

**TRI-COUNTY BATTERERS INTERVENTION NETWORK**  
**Meeting Minutes**  
**June 3, 2003**

**Members Present:** Gustavo Picazo, Paula Manley, Chris Huffine, Mai Kayanuma, David Houston, Elsie Garland, Songcha Bowman, Marc Hess

Minutes by Elsie Garland, edited by Chris Huffine

**Guest Speaker: Jesse Bledsoe – PSU student      Topic: Attention Deficit Hyperactivity Disorder and Battering**

Jesse is a junior at PSU. He worked for two years in a special ed classroom with students diagnosed with Fetal Alcohol Syndrome.

Jesse did a psych lit search and found very few resources on the combination of ADD and Domestic Violence perpetrators. He referred to Hollowell, Driven to Distraction who defines and delineates symptoms. He talks about neurological genesis of inattention, distractibility, impulsivity and restlessness. True ADD is not episodic but is chronic, ongoing, and interminable. Many other conditions look like ADD; Learning Disabilities can mask as ADD. Students with High I.Q.s can also appear to be ADD.

These days ADD is a very popular diagnosis and, as a consequence, tends to be overdiagnosed in recent years. Where there is ADHD, there is a high concordance with co-morbid disorders, i.e. depression, L. Disabilities, etc.

Jesse also referenced Daniel Amen, Change Your Brain, Change Your Behavior. Regarding adolescents, Oppositional Defiant Disorder is differentiated from ADHD. ODD is planned defiance; ADHD is impulsive defiance.

Further discussion pertained to clients' use of THC and Methamphetamines to help them calm and focus.

One person asked about effective strategies, tools, and treatment modalities for ADD batterers as well as non-ADD batterers.

Suggestions included: Experiential modalities and exercises, structure, routine and predictability. Have clients make a list, a daily schedule. Remind them to look at their list and external cues. Give them self-regulation tools, stimulus of touch, gentle reminders, prompting, "When will you do your journals this week?"; and reduce the sound levels. The differences between ADHD men and violent men is that batterers have a long-term pattern of controlling behaviors; ADHD is not a pattern of controlling behaviors. Very few 45 year old ADHD men in BIP, but there are many 45 year old Anti-Social Personality Dx or Borderline Personality Dx. Daniel Amen's website is [www.amenclinic.com](http://www.amenclinic.com).

Another person noted that ADHD is primarily related to poor impulse control, whereas a central aspect of domestic violence is a willful and patterned use of power and control. While ADHD may lead to periodic inappropriate outbursts that could be abusive, that condition alone would not cause a sustained pattern of abuse and control.

Just as addiction does not cause domestic violence, but can be a contributing and co-existing factor that also needs to be addressed, ADHD can be seen similarly. So some men who are abusive may also have ADHD, which may even contribute to their abusive behavior, but is not the primary cause, nor should it be the primary focus. However, it may be a condition that needs to be considered when doing other forms of intervention related to domestic violence.

Listed below is Jesse's summary of the one dissertation/study he could find related to ADHD and DV.

An investigation of the presence of adult attention deficit hyperactivity disorder behaviors in a population of court mandated domestic violence perpetrators. Mandell, Allan R., Ph.D. Oregon State University, 1998. 142pp. Advisor: Lizbeth A. Gray. Dissertation Abstracts International vol. 59, no.12 June 1999

Highlights from study abstract:

- 65 participants from a court mandated domestic violence treatment program were given a questionnaire to assess for the presence of adult attention deficit hyperactivity disorder (ADHD) behaviors.
- 93.8% or (36) met or surpassed the Wender Utah Rating scale (WURS) indicating the presence of ADHD behaviors.
- 23.0% or (15) met or surpassed the Attention Deficit Scales for Adults (ADSA) indicating the presence of ADHD behaviors.
- Treatment suggestions include: "Increased use of experiential exercises, minimizing distractions, increasing awareness of potential sensitivity to sound levels, and inclusion of stress reduction techniques"

Why, according to the author, should we look at ADHD?

- Literature suggests that 50% of male children diagnosed with ADHD may continue to display symptoms of the disorder into adulthood, such as low thresholds for provocation and aggressive reactivity to provocation (Murphy, et al., 1992).
- Adults with ADHD may have more trouble identifying and solving problems in their relationships than adults without ADHD. Specifically, adults with ADHD may be less equipped to manage feelings of rejection (Heilveil & Clark, 1990).
- Research by Kane (1990) and Mannuzza (1988) indicates "that adults with ADHD continue to have adjustment difficulties, exhibit a higher incidence of abusive verbal behavior than non-ADHD adults, exhibit academic and job performance instability, and are more disorganized, and confused than non-ADHD adults".

Highlights from author's "Implications for Treatment" section:

- Use engaging experiential exercises to solidify treatment concepts
- Minimize environmental distractions, particularly sound, both during group and in the home to whatever extent possible
- Help men become aware of situations where they may become distracted and teach techniques to help men regain their focus
- Spend time identifying particularly stress inducing situations and teach men how to manage their feelings of stress either through relaxation exercises or guided imagery
- Help men become more proficient at resolving relationship problems
- Lufi & Parish-Plass (1995) concluded that children with ADHD have higher external locus of control. Subsequently, it might be helpful to increase amount of time spent helping men investigate their responsibility for the events in their lives.

PSU team offers these important limitations to consider:

- Extensive literature search revealed only 1 study (Mandell, 1999) on ADHD and battering
- It is unknown what percentage of male adults with ADHD don't choose to batter

Dattler

- There is still much debate about the ADHD diagnostic category.