited for the other presentation of Mr. Diaz. He presented the Assistive Technology App and Employment. He showed us the App of the resume, awesome calendar. We all did the group activity to every section. We ate lunch. During lunch time, we listened to the cooperative program and he told us what job we can do while we're in school. We can join co-op in school. MHS presented their project and their experience about the presentation. After lunch, we listened to other presentation. His presentation is about job readiness like an island training. We get all together as a group to a general section. And we listened to the OVR people and everybody about it. Today is our last day to attend that conference. I learned a lot in the training and it will really help me in the future. So if we need a job, we can go there and ask them for help. Yesterday, we learned about accommodation and everything, basic intervening skills, job exploration and self-advocacy. We need to speak up for ourselves."

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up with domestic violence may have impaired ability to concentrate; difficulty in completing schoolwork; and lower scores on measures of verbal, motor and social skills.

OCTOBER IS DISABILITY EMPLOYMENT AWARENESS MONTH
Originally aimed at encouraging employers to hire persons with physical handicaps, National Disability Awareness Month now encompasses those with mental disabilities as well. Recognizing the significant impact domestic violence can have on the workplace and victims’ ability to work, the CNMI Anti-Violence Act of 2013 was enacted to protect working victims as they address domestic violence by attending court, seeking protective orders, medical treatment, legal assistance, psychological counseling or participate in safety planning. The Act discourages employers from discharging or otherwise discriminating or retaliating against employees who are victims of domestic violence, imposes strict confidentiality requirements and penalties that include misdemeanor convictions and fines of up to $10,000.00.

OCTOBER IS DOMESTIC VIOLENCE AWARENESS MONTH (DVAM)
What can we do to end domestic violence? Get to know the dynamics of domestic violence so can support friends, family members, coworkers, neighbors, classmates and/or clients who are victims or survivors of domestic violence. Commit to doing your part to make the CNMI a place of love, respect, safety and peace. Doing so will Break the Cycle and Heal Generations.

Local Resources:
If you or a person you know is a victim of domestic violence, the following agencies can offer assistance:

- 911 in case of an emergency
- Northern Marianas Coalition Against Domestic and Sexual Violence (670) 234-3878
- Karidat (670) 234-6981
- CNMI Department of Public Safety (670) 664-9001/9002
- Domestic & Sexual Violence Hotline (670) 234-5100
- NMPASI - If you or a person you know has a mental illness and are suffering from domestic violence, we may be able to offer assistance. Please call us at (670) 235-7273.
OVR Transition services: *Get connected*

Ever wondered how you can transition from high school to the adult world after graduation?
The Office of Vocational Rehabilitation, together with your Individualized Education Program (IEP) team, can be a part of your journey, if you let them.

**What will I need to do?**

3-4 years prior to exit: **CONNECT**
- Participate in your IEP meeting
- Learn self-advocacy skills
- Learn about the various community resources available
- Start thinking about your future in terms of a job or career
- Start putting together a portfolio

2 years prior to exit: **EXPLORE**
- Evaluate your skills
- Discover your interests
- Identify your career options
- Get work experience or volunteer
- Apply for OVR services.

1 year prior to exit: **PREPARE**
- Develop a career plan
- Continue with work experience
- Make sure to update your portfolio
- Keep regular contact with your OVR Counselor

During the exit year: **SUCCEED**
- Explore college options
- Become employed
- Gain independence
- Reach your goals!

**OVR pre-employment transition services**

**OVERVIEW**
The Workforce Innovation & Opportunity Act (WIOA), a new federal law passed in 2014, requires that Pre-Employment Transition Services (Pre-ETS) be provided to students with disabilities who are:

1. Between the ages of 16-21 years
2. Enrolled in high school and is receiving Special Education Services, or is in college, or participating in another educational program.

**Pre-ETS services include:**
- Job exploration counseling
- Work-based learning experiences
- Counseling on postsecondary (college) options
- Work readiness training
- Instruction on self-advocacy

**FOR MORE INFORMATION**
**CONTACT OVR AT:**
TEL: (670) 322-6537/8/9