ASKING ABOUT & RESPONDING TO SURVIVORS’ EXPERIENCES OF ABUSE RELATED TO MENTAL HEALTH

Experiencing abuse can affect a person in many ways. Abuse can make people feel frightened, overwhelmed, distrustful, hurt, sad, confused, angry, ashamed, or hopeless. Abuse can also affect how a person responds to others. If someone has a mental health condition, experiencing abuse may cause their symptoms to get worse. In addition, survivors tell us that their partners sometimes deliberately try to cause them to feel bad about themselves, use their responses to control and belittle them, make it hard for them to trust their own perceptions of what’s happening, or use mental health against them in other ways. For example, many survivors tell us that the person who is abusing them...

- Calls them “crazy” or things like that.
- Does or says things to make them feel confused or “crazy.”
- Justifies or excuses the abuse by saying their partner is “crazy,” out of control, or sometimes needs to be restrained.
- Tells them that no one will believe them because they are “crazy” or because they have a mental health history.
- Tells them that they are lazy, stupid, “crazy,” or a bad parent because of their mental health history.
- Interferes with their mental health treatment.
- Controls their prescription medications.
- Has forced them to be committed to an inpatient psychiatric unit or threatens to do so.
- Threatens that they will lose custody of their children because of their mental health status.

WHAT CAN ADVOCATES DO?

Both abuse and mental health are highly stigmatized in our culture. This may make it more difficult for a survivor to disclose aspects of the abuse that are related to mental health. She may be worried that you will judge her, blame her, not understand her, or not help. Communicating non-judgment is key to countering shame and stigma. It’s often helpful to normalize the person’s experiences by letting them know that many survivors have those experiences. As always, you will use your skills as an advocate to build trust. Offer support, validation, compassion, and respect. Listen, empathize, and try your best to understand.
This tipsheet offers some examples of things that a survivor might experience and how an advocate could respond. These conversations may happen over a hotline or while the survivor is accessing other services such as group counseling or shelter.

It is important to note that not all survivors will bring up these issues. It can therefore be helpful if you, as the advocate, raise the issue first. Asking specifically about what has happened to her in a non-judgmental way can communicate that you are open to hearing about her experiences (even if she does not appear to respond) and can help reduce feelings of isolation and shame. You may say something like, “Many people who experience abuse tell us that... has anything like that happened to you?”

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A survivor says that her partner tells her that she’s “crazy” all the time, and it sounds like her partner also justifies the abusive behavior by saying that she is “crazy” or needs to be “put in line.”

Let her know that this is a common tactic people use to justify abusive behavior or when they are trying to undermine and control their partners. They get away with this because mental illness is so stigmatized. Calling a person “crazy” and using it to label, undermine, or discredit them is never okay. After hearing that she is crazy over and over again, it might be hard to trust her own perceptions of what’s going on or to convince other people of her experiences, especially if she has ever been diagnosed with a mental illness.

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A survivor’s partner is putting her down by saying that she’s lazy, stupid, worthless, and that she’s a bad mother.

Let her know that her partner is trying to break down her self-esteem. Acknowledge that it can be really hard to hold on to your sense of self when someone is constantly saying or doing things to try to put you down. It can be especially hard not to believe those things when we are being affected by the abuse. Trying to survive abuse is exhausting; many people who are experiencing abuse feel tired, overwhelmed, and depressed. A lot of survivors have noticed that their partners also do things on purpose to make them feel tired, overwhelmed, or stupid, or to make it hard for them to be a good parent.

You can ask: Is there anything that has helped you (or that might help you) to hold on to your sense of self or self worth, when your partner says these things? Are there things that have helped you (or can you think of things that might help you) feel good about yourself? Examples might include doing something you do well,
thinking about the people in your life who know that you deserve to be treated with kindness and respect, or doing things that are important to you or that make you feel good, such as listening to music; reading; building something; interacting with animals, children, or friends; working on a project; taking a walk; or writing a poem, meditation, or prayer. You can also offer to work with her to come up with something simple that she can recite or say to herself when she feels bad because of what her partner tells her.

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_A survivor is describing how her partner does things that make her feel hurt or scared or uncomfortable, and then disregards her reactions, accuses her of overreacting, or insists that she shouldn’t feel that way._

Try to validate her perspective by confirming that those things are hurtful, scary, or would make anyone feel uncomfortable. Find out if there is someone she trusts that she can check-in with regularly, who will remind her to listen to her own feelings and instincts. If it is safe or possible to do so, journaling or writing down her thoughts can be a helpful reminder of her own perspective. You can offer to work with her to come up with something simple that she can ask herself or recite to herself when her partner disregards or minimizes her feelings.

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_A survivor is describing how her partner deliberately does things to drive her crazy or make her feel like she’s losing her mind._

Tell her that this is a common tactic of abuse, and it’s effective in part because it’s hard for many people to believe that it happens. Find out if there is someone she trusts that she can check-in with regularly. Just putting these experiences into words and sharing them with someone who knows what is going on can be both grounding and validating. It may be difficult for her to trust her own perceptions. If she is receiving mental health treatment, talk with her about discussing this with her provider. If they don’t believe her, consider finding someone else. Talk with her about making sure her therapist or doctor documents the relationship between how she is feeling and the abuse she is experiencing.
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A survivor describes things that her partner is doing that are disrupting her sleep.

Validate that not getting enough sleep can really affect us. It can make us feel overwhelmed more easily or less in control of our emotions. You can ask: What effect do you think it has on you when you aren’t able to get enough sleep? Do you think your partner might be intentionally disrupting your sleep to make you feel those ways? If possible, work with her to develop a plan for trying to get more sleep.

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A survivor says that she wants to try and find a counselor or therapist to talk with.

Many survivors find it helpful to talk to someone. We know that cost is often one of the biggest barriers to accessing mental health services. If possible, develop a list of sliding scale and low-cost mental health providers in your area. In addition, you can use our resource, Locating Mental Health and Substance Abuse Supports for Survivors, to find support groups or peer-to-peer resources, many of which are free. It may also be an option for her to talk regularly with a friend, family member, or someone from her religious or spiritual community. If a survivor is looking for a therapist, you can let her know that she has the right to ask questions about a therapist’s experience working with trauma survivors and people experiencing domestic violence as well as other things that may be important to her, such as the therapist’s experience working with people with her cultural or religious background. If the person she is seeing ever doesn’t take her concerns seriously or tries to involve her partner in her treatment, or if for any reason she doesn’t want to keep seeing the therapist, she has the right to find another therapist.

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A survivor says that her partner is controlling her access to mental health treatment.

Remind her that she has a right to control her own mental health treatment and medications. Ask her about some of the ways that her partner is controlling her treatment so that you can help her safety plan around these concerns. For example, ask whether her partner is keeping her from accessing mental health treatment, interfering with her appointments, or speaking for her or preventing her from talking to doctors or mental health professionals. Ask whether her partner is controlling her prescription medications (e.g., forcing her to take an overdose, giving her too much or too little medication, or preventing her from taking it at all).
If she is experiencing interference with treatment or medications, can she discuss this with her doctor or therapist? (If she has told her doctor or therapist and they did not believe her or were not responsive, you may want to explore whether she can get a new doctor or therapist.) Is there a way that she can safely get to her appointments or access her medications without telling her partner? Can she change her contact information with her mental health provider or pharmacy? If she has legal documents (such as an advance directive), her partner may have a right to make medical decisions for her if she is unable to. Talk with her about making a plan to safely change that relationship to someone she trusts.

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A survivor says that her partner is using or threatening to use mental health issues against her in a legal or custody case.

Let her know this is a common tactic of abuse and that there are guidelines for advocates and attorneys for dealing with these situations. If she is already working with an advocate or attorney, she can suggest they contact the Center for Survivor Advocacy and Justice (www.csaj.org), the Judge David L. Bazelon Center for Mental Health Law (www.bazelon.org), or the National Center on Domestic Violence, Trauma & Mental Health. She may want to share our resource, *Representing Domestic Violence Survivors Who Are Experiencing Trauma and Other Mental Health Challenges: A Handbook for Attorneys*, available on our website, with her attorney.

For more information and resources, visit our website.

If you have feedback on this resource or to share how you are using this tool, contact us and let us know!