An Assessment of Court-Mandated Treatment of Batterers in Kentucky

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An Assessment of Court-Mandated Treatment of Batterers in Kentucky

Abstract of Thesis

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Morehead State University, 1993

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Neil Weisgal
Since ancient times, the patriarch of a family was given the right to use force against women under his control (Buzawa & Buzawa, 1990:23). The battered women's movement is based on a philosophy of feminist change. This feminist philosophy brought the issue of male violence against women to public attention. The grass-roots feminists attempted to challenge patriarchal relationships, while the mental health movement saw batterers to be in need of treatment.

Therapeutic approaches tend to individualize battering. Furthermore, therapeutic approaches often view both men and women as batterers. This approach to understanding battering implies battering is a two-way street. Feminists argue the response by the criminal justice system is inadequate. Radical feminists argue the criminal justice system is based on patriarchal beliefs and attitudes. Therefore, the criminal justice system fails to challenge patriarchal relations. Furthermore, the economic dependence of wives upon husbands has shackled them to subordinate positions. Society's beliefs about men as being dominating and strong and women as being subordinate and nurturing have become part of the patriarchal system that serves to control women. Within the abusive marriage, women become trapped by economic, social, and cultural factors. Feminists challenge the power relationship between men and women in society.

An assessment of the mental health communities' impact on reducing levels of domestic violence will be made. How successful is therapeutic treatment in lowering
levels of violence by men toward women? I will assess Kentucky’s therapeutic treat-
ment of batterers in relation to the meanings and motives upon which batterers’
violence is based. Primary qualitative data was collected through semi-structured
interviews with key informants (three program directors, five therapists, one shelter
leaders and one state domestic violence trainer) involved in the treatment of court-
mandated batterers in Kentucky.

If the basic social causes of male violence are not dealt with, the result of treating
batterers may do more to create a new source of clients than to reduce the levels of
domestic violence. Pro-feminists argue that individualization or failing to viewing
battering as men’s responsibility must be overcome if levels of violence against
women are to be lowered.
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CHAPTER ONE: INTRODUCTION

An Historical Look at Battering in America

In the seventeenth century, the Puritan colonies passed the first legislation in the West prohibiting the beating of one's spouse (Pleck, 1987:21). However, this focus on battering represented the importance of preserving the social and religious order, more than a belief in individual rights (Pleck, 1987:23). Puritan law encouraged the use of moderate force. Moderate force by a man was acceptable and seen as a necessary duty by the family patriarch to follow the narrow road to salvation (Pleck, 1987:17-18). Furthermore, these first laws were confined to the Puritans. However, when a case of spouse beating occurred it was seldom enforced (Pleck, 1987:27). The interest of Puritan law prohibiting spouse beating was in preserving religious and social order, not in protecting women's rights per se. As Puritan communal life deteriorated so did the concern for family discord (Pleck, 1987:29).

Domestic violence again returned as a focus for concern in the mid-nineteenth century with the antebellum temperance advocates conjuring up images of the "drunkard's wife" (Pleck, 1987:50). The antebellum temperance movement was the first movement by women against male domination (Pleck, 1987:52-53). After the Civil War battering returned as a focus for concern. The "social purity
movement" refocused attention on crimes against women and led to the introduction of whipping post for the abusive husband (Pleck, 1987:108).

However, by the early twentieth century, domestic violence became viewed as a moral question (Pleck, 1987:121). Moral ideas about battering as a social and religious concern became viewed as out of the proper reach of government control. As society became more secularized, the enforcement of moral standards in private conduct was considered out of the proper reach of government control (Buzawa & Buzawa, 1990:24).

Freudian psychoanalytic theory of the 1930s, with its emphasis on "female masochism" further fueled the silence of women's abuse and victimization (Pleck, 1987:159). Treatment for the female was an acceptable way of ending the violence. Psychoanalytic theory viewed battering as a dysfunction within the individual.

Not until the early 1970s did the women's movement bring the issues of battering and women's oppression to public attention. The battered women's movement of the 1970s brought public attention to the victimization of women within the home. Women's victimization in the home was once again brought into public view. No longer would the years of victimization go silent. Grass-roots feminists viewed battering as part of the patriarchal system that controls and dominates women in society.
Theoretical Approaches to Treating Batterers

Two theoretical approaches to be reviewed are the pro-feminist approach and the therapeutic approach to treating batterers. The pro-feminist approach address males as the batterers, and views men's domination of women as the source of the problem. The therapeutic approach treats domestic violence as an individual psycho-pathological state. Furthermore, some therapeutic approaches see battering as family dysfunction. Radical feminists and many conflict theorists argue that the family can not be functional due to the inequality between husband and wife.

Pro-feminist approaches are based on assumptions that the violence men direct toward women is not beyond their comprehension or control; thus the violence is not an uncontrollable impulse, blind rage, or alcohol induced action (Dobash & Dobash, 1992:245). Men are forced from their narrow perceptions that a man is a man when he is in control and dominant. The pro-feminist approach stresses "critical moments" when men must take responsibility to end violence directed toward women for control and domination (Dobash & Dobash, 1992:246). The man is forced to reconstruct his violence from what was said, felt, and done to understand and stop the violence (Dobash & Dobash, 1992:246). Pro-feminist approaches are a radical treatment that addresses the patriarchal relationships in society.
The therapeutic approach is an individual psycho-pathological conception of violence. To first understand the approach, one must examine the United States as a therapeutic society where social problems, economic problems, and most anything can be seen as personal problems in need of therapy. This has been referred to as the "medicalization of deviance" (Conrad & Schneider, 1985:32). The psychiatric perspectives shift the focus from social and economic conditions of exploitation to issues of personalities (Dobash & Dobash, 1992:214). The mental health field exploits society and individuals through its ability to convince large numbers of people that the route to improving themselves as individuals is through counseling and therapy by professionals (Dobash & Dobash, 1992:216). This reduces the problems in our world to an inter-personal relationship where the only thing we can change or understand is ourselves (Dobash & Dobash, 1992:218).

The Transformation of Battering by Mental Health Professionals: The Individualization of a Social Problem

The feminist grass-roots women’s movement ran into conflict with its original goals, through its very growth. The women’s movement, born out of the feminist challenges to patriarchy and inequality, was changed through outside support of professionals. The battered women’s movement sought coalitions with others
interested in promoting their ideas. One important coalition was with mental health professionals. My attention will focus on the impact of the mental health communities’ interest in service provision on the goals of the battered women’s movement. The mental health field has an interest not only in providing services for the victim but also in providing services for the perpetrator. Very often the ones identifying the problem are those who have a service to offer (Akers, 1992:17). From one viewpoint the treatment of the perpetrator or batterer is the recognition of the need to address the issues of domestic violence and to reduce victimization. From a different vantage point, it may constitute exploitation (Aday, 1990:174). Unless the basic social causes of battering are addressed, the result serves more to create a new clientele, than to reduce the level of domestic violence in society (Aday, 1990:185).

What is Society doing with Batterers?

The women’s movement brought a private subject into the public domain. The victims had long known the problem, while the women’s movement brought battering to public awareness. This awareness of a social problem can be traced to the growth of the women’s movement. The media was essential in bringing the ideas of the battered women’s movement to public attention. One of the first books that publicized the problem of battering was Scream Quietly or the
Neighbors Will Hear (1974), written by Erin Pizzey (Tierney, 1982:207). By the mid-1970s domestic violence was given attention through extensive news coverage of issues such as wives who kill their husbands (Tierney, 1982:212-213). Popular women's magazines started coverage with articles such as Readers Digest (1976), "How Battered Women Can Get Help" and Mc Calls (1978), "Powerless in the Suburbs: The Battered Wife". Women's magazines began focusing not only on the victims but also the batterers. Articles such as MacLeans (1983), "Curbing the Wife-Beaters" brought the issue of batterers' treatment to public attention. This awareness of a need led to the recruitment of further support and resources with various interests.

The mental health system's need for new and more stable sources of clientele have led to the criminal justice system (Weisner & Room, 1984:176). A new source of court-mandated clients can be found within the criminal justice system. The criminal justice system can sentence a perpetrator to treatment. This stable influx of batterers into treatment programs allows for the mental health system's expansion. Often this expansion is done through redefining the problems in need of treatment. This expansion of services encompasses the area of battering as in need of professional treatment. The court-mandated batterer ensures through coercion the arrival of new clientele who would otherwise not attend treatment. Court coercion also serves to induce payment for services from batterers, needed
for the completion of treatment (Weisner & Room, 1984:176). Completion of
court-mandated treatment requires not only that batterers attend the sessions, but
that services provided are paid in full. When a batterer is court-mandated into
treatment, that includes being responsible for payment of services. A letter of the
completion to the court is not sent until the batterer has paid in full for services.

Traditional treatment suggest that there is an illness. Therefore, people are
not responsible for having an illness. However, if a perpetrator stops coming to
treatment, his case is returned to court for disposition. The penalty for failing to
complete a diversion agreement is often fifteen days in jail, thirty days probated
for two years. Therefore, if a batterer fails to attend treatment he will be
sentenced to jail for fifteen days. Furthermore, if he is remanded and fails to
complete or has another battering crime in the next two years, he will be
sentenced to thirty days in jail. Batterers who are court-mandated due to a
domestic violence contempt charge, because they violated their domestic violence
order, may have up to ninety days in jail if they fail to attend and complete the
batterer program. The criminal justice system is faced with an enormous task of
what to do with batterers.

*Up to eight million times each year, this nation's police are confronted with a
victim who has just been beaten by a spouse or lover. Domestic assault is the
single most frequent form of violence that police encounter, more common than all
other forms of violence combined (Sherman, 1992:1).*
How many victims never come to police attention? Straus, Gelles, and Steinmetz (1980) estimate that eighteen million incidents per year occur that police could classify as an assault, while only 20 to 40% of these are reported to police (Straus, Gelles, & Steinmetz, 1980:32).

Is it feasible for the criminal justice system to jail all these batterers? The number of prisoners in federal and state correctional authorities reached a record high of 823,414 at year end 1991 (U.S. Department of Justice, May 1992). The numbers of inmates in federal and state prisons have steadily increased. Since 1980 the total percent change by 1991 was 149.7% (N=329,821 in 1980; N=823,414 in 1990) (U.S. Department of Justice, May 1992). As of 1991, there were 588 sentenced male prisoners for every hundred thousand males in the U.S. (U.S. Department of Justice, January 1992). The average daily jail population in the United States as of June 28, 1991, was 422,609. Furthermore jails were operating 101% of rated capacity in 1991, which is down from the 104% in 1990 (U.S. Department of Statistics, June 1992). Kentucky statistics for 1989 showed 5,558 adults were in the custody of jails and 6,878 were in custody of prisons, 3,133 were on parole, while 8,062 were on probation (U.S. Department of Justice, October 1991). See tables I and II.
Table I: Numbers of Inmates in Federal and State Prisons

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<th>1980</th>
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<td>N=329,821</td>
<td>N=823,414</td>
<td>146.7%</td>
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(U.S. Department of Justice, May 1992)

Table II

Adults in Custody of Jails, Prisons, on Parole and Probation in Kentucky

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<tr>
<td></td>
<td>Custody of jails: 5,558 adults</td>
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<tr>
<td></td>
<td>Custody of prisons: 6,878</td>
</tr>
<tr>
<td></td>
<td>On parole: 3,133</td>
</tr>
<tr>
<td></td>
<td>On probation: 8,062</td>
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</table>

(U.S. Department of Justice, October 1991)

Is jailing batterers more expensive than treatment? The criminal justice system also has an interest in the treatment over the sentencing of batterers. Currently it would be impossible to jail all the batterers. If the police encounter
battering eight million times a year, where would the courts jail all these batterers? The criminal justice system would have to either build more jails or put priorities on which criminals should be jailed. According to Roger Case, the jailer of the Maysville, Kentucky, jail, the cost to build a eighty-five bed dormitory style jail is 2.2 million dollars or $25,000 per bed. However, many states require that each inmate have their own single cell. A single cell jail costs approximately $50,000 per bed to build. The dormitory style prison houses up to eight inmates per dorm. Another possibility would be to sentence batterers and reduce the prosecution of another jail population such as drug offenders. Currently, the cost of jailing someone in Kentucky is estimated to be $22.00 per day. Thus, a thirty-day jail sentence would cost an existing jail $660.00. The court system’s interest in treatment may not be a belief in treating batterers, but rather an alternative to sentencing.

Court-mandated treatment could also be viewed as necessary for the mental health system’s growth. The growth of the mental health service and treatment industry has created a need for sufficiently larger and larger clientele to justify continued and increasing amounts of funding (Weisner & Room, 1984:175). Victimized women and male batterers are a growing source of "clientele" for the mental health community. The cost, per person, ranges from four dollars a session to a hundred. Community mental health systems often use a sliding scale
fee. A sliding scale fee is based on the client's income. Clients are charged a minimum fee from $4.00 to $100.00 a session. However, the state makes up the difference so that the full fee is paid. For example, if a client pays $4.00 a visit, the state will pay $96.00. Furthermore, the Medical Assistance Card for the state of Kentucky will pay in the case for certain psychiatric diagnoses. A batterer with a Medical Assistance Card may pay nothing if they carry a psychiatric diagnosis, while the state’s cost for twelve sessions might be as high as $1,200. Batterers who pay the minimum sliding-scale fee for ten sessions might pay $40.00 ($4.00 x 10), while the state cost would be $960.00. Other mental health centers in Kentucky have a set fee for a batterer program. The average cost for this type of batterer program is $310.00. It appears that the batterer often has a small investment in treatment, while the state picks up the bill. Nonetheless, it would be safe to conclude that treatment is less expensive than building new jails. However, sentencing a batterer to an existing jail for thirty-days would cost the state less in some cases and more in others. Batterers, mental health professionals and the criminal justice system appear to be profiting from maintaining the status quo.

The lack of stiff sentencing of batterers and such things as domestic violence petitions could be viewed as a form of decriminalization of battering by the criminal justice system. The offense of breaking a domestic violence petition
results in fifteen days in a jail, a misdemeanor. Fourth-degree assault, also a misdemeanor, may result in thirty days in jail. The penalties for battering and breaking a domestic violence petition are value judgements of the seriousness of battering by the courts.

Does jailing batterers work? Sentencing suggests that batterers are responsible and should be held accountable for their actions. Thus, battering is a crime and should be treated just as any other criminal act. The Minneapolis Police Department conducted the first experiment that tested the effects of mandatory arrest laws (Sherman, 1992:2). Control groups and randomized selection of cases were utilized in the Minneapolis experiment to measure the effect of mandatory arrest laws. "The Minneapolis experiment found that arrest and a night in jail for the suspect cut in half the risk of repeat violence against the same victim over a six-month follow-up period, from 20% to 10%" (Sherman, 1992:2). Nonetheless, the Minneapolis experiment did not prove that arrest is the best policy for reducing recidivism in every community, or for all people (Sherman, 1992:3). Currently it is difficult, if not impossible, to know what effect arrest policy is likely to have on a city. "Arrest reduces domestic violence in some cities but increases it in others" (Sherman, 1992:19). Mandatory arrest policies reduce violence against employed women; however, it increases violence among poor women (Sherman, 1992:19). Even if arrest reduces the cities’ overall level of
domestic violence, it may increase the violence against the poorest victims (Sherman, 1992:19). "Arrest reduces domestic violence in the short run but can increase it in the long run" (Sherman, 1992:19). No arrest places the woman in danger after the police leave. However, making an arrest may be more dangerous for the victim or another victim in the long run (Sherman, 1992:19).

Furthermore, society places a high value on privacy, too high to prevent future violence (Sherman, 1992:19). Police tend to respond to incidents rather than patterns of violence (Sherman, 1992:20). Police tend to react to cases, not patterns of domestic violence (Sherman, 1992:43). It makes little sense for police to react to all domestic disputes alike, since a limited number of couples in specific areas of the city tend to produce most of the incidents (Sherman, 1992:23). Furthermore, mandatory arrest laws can backfire depending on an individual's stake in the community (Sherman, 1992:22). If a perpetrator has a high stake in the community such as being employed, being educated and being married then mandatory arrest laws are more likely to be effective (Sherman, 1992:19-24). However, mandatory arrest laws for perpetrators with no stake in the community may increase the rates of domestic violence (Sherman, 1992:19-24). Furthermore, nonarrest treatments such as separation, police giving verbal warnings, or providing one-shot counseling appears to be a more powerful
alternative to mandatory arrest for misdemeanor domestic violence (Sherman, 1992:263).

The criminal justice system and therapeutic community benefit from the battered women’s movement. The criminal justice response serves to maintain the status quo of society. The mental health system profits from a new clientele in need of treatment. However, the shift from social change to provision of services deeply affects the ideology of the battered women’s movement’s challenges against patriarchy. Have women been further exploited by the therapeutic treatment of batterers? Why does the criminal justice system often favor treatment over sentencing? Who suffers from jailing batterers? Does court-mandated treatment for batterers lower the level of domestic violence in Kentucky or create a new class of clientele? What effect does the treatment for court-mandated batterers by the therapeutic community have on the challenge against a patriarchal society? I hope to address these questions through my assessment of batterer treatment.

The review of the literature is chapter two; it examines battering and the treatment of battering. The frequencies and types of violence by men toward women are examined through the literature. I will examine treatment for offenders and the effectiveness of these interventions.

Chapter three is the methodology of my study. I will examine the different types of research methods and focus on the benefits and drawbacks of focused
interviewing. My methodology will include a rationale for my choice of qualitative interviewing and address the issue of subjectivity.

The conflict between feminist and therapeutic views of battering are examined in chapter four. I will present data summarizing themes revealed from interviews. Direct quotes from my interviews are used to show the significance of these themes.

Chapter five is the theoretical interpretation of my study. For purposes of my study I will adopt a radical feminist orientation toward battering. The input of the mental health community toward lowering battering will be assessed. The question of who benefits and who suffers from court-mandated treatment will be addressed.

In the final chapters, I bring the literature, methodology, results, and theoretical interpretation together. I conclude that unless the basic social causes are dealt with, the therapeutic community may be acting more in its own interest to create a new clientele, than to reduce the levels of domestic violence in Kentucky. The changes which radical feminists would like to see threaten the current power relationships of society. The criminal justice system and the mental health community both stand to profit from the status quo.
CHAPTER TWO: REVIEW OF THE LITERATURE ON BATTERING AND TREATMENT OF BATTERERS

Introduction

The literature review of my study will examine the types and frequencies of male violence toward women. I will examine the literature on the treatment of offenders and the effectiveness of treatment.

The Prevalence of Violence by Men Toward Women

Of all violent crimes, domestic violence is thought to be the most common. It has been estimated that fifty to sixty percent of American families will experience some violence (Straus, 1977-78:443). Furthermore, it is estimated that within a one year period two million women are beaten by their spouse (Straus, 1977-78:443). Straus (1977-78) reports that almost 13% of all marriages in the U.S. may involve chronic, severe violence. Estimates of wife abuse, or wife assault, were reported in 25% of all marriages (Straus, Gelles, & Steinmetz, 1980:33-34). As for Kentucky, Lou Harris’s study (1979) of spousal violence reported 21% of those women surveyed answered that they have been battered by their spouse during the relationship (Schulman, 1979:1). Furthermore, 10% of
the women in the Lou Harris study reported experiencing some degree of violence from the partner over the last twelve months (Schulman, 1979:1). Since Lou Harris's study in 1979 the composition of Kentucky has changed little demographically. As of the 1990 statistics, Kentucky’s population has changed little more than 0.7% from 1980, totaling 3,685,296 (1992 Kentucky Deskbook of Economic Statistics). Therefore, if the status quo of battering in Kentucky has been perpetuated, then one could expect the reports of the Lou Harris study to have some importance today.

Lou Harris's survey of 1,793 women in Kentucky clearly reports, "that spousal violence and abuse, contrary to myth, are not confined to poor, but are found in every societal level" (Schulman, 1979:17). Domestic violence is not confined to the unemployed and poor. Although the highest reports of battering are found among the poor, it is believed that poor people are more likely to come to the attention of public agencies (Martin, 1976:32). It is more likely that middle- and upper-class families can better protect their privacy than poor families.

Violence by men toward women takes many forms including physical battering, sexual battering, psychological battering, and destruction of property (Ganley, 1985:1). Radical feminists argue that whatever the type of abuse is, all battering involves the control and domination of women.
Patriarchal Structures

Patriarchy is a system of social relations in which men dominate women. The patriarchal system is made up of various social structures that serve the domination and control of women by men (Walby, 1990:20). Walby (1990) explains six main structures: housework, paid work, the state, violence, sexuality and culture. Within the home women’s household labor can be exploited by their husbands or cohabitees. Traditionally the wife is responsible for cleaning, caring for the children, and serving the man within the household. She cooks and cleans not only for herself but for the rest of the family. Thus, the husband exploits his wife’s labor within the household. Within the economic level of paid work women may find jobs; however, the jobs are generally less skilled, lower paying jobs. Furthermore, the pay between men and women is not equal for the same job. “In 1986 women earned 74 per cent of men’s hourly rates” (Walby, 1990:25). In 1991 women’s median earnings for executive, administrators, and managerial jobs was $12,250, while men’s median earnings for these same jobs was $21,522 (U.S. Department of Commerce, March 1991). Women held only nineteen percent of lawyer and judges jobs and seventeen percent of engineers jobs; while women held eleven percent of professional jobs; while women held ninety-seven percent of receptionists jobs, ninety-nine percent of secretarial jobs and eighty-one percent of general office clerk jobs in the United States (U.S.
Radical feminists argue that the state is dominated by male control, therefore the laws and practices are in men’s interest. Furthermore, violence by men toward women serves to keep women as a group in subordinate positions to men. Walby (1990) argues that sexual relations are patriarchal (Walby, 1990:120). Men often view women as sexual objects, reducing women to mere objects. "Within heterosexual relations women, emotionally and materially, as well as sexually, serve men" (Walby, 1990:120). Cultural institutions of patriarchy includes the institutions that create the representation of women within a patriarchal gaze (Walby, 1990:21). Religion supports the subordination of women to men. Furthermore, Walby (1990) argues that academia has traditionally been taught from a male’s perspective of social life. That traditional academic research and theories are an attempt by men to understand the world around men. Furthermore, the issues of interest to study have traditionally been thought from a male perspective.

Radical feminists such Walby (1990) argue that it is vital to understand both the private and public forms of patriarchy if we are going to understand the problem of violence by men against women (Walby, 1990:24). Walby (1990) argues that women are dominated from the private spheres of housework and sexuality to the public arena paid work by men. One must "distinguish analytically between changes in the degree of patriarchy from changes in its form."
The interrelationships between these structures create different forms of patriarchy (Walby, 1990:16). Two main forms of patriarchy are private and public. A private form of patriarchy is the home, while a public form is cultural institutions. The degrees of patriarchy are the intensity of oppression on a specific dimension (Walby, 1990:174).

The structures of patriarchy affect each other but are still relatively autonomous. An example of the inter-relationship of patriarchal structures can be seen through the use of male violence. Walby (1990) argues male violence may be used to maintain control over women when a usual form of control and power is missing (Walby, 1990:136). When a usual form of male control such as a man's superior wage packet is lost, the degree of violence toward women may increase as a means for control (Walby, 1990:60). A study by John O'Brien (1975) suggests that men are more likely to use violence against women within a marriage when they lose clear economic and educational superiority over their wives (Walby, 1990:136). Sherman (1992) also suggests that aspects of battering rates may correlate with social class (Sherman, 1992:19). "Arrest reduces domestic violence among employed people but increases it among unemployed people" (Sherman, 1992: 19). However, it may well be that the unemployed are more likely to come to police attention. Furthermore, Schulman (1979) clearly
reports that contrary to myth, spousal violence and abuse "are not confined to poor, but are found in every societal level" (Schulman, 1979:17).

**Physical Battering**

Physical battering includes any form of violence directed toward the victim’s body. Examples include punching, slapping, choking, burning, grabbing, biting, knifing, shooting, and poisoning. Furthermore, society shows more tolerance of violence against women than other violent crimes, especially when the violence is instigated by husbands, lovers, and dates (Scully, 1992:1). Society’s mores do not tolerate a stranger beating another in a parking lot. However, norms of society often tolerate a man arguing with and pushing his *wife* in a parking lot.

**Sexual Battering**

Sexual battering involves unwanted sexual acts against the victim’s body (Ganley, 1985:1). Examples include any forced sexual activity and such things as unwanted pinching of breast and buttocks. Sexual battering by husbands is the most unreported of assaulting behaviors by men against women (Russell, 1990:303).
Radical feminists argue the key to an understanding of wife rape, and all violence toward women, lies within an understanding of our patriarchal history. Within our patriarchal history wives and children have often been viewed as the husbands' property. Radical feminists such as Russell (1990) argue that this issue of property is illustrated by the rape of wives, lovers and daughters (Russell, 1990:110). It is important to understand this problem as primarily a male problem, and avoid labels such as family violence (Russell, 1990:109). Traditionally rape and sexual violence have been perceived as women's problems. Feminists argue rape and sexual violence is perpetrated mainly by men and should be viewed as men's responsibilities and issues (Scully, 1992:1). The battered women's problem takes the focus off men and places it on women. The problem is violent men. The responsibility for changing violence by men toward women lies within men, not women. Only recently has the women's movement brought to public attention the issues of women's inequality and abuse. This abuse includes the rape of wives. Battering serves as another way to control and dominate the woman. Before the women's movement of the early nineteen-seventies, little research had been done on the issue of rape of wives. This is due in part to beliefs about the origins of sexual violence, that sexual violence is a psycho-pathological, isolated, individual problem, by a few men (Scully, 1992:1). Radical feminists such as Scully (1992) argue that these disease models of rape
only served to perpetuate women's subordination and avoided collectively pinning the responsibility on men (Scully, 1992:1).

Today there is considerable disagreement on what actually makes up wife rape. Traditional legal definitions of rape include "forced intercourse (vaginal-penile penetration); intercourse obtained by threat of force; intercourse when consent is impossible because the victim is unconscious, severely drugged, asleep, or in another way totally helpless" (Russell, 1990:43). The feminists oppose the traditional legal definition, preferring to encompass "any sexual intimacy or activity that is forced on one person by another" (Russell, 1990:43).

For those who view domestic violence and wife rape within the context of patriarchy, wife-rape is viewed as another form of violence, control, and abuse of women by men. Moreover, there exists an overlap between those wives who are raped and those wives who are beaten. In Russell’s study, in 54% of marriages where the wives are abused, wife beating is the major or only problem (Russell, 1991:91). In 23% of marriages, wife beating and wife rape are equally a problem (Russell, 1990:91). Furthermore, 31% of wife rapes were isolated cases in the marriage, equal to the percentage that occurred over twenty times (Russell, 1990:111). Thirty-five percent of those cases involving rape involved verbal threats (Russell, 1990:111). Fifty percent involved no verbal threats, 14% involved weapons, 19% involved extreme beating, 16% involved hitting, kicking
and slapping, 58% involved minimal levels of pinning down and pushing, and 7% involved no force - due to an inability to consent in a drugged or asleep state (Russell, 1990:111). Furthermore, the rape usually occurred within a private dwelling such as the home or a motel room (Russell, 1990:112-113).

Russell's study shows that most women's escape from the sexual battering came when the relationship was ended. Forty-two percent of the women attributed the end of their rapes to their leaving the marriage (Russell, 1990:114). Russell reports that only 2 percent reported their rapes were brought to an end due to counseling (Russell, 1990:114).

In a study by Scully (1992), 114 convicted rapists were asked "how they would feel and what would they do if their significant woman was raped" (Scully, 1992:5). Scully (1992) reported they reacted in expressions of anger and violence, and the majority said they would get revenge (Scully, 1992:5). It becomes hard to view this revenge as protecting their women, since these men who rape women also abused their woman. Perhaps their revenge is motivated due to their own perceived offense. He views the woman as his property; therefore he becomes the offended party - not her (Scully, 1992:5). However, Scully fails to address the question, "What if your father was raped?". If the father had been raped would they still have been angry and wanted revenge? Does he become the offended party or is it something else?
It is acknowledged that forced rape is the most under-reported of violent crimes. The results of Russell's study "show that only 9.5 percent (N=930) of all the extramarital rapes revealed to an interviewer . . . were reported to police" (Russell, 1990:303). The low number of extramarital rapes reported to police is a serious concern. In 1979, 22% of the total numbers of females murdered were murdered by their husbands. Radical feminists argue that the abuse, rape and murder of women is a product of the unequal relationships of power between husbands and wives.

**Psychological Battering**

Psychological battering is an assault against someone's state of well being (Ganley, 1985:1). It is not physical in nature; however, it is nonetheless an assault against her psychological state of self-worth and security. With psychological battering, there exists the *fear* of coming physical abuse. According to Ganley (1985), psychological battering, "has to have at least one (prior) physical attack against the person or their property in the relationship" (Ganley, 1985:1). Examples include threats of violence, control over movement (where and when one can go somewhere), swearing, and attacks upon the victim's self-esteem.
Psychological battering has more effect on the victim than lowering her self-esteem. Carmen, Rieker, and Mills (1984) found that 43% (N=188) of those patients in a psychiatric hospital had histories of physical, sexual, or both physical and sexual abuse; over half (51%) reported being victimized by their spouse, or ex-spouse (Carmen, Rieker, & Mills, 1984:379). Of the 43% of abused patients (N=80), 53% were physically abused, 19% were sexually abused, and 29% had been both physically and sexually abused (Carmen, Rieker, & Mills, 1984:379). Moreover, 90% (N=188) of the patients who reported being abused were victimized by family members (Carmen, Rieker, & Mills, 1984:378). In another study, 68% (N=31) of those psychiatric outpatients interviewed reported past physical or sexual assault (Jacobson, 1989:755). Either psychiatric hospitals are revealing more battering that is unnoticed in the general public, or women who are battered show higher rates of psychiatric hospitalizations. Victimized women who have been in long term relationships of repeated battering, characterized by trauma, captivity, and control by their abusers, have lead to the identification of Complex Post-Traumatic Stress Disorder (CPTSD) (Herman, 1992:377). This syndrome is under consideration for the coming DSM-IV (Diagnostic and Statistical Manual of Mental Disorders - Fourth edition) as DESNOS (Disorders of Extreme Stress Not Otherwise Specified) (Herman, 1992:378). This diagnosis
could be used to document the long term psychological stress that battered women have lived with.

**Destruction of Property**

Destruction of property is an assault, not directed physically to the victim's body, but nonetheless directed toward her (Ganley, 1985:1). The victim is made to feel her own vulnerability when a violent male destroys or damages her property or pets. The destruction of her property sends a clear message to her that this violence may well be directed to her next.

**Critical Review of the Literature on Interventions with Batterers**

Treatment for the batterer directly addresses the needs of battered women. Batterer treatment is an attempt to end the violence by men toward women. However, concerns about batterer treatment effectiveness and methodological concerns about assessment of treatment are causes for alarm.

Assessing whether treatment programs for batterers really work is very important to an understanding of the therapeutic approach and the battered women's movement goals. "What works" becomes the focus when looking at the
different levels of intervention: the individual, the couple, men's groups, the institution, and the culture.

At the individual level there is a void in research directed specifically toward batterer treatment (Eisikovits & Edleson, 1989:387). No batterer treatment interventions have been assessed at the individual level.

Evaluations of couples counseling appear to be ineffective. Taylor's study reports that all the men had used violence within six months after couples counseling (Taylor, 1984:11-12). A major problem with couples research has been a failure to include a comparison group (Eisikovits & Edleson, 1989:392). The lack of a control group prevents attribution of causal observations. A control or comparison group for the studies could be used to figure the actual effects of treatment verses other variables such as arrest and prosecution. Another criticism on the effectiveness of couples treatment is how reports of violence free relationships are made. Deschner, McNeil and Moore (1986) report 85% of fifteen couples questioned eight months following couples treatment, as free from battering (Deschner, McNeil & Moore, 1986:55). However, their study showed that five of the eight couples reported minor violence following couples treatment (Deschner, McNeil & Moore, 1986:59). The minor incidents were not defined as battering, so the five couples were considered violence free (Eisikovits & Edleson, 1989:391). Harris (1986) presents a further problem in couples treatment results.
Follow-up studies by Harris (1986) varied anywhere from two months to three years following couples treatment (Eisikovits & Edleson, 1989:392). These follow-up studies are then all collapsed together as if it were one static point in time (Eisikovits & Edleson, 1989:392). Furthermore, Harris (1986) reports that 73% of these couples were successful, however, "successful" is not defined (Eisikovits & Edleson, 1989:392). Niedig, Friedman and Collins (1985) reported outcomes from a study of 100 couples as showing "significant positive changes" (Niedig, Friedman & Collins, 1985:207). The question remains what is "significant positive change"? Significant positive change for the woman may differ from the program’s idea of it. Moreover, Neidig, Friedman and Collins (1985) report that 87% of the participants were violence free four months after couples treatment (Neidig, Friedman & Collins, 1985:204). However, this 87% does not specify who reported the violence as ended (Eisikovits & Edleson, 1989:392). They fail to specify if batterers were asked or if victims were asked about the lack of violence. The major definition for success is the absence of violence, or at least a decrease in violence. There appears to be a lack of precise definitions or uniform criteria in assessing violence-free relationships. Some studies such as Neidig, Friedman and Collins (1985) assess decreases in violent incidents, while others like Deschner, McNeil and Moore (1986) assess percentage of violence-free couples. However, often these measures are confused (Eisikovits
& Edleson, 1989:392). Decreases in violent incidents is not the same as percentages of violent free couples.

According to available research, group education or treatment may be the most effective milieu in batterer programs (Dutton, 1986:163-164). Whether the milieu is education, skill-building, self-help, or therapy, the men need to be exposed to altering their behavior away from violence (Adams, 1988:191-192; Eisikovits & Edleson, 1989:393-394).

Feazell, Mayers, and Deschner (1984) examined ninety different treatment programs for batterers in North America and reported 66-75 percent of the men had stopped their violence one year after group treatment (Feazell, Mayers & Deschner, 1984:221). Again there is a lack of documentation in the way follow-up data was generated and "who" reported the end of violence - victim or abuser (Eisikovits & Edleson, 1989:395). Asking the abuser if he had abused his partner may result in different rates of violence being reported than if the victim is asked. Furthermore, programs often fail to document success rates. It appears that the figures are not the products of a scientific outcome evaluation (Eisikovits & Edleson, 1989:395). In a study by Rosenbaum (1986), six month follow-up studies assessing those completing 5-6 behavioral-educational sessions revealed that eight of the nine men reported being non-violent following treatment (Rosenbaum, 1986:611). However, there is often no control or comparison group
for the study to figure out the actual effects of treatment versus other variables not considered - possibly arrest and prosecution of future violence (Eisikovits & Edleson, 1989:397). Dutton (1986) used a control group of men who completed treatment (N=50) in a sixteen-week group program with a similar matched group of batterers not receiving treatment (Dutton, 1986:167-168). The study examined police reports and reported a 4% recidivism rate for batterers who completed treatment, while a matched untreated group of batterers showed a 40% recidivism rate two years later (Dutton, 1986:163). However, only physical violence was assessed; verbal threats of violence were not considered (Eisikovits & Edleson, 1989:197). Four years of outcome data from a study by Edleson and Grusznski (1988) reported that two-thirds of the men reported being non-violence at follow-up; however, reports of "threats" of violence were still present (Edleson & Grusznski, 1988:3-4). "Threats" of violence raises serious concerns about the impact of treatment success on the victim's life (Eisikovits & Edleson, 1989:399). Again there is an inconsistency in criteria and definitions of lowered violence. Some studies like Dutton (1986) assess recidivism, while others such as Rosenbaum (1986) report decreases in rates of reported violence (Eisikovits & Edleson, 1989:396-397).

Institutional intervention has focused on the police and criminal justice system (Eisikovits & Edleson, 1989:400). Crisis-intervention training for police
regarding domestic violence appears ineffective in lowering recidivism rates of abusers (Eisikovits & Edleson, 1989:402). Other interventions that involve police, prosecutors, judges, probation officers, social workers, and woman advocates, such as the Duluth Domestic Abuse Intervention Project, have proven to be effective in only lowering recidivism of police calls for subsequent episodes, in Duluth (Dobash & Dobash, 1992:181). However, the effectiveness of the Duluth Domestic Abuse Intervention Project is questionable. The Minneapolis experiment failed to prove mandatory arrest laws as the best policy for reducing recidivism in every community, or for all socio-economic groups (Sherman, 1992:3). Mandatory arrest laws reduce domestic violence in some cities and increase it in other cities (Sherman, 1992:19). These mandatory arrest policies lower the rate of domestic violence reports among employed women; however, these laws increase the reports of domestic violence among unemployed women. Furthermore, arrest reduces domestic violence in the short run but can result in higher rates in the long run (Sherman, 1992:19).

Two of the first community projects were the San Francisco Family Violence Project and the Duluth Domestic Abuse Intervention Project. Both the programs began in 1980.

The San Francisco Family Violence Project attempted to reduce violence and to challenge traditional crisis-intervention types of police response (Dobash &
Dobash, 1992:179). The project used a multi-faceted approach involving all areas of the justice system and a broad community based alliance (Dobash & Dobash, 1992:178-179). The focus was on police addressing violence in the home like any other violence. The use of incident report forms, records, and assessments of time and resources spent on cases were all required in addressing domestic violence cases (Dobash & Dobash, 1992:179). Furthermore, there is a new focus on the victim. The focus is on successful prosecutions of batterers through witness testimony by the victim (Dobash & Dobash, 1992:179).

The Duluth Domestic Abuse Intervention Project began within the shelter movement. The goals include reducing the diversion of domestic violence cases, shifting responsibility from the victim to the state and perpetrator, imposing and enforcing increasingly harsh legal consequences on the abuser who continues the violence, creating policies and practices that specifically deter domestic violence, providing a pro-active response to victims and assisting victims in the criminal justice system, and improving the cooperation and communication of all involved into a uniform response (Dobash & Dobash, 1992:180). Police officials used a monitoring strategy of follow-up calls and victim interviews to increase pro-arrest policies (Dobash & Dobash, 1992:182). The police records are used to contact victims even where an arrest was not made to offer assistance and support,
including legal help should they decide to pursue the matter in court (Dobash & Dobash, 1992:182-183).

One strategy of the Duluth project is to reduce men’s violence through an educational program that stresses their accountability and responsibility for the violence (Dobash & Dobash, 1992:183). Violence had to be treated as a crime to reach this goal (Dobash & Dobash, 1992:179). This would produce effective processing and sanctioning by the courts. Sanctions ranged from jail with no probation to probation within a batterers’ program (Dobash & Dobash, 1992:183). The batterers’ program required men to attend twelve weeks of counseling sessions followed by twelve weeks of Batterers Anonymous (Dobash & Dobash, 1992:183). Three unexcused absences and they are returned to court for disposition (Dobash & Dobash, 1992:183).

The Duluth Domestic Abuse Intervention Project has served to shift the focus of the criminal justice system from the victim to the perpetrator. A new perspective is created by viewing violence within the home as a criminal offense, not as arising from pathological individuals or dysfunctional homes. However, pro-arrest laws are questionable. Pro-arrest laws tend to lower violence in some cities and increase violence in others (Sherman, 1992:19). Furthermore, pro-arrest laws tend to lower violence among those with a stake in the community such as the educated, employed and married; while increasing violence among the
uneducated and poor who lack a stake to conform within the community (Sherman, 1992:19). Feminists argue that mandatory arrest laws send a clear message that battering is a crime and will not be tolerated. However, for those who fear a police state, mandatory arrest laws may be seen as a broader process of extending state control into individuals private lives.

At the cultural level of values and beliefs there are no reported therapeutic interventions per se aimed at challenging the patriarchal beliefs of batterers. (Eisikovits & Edleson, 1989:405). However, Walker (1979) sketches out a three-level intervention system for reducing battering that includes an intervention at the cultural level.

Primary prevention of battering includes educational programs and encompassing other agencies' support as a cultural intervention (Walker, 1979:186). The media is vital in bringing new awareness about battering to public attention. Television, books, and magazines must reflect equality between gender (Walker, 1979:187). Television and motion pictures need to be persuaded to decrease the violence in programming (Walker, 1979:187). Moreover, physical punishment of children must be reduced; the process of victimization must be understood by society in order to avoid victim blaming; and agencies must be taught to be more supportive of women if battering is to be eliminated in society (Walker, 1979:187-188). Thus society is treated as a whole.
Secondary intervention involves the treatment of battered women by professionals (Walker, 1979:188). These interventions are the least restrictive and include such interventions as telephone hot lines, legal advice and outpatient counseling for battered women (Walker, 1979:189).

Tertiary intervention for battered women supplies a totally supportive environment to allow for independent decision making (Walker, 1979:189). Tertiary interventions include such things as shelters.

Shepard (1987) reports short-term group sessions appear the most effective treatment (Burns & Meredith, 1991:34-35). Short-term group sessions were defined as twelve sessions (Burns & Meredith, 1991:34-35). Leong and Coates (1987) in a study examining prior arrest and recidivism of men in court-mandated treatment reported the average number of sessions attended for men sentenced for thirty-six sessions was only twelve (Burns & Meredith, 1991:34).

Several problems exist in evaluating the methodology of batterer treatment interventions. At all levels of evaluating interventions for batterers, many studies were done by the ones who created the intervention technique (Eisikovits & Edleson, 1989:407). Therefore their results at best should be considered "self-evaluations". The question of how much "success" is due to treatment per se is also a problem. The lack of control groups for comparisons fails to attribute the effect of arrest versus treatment on recidivism. Furthermore, the role of the
family, peer groups and the church may have an effect on reducing rates of battering. These variables have not been adequately accounted for, if at all in most all studies (Eisikovits & Edleson, 1989:407).

Conclusion

There exist four main types of battering: physical, sexual, psychological and destruction of property. Radical feminists such as Walby and Russell view all violence by men against women as the domination and subordination of women in a patriarchal society. Therapeutic perspectives view battering as a dysfunction within specific individuals or a relationship problem.

The current methodology in evaluating the treatment of batterers appears inadequate and controversial at best. The question whether psycho-educational programs for batterers "works" remain just that - unanswered. For purposes of my study I will assess the current therapeutic approaches and interventions for treatment of batterers in Kentucky from a macro level analysis. Can therapeutic approaches ever challenge the basic social causes of male violence toward women? Radical feminists would argue that any therapeutic approach will serve to maintain women's subordinate position in society. Individualization or family sharing of the responsibility fails to address the patriarchal relations in society.
CHAPTER THREE: RESEARCH METHODS

Introduction

The method of primary data collection chosen for my study was focused interviews. I interviewed ten key informants (three program directors, five therapists, one domestic violence trainers and one shelter leader) involved in court-mandated treatment for batterers in Kentucky. When a batterer is brought into the criminal justice system there are two primary ways of dealing with him. First, the judge could sentence the batterer to jail time. Second, the judge could order him into a batterer treatment program. I will assess the effectiveness of treatment in lowering rates of battering. I called local mental health centers and talked with the state department of mental health in an attempt to find current batterer programs in Kentucky. Five batterer programs were all I could currently locate in Kentucky. However, it is possible that a few more batterer programs may exist. Because of the limited number of court-mandated treatment programs in Kentucky a qualitative research strategy will produce representative information. Focused interviews were chosen to gain a deeper and richer understanding of battering. Understandings of battering were explored through the perspective of key informants involved in batterer treatment programs.
The Key-Respondents in My Study

My study involved focused interviews with ten key-informants that are involved in the treatment of batterers. For the purposes of my study I assessed five programs that provided services to court-mandated batterers. See Table III for summary of key-respondents and programs in my study.

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<thead>
<tr>
<th>Looney Tunes' Batterer Program</th>
<th>Mr. Elmer Fudd</th>
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<td>Mr. Pepe Lepeu</td>
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<td>Ms. Foghorn-Leghorn</td>
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<td>Sesame Street's Batterer Program</td>
<td>Ms. Big Bird</td>
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<td>Mr. Bert</td>
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<td>Mr. Ernie</td>
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<td>Smurfville's Batterer Program</td>
<td>Mr. Brainy Smurf</td>
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<td>Walt Disney's Batterer Program</td>
<td>Ms. Minnie Mouse</td>
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<td>Peanuts' Batterer Program</td>
<td>Mr. Snoopy</td>
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<td>State Department of Mental Health</td>
<td>Ms. Piggy</td>
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Table III: Batterer Programs and Key-Informants

Qualitative and Quantitative Methods

The use of qualitative data necessitates an interpretive approach. Qualitative methods are based on the understanding gained from interpreting the meanings and motives on which a social action is based (Haralambos & Holborn, 1991:707).
Data from qualitative research is usually in the form of words. Interviews are often involved in qualitative research. It is suited for an in-depth study when only a small number of key-informants are available. One classic study showing the applicability of qualitative research was a study of an Italian slum known as Cornerville (Whyte, 1943). Limited information was known about Cornerville and the street corner boys. This information about their society on the streets of Cornerville was only possible through qualitative research from the point of view of someone involved in their society (Whyte, 1943). The use of local informants revealed a source of information to Whyte (1943) that otherwise would have been unobtainable.

In a study by Ann Oakley (1974), *The Sociology of Housework*, specific experiences of satisfaction or dissatisfaction with housework were studied. Women were interviewed in an attempt to measure levels of satisfaction or dissatisfaction based on the interviewees’ responses. This qualitative measurement allowed each respondent to make his or her own subjective assessments of satisfaction or dissatisfaction. Paul Corrigan’s *Schooling the Smash Street Kids* (1979) is another example involving a qualitative approach. Corrigan’s study to understand "kid’s" experience of school life from their own terms used a variety of methods including a qualitative approach. Qualitative interviewing was used with kids to find out how they viewed things.
Qualitative approaches are more consistent with social action theory. Social action theory looks at the experiences and beliefs of individuals in a social action. Women's experiences of battering are consistent with a qualitative approach. Radical feminists argue that women's experiences of battering must be understood to be personal as well as political. Thus, qualitative approaches allow the researcher to tap the experiences of those involved from their own perspective.

Quantitative data and analysis entail the use of numbers, which represent a coded response. Coded responses are then mathematically analyzed. These collections of coded responses can be used demographically to describe variables such as the race and sex of a population. When higher levels of interval/ratio data are available, correlations between variables and regression analysis are possible. Interpretation of the data is by means of the statistical analysis.

Quantitative approaches are based on positivism. Positivism is the scientific method of research where variables are quantified by the researcher. Objectivity in data collection and analysis are the virtues of positivism. However, qualitative analysis also involves a quantitative aspect. Words such as always, never, sometimes etc. are a form of quantifying data. Thus, quantitative research is present to some degree in all research methods. Quantitative research imposes fixed responses. Fixed responses are seen as representing a population under study. Quantitative approaches tend to be more consistent with structural rather
than interpretive theories. Structural theories of social actions are based on scientific assumptions. Scientific assumptions relate social actions toward one another in order to explain social relationships.

Qualitative and quantitative methods are sometimes blended together. Using both qualitative and quantitative methods can be used for several reasons: qualitative and quantitative data can be used to check the accuracy of conclusions reached by the other; qualitative data can be used to produce hypotheses that can be checked quantitatively; both approaches can be used together for a comprehensive picture; and qualitative research may be used to explain why certain variables are correlated (Haralambos & Holborn, 1991:754).

Within sociology, no one method is always the best. However, certain types of research tend to lend themselves toward different methods. Qualitative interviewing allows for unique, in-depth studies of a few respondents. Quantitative approaches allow for statistical analysis of large interval/ratio data. Most often the best methods are those that use both a qualitative and quantitative approach.

Subjectivity in Methodology

Radical feminists such as Harding (1987) argue that the traditional research methods are written from the point of view of men. Harding argues that
"science" and "objectivism" are shaped by the cultural beliefs and behaviors of men for the dominant class, race, and sex. Radical feminists such as Harding argue that traditional research methods are based on patriarchal assumptions and beliefs. Harding (1987) states that radical feminists "recognize that cultural beliefs and behaviors of feminist researchers shape the results of their research no less than those of sexist and androcentric researchers" (Harding, 1987:9). The researcher's beliefs and behaviors become part of the results, which are open to question. Feminists' methodologies are based on the assumption that a women's experiences are unique to women. Therefore, comparisons of men and women would be hard, if not impossible, to make. Comparisons are difficult because of the inequality in sex relationships. Women's and men's experiences are different and thus should be treated as different experiences. Radical feminists such as Harding (1987) argue the way science has been theorized is based on and built from within a male perspective, making it less than a pure science (Harding, 1987:86). Harding (1987) argues that subjective elements are present in all research methodologies. The very issues deserving of study and choices of study are in themselves less than objective; they are the social products of men and women.

Other feminist researchers such as Gelsthorpe and Morris (1990) suggest that feminist research can involve men, for men and be done by men (Gelsthorpe &
Morris, 1990:94). "What is crucial is that feminist researchers explore the nature
of their own experience (of women or men) and do not dismiss it as irrelevant" (Gelsthorpe & Morris, 1990:93). However, one should not assume that all
women or men who participate in a feminist research study share the same politics
(Gelsthorpe & Morris, 1990:92). A feminist research allows for a study of
gender from men’s and women’s unique experiences of social life.

**General Rules of Interviewing**

The interviewee was contacted by phone and asked to participate. The purpose of the interview was explained to the interviewee over the phone and again at the start of the actual interview. The purpose was to learn of their experiences in treating court-mandated batterers. The title of the study was given as: "An Assessment of Court-Mandated Treatment of Batterers in Kentucky." It was further explained that the information collected would be used for my Masters of Arts Degree in Sociology.

During the interviews care was taken to refrain from offering opinions and expressions of verbal or facial approval and disapproval, therefore decreasing the chances of "leading" the interviewee's response. The following is an example
of my attempts not to lead the interviewee with Ms. Foghorn-Leighorn:

In the past, completion rate has been real low. One thing is, I'm not quite sure what happens to them after we notify the court that they have dropped out.

Interviewer:

If they drop out you notify the court?

Ms. Foghorn-Leighorn:

Right.

Interviewer:

And then a lot of times you're saying what?

Ms. Foghorn-Leighorn:

We don't see them again. I don't know what happens, ...

As a rule, the interviewer should dress in a similar fashion to those being interviewed, thereby appearing non-threatening. The way one is dressed and groomed is regarded as a signal of the person's attitudes and orientations (Babbie, 1992:270). I tried to appear well-groomed and sober. The demeanor should be pleasant if nothing else during the interview (Babbie, 1992:270). It is important that the interviewer has a genuine interest in the respondent and the subject matter. However, there were times when my interviewing appeared poor. An example of my failure to show interest and preparation for an interview happened while interviewing Mr. Bert.
I asked him the following question:

*I guess what I needed to know here . . . you’ve worked here how many years altogether?*

Phrases such as, "I guess what I need to know" sounds like I'm just going through the motions of the interview. Furthermore, it appears as if I have little focus to what I believe is relevant questioning. An example of poor interviewing that not only appears to be a lack of interest, but also could result in leading an interviewee's response happened while interviewing Ms. Minnie Mouse.

I questioned:

*I guess I'd have to ask you does a cycle of violence actually exist? Is there such a thing?*

Although the possibility for leading the respondent existed in my questioning, I do not believe I lead her response. Ms. Minnie Mouse responded:

*Oh yes.*

I was then able to probe and get a explanation about the cycle of violence by asking:

*Could you tell me just a little bit about that?*

Another example of poor interviewing is in the following from my interview with Mr. Bert. I questioned:

*I'd like to know about the length of the program, I mean like how long does it last, you know, just in general, but I'd like for you to tell me a little bit more, I mean what's the difference in the court-mandated and the voluntary, I mean as far as, is there a different emphasis of the program? What is the emphasis? Does it differ?*
Not only is the question too long, but it is several questions. I was asking about the length of the program, the emphasis in each, and the difference in emphasis between the court-mandated and treatment groups. Furthermore, words like "you know" can lead to confusion.

To conduct a good interview, I had to be prepared and organized going into the interview. I attempted to read the questions without error in a comfortable tone. Pausing and rapidly speaking may lead to confusion for the respondent. The familiarity with the questions needed to do successful interviews comes from carefully studying each question and practicing aloud. The questions were read naturally, as in normal conversation. Good eye contact is a good way of showing interest in the respondent. I attempted to appear relaxed and ready, while not appearing too casual to the respondent. Inevitably there were some problems. At times the respondent would be unclear about my question or get sidetracked from the question and I would re-focus on the issue. An example of re-focusing the interviewee happened while interviewing Mr. Elmer Fudd.

Mr. Elmer Fudd stated at the end of an answer:

*Remind me of the question because I got started off on Peter Neidig, what did you ask me, I got sidetracked on his model.*

I refocused the question:

*I was asking about the marital combat.*
He quickly responded:

_The marital combat, okay . . ._

Refocusing can also be used to further explore an area, much like a probe. In my interview with Mr. Brainy Smurf I re-focused my questioning back toward an area I wanted to explore further. I re-focused my questioning:

_Just going back a little bit, you were telling me about some of the programs that have dual diagnosis programs, I was wondering, could you tell me . . ._

Focused Interviewing

Interviewing takes several forms from structured to unstructured, and any point between. In the structured interview the interviewer simply reads the question to the respondent, while the respondent answers the questions without deviation. While at the other extreme, the totally unstructured interview is more like a conversation where the interviewer has no preconceived ideas of the questions to follow. Most interview research falls somewhere between the two. The interviews of a more structured type allow the interviewer to probe for responses and clarify questions with the respondent. In interviews of a more unstructured nature the conversation develops casually. Only unless the respondent fails to cover an area does the interviewer go back and bring up an issue.
Focused interviews involving open-ended questions allow the interviewee to respond at length to a question. This allows for a rich source of information. Furthermore, the respondent is not put in a position of answering within boundaries set up by the interviewer. The focused questionnaire mainly functions as a guide for the interview. I was able through focused interviewing to ask further questions needed to clarify or probe deeper when the occasion arose. One example of probing for further clarification came from Mr. Pepe Lepeu when he was explaining that batterers "have a problem that's out of control". I probed:

*Why do they get out of control?*

However, Mr. Pepe Lepeu responded:

*They get out of control because they've had it, they're at the end of their rope, they don't know how to handle it anymore, they're just out of control.*

I probed further asking:

*It being what?*

Mr. Pepe Lepeu responded:

*It being frustration. Frustration from whatever, . . . finances, relationships.*

The respondent may hit on issues that originally I was unaware of, allowing me to explore an area I had not previously conceived of. One example of exploring an idea or area not originally conceived was in my interview with Mr. Elmer Fudd.
Mr. Elmer Fudd was explaining that the batterer needs to see himself:

... as victims of society in the same way that women are victims of society in terms of our sex role stereotypes.

This idea that the treatment of batterers might be addressed from a standpoint that men are also victimized by society was an issue I had not previously conceived. Men as possibly being victims would place the blame not on them because they too are victimized. I brought the issue up in another interview with Ms. Minnie Mouse. I asked her:

How would you characterize batterers? Are they criminals? Are they sick? Are they just victims of their own masculinity or what are we talking about?

This allows not only a new perspective but a new manner of hypothesizing therapeutic understandings of male violence.

Sometimes the interviewer may need to probe for responses. The respondent may answer obscurely, by accident or on purpose. Appropriate probes for interviewing might be "How is that?" or "In what ways?". "Perhaps the most generally useful probe is 'Anything else?'" (Babbie, 1992:273). I always asked if interviewees could tell me anything else about batterer treatment or important issues I might have left out. One of the best probes is silence. If after an obscure response the interviewer sits attentively, with good eye contact, and silent - the respondent will often expand on the answer. This use of probes is often necessary to find sufficient answers for analytic study (Babbie, 1992:273). Probes allow the interviewer to explore an issue as little or as in-depth as they wish.
Qualitative Phone Interviewing

Qualitative phone interviews were conducted with six of the ten key respondents. The primary reason for phone interviewing with an intercom system was proximity. Phone interviews were conducted with key respondents involved in the treatment of court-mandated batterers in Kentucky which involved drives of three or more hours one way. Furthermore, because of the time constraints and cost involved in trips, phone interviewing allowed for interviewing that might otherwise have been impossible for my study.

Qualitative phone interviewing follows most general rules of interviewing. The biggest disadvantage of phone interviewing is the reduction in the interpersonal aspects of the interview. There was an inability to show interest through eye contact with the respondent. I was unable to procure a phone with a recording device for my study. However, I was able to utilize a phone with a one-way speaker system, which enabled me to record the interviews. Simple verbal communications such as "yes" and "okay" during the respondents answers were impossible because of the one way speaker system that was used for my study. Furthermore, the length of my questions tended to be much longer in the phone interviews. An example of lengthy questioning with Mr. Brainy Smurf that could have been easily broken down into several questions in a face-to-face
interview follows:

*I'd (interviewer) like to know about the length of the program, . . . how long does it last, . . . , but I'd like for you to tell . . . what's the difference in the groups for the court-mandated and the voluntary, . . . , is there a difference emphasis of the programs? What is the emphasis?*

The risk of a poor connection was present every time I switched the speaker on/off. I learned in order to make the one way speaker work like normal conversation and avoid breaks in phone line connection, I often had to state my questions at length.

**Advantages of Interviewing**

The one-on-one interview allows for the ability to establish rapport, to avoid distractions from the influence of others, and to increase confidentiality. This ability to clarify ideas, questions and words is a major advantage for the qualitative researcher. Interviewing involves an interpersonal relationship. Rapport is vital in effective interpersonal communication. Furthermore the issues under study can be explored in greater depth because of the absence of fixed responses and questions.

One reason for the widespread use of the interview lies in its practicality. Interviews can be used to collect simple demographic data or used to collect data on people's attitudes, motives, emotions, or past and future behaviors that cannot be directly observed. Furthermore the interviewer can explore an area as little or
as in depth as they wish. A major advantage of probing is the ability to explore in-depth while introducing new hypotheses that can be investigated later.

**Disadvantages of Interviews**

The risk of the respondents giving inaccurate information purposely or unintentionally always exists. Furthermore, the response given may not reflect the true behavior of the respondent. When a researcher is questioning a respondent on past events, the respondent may alter his or her interpretation in light of past experiences (Haralambos & Holborn, 1991:738).

The respondent may be influenced by the researcher. The way the respondent defines the situation may influence the answer given.

Mr. Elmer Fudd, who knew me previously, responded:

\[
I \text{ suspect you know more about the sociological things than I do in terms of poverty and lack of work.}
\]

Mr. Elmer Fudd was influenced to give me an answer based on his knowledge that I was a sociology major. In more unstructured interviews the respondent may consciously or unconsciously give the type of answer that they believe the researcher wants to hear, versus what is thought. This is the problem known as "interviewer bias". "It can never be eliminated from the interview research simply because interviews are interaction situations" (Haralambos & Holborn, 1991:738-739). Furthermore, the problem known as "conventionalisation" may
exist in both self-reports and standardized answers (Oakley, 1974:200).

Conventionalisation is "the tendency of people to choose the socially desirable response - which results in a reporting distortion of the phenomenon under study" (Oakley, 1974:200). For example, in my interview with Mr. Ernie it is possible he could have been giving the socially desirable response to some of my questioning. When I questioned:

*Is there a battered women's syndrome?*

Mr. Ernie answered:

... I don't know whether I could define it or not. I would say yes there is a battered women's syndrome.

In another question I asked:

*Can you tell me about women's battering, and is it different than the battering of men when they batter?*

Mr. Ernie responded:

*I would say yes...*

It appears Mr. Ernie might be answering what he believes is the socially desirable response to battering.

**Conclusion**

It is acknowledged that no specific methodology is always the best in doing social research. I chose qualitative interviewing in order to draw upon the unique experiences that each of the key-respondent offered in understanding battering.
Furthermore, some of the batterer programs provided examples of their battering handouts. These written materials are used to compliment my assessment of the therapeutic approaches. The content of these handouts was helpful in gaining a better understanding of the key-informant responses from the interviews. Handouts showing the *cycle of violence* added to the clarity of this understanding of why battering occurs. However, the main themes for my study come from direct quotes with key-informants.
CHAPTER FOUR: TREATING THE BATTERER

Chapter Overview

Mental health professionals profit from exhibiting their formal education and training as the appropriate response to treating batterers. The mental health community can take control of the response to battering through defining their skills as the appropriate response. The need for this expert treatment is justified by mental health professionals in order to address the special issues related to working with court-mandated referrals. However, expert treatment also serves to keep the response to battering within the existing agencies.

Are court-mandated batterers sick and in need of treatment or are they a criminal? Who is responsible for battering? How do mental health systems deal with court-mandated batterers? The mental health system's responds to battering through different sized client groups - small groups, couples and individuals. Often these ways of treating battering are influenced by concepts of the addictions field. Why do batterers stop the violence? Therapeutic approaches stress external and internal motivators toward change and stopping the battering. Furthermore, the success, or lack of success, of batterer programs is measured through external and internal measures.
Expert Treatment in the Mental Health Response to Battering

All the key-informants I interviewed had a four-year degree. The vast majority of key-informants I interviewed had completed a Master's degree in a helping profession. The majority of key-respondents were involved in some form of training directed toward working with domestic violence perpetrators. Ms. Piggy, Administrator of the Sexual and Domestic Violence Program for the Department of Mental Health, reports:

*We probably train 300 people a year in the area of domestic violence ... we do some specialized training on the development and delivery of services for perpetrators as well.*

These training were developed for professionals who work in community mental health centers. The need for specialized training is attributable to the special issues involved in treating batterers. Working with batterer groups, according to Ms. Piggy:

*... is not traditional mental health care. It is much more confrontive, it's dealing with dangerous issues on a regular basis, so there is a lot of specialty in doing this kind of work, and so we emphasize having a lot of training for providers who are providing services to batterers.*

Traditional community mental health is provided for those in need of help who lack the financial ability to pay for private, for profit, counseling. Community mental health centers were established so that everyone, not just those who could afford to pay a private psychiatrist, could seek help. Traditional mental health care deals with mental illness such as depression, organic brain disorders, and
various interpersonal problems. These individuals often want help and are not held responsible for their mental illness. Batterer treatment is more confrontive. The batterer usually has not freely chosen to seek treatment. Treatment for batterers involve placing the responsibility for the battering on the batterer.

Furthermore, according to Ms. Piggy:

There is also in other states certification process used for clinicians who provide services to batterers and that's something that's being considered here in Kentucky, the development of a certification process for people who receive court ordered batterers into treatment.

"Sociologist Randall Collins (1979) has called the United States a credential society, suggesting that Americans view diplomas and degrees as evidence of a person's ability to perform a specialized occupational role" (Macionis, 1991:439). A certification process for therapists assumes that the most qualified people are in these very important positions of treating batterers. This certification process would supposedly allow only those deemed qualified by the state to treat court-mandated batterers. Credentialism serves as a social control that restricts powerful occupations to a small segment of our population (Macionis, 1991:439). Functionalist theory suggests that credentialism reflects our technologically complex society by filling challenging occupations with well-trained individuals (Macionis, 1991:439). In contrast, conflict theory argues that credentials often relate little to the skills and specific responsibilities a job demands (Macionis, 1991:439). A degree in a social science may be required, even though the agency
is likely to provide a training program. However, this would allow the mental health professionals to take further control of the response to battering. Others involved in the treatment of batterers agree with a certification process.

Mr. Elmer Fudd reports:

... the batterer is a court-ordered client most of the time, the ones we’ve had here, and so you do need to be able to deal with someone who’s a resistant client.

Resistant clients are those who usually have not sought treatment on their own free will. The resistance is their inability to view the problem within themselves.

When the State is offering training, according to Mr. Elmer Fudd:

I think people ought to get it if they are going to practice.

There appears to be some agreement among professionals that the treatment of court-mandated batterers needs to be done by people with specialized training.

Court-Mandated Referrals: A Response to Battering

All the five programs I assessed rely on court referrals. The programs involve court ordered treatment for batterers, according to Ms. Piggy:

...largely because voluntary programs historically have not worked well.

Ms. Piggy explains:

We find that people who are voluntary tend to come for a brief period of time and then drop out of treatment, and they may do that in order to have the wife come back to the home or to keep her there to make a commitment, just to keep the family together and then once the wife is back within the home their motivation for continuing in treatment is gone and they drop out of treatment.
Ms. Piggy believes that those entering voluntary programs are often manipulating the system toward their own goal - to get the wife back home. From this view, voluntary programs serve the batterer as a means to maintain the family system.

Court-mandated programs supposedly keep the batterer in treatment long enough for treatment to be effective. Those programs that originated as voluntary are court-mandated programs today. Smurfville's batterer program, according to Mr. Brainy Smurf, started "purely voluntary" but:

... increasingly the numbers of people became court-mandated rather than voluntary, and that's true today as well.

However, Mr. Brainy Smurf explains:

I don't think any or very few people are truly voluntary, they just hit their head and realize that they've got a problem at this point, a light goes off in their heads and realize they've got a problem. Most often there is some coercive power that is saying there's a problem here.

Mr. Brainy Smurf states that no batterer originally enters treatment totally voluntarily. There is always some form of external coercion.

Mr. Brainy Smurf explains:

... most often it's something externally, such as your spouse, friends or a judge, saying there is a problem.

At present Smurfville's batterer program has a court-mandated batterer program that is viewed as externally driven and a treatment group that is viewed as internally driven. The internally driven treatment group consists of those batterers whose motivation for treatment comes from inner cognitive understandings for help.
According to Mr. Brainy Smurf:

the majority of people feel as though they've graduated (after the sixteen court-mandated weeks) feeling as though they don't want to come back anymore, they've done what they've needed to do to satisfy the court, but a small minority of people keep on coming, and those people (are the internally driven) treatment group.

Batterers tend to come for one specific reason - to satisfy the court-order.

However, there are a few people that ask for further help in dealing with their battering. These people make up a treatment group of motivated individuals.

Mr. Brainy Smurf explains:

These people are motivated so you don't have some of the resistance that you would feel in the large psycho-educational groups.

The difference in the court-mandated group and treatment group is the level of acceptance of the problem and desire for help. Those who only complete the court-mandated program appeared less than interested in help.

The Sesame Street's batterer program was born out of a spouse abuse shelter.

Ms. Big Bird reports:

... for the most part the vast majority, probably ninety-five to ninety-eight percent of those who attend group are court-mandated by the judge ... 

However, Ms. Big Bird explains:

We have some who volunteer and oftentimes after we've worked with a victim for a long time if she decides to reconcile with him, he will call and ask if he can volunteer to go to the program, and, of course, if we have any slots at all available, we're not going to turn somebody who wants a self-refer away.

Are these voluntary referrals manipulating therapy to get the woman back in the home, or are these batterers internally driven to end their battering? It appears
that Ms. Big Bird believes these batterers are internally driven. Mr. Ernie of the Sesame Street’s batterer program reports:

*Maybe one out of twenty comes voluntary before they’ve been to court.*

It appears from Mr. Ernie’s response that perhaps some of these batterers enter voluntarily into a program before going before the judge. One could argue that this is possibly a way for batterers to manipulate both the treatment program and the criminal justice system. If a batterer goes before the judge, stating he is sorry and wants to go to treatment, perhaps the judge will go easy on him. Perhaps the judge will not directly order him into treatment. If the judge doesn’t directly order the batterer to treatment, then the batterer could stop attending. The batterer would have entered the program classified as voluntary and perhaps there would be no written court-order forcing him to stay in treatment.

Mr. Bert of the Sesame Street’s batterer program states:

*I would say 99% are court-ordered. One or two people who come in because they heard about it and want to come in to find out how to manage themselves better in a relationship.*

Mr. Bert states a belief that some batterers hear of the possible help and seek out treatment to improve their relationships. In the Looney Tunes’ batterer program and Peanuts’ batterer programs the violence is viewed as a matter of *mutual violence*. In the Looney Tunes’ and Peanuts’ batterer programs the men are seen in a group and the women are seen by a women’s specialist separately in the beginning. Later they may be seen in joint marital counseling. Ms. Foghorn-
Leghorn of the Looney Tunes’ batterer program explains the women’s referrals as not court-mandated. Ms. Foghorn Leghorn explains:

*He’s the one charged with the assault or domestic violence petition . . . but when he goes to court and she goes to court they’re both in front of the judge, he says both of you, you have to go . . . but you (the victim) can go, so she’s really not court-ordered.*

Ms. Foghorn-Leghorn explains often both of them are before the judge upon sentencing. However, the judge’s sentence is treatment. Both the victim and perpetrator may be sentenced to treatment. Mr. Elmer Fudd explains:

*Sometimes it’s a marital combat and both of them are involved, and so the judge may send both of them, even though one of them made the charge, he’ll send both of them because he knows them from history, for example, that they’ve been battling physically for years.*

The responsibility in marital combat is placed on both parties of the relationship. Marital combat addresses the reasons for men’s and women’s battering as the same. According to Mr. Pepe Lepeu of program Looney Tunes’ batterer program:

*. . . our view is that there is a problem within the marital system itself.*

The battering is seen as a shared problem within the marriage itself. Therefore, both parties are in need of treatment.

Ms. Piggy of Sesame Street’s batterer program explains:

*In this part of the state, most of the judges, especially when there are children involved, court order both, they court order both the battered and the victim and oftentimes the family want the children to go as well. We’ve said this woman has not committed a crime, we don’t want her ordered to counseling, could you just suggest that she go if she wants to, but the judges, by law, have a right to mandate one or both parties, and they just feel like when children are involved that whether they stay together or separate, they’re going to be in contact.*
All the programs I assessed report that if the batterer falls out of treatment the court is notified of his non-compliance. Ms. Big Bird of Sesame Street’s batterer program explains:

\[\ldots\text{they are taken back before the judge and very oftentimes the judge then will sentence him to jail for failure to comply with the court order.}\]

However, often there may be no penalty. Mr. Pepe Lepeu of Looney Tunes’ batterer program reports often:

\[\text{We don’t see them again. I don’t know what happens, if they come back into the court they get involved in the penal system or what the modality is.}\]

According to Ms. Foghorn-Leghorn of the Looney Tunes’ batterer program:

\[A\ \text{lot of them just tend to stop coming in and we refer them back to court and then the judge basically, for example, if they’ve attended six or seven sessions, she’s come in seven times, he’s come in seven times, they quit coming in so we report back to the court, they go before the judge for non-compliance, the judge says ‘well how are you all doing,’ and they basically say ‘we’re doing fine,’ and then that’s the end of it. The judge kind of rescinds his court order if they’ve made any attempts at all.}\]

Mr. Brainy Smurf of Smurfville’s batterer program reports:

\[\ldots\text{on the fourth absence they are out of the program effectively, and a letter is sent back to the court system and then the judge has a variety of options for himself or herself at that point.}\]

These options are not always in the interest of mental health professionals. Mr. Brainy Smurf reports:

\[I’m\ not\ sure\ I’ve\ been\ very\ happy\ with\ their\ response.\]

If the judge does not use punitive measure in dealing with the batterer’s non-compliance with treatment, the mental health professionals’ authority is reduced. Furthermore, batterers that are charged with contempt of court are in contempt for
not following the orders of the court - not necessarily for stopping treatment. Ms. Minnie Mouse of Walt Disney's batterer program reports if a batterer fails to complete a diversion agreement:

... then (he would) have to go back to (his) original agreement that the county attorney made with him, and most often that's fifteen days in jail, thirty days probated for two years.

However, according to Ms. Minnie Mouse, some men who are here on a domestic violence contempt charge, because they violated their domestic violence order, might face ninety days in jail if they fail to attend or complete the program. Furthermore, if a batterer is mandated to come as part of his probation, his failure to attend could violate his probation and send him back to jail. Ms. Minnie Mouse states:

... most of them have some kind of heavy duty consequence hanging over their head that keeps them coming.

Although the threats of jailing exist for batterers who fall out of treatment, often the consequences reported are non-existent. Mr. Ernie reports:

Eventually they're tracked down by the court system and re-mandated to come under a threat of contempt of court.

These threats are often no more than a threat. Mr. Snoopy of the Peanuts' batterer program explains:

Sometimes if people go through with the divorce and completely split up, then they're not necessarily required to come back.

The courts appear to be interested in ending the violence within a specific relationship. However, if as radical feminists argue, men batter in order to
control and dominate women, what is going to prevent them from battering their next girlfriend or wife? Who would suffer the consequences of long jail time -batterers or victims? Why are the court’s threats not followed through with? These questions are addressed in chapter five.

Who is Paying for Treatment?

The financial cost of a treatment program varies. Mr. Elmer Fudd reports:

... the men are generally self-paid and they generally pay the minimum fee. Many of them are unemployed. We have had, of course, men who are successfully employed who pay the higher fee, but it's not covered by the Kentucky Medical Assistance Program for most of the men, they don't have the cards. If a man has a card, it would cover it. If they've got a psychiatric diagnosis that goes with it, yes (it will pay for it) ... There are certain diagnosis that Medicaid doesn't cover, and if you have that diagnosis, and they have a medical card, if they only have marital problem diagnosis and they have medical card, they still have to pay. For the men, what we mostly wound up with was personality disorder diagnosis.

Certain diagnoses may be paid for by the Kentucky Medical Assistance Program.

The battering has to be diagnosed with a psychiatric illness in order for KMAP to pay for the services. Furthermore Mr. Elmer Fudd reports:

There was some women's program money and I don't know where it stands, but there was money to the centers to develop programs for women, which, of course, has a lot of domestic violence components, alcohol/co-dependency are probably the two big ones.

Therefore, the women seen by Ms. Foghorn-Leghorn, the Women's Specialist, of the Looney Tunes’ batterer program can be paid for through monies set aside for women’s programs. Furthermore, case-management can be billed whenever Ms.
Foghorn-Leghorn calls the women to see how they’re doing or if the woman wants someone to talk with about her problems. This is an example of Walker’s "secondary intervention" approach to treating victims (Walker, 1979:188).

Secondary intervention involves the treatment of battered women through the least restrictive means such as counseling and hot lines (Walker, 1979:189).

Often mental health systems get their funds from the state.

Mr. Brainy Smurf explains:

We get a slice of the pie from the Department of Mental Health and that's for indigent care dollars from people that don't have the money to pay, it's a sliding fee scale, so whenever it slides down, if somebody's paying $2.00 then we try to bill back the State for whatever else makes up our full fee. We also take insurance. We also take medical assistance cards, we take Medicare cards, but we've found that the majority of a huge number of people are coming through our agency and burning up all that Department of Mental Health dollars, and so we made a decision about a year ago to not use any insecure dollars for this program per se, so this is a fully self-sufficient program where they're paying the fee for the court-mandated program to come here that amounts to 300 bucks or ends up being seventeen services that they are rendered, the individual screening and then sixteen weeks, so they are expected to pay $300, pay as you go and over the course of doing this now for a year has been able to support the victim services as well. If somebody's purely indigent we have the ability to waive fees or figure out something else to do, but our expectation is for them to pay for the services.

In Sesame Street's batterer program, which is not a mental health agency and does not make any diagnosis, no state monies are used for batterer programs.

According to Ms. Big Bird:

... we go into individual counties and target United way, men's groups, private donors, or individual grants to run the perpetrators program.

State monies, individual payers and private monies are used to pay for batterer treatment programs. If a psychiatric diagnosis is given, the financial cost to the
batterer is paid in full by the state. In the Sesame Street’s batterer program, United Way or a grant pays for the cost of treatment. The financial cost to low-income batterers may be minimal when a sliding-fee scale is used, while the state pays the difference for treatment. Other batterer programs have a set cost; however, it may be negotiable for indigent people. What is the cost to the state versus the cost to the batterer? Who benefits from treating batterers and who suffers? What is the most effective way to treat batterers? These questions are addressed in chapter five.

The Mental Health Response to Battering through Different Sized Client Groups

There are several different milieu that can be used to treat batterers. The individual milieu is a one-on-one situation. Ms. Piggy argues that because of the confrontive nature of this treatment an individual approach is not the most effective. Mental health professionals report that peers often serve to act as the best means in confronting a batterer about his violence.

The group milieu supposedly is the best in dealing with resistance. When peers in the group point out the responsibility of their violence to one another, it is believed to be the more effective manner in dealing with resistance.
All the programs I assessed respond to domestic violence through batterer groups. The batterer’s group is the preferred response.

According to Ms. Piggy:

_The literature has shown us for some time now that the most effective treatment modality for batterers is a group modality, because it may not be as effective for a therapist to sit in there with a tie or whatever to confront a batterer about what’s inappropriate behavior. It’s much more effective if you have another client within that program who can confront a peer, essentially, and there’s a lot of confrontation and that sort of model turns out to be quite effective._

Are there other interests in the preferred group response? If there is only one or two qualified people to treat batterers how could they see large numbers of batterers? Furthermore, most of those I interviewed work with batterers only a few hours a week. How are they going to treat twelve batterers with an individual milieu? Are individuals and couples treatment as cost effective as group?

According to Mr. Elmer Fudd:

_If you don’t have enough people to form a group, you can’t have a group. When the referrals were not going real fast, we happened, at one point, to get some men and women who we thought would be appropriate for couples, and so we started a couple’s group._

Smurfville’s treatment group differs from court-mandated groups. Mr. Brainy Smurf explains, the treatment group is:

_... much more loose, very much traditional psychotherapy._

Traditional psychotherapy stresses the only thing they can gain an understanding of is themselves. Thus, the only thing they can change is themselves. Traditional
psychotherapy relies on assumptions of cognitive understanding and behavior
modification in dealing with violent behavior. According to Mr. Brainy Smurf:

What's very much different in the treatment group is we do whatever makes sense
to do at that point. If that's individual we do ongoing individual as well as a
group. If that means we need to be doing some couple's work we will do that at
the point to which that becomes safe.

Within these treatment groups, any milieu may be used in treatment. However,
the man and the woman are not addressed together in couple's counseling, until all
parties (man, woman, therapist and staff) feel it does not endanger the woman.

There are many different types of batterer groups. Psycho-educational groups
are a mixture of education on battering and behavior changing techniques. Dual
diagnosis groups have a mixture of problems. The term dual diagnosis signifies
that these people have two different diagnoses that could be found in the
Diagnostic and Statistical Manual for Mental Illness - Revised. An example is
alcohol dependence and antisocial personality. Here the individual suffers both
from alcoholism and a personality disorder. The goal of treatment is to work on
both these issues within the framework of a specific group. These dual diagnosis
groups are needed due their special needs.

Ms. Piggy explains that these therapy groups:

... what we call dual diagnosis groups, ... groups for batterers who are also
chemically dependent, so there's a dual focus in those particular kinds of groups,
but most of the court ordered programs around the nation, we're taking about a
psycho-educational, fairly short-term approach.
The idea of dual diagnosis treatment can be found in other batterer programs I assessed. Ms. Minnie Mouse explains:

*It's entirely group with the exception you may occasionally have an individual session for someone who's having some problems. For perpetrators who have a substance abuse problem, they would need to have individual and/or group in addition to that, possibly, if their substance abuse problem is severe enough.*

Furthermore, Ms. Minnie Mouse explains:

*We have some men that maybe for their own childhood issues need some individual therapy, maybe they've been sexually abused or whatever, and they need some individual therapy.*

Dual diagnosis groups are one approach in dealing with diverse diagnosis in batterers.

Another approach to batterer treatment is separate groups for men, women, and children. Sesame Street’s batterer program has a specific group for men, women, and children. Ms. Big Bird explains:

*They all meet separately, but they meet concurrently at the same time . . . each of the (ten) topics is slanted toward the children, victim and the perpetrator, but it’s the same subject material, but it’s set up to be delivered in a different manner whether you’re speaking to batterers, victims or children.*

Sesame Street’s batterer program brings the issue of effects of battering on children into care. The family can come together to the program, however husband, wife, and children all meet in separate groups. Within the separate groups the topic is the same but is addressed from the different perspectives of batterers’, victims’, and children's issues.
Looney Tunes' batterer program and Peanuts' batterer program respond to domestic violence lastly through couples groups. Mr. Pepe Lepeu explains the Looney Tunes' batterer program response:

... right now is that the batterer is in individual session for two or three sessions, then group for ten sessions, and then another couple's general group for the rest of the year.

The court-order to the Looney Tunes' batterer program is for up to one year. The first two or three sessions are to make sure the batterer will work out in the group setting. Life histories are gathered and the purpose for the group is related to the client by his therapist. The ten group sessions are psycho-educational in format. Each group session addresses an issue related to battering, such as, cycle of violence and how it can be broken, effects of alcohol on cognitive processes and Alcoholic Anonymous groups. The education part of the group session is about such things as the existence of the cycle of violence and effects of alcohol on judgement and reasoning. The psychological part of the group session is the how to in breaking this cycle of violence and the principles of Alcoholic Anonymous. If after the group sessions the woman and the therapist feel it is safe for her to be in counseling with the man, couple's counseling is addressed. The man and the woman are seen as a couple for the rest of the one year period. However, Mr. Pepe Lepeu explains, before going into couple's counseling the woman is seen
... with what is called a Women's Specialist. She sees the women who come in, either court referred or self-referred, and I generally see the men.

Ms. Foghorn-Leghorn, the Women's Specialist, explains:

*He (Mr. Pepe Lepeu) would give out certain handouts to the male about battering, and I'd give the exact same brochure to the females, but on the victim's side.*

However, according to Ms. Foghorn-Leghorn, Mr. Pepe Lepeu:

... does just the males in a group and I do the females in a group, and we have yet to get together with both because we just started it up.

The intention is to get them back together as a couple.

Mr. Elmer Fudd reports in the beginning of Looney Tunes’, batterer program when there were not enough participants for separate men and women groups, a couple’s group was used. Since there were not enough people to form a group, a couples approach was adopted. Furthermore, Mr. Elmer Fudd explained:

... the thing the feminists have been concerned about is that the women lack power initially to be in treatment with a batterer, that they're still in danger, and that during therapy may result in somebody getting hurt, if it’s done in a marital context, or there is enough intimidation that the women would not be able to make changes or to participate fully in the room with the therapist and the man.

However, Mr. Elmer Fudd reports:

*We didn’t see that in the marital group, but it was possibly because we had screened the people and felt like they would be good candidates to be SAFE, and that the women in those marriages appeared to be quite competent to hold their own, was really what we felt.*

Mr. Elmer Fudd states that feminists’ fears that counseling from a marital context would be ineffective did not apply to the marital groups he worked with. Women
who lacked power in the relationship were initially screened out and not put in marital groups. The women in these marital groups had as much power as the men according to Mr. Elmer Fudd. Peanuts’ batterer program also uses marital sessions. Peanuts’ batterer program response is basically the same as the Looney Tunes’ batterer program. Mr. Snoopy explains:

*The group is set to run in twelve week-sessions . . . in addition to that there are some individual sessions, and in addition to that sometimes some conjoint marital sessions, like once a person finishes up with the group.*

Couples counseling is supported by the state mental health department.

Ms. Piggy explains:

*Once the batterer has completed the group treatment program, then the mental health program is able to look at bringing the couple together if there is safety to do that. Generally we do not support providing services to couples up front.*

However, couples counseling is not supported until after the group treatment and the treatment program feels it is safe.

The couples milieu is based on the belief that the problem lies within the relationship or marriage. Radical feminists argue that this sharing of the responsibility fails to address the patriarchal nature of the family. Furthermore, radical feminists point out that couples counseling may endanger the women if she openly speaks out against her abuser. However, some of those providing treatments believe the problem lies within the marriage, and to only treat the man is only treating half the problem.
Other batterer programs that tend to be more feminist in orientation did not use couple counseling or any form of marital counseling. They believe it endangers the woman. Radical feminists argue that if a battered woman openly challenged her partner, there would be consequences for her back home. Radical feminists such as Harding (1987) argue that women lack the power in a relationship due to the patriarchal structure of the family. Therefore, couples counseling would be ineffective. Ms. Minnie Mouse of Walt Disney’s batterer program explains:

_There is not any couples therapy. We do encourage the women, and we offer therapy to the women, but it’s not included . . . the main reason for that is we do not want to put the women in jeopardy of being abused or controlled or manipulated by therapy, and if women are ordered into therapy are required to come here as part of their treatment, then the man can sabotage that. If she’s supposed to come to therapy, he can make it so that she can’t come, and then she gets penalized by the court system. Or, if you’re doing a marital therapy session and she brings up something that he doesn’t want her to, then there are consequences for that afterwards, there’s repercussions._

Walt Disney’s batterer program offers separate therapy to the women; however, this therapy is not part of the program. For those women who decide to enter therapy, issues such as shelter support and co-dependency are addressed. Ms. Big Bird of the Sesame Street’s batterer program agrees with not doing couples groups because:

_... one of the most dangerous things you get into is to put a violent couple together immediately because then the focus of counseling becomes relationship/marriage counseling rather than 'let’s look at inappropriate battering behavior._
There is a diversity of milieu used in treating batterers. See Appendix I.

These different milieu represent where the responsibility of battering rests.

Who is Responsible for Battering?

There are many different milieu used to treat batterers. The emphases of these programs are representative of who is responsible for battering. According to Ms. Piggy, the goal of court-mandated batterer programs:

... is a re-learning for perpetrators about what is appropriate and inappropriate behavior and that violence against a spouse is in fact criminal behavior and extremely inappropriate, and helping to re-learn other kinds of more appropriate behavior as opposed to using violence, so most of the models we have around this State and nationally are psycho-educational or didactic in nature.

Ms. Minnie Mouse of Walt Disney's batterer program explains:

We are basically operating out of a feminist perspective. We believe that the violence is a learned behavior, it's controllable, it's not a marital problem or a family problem, it is a problem within the offender in the way he's learned to deal with his own emotions... We look very closely at the issue of power in a relationship, and the inequality of women's power in society.

It's a feminist perspective, according to Ms. Minnie Mouse, in:

... that we know that women are not equal to men in our society, are not treated as equal, and that's part of why violence occurs, and why it continues... It's a psycho-educational approach that focuses on learning new skills to end their violence, and we really focus in on that individual and not on the family or marriage or anything like that.

Mr. Brainy Smurf of Smurfville's batterer program explains the emphasis as:

... violence in a relationship is inappropriate, that people are responsible for their own behavior and that for things to change within this relationship they've got to take hold of that by themselves and make some changes... it's not a sex issue, it's really violence is inappropriate... We live in a violent culture.
People get off on violence. . . There’s an awful lot of support for violence to continue to occur . . . People like violent movies.

Mr. Brainy Smurf’s cultural aspect of violence is that culture supports violence but is not a male/female issue. Mr. Brainy Smurf states why gender is not the issue:

I think that there are most often people who end up being mutually abusive. There are a couple of psycho-ed groups that have women in there.

I questioned Mr. Brainy Smurf, "Then why is it men tend to batter more than women?"

Mr. Brainy Smurf explained:

I think very few men report that they’ve been victimized.

Mr. Brainy Smurf explains that men may be victimized by women. Battering is done by both genders. However, men are less likely to admit they are being battered by a female due to masculine attitudes and beliefs in society. Masculine beliefs in society include such things as men are the stronger sex who must defend their women, that men don’t cry, and that men are not men unless they are in control. Research by Straus showed that "violence between husband and wife is far from a one way street" (Straus, 1977-78:448). Straus reports that "for all violent acts during the survey year, there is only a slightly higher incident (of violence) for husbands than for wives (12.1 percent versus 11.6 percent)" (Straus, 1977-78:448). However, feminists such as Dobash and Dobash (1992) show that most of women’s violence occurs in self-defense (Dobash & Dobash, 1992:278).
Therefore, women may use violence to protect themselves. Feminists argue reports of mutual battering are misleading because women tend to "fight back".

There is a conflict over whose responsibility battering is between Walt Disney's batterer program and Smurfvilles' batterer program. Walt Disney's batterer program is based on the belief the responsibility for battering is a male issue. Battering is carried out by men to control and dominate women. Smurfvilles' batterer program emphasizes that violence is an inappropriate behavior within the family. Any violence within the family, despite who is battering, is inappropriate behavior.

There is the common theme of stopping the violence. However, someone must be responsible for the battering. Ms. Big Bird of Sesame Street's batterer program explains:

\[ \ldots \text{we want the violence to stop} \ldots \text{we want the perpetrators to accept the responsibility for his actions.} \]

Mr. Bert of Sesame Street's batterer program states:

\[ \text{The emphasis of the program is to educate people to the nature of the cycle of violence in relationships. We talk to them about the effects of violence on children. We talk to them about the effects of alcohol and the whole relationship setting and especially how it contributes to violence. We talk about stress and how you handle stress. We talk about conflict and conflict containment. We talk about self-esteem and the importance of having good sense of self. We talk about jealousy. We talk about anger and anger-management, anger-control. We talk about irrational thought systems.} \]

However, Mr. Pepe Lepeu of Looney Tunes' batterer program
explains the emphasis of the program is:

... to try and stop the battering.

Mr. Pepe Lepeu explains:

Our view is there is a problem within the marital system itself and so we need to identify that and get that battering stopped, get more appropriate ways to handle the anger or frustration that causes battering to begin.

There is the common theme throughout all respondents that the violence is socially learned. While growing up batterers have learned to batter women from witnessing battering and through acceptance of beliefs about men’s right to batter.

All of the batterer programs explain the violence through the "cycle of violence."

The cycle of violence, as explained by Ms. Foghorn-Leghorn follows:

In the basic cycle of violence, it's going to begin just as a basic tension between the husband and wife from whatever external stressors there are, financial problems, child problems, marital problems, sexual problems, whatever these stressors might be, and the wife especially if she's co-dependent, is going to try to be a better wife a better mother, and a better everything, and she's going to walk on eggshells the whole time. I know he's not happy today so I'm not going to say anything to him, I'm going to make the kids be real quiet, so in the tension phase it doesn't go away, the tension is going to mount, everyday is going to get a little more tense until he's going to explode and maybe get physically violent with her and then the violence is going to occur and then the flower and candy stage or the makeup stage will occur, he's going to express a lot of guilt through crying and making promises, 'it's never going to happen again', 'I'm going to quit,' and then they're going to fall back in love and everything's going to be normal or they're normal or normal as it's going to be in that dysfunctional family, things are going to go smooth, they're back in love again, so to speak, then the tension is going to start mounting again. Every little mole hill is going to be made a mountain and the tension is going to increase, increase, increase until he explodes again and then the abuse is going to occur and the flower and candy stage is going to occur then they make up and fall in love again and then the tension starts to build.

Ms. Big Bird of Sesame Street's batterer program explains that there is also an intra-generational cycle of violence. See Appendix II.
Ms. Big Bird explains:

*The other part of the cycle is not only a cycle within the couple, but it's a generational cycle and the children in that home are learning that with the conflict resolution is to hit and fight, so it's a cycle within that family and it's also a generational cycle and it's all boxed in by power, control and isolation.*

All of the batterer programs, except Walt Disney's batterer program, explain some responsibility for domestic violence on *mutual combat*.

Mr. Bert states:

... it's very important that both men and women accept their level of responsibility in the level of violence that exists as a whole.

Mutual combat, as explained by Mr. Elmer Fudd, is where both the husband and the wife are both responsible for the violence.

Mr. Elmer Fudd explains:

*The Department of Defense is way ahead of the civilians, ... There's a complete domestic violence program in the armed services that he (Peter Neidig) started as a consultant, in his model is marital group ... (Peter Neidig) feels like if you aren't learning with your spouse how to control the violence in your relationship, then you're only learning half of what you need to learn.*

Mutual combat is where both the man and the woman are equally responsible for the battering. Both of them batter each other.

Mr. Elmer Fudd states:

*It's not that the woman gets beat to death and never defends herself. There's a lot of pretty stout women out there, stout or not, that will get right up there and continue to battle for themselves.*

Mr. Elmer Fudd states that women are not being beaten to death and that women also batter.
Mr. Elmer Fudd explains:

*I think the reason we talk about perpetrators and victims is that the men are generally physically going to come out on top.*

This reduces battering to a biological issue that men are physically going to win the fight. Ms. Big Bird states, the mutual combat is in the:

...younger generation, one generation back, or one decade back where we had high school kids.

Ms. Big Bird believes that mutual combat is a very recent phenomenon.

Furthermore according to Ms. Big Bird and Mr. Pepe Lepeu, they confirm that they do in fact have women who batter. However, according to Ms. Minnie Mouse, the reasons are totally different for why women become violent.

Ms. Minnie Mouse explains:

Women are usually battering out of anger at their perpetrator for treating them this way for so long, or they do it before because they want to sort of ‘get him before he gets them’ kind of thing. It’s not the same kind of power and control, they’re wanting to make the batterer stop hitting them, but they know they can’t win.

A belief in the battered women’s syndrome is commonly accepted throughout all the batterer programs I assessed. The battered women’s syndrome is a belief that women who are abused lose all hope in escaping from the batterer. This loss of hope in escaping from the battering has resulted in cases where women have killed their abusers in a last effort of self-defense.

Ms. Big Bird explains:

*What we’re seeing more now, it’s more like post traumatic stress disorder and it’s very similar to having been in war for twenty years.*
Ms. Big Bird states:

*You take a victim who has lived in this level of violence and power and control and fear and terror year after year after year she very much operates like a soldier who was in the Vietnam War, so we see post traumatic stress disorder in a lot of battered women.*

One explanation why battered women stay in abusive relationships is learned helplessness. Learned helplessness is an acceptable explanation for why these women stay in abusive relationships, according to many key-informants.

Learned helplessness, according to Ms. Foghorn-Leghorn:

*... is a great part of a dysfunctional system.*

The existence of a dysfunctional family system suggests that the family can be functional. Ms. Foghorn-Leghorn explains that these battered women are:

*... going to be the chief martyr... in the family and as it continues, it's a family cycle, just like the violence is and 'I feel it's my duty to stay in this wonderful marriage because we do have our good times' in the makeup stage.*

Many battered women, according to Ms. Minnie Mouse, have:

*... been victims as children, they've been raised in a family where they have been mistreated, or where they've seen domestic violence occur, and so that's what they've learned is that it's okay for dad to hit mom, and they've seen that played out in their family situation, then they get with a man who does the same thing.*

Learned helplessness is a response to finding out they (battered women) can exert no influence over the battering. Thus, it serves to explain why battered women remain in abusive relationships.
Ms. Minnie Mouse explains why learned helplessness occurs:

We're looking at women that may not believe that they deserve any better, may not believe that there are men out there who are not abusive; would grow up to think that they had some control over it, that they caused it someway.

Mental Health Diagnosis of Battering

Is battering a social structure of society, or an illness that develops from learned behaviors? Often mental health diagnosis is given to batterers and victims. The psychiatric diagnostic model is often used to explain battering and victimization. However, Mr. Elmer Fudd of the Looney Tunes' batterer program explains:

... they (the State Department for Mental Health) are telling us that psycho-pathology per se doesn't lead to battering.

Nonetheless, Mr. Elmer Fudd states:

I think you do see a lot of personality disorders come in, in the men. I don't think it's simply that they've got a marital problem all the time, but I think the research is still unclear.

Mr. Elmer Fudd reports explosive personality is really a rare diagnosis for batterers. Mr. Elmer Fudd explains:

When you work from the learning model, explosive personality supposedly has some sort of physical component. If they've learned it and they just about all act the same, if they get angry and feel like they're out of control, we're not calling for that (explosive personality disorder), but a fair number we were able to identify personality disorders and then in some cases it was a V-code. We're not really trying to treat their personality disorders. We're really trying to treat their violence. We're trying to teach them to be non-violent.
Mr. Pepe Lepeu reports:

... some may be antisocial, some may be alcohol dependent, some may be whatever, but all of them carry, with me at least, impulse control disorder or explosive disorder.

Mr. Pepe Lepeu explains:

They are out of control obviously, but they can be dealt with through therapy. They don't need to be medicated generally speaking they don't need this other stuff, it is not an organic problem like schizophrenia or bipolar disorder, but it is an impulse problem.

Ms. Foghorn-Leghorn explains:

For the females, if they continue to live in abuse, if this isn't the first time, and usually it's never the first time he hit when you file it's repeated, usually we're going to put other specified family circumstances diagnosis because they're either going to be co-dependent, ACoA, or from a dysfunctional home, there's going to be some kind of dysfunctional history, so we might put other specified family circumstances.

Mr. Snoopy explains:

... there is a diagnosis for everybody that comes through ... something as simple as V-code diagnosis, something like a marriage problem, marital problem or adult antisocial behavior, with people whose violence is more of a pattern, more an inclusive pattern, it might be intermittent explosive disorder.

Ms. Minnie Mouse uses diagnosis. However, she explains:

I don't think the DSM III-R really adequately addresses these guys. Mainly what we end up using is marital problem, a V-code or an interpersonal problem. Sometimes you do get an offender who is obviously a personality disorder. For the most part it's probably a V-code for most of the offenders. I feel uncomfortable putting a V-code that says marital problem. It is a marital problem, but in a sense it's really not. That's the context in which the violence happens, but that doesn't really adequately address his problem I don't think.

Sesame Street's batterer program does not use any diagnoses in their batterers program. Ms. Big Bird reports:

We do an assessment at the beginning of group ... to red-flag possible mental illness. What we do is support counseling, we do it in an educational format.
Mr. Brainy Smurf explains that diagnoses are not given in the court-mandated program. The court-mandated batterers, explains Mr. Brainy Smurf:

... are not clients per se, they're here for a 16-week educational kind of experience. Should they become a client, should they become interested in individual care, should they be screened out at initial triaging point of needing other kind of care, they would become a client and, therefore, would have a diagnosis and a working treatment plan.

Ms. Piggy explains battering as:

There are a number of reasons that battering happens. There are a number of causation of violence. Sometimes the causation of violence is a physical disorder such as an organic brain syndrome. Other times it's a mental disorder. If you look in the DSM III-R you'll find by definition there are mental disorders, classifications which include by definition violence on the part of the individual. When we're taking about domestic violence, however, the most primary cause that we see is that the batterer has grown up and witnessed the violence between his or her own parents, and that in essence has been a learning situation for that perpetrator as he's grown up, that that's the appropriate way to deal with anger and stress and other kinds of emotions, so there's a social learning kind of model to domestic violence which we feel explains most of the cases which happen.

Ms. Foghorn-Leghorn explains:

One of the key issues in the groups is going to be anger control and usually the batterer is going to have an inner rage, and we try to find out what the causes of the rage are, and they can be from history of sexual, physical, emotional types of abuse, so anger is a big part of the sessions and how to deal with that anger and placing that anger. For example most men maybe who have been sexually abused as kids between the ages of twenty-five and thirty-five, they're going to show a lot of anger in that approximation of about ten years, they're going to start hitting walls and hitting people and doing real violent things, excessively abuse alcohol and drug use, and because they've repressed a lot of childhood, it could be physical abuse, sexual abuse, but usually between the ages of twenty-five and thirty-five, and that's the ages of most of the cases we get in here.

Mr. Elmer Fudd's impressions are that:

... a fair number of the men are victims, but so are a fair number of men who are not batterers.
However, according to Mr. Elmer Fudd:

They may be victims of physical or sexual abuse and there have been a pretty fair number of physically abused men, I think, in the ones that we have come through and the ones that are not physically abused, many of them, I think, were in families where the man, the macho model, was prevalent and they were taught to take care of themselves, and they were taught to fight, they were taught to be tough to survive.

All of the batterer programs use anger management/control as a strategy in dealing with batterers. Mr. Elmer Fudd explains:

The cool-down is their emergency Band-Aid procedure to be able to get out of the situation, let their partner know that they're getting angry and they need to take a cool-down and the partner says okay, and they leave, and the partner may need one too.

Alcohol abuse as a theme in treatment is addressed at all the batterer programs. Ms. Minnie Mouse believes, people do not abuse:

... just because they're drinking. I think alcohol makes it easier to abuse as it does for any social problem.

Furthermore, explains Ms. Minnie Mouse:

When you take away the alcohol those attitudes and beliefs about women and what's acceptable to do and what's an acceptable way of treating people is still there.

Mr. Brainy Smurf explains:

Sixty to eighty percent of all abusive incidents involves in one form or fashion alcohol or drugs, and clearly this is an important kind of piece to this whole process.

However, explains Mr. Brainy Smurf:

Nothing suggest that the alcohol causes violence.

Alcohol, according to Mr. Brainy Smurf, only lubricates the wheels to allow for violence to occur.
Mr. Pepe Lepeu reports:

... usually (alcohol abuse) is secondary to what's really going on.

Mr. Elmer Fudd explains that when he was directing the program alcohol abuse was addressed separately with a substance abuse counselor.

Ms. Foghorn-Leghorn explains that alcohol:

... is going to increase any kind of mood changes.

Furthermore, Ms. Foghorn-Leghorn estimates that:

Seventy to eighty percent are alcohol related cases.

Mr. Ernie reports alcohol was often a contributing problem in the specific event that resulted in their battering. Mr. Ernie reports:

... generally about 50% of the men that are mandated to the session, alcohol did play a part in the specific incident that caused them to be mandated.

However, alcohol may not be viewed as the actual cause for battering. Ms. Big Bird explains:

Most research will say that alcohol does not cause battering nor does battering cause alcohol (abuse), but of course, there's a real high correlation where you find one you often find the other. We see a real strong correlation in this part of the state probably as high as 90%. A lot of the domestic violence petitions start out 'he came home drinking', 'we had been to a party', had too much to drink. A lot of the batterers on their assessment will show one, two, and three as many as five DUI's, so there's a lot of history with drinking. What we do is a lot of education on alcoholism, drug use. The physiological predisposition and a lot of education, there are referrals for if you need inpatient treatment, if you need outpatient treatment, A.A., those kinds of things, but to try to force people to look at the alcohol issue in their life because it also is the same cycle as violence and they're often intertwined, it's real hard to assess one and intervene in one without the other. If somebody is fighting and drinking and they stop fighting, but they're still drinking, you've still got a problem. You have to almost work both issues.
Alcohol abuse is addressed within the batterer programs. Although alcohol abuse is not seen as the primary cause, it is seen as another problem for many batterers. Therefore, alcohol abuse is addressed. Alcohol abuse is examined as it relates to increasing incidents of violence and cognitive blocks. The way a batterer’s responsibility is viewed is directly related to understandings of battering. See Appendix III for definitions of psychiatric diagnoses.

The Influence of the Addictions Field on Understanding Battering

The ideas and language of the addiction professionals are seen in the treatment of domestic violence. Batterers are viewed as resistant, minimizing and in a state of denial about the problem. The concepts of recovery and relapse are applied to the therapeutic understandings of violent behaviors. Furthermore, the victims are viewed as co-dependent and in addictive relationships. All of the batterer programs, except Walt Disney’s batterer program, involve the language, concepts, and influence of the addiction field in understanding battering.

According to Mr. Elmer Fudd, working with batterers is:

... analogous with treating alcoholics in that there's denial and minimization.

According to Mr. Pepe Lepeu the batterer can have a relapse:

... much like the addiction people have.
Mr. Brainy Smurf reports that the court-mandated psycho-educational groups are:

... led by therapists that have a significant history of doing alcohol treatment work... (due to the) gray area of people that have some level of alcohol abuse or dependency" (and are batterers).

Mr. Bert explains:

We talk about addictive relationships versus healthy belonging, and I would say that 90% of those people who come to my group are in addiction relationships. They have no sense of boundaries, they have no sense of self-esteem... they're in a state of masochistic-type of stuff, in other words, being in the relationship is a punishment to them, but they'll be damned, they're going to punish the other person as well, so in many instances it involves minimal relationship skills. A minimal application of a skill if it did exist. At the very bottom of it all is a real absence of a sense of self, self-esteem and a real absence of any ability to help another person achieve self-esteem.

The victims are often seen as co-dependent. Ms. Foghorn-Leghorn explains the emphasis of Looney Tunes' batterer program in working with the women is basically behavior change. According to Ms. Foghorn-Leghorn:

Most of the females are going to be very co-dependent and in co-dependency you're going to have a lot of control and manipulation on the female's part, so we're going to try to change her behavior and just basic education on spouse abuse centers and other options.

According to Ms. Foghorn-Leghorn co-dependency is a condition where one's own happiness rests on making others happy. Therefore, co-dependency fuels the dysfunctional family system. Radical feminists argue that functional assumptions of the family are incorrect. The inequality between husbands and wives within the marriage is much less than an egalitarian relationship. The inequality of women within the family prevents any homeostatic balancing of the family.
Ms. Foghorn-Leghorn explains co-dependency as:

*I will try to change your behavior instead of my own, and you get sicker and it makes me sicker.*

These concepts from the addiction field are present throughout most of the batterer programs I assessed. The understandings and concepts of battering are directly related toward issues of how to end the violence. See Appendix III for definitions of addiction concepts.

**Why do Batterers Stop Battering?**

There are two types of motivators reported toward ending the battering, external forces and internal cognitions. The threat of a subsequent arrest is a commonly viewed external motivator for stopping the violence. Ms. Minnie Mouse explains that arrest:

*... seems to be the biggest thing that truly gets offenders like 'woke up' ... is the arrest and the consequences that could befall him if he doesn't; granted, most of the men that come into our program, they want something else too, they want to control their anger, they don't like being like this, they don't like what affect it's had on their partner, but for the most part they wouldn't be here if they didn't have some kind of court leverage.*

According to Ms. Foghorn-Leghorn and Mr. Pepe Lepeu of Looney Tunes' batterer program, the threat of going to jail or back to court is the main motivator.

However, according to Mr. Pepe Lepeu:

*Sparad enormously these people realize they can't keep doing this as it will ruin their relationship, it's going to ruin their relationship.*
Mr. Pepe Lepeu explains:

The fact is that if someone batters his spouse doesn't mean he doesn't care for and doesn't generally love her like anybody else would, he has a different way of showing it perhaps, but he probably cares just as deeply as anyone else would. So when they face the possibility of change or else 'I'm out of here', then that's kind of motivating to change.

Ms. Big Bird also explains an internal motivation toward stopping the violence may come from:

... remorse about inflicting pain on individuals whom they also love.

Mr. Ernie explains:

... the individual is motivated by what's important to them. In some cases it's, they don't want to pass this on to their children. In some cases it's because they don't want to spend time in jail for they know if they're fined that would have a serious impact. In some of our cases the incident may have been a one-time situation that developed and if that situation is avoided in the future, then there will be no repeat of the violent behavior.

Mr. Brainy Smurf explains the motivators toward change are:

... all external for a long time, but for them to make a shift to internal kind of responsibility and justification for making changes is the toughest process ... but for real change to occur I think it really needs to be translated into an internal kind of drive rather than an external kind of drive.

How do mental health professionals know if real change is taking place? Are these batterer programs successful in reducing rates of battering?

Assessing the Success of Batterer Programs

The documentation, or lack of documentation, of batterer program success involves external measures such as recidivism and internal measures such as
cognitive understanding and participation. However, all the internal measures of success in these evaluations are highly subjective in that they are self-reports or unsystematic in nature. According to Ms. Piggy, program success is measured by recidivism.

Ms. Piggy explains:

... in Kentucky the primary means by which we're measuring that is recidivism. Recidivism of arrest, being re-arrested or appearing before the court again or referred to the treatment program again.

However, it is understood that recidivism rates are not representative of all batterers, only those appearing in court again. Ms. Piggy reports:

It's actually a weakness in the system.

The ability to measure the effect on society at large is difficult, if not impossible, by examining recidivism rates of repeat offenders. Mr. Brainy Smurf explains:

... about the only way we have at this point to gauge whether a program is working is whether somebody ends up coming back or not for a new charge, and I think that's less than adequate.

Mr. Brainy Smurf explains how he measures the success of his batterer program:

For me the chief criterion for success, however, is the cessation of violence, both physical and emotional kind of violence... it's not necessarily to salvage relationships that are unhealthy, lots of these relationships are unhealthy beyond the point that abuse is occurring that's making it a lot worse obviously, but it's not the only reason that's it bad. The other way that we're gauging it is when they come into the program we do a pre-test about information that's added to the beliefs and values about abusive relationships... true/false questionnaire that then they get scored and I think it's scored after the psycho-educational program with the belief that they've acquired some new knowledge and/or understanding of the situations, and, therefore, should have a more positive test result at the end of that time, and I think that that's been shown to happen, but I'm not sure that's fully adequate, but I think that people are learning some information whether they're able to translate that and incorporate that into how they interact with their partners, I don't know yet.
The extent that individuals complete the program and do not return are some criteria for success for the Looney Tunes' and Sesame Street's programs.

According to Mr. Pepe Lepeu:

... if I never hear from them again, never hear about them, and in a small community you'll either hear from them again, which is the way we are, so if I never hear from them again I'm assuming they made it.

Mr. Pepe Lepeu explains:

I do not contact any of my regular clients or batterers referred simply because I feel it's an ethical issue with me. I'm not respecting their right of privacy.

According to Mr. Ernie, the measure of success for the Sesame Street's program lies in assessing the:

... level of participation ... the level of admittance by some people of their responsibility for what's happening, the level of commitment on the part of the person to try and make the relationship work, and as they talk that up in the group and as they confront other people who are coming off with negative denial stuff.

Success for the Sesame Street's program is based upon their participation in group therapy, admission of responsibility for the violence, and having an overt desire to make the relationship better. Mr. Bert, also from the Sesame Street's program, reports he looks at the percentage who complete. Is going to a number of sessions the same as completing? Mr. Bert not only assesses the percent that attend all the sessions but also the percent who don't miss sessions.

Mr. Bert reports:

I would say probably 50% complete, and 50% completed without any void in there too.
According to Mr. Brainy Smurf:

The mere attendance of ten sessions and some participation (by) the person in those ten sessions is really the only criteria that you can use as a measure.

Others such as Mr. Snoopy of the Peanuts' batterer program reports:

I look at . . . (is the batterer) participating, understanding or at least verbalization of understanding the principles that I try to get across, and being able to at least verbalize, and then to practice, do more effective and more effective attitudes, and more effective ways of communicating.

However, Ms. Big Bird of the Sesame Street's batterer program explains:

Our definition of success and the participant's definition may be quite different.

What if success for the batterer is not coming before court again? Does that mean the violence has ended? Success for batterers may only mean they attended twelve sessions. Ms. Big Bird reports:

We have an evaluation tool that we use, it's a self-evaluation of services.

Ms. Big Bird explains that prior to participation, mid-term and upon completion there is an assessment:

. . . of what they think they're getting out of it, and then they do a final evaluation, and almost always we have a positive report from the participant.

Furthermore, Ms. Big Bird explains:

We also, on the other hand, have the victims fill out the same set of paper in a different facility so that we can compare the answers for the truth scale, . . . and the couples who have been part of the program report decreased violence, lack of violence, better fair fighting for those who stay together. Some of them, of course, separate.
Others such as Ms. Minnie Mouse of Walt Disney's batterer program report they can educate and practice ways to end the violence with batterers; however, they cannot guarantee success. Ms. Minnie Mouse explains:

*I don't have any follow-up studies on the men in our group. There has been some attempt to do that, and for the most part most of them don't re-offend in our group. I think they were looking at 80% not re-offending, but it's real hard to gauge. You've got a man in group who seems to be understanding the content, is using the skills, is saying all the right things, but the bottom line is if he decides not to use it in his own personal life when the situation arises again. All we can do is teach it and help them practice and help them understand it and it's up to them to use it, so it's real hard to know who's getting it and who's not, and who's going to use it and who's not.*

The way success for batterer programs is defined differs not only from program to program, but from therapist to therapist within these programs. Furthermore, there is a lack of documentation of program success.

Conclusion

The State Department for Mental Health is in favor of expert treatment for batterers. The need for this expert treatment will be examined in chapter five. Court-mandated programs are justified as needed in order to keep batterers in treatment long enough for treatment to be completed. However, completion of treatment often involves only attending the sessions. Treatment by mental health centers involves giving diagnoses to clientele. Battering is often viewed as a disease or family dysfunction in need of treatment by mental health professionals. Radical feminists argue that approaches that utilize a disease concept of violence
or share the responsibility fail to challenge the root of the problem - a patriarchal society. It appears that not only is it important to assess the effectiveness of treatment per se but also to look at the effect of future arrest in evaluating batterer program success. However, is the attendance of sessions or lack of recidivism an accurate measure of lowered incidents of battering in society?
CHAPTER FIVE: THE CONFLICT BETWEEN FEMINISTS AND THERAPEUTIC VIEWS OF BATTERING

Introduction

I will assess the approach of the mental health system in dealing with batterers and views on battering from a radical feminist perspective. The therapeutic treatment of court-mandated batterers will be assessed in relation to reducing levels of battering. I will assess the meanings and motives upon which the batterer's violence is based.

Feminists argue that individualization or viewing battering as a mutual combat between men and women must be overcome if levels of battering are to be reduced in society. For feminists the nature of psychotherapy is based upon patriarchal assumptions about the family and women's subordinate position to men and should not be used in an attempt to combat patriarchy. To understand the mental health response to battering, one must view the United States as a therapeutic society. The therapeutic society reduces economic problems, social problems, and most anything as a personal problem in need of treatment. The social and economic conditions of society get shifted through the psychiatric perspective into issues of personalities. The social problems in our world get reduced to the individual. This reduces the problems in our world to an inter-
personal relationship where the only thing one can change or understand is one-
self.

Theorizing Feminist Ideologies Toward Battering

Radical feminism is distinguished through its analysis of gender inequality in
which men as a group dominate and exploit women as a group. Radical feminists
consider patriarchy to be an independent system. "This system of domination,
called patriarchy, does not derive from any other system of social inequality; for
instance, it is not a by-product of capitalism" (Walby, 1990:3). Male domination
of women is independent of capitalism. Within patriarchy, male violence toward
women is considered part of a system of dominating and controlling women. The
term social structure is important in the definition, "since it clearly implies
rejection both of biological determinism, and the notion that every individual man
is in a dominant position and every woman in a subordinate one" (Walby,
1990:20). However, critics of radical feminism have raised questions such as the
tendency to understand social action from an "implicit or explicit biological reduc-
tionism" (Walby, 1990:3). Furthermore, "critics argue that radical feminism lacks
the ability to understand historical change or take account of divisions between
women based on ethnicity and class" (Walby, 1990:3).
"Marxist feminist analysis differs from that of radical feminism especially in considering gender inequality to derive from capitalism, and not to be constituted as an independent system of patriarchy" (Walby, 1990:3). The domination of men over women is viewed as a by-product of capital’s domination over labor, not an independent system according to Marxist feminists (Walby, 1990:3). Battering becomes part of capitalist exploitation. "The main problem raised by critics about Marxist feminism is that it is too narrowly focused on capitalism, being unable to deal with gender inequality in pre- and post-capitalist societies, and that it incorrectly reduces gender inequality to capitalism, rather than recognizing the independence of the gender dynamic" (Walby, 1990:4). Marxist feminism recognizes women’s subordination as a product of capitalism.

Liberal feminism lacks an analysis of women’s subordination in terms of an overarching social structure. However, there are two major foci of analysis. The first focus is the denial of equal rights in education and employment for women. Second, the sexist attitudes of men serve to perpetuate the situation of women. Liberal feminists view battering as the control and domination of women by men; however, it falls short of specifying the causes for battering. "Liberal feminism is often criticized for its failure to deal with the deep-rootedness of gender inequality and the interconnectedness between its different forms" (Walby, 1990:5).
Dual-systems theory brings both Marxist and Radical Feminist theory together. Dual-Systems theory "argues that both systems are present and important" (Walby, 1990:5). Gender inequality is viewed as a result of capitalist-patriarchal society. "Thus patriarchy contributes especially order and control while capitalism provides the economic system driven by the pursuit of profit (Walby, 1990:157). Battering is viewed as being perpetuated by both a system of patriarchy and capitalism. The problem with Dual-Systems analysis is in the ability to adequately blend the duality - capitalism and patriarchy (Walby, 1990:6). Furthermore, existing Dual System theories "do not cover the full range of patriarchal structures" that Walby addresses (Walby, 1990:7). In order to better put in perspective a feminist ideology toward battering I utilize a more radical feminist theory.

Psychological Processes Toward Battering

The therapeutic approach to domestic violence stresses a psycho-pathological view of violent behavior. Violent behavior is seen as stemming from such things as disease, illness of personality, family dysfunctions and frustration. Within the therapeutic approach violence often gets defined as a clinical condition of the individual. The therapeutic approach often defines battering as a disease. A medical model solution to battering is sought to explain battering. The
development of medical conceptions and controls for deviant behavior is referred to as "the medicalization of deviance" (Conrad & Schneider, 1985:29).

**Individualization of Battering**

Radical feminists argue if the violence by men toward women is not viewed as an aspect of the domination of men over women, and society refuses to view battering as part of a patriarchal society - the efforts of the women's movement toward equality are hindered. The efforts of the therapeutic community tend to individualize the problem; therefore avoiding the basic social causes, and only perpetuate the subordinate position of women in society. Therapeutic understandings of battering influence the way society views who is responsible for battering.

Social learning theory examines the consequences of being raised and experiencing abuse in the family as a child. These learned experiences result in children becoming entangled in the same type of violent interpersonal relationships (Steele & Pollock, 1968:103; Spinetta & Rigler, 1972:296). Social learning theory is a functional theory that views the family not only as the primary agent of socialization, but as in some type of harmony. Thus, children who grow up experiencing abuse are often the product of these dysfunctional homes. Radical feminist argue that due to the inequality between men and women, there is no
such thing as a functional home. The family is viewed by radical feminist as based on patriarchal assumptions and beliefs. Parsonian functionalism "conceptualized women's position in the family as that of the 'expressive role,' while men took on the externally oriented 'instrumental' role" (Walby, 1990:30). According to Parsons these roles are in the interest of the family and society at large, not one of power and inequality within the family. Thus, the position of women is a result of their position in the family, which is functional for both the family and the society. The family serves to socialize the next generation into the social order.

The cycle of violence is a hypothesis about why battering occurs. Within the cycle of violence there are three phases. The first two stages are tension building and explosion of violence, followed by a last stage of calm, loving, repentant expressions by the man. This cycle repeats itself over time and the women become further bonded to the relationship through experiences of the third stage involving love and "honeymooning." The repeated conditioning through this cycle of violence results in learned helplessness in battered women. However, does the cycle of battering exist, or is this part of the imagination of social scientists?

Learned helplessness supposedly results from distorted views and beliefs about the women's powerlessness and inability to help themselves. Furthermore, women experiencing learned helplessness have been described as suffering from a
"battered woman syndrome" (Walker, 1979:45-50). The battered woman syndrome has been used as a legal defense to diminish the responsibility of women who kill their abusive partners. Walker first testified for a woman who had killed her husband. The woman, according to Walker, was a victim of learned helplessness due to her years of being battered (Comack, 1991:8). Walker has since testified in over 150 murder trials for women who have killed their male partners after extensive battering (Comack, 1991:8). Women victimized through battering have often been compared to victims of prisoner of war camps. Women who are captive within the home of an abuser are characterized as suffering from a form of illness. Currently, identification of Complex Post-Traumatic Stress Disorder is a diagnosis considered appropriate for describing battered women (Herman, 1992: 377).

Co-dependency is another therapeutic concept which attempts to understand why battering continues to occur to women. Originally co-dependence was used to describe spouses of alcoholics. Co-dependency was the concept which described these people as having an illness of their own (Phyllis & Gail, 1992:5). Co-dependent individuals seek their own happiness from their ability to make others happy. The philosophy of a co-dependent individual goes like the following: If I could be a better mother, wife, lover etc. then he would stop drinking; therefore I have to do better so that he can be happy. The idea has been
further enlarged to include and describe battered women who are coupled with their abuser (Phyllis & Gail, 1992:5). Thus, victims are also in need of treatment.

The Battered Women’s Movement

The battered women’s movement became a center of awareness and push toward social change for women. The first publicized shelter was Chiswick Women’s Aid, formed in England in 1971 (Dobash & Dobash, 1992:25; Tierney, 1982:207). This awareness quickly diffused to the United States. In 1973, Rainbow Retreat opened in Arizona as the United States first shelter for battered women (Tierney, 1982:207). These first feminist organizations grew, according to U.S. News and World Report (1979), to over 170 shelters in the United States between 1975 and 1978. The movement includes a variety of ideologies and structures. Some are primarily feminist, while others appear more typical of mental health agencies.

The growth and creation of the "problem of wife beating can be attributed to three factors: the pre-existing organizational base for the movement, the movement’s flexibility, and the incentives for sponsors to provide resources" (Tierney, 1982:211). The grass-roots movement provided a network among others interested to promote the ideas of the movement to help battered women.
Professionals such as those in the mental health movement, who often worked with the movement as part of their profession, possibly had a self-interest in the battered women’s movement. The mental health system treatment of batterers by professionals serves to keep the response within professional care. This creates a more positive image of mental health care to the community and expands their authority as the experts to deal with the issue.

The need to mobilize resources and build coalitions has led to the transformation of a grass-roots movement challenging patriarchy into a professional social movement. Has the battered women’s movement eliminated wife battering or has the price of the movements’ growth, through mental health professionals involvement, been a move back toward the status quo?

The grass-roots movement quickly ran into conflicts with its vision. Feminist grass-roots movements are focused on challenging patriarchy while the mental health interest lies in providing services to individuals. The mental health system attempted to “treat” the problem as in need of psychiatric care. Furthermore, the mental health "professional" is oriented toward helping those that can not help themselves.
At the core of the battered women's movement is the shelter. These shelters can be viewed as a response to the violence and inability of our social, legal, and medical agencies to act effectively (Dobash & Dobash, 1992:11). The three general goals of the movement were to help the victims of male violence, challenge male violence, and change the subordinate position of women in society.

With its growth came changes in the movement. One highly significant shift in the movement came with the introduction of mental health professionals. The introduction of mental health professionals created a shift in scope of battering. This shift was from wider social change to individualized treatment. The therapeutic society transformed the grass-roots visions for social change through reducing battering as a dysfunction or illness in need of treatment. Professionals of the mental health movement had their own interest in the issue (Tierney, 1982:214). The multi-agency response to domestic violence has been useful in responding to the abuse of women. However, it falls short of effectively challenging male violence if left solely in the hands of mental health professionals.

Radical feminists argue that not only are the therapeutic approaches rooted in patriarchal domination, but so is the law and legal apparatus. The psychoanalysis and criminology of the 1930s defined the problem of wife beating as family and
personal problem that, if dealt with through courts, should go to family court, not
criminal court (Dobash & Dobash, 1992:151,158). Crisis-intervention training for
police in the 1960s failed to deter violence. However, it did resist change by
fueling the mental health system's psychological, and individual approaches
through referrals (Dobash & Dobash, 1992:160). The first strong legal push for
change came not from psychoanalysis, but from class-action lawsuits by women

The Professionalization of Batterer Treatment

The expert treatment by professionals in the helping professions differs from
the views of the grass-roots feminist movement. The mental health response to
battering is oriented toward individualized treatment or shared responsibility. The
mental health system's "expert treatment" has created exploitation in a different
form. Exploitation by mental health professionals rests on their ability to
convince large numbers of individuals that the answers to their problems lie in
therapy. Through formal education, certification and licensing the mental health
community can retain their control of the response to battering, while continuing
to gain further control by defining their skills as the preferred response to the
problem.
All the key-informants I interviewed had formal education in a helping profession. Most of them had a Masters degree in helping professions. Furthermore, most of them had been involved in some form of specialized training directed toward working with batterers. Mental health professionals have a self-interest in keeping the response to battering within the existing criminal justice system and treatment agencies. The requirement of formal education in the helping professions can be viewed as a means to define their skills as the appropriate and preferred response. If mental health professionals can gain control of the response to battering, they stand to benefit from maintaining the status quo.

Court-Mandated Referrals in the Response to Domestic Violence

The way American society has dealt with its mental health problems has changed radically since the 1950s (Weisner & Room, 1984:167). Mental health services began to change especially in the late 1960s and early 1970s, with the beginning of a period of conservative politics (Weisner & Room, 1984:167). The federal government passed the cost of mental health services to the state governments thereby increasing the availability of services (Weisner & Room, 1984:167). Start-up monies were made available for community mental health centers throughout the country (Weisner & Room, 1984:168). The very growth of the mental health service and treatment system has created a need for
sufficiently large clientele to justify continued and increasing funding (Weisner & Room, 1984:175). Furthermore, the need to draw funds often rests on the ability to expand the type of problem defined as in need of treatment (Weisner & Room, 1984:175). One relative example is co-dependence. Co-dependence was first used to describe spouses that lived with alcoholics. Thus, co-dependency became the most common of all addictions. Co-dependency is the addiction that something outside ourselves can give us happiness and fulfillment (Whitfield, 1991:4). The term was first used to explain the spouse’s behavior involving chemically dependent relationships. Those suffering from co-dependency are seen as having an addiction of their own in need of treatment. Eventually co-dependency started being applied to battered women to explain why they remained in the abusive relationship. Strategies for dealing with battering emerged that emphasized alcohol related problems because funds were available for alcohol treatment (Weisner & Room, 1984:176).

As the mental health treatment system expanded, it has had to strive for respectability (Weisner & Room, 1984:175). The women’s movement need for awareness led to the recruitment of further support and resources of various interest. The support of the mental health community fueled the social awareness of battering issues. The mental health system and criminal justice system both have an interest in responding to domestic violence. The court-mandated batterer
program is an alternative to sentencing. The court can mandate a batterer to treatment and avoid the issue of where to jail batterers.

Court-mandated treatment ensures the growth of a clientele for the mental health system. All of the five batterer programs I assessed rely upon court referrals for their batterer programs. Court-mandated treatment is justified by mental health professionals as being needed for treating the batterer. The court-mandated treatment prevents the batterer from manipulating the woman into coming home and then dropping out of treatment. However, court-mandated treatment could also be viewed as necessary for the growth of the mental health system. The growth of the mental health service and \textit{treatment industry} has created a need for sufficiently larger and larger clientele to justify continued and increasing amounts of funding (Weisner & Room, 1984:175). Victimized women and male batterers are a growing source of "clientele" for the mental health community. Batterers can be seen as a new source of clientele in need of treatment from the mental health system.

The cost for the program, per person, ranges from four dollars a session to a hundred. In Walt Disney's batterer program the total cost is $320.00 a person ($10 per group x 32 sessions) regardless of an individual's income. In other batterer programs, such as the Peanuts' batterer program and Looney Tunes' batterer program, a sliding scale fee is used. With the sliding scale fee people are
charged a minimum of $4.00 to $80.00 a session. The Looney Tunes’ batterer program cost up to $100.00 an hour depending upon a batterer’s income. Furthermore, the medical assistance card for the state of Kentucky will pay in the case of certain psychiatric diagnoses. Different from the use of state monies and private payers is the Sesame Street’s batterer program. Sesame Street’s program is free to batterers because United Way pays for the services provided.

However, the cost of jailing a batterer is twenty-two dollars a day according to the Rowan County Jailer. The batterer may face fifteen days in jail, thirty days probated for failing to complete treatment. If the batterer was sentenced to fifteen days in jail the cost would be $330.00 to the state. However, if a Medical Assistance Card was used, the batter may pay nothing if they carry a psychiatric diagnosis, but the state cost for twelve sessions might be $1,200. Batterers who pay the minimum sliding-scale fee for ten sessions might pay $40.00 ($4.00 x 10), while the state cost would be $960.00. Walt Disney’s batterer program cost the batterer $320 and Smurfvilles’ court-mandated program cost $300.00 regardless of income. It appears that in many batterer programs the state is paying much more to treat the batterer than sentence him to fifteen days in jail, although treatment often costs little or nothing to the batterer.

All the batterer programs report if the batterer stops coming in then the court is notified. The court-order can not only serve the growth of mental health
centers, but can be used as leverage for getting batterers to pay for services. Completion of treatment is not reported to the courts until the client pays. However, if the couple has made attempts toward treatment and report they are doing fine or have separated, the court often does not hold the individual in contempt or re-mandate them back to treatment. The court system’s interest in treatment may not be a belief in treating batterers, but as an alternative to sentencing. Thus, the lack of stiff sentencing for batterers and such things as domestic violence petitions could be viewed as a form of decriminalization of the act by the criminal justice system. The lack of sentencing and re-mandating batterers back into treatment could be interpreted as a value judgement of the issue by the courts. Furthermore, the penalty of only fifteen days in jails, a misdemeanor, is a value judgement of the seriousness of battering by the court. Perhaps the belief that jailing batterers for a year would devastate the family economically is a reason why the criminal justice system may be in favor of treatment over sentencing of batterers. Feminists argue by maintaining the family the status quo of women is perpetuated. Possibly the state rationalizes that economically, women are dependent on the man, and the man is jailed, then the women and children suffer. Perhaps the woman would become dependent on the state. A female with no children could qualify for only foodstamps in Kentucky. Recipients are allocated $111.000 per month. If a batterer was jailed for three
months the woman would receive $333.00, paid for by the state. The cost of jailing a batterer would cost the state $1,980.00. Women with children may receive AFDC in addition to foodstamps. A woman with one child can receive $196.00 per month AFDC and $203.00 foodstamps. However, the maximum foodstamps that can be allocated is $203.00 per month. Radical feminists argue this economic dependency is part of the patriarchal control of women in society.

Occasionally the women also get referred as part of the batterer’s program. Therefore, battering is not viewed as a gender problem. The court often views the battering as a mutual problem contained within the family. Thus, battering is viewed as a family dysfunction. The view that battering is not a man’s problem and is a marital problem fails to address the patriarchal relation of the family.

The "Preferred Treatment" for Batterers

The primary mental health response to batterers is through batterer’s groups. Batterer groups consist of approximately ten to twelve batterers in a small group format. Court-mandated batterer’s groups are psycho-educational in format. Another level of response is through couples counseling for clientele deemed appropriate.

A couple’s group is two or three couples brought together as a therapy group. In Sesame Street’s batterer program the men, women and children all are seen in
separate groups. Smurfville’s court-mandated program and Walt Disney’s batterer programs only use batterer groups for their court mandated program, except in a case that involves other mental health issues in need of special treatment.

However, Smurfville’s batterer program also has a voluntary batterers program. The volunteer program is largely group; however, treatment is oriented around doing "whatever makes sense". If individual therapy seems appropriate they do that, if marital counseling is deemed appropriate they will do that.

Couples counseling is the least effective milieu reported in the literature. Taylor (1984) reported in a study examining the effectiveness of couples counseling that all the men had used violence within six months after completing couples counseling (Taylor, 1984:12). One major problem with couples counseling research has been the failure to include a comparison group in the studies (Eisikovits & Edleson, 1989:392). Other studies report only minor violence following treatment (Descher, McNeil & Moore, 1986:59). However, minor violence is still a continuation of violent behavior. In the Descher et al (1986) study, couple’s reports of minor incidents of violence were not defined as battering, so these couples (five of eight) were considered violence free. Neidig, Friedman and Collins (1985) reported outcomes for 100 couples as showing "significant positive change." However, what significant positive change means was not defined. Significant positive change for the women may differ
considerably from what the program intended. The belief in marital combat and that these women could "hold their own" was further justification for couples groups. Straus argues that women are also batterers (Straus, 1977-78:446). Marital combat reduces battering to an interpersonal relationship where both the man and the woman are engaging in battering. Couples counseling when deemed appropriate based on the belief that mutual combat was occurring within the Looney Tunes’ batterer program. The other reason used to justify couples groups were that there were too few participants for separate groups. From a radical feminist’s perspective any form of couples counseling will fail. The family is not viewed by radical feminists as an egalitarian unit. Therefore, any attempts by mental health professionals to treat the dysfunctional family only serves to maintain the subordination of women.

Functionalist theories assume harmony is necessary to the existence of society, "a functionalist approach excludes the possibility of recognizing conflict between individuals and/or groups as based on antagonistic interest" (Friedman, 1982:9). Functional theory assumes men and women are different but equal. The roles between husband and wife and father and mother are viewed as operating out of "mutual dependence and harmony of interest; the purpose of the activities governed by these roles is the provision of emotional support for each other, and the socialization of children into their appropriate sex role so that the existing
social order is reproduced" (Friedman, 1982:9). Assuming the family is needed for the maintenance of social order and the reproduction of mankind fails to allow room to question whether the family is possibly not in harmony (Friedman, 1982:10). How can a functionalist theory explain increasing rates of divorce, battering, and the murder of wives by men. Thus, if the family is in harmony there is no need for change and the status quo is perpetuated.

There is a void in research on the individual milieu of treatment for court-mandated batterers (Eisikovits & Edleson, 1989:387). Nonetheless, the Looney Tunes' and Peanuts' batterer programs both report they initially do individual treatment as preparation for group treatment. Mr. Brainy Smurf of Smurfville's batterer program reports an individual milieu may be used in cases that get screened out initially and are inappropriate for group treatment. Individual milieus suggest that there is something abnormal about these batterers that requires special one-on-one treatment. If there is a psychological abnormality with these batterers then they are not to be held responsible for their illness. Feminists argue that such an explanation fails to address the basic social causes of battering.

Therapeutic Understandings of Battering

All the batterer programs I assessed made use of concepts that serve to maintain the subordinate position of women and to decontextualize the problem of
battering. Although some key-informants showed some understanding of women’s inequality to men, these understandings were outweighed by the individualization of the problem. For example, Walt Disney’s Batterer program believes that men are the instigators of battering and should be held accountable. Furthermore, Ms. Minnie Mouse explained that battering is used to control women in society. However, diagnoses and treatment reduces the understanding of battering to an individual level. Giving diagnoses to batterers signifies that they suffer from an illness. Furthermore, treatment is an individualized approach. Talcott Parsons explains that illness and crime are forms of deviant behavior. Mental illness is deviant because it threatens the stability of the social order. Willful deviance is viewed as crime while unwilling deviance is seen as illness (Conrad & Schneider, 1985:32). Within the "sick role" individuals are not held responsible for their condition. When battering is viewed as illness the responsibility for the violence is taken off of men. Thus badness is now viewed as sickness (Conrad & Schneider, 1985:34). Alcoholism is another example of a disease model treatment. The once moral badness view of excessive drinking is now viewed as a sickness.

All the batterer programs operate on the assumption that battering is learned and that people who act out violently toward someone else are responsible. The cycle of violence was the biggest explanation given to me for understanding
battering. However, the unanswered question remains, "Why does a man beat his wife, who is probably not the source of his frustration?". Are we going to accept another therapeutic concept like displacement? Displacement is the concept that the anger from one object is placed on another. For example, a man has an argument with his boss and goes home and beats his wife.

All of the batterer programs, except Walt Disney's batterer program, report some sharing of the responsibility through ideas like mutual combat and co-battering. These ideas share the responsibility of the violence and suggest that women are also batterers. Feminists argue this understanding takes the responsibility off men.

Treatment of batterers often involves giving diagnosis, not only to the violent men but also the victims. Diagnoses given to batterers such as Intermittence Explosive Disorder, Impulse Control Disorder and Personality Disorder, all serve to take away some responsibility and lay the blame, or justification, on mental illness. Diagnoses are often given to the victims such as Other Specified Family Circumstances: co-dependence, Acoa, and dysfunctional home, which all serve to stress the victim's behavior, not the violent acts of the man. Co-dependency, addictive relationships and being an adult child of an alcoholic, all serve to either diffuse the responsibility or place some responsibility upon the woman to explain her continued abuse. The V-code Marital Problem given to both the batterer and
the victim reduces the problem to a relationship problem. Making a diagnosis is required within the mental health agencies that classify batterers and victims as clientele. Documentation through diagnosis results in a transformation of the problem away from challenging patriarchy. This transformation serves to maintain the status quo of women in society by implying illness or disorder within individuals. The feminist viewpoint is nullified through this documentation and diagnosis of their clientele. The batterers must have a treatment plan in Walt Disney's batterer program and the only diagnoses available reduce the problem to the individual, family or mental illness perspective. Defining battering as an interpersonal problem also reduces it to the individual level not the social. The marital problems diagnosis reduce the violence to a relationship where responsibility is often shared. Viewing batterers as suffering from personality disorders reduces the violence to issues of mental illness. Ms. Minnie Mouse reports that there is not really an appropriate diagnosis. Providing a diagnosis, common throughout all the batterer programs except Sesame Street's batterer program and the court-mandated Smurfville's batterer program, reduces the problem to the individual, marital relationship, or illness of individuals. Sesame Street's and Smurfville's court-mandated programs are solely educational. Diagnosis of battering by mental health professionals reduces, if not eliminates, the possibility of wider social change.
Diagnosing victims also shifts the focus of the problem from men onto the women. Giving V-codes, such as Other Specified Family Circumstances (co-dependent, Acoa or dysfunctional home), ignores the social context of violence. Co-dependency is a sharing of the problem. "Addictive relationships" also implies a sharing of the problem. Acoa reduces the issues of women's domination and exploitation to issues of the family. The idea of dysfunctional homes confines the responsibility to these homes and ignores the patriarchal structures that may exist in the family.

Commonly the violence is seen as learned. The batterers violence is seen as inappropriate and the goal of treatment is to re-learn more positive ways to handle things such as stress/frustration and understand that violence is always inappropriate. Stopping violence is the emphasis of the batterer programs. Mr. Ernie of Sesame Street's batterer program reported that violence can be between husband and wife, father and son, or mother and daughter. This type of understanding also fails to understand the violence in a gender context. The violence is seen to stem from such things as individual disorders, relationship problems, mutual battling and frustration. All these understandings reduce the problem below the social level of patriarchy.
The Influence of the Disease Model on Understanding Battering

The ideas and language of addiction professionals are seen in the treatment of domestic violence. The batterers are viewed as resistant, minimizing and in denial. The concepts of recovery and relapse are applied to therapeutic understandings of violent behaviors. These ideas of recovery and relapse originate in the disease model of alcoholism and addiction. Relapse signifies a medical condition or a disease per se in the batterer. Therefore, use of such terms would apply a disease model aspect to battering that would place the responsibility for recovery on the batterer. Not surprisingly, Batterer Anonymous groups exist throughout the county. These disease model concepts are even applied toward victims.

The victims are viewed as co-dependent and in addictive relationships. These terms share the responsibility in the addiction to violence. The concepts co-dependence and additive relations enlarges the size of the addicted group. Treatment of these co-dependent and relationship addictions creates an ever expanding pool of addictions in need of treatment by mental health providers. The ideas and language of the addiction professional create an atmosphere where the battering gets viewed from a disease model of violence perspective. Any such perspective falls short of addressing the social level of the problem - patriarchy. See Appendix III for definitions of addiction concepts.
Therapeutic Measures of Reduced Battering

Two main therapeutic categories of motivators toward stopping the violence are external and internal forces. External forces toward ending the violence are such things as arrest, family and friends. Internal forces toward stopping the violence are such things as cognitive understanding and repentance. Most batterer programs report that the threats of an arrest or subsequent arrest are the main motivators behind batterers ending the violence. Internal forces such as a cognitive realization that their violent behavior is hurting someone they love and ruining their relationship is often seen as a internal motivator toward ending the violence in some batterer programs. Mr. Brainy Smurf of the Smurfville’s batterer program reports that usually there is always some external motivation to start, such as the court. However, Mr. Brainy Smurf reports that real change comes when the batterer internalizes the reasons for his violence. Therefore, what starts out as external motivators can change through treatment to internal motivators.

Therapeutic Measurement of Treatment Success

The documentation, or lack of documentation, of program success involves external measures such as recidivism and internal measures such as cognitive
understanding and participation. Internal measures of success involve asking the batterer how much he is learning or understanding. Does he appear to understand the information? Is he participating in group discussions in a positive way? The internal measures of success in the evaluations are highly subjective in that they are self-reports or unsystematic in nature. Sesame Street's batterer program uses pre-, mid- and post-tests to assess what batterers "think they're getting out of it," and nearly always gets a positive report. The victims are asked to fill out the same assessment to measure truthfulness. The level of participation and admittance of responsibility was assessed as a measure of success in many programs. Mr. Ernie of the Sesame Street's batterer program reports the admittance of responsibility as a criterion for success in their program. Mr. Snoopy of the Peanuts' batterer program also looks at participation, verbalization, and understanding of principles in measuring the program's success. Many batterer programs do not attempt to measure the later effectiveness of treatment on batterers. Mental health professional often "justify" not being able to effectively measure the success of their programs due to a possible breach in client confidentiality.
Conclusion

Currently battering is understood and treated by mental health professionals as a disease or family dysfunction. Radical feminist argue that any individual, psycho-pathological conception of battering will fail to effectively lower the rate of battering at the social level. Therapeutic understandings treat individuals and families as dysfunctional. Grass-roots feminists argue that if the basic social structures of patriarchy are not challenged, the therapeutic treatment of batterers will do more to produce a new class of clientele in need of treatment than lower rates of battering in society. The criminal justice system also benefits from maintaining the status quo. Building new jails or jailing criminals for long periods of time, such as three to six months, would be a great cost to the criminal justice system. In areas where jail space is available in existing jails, the cost of jailing a batterer for long periods of time would be extremely costly and could quickly fill the jail space up.
CHAPTER SIX: "TREATMENT" SERVES THE INTEREST OF PATRIARCHAL CONTROL

Introduction

The battered women's movement of the 1970s brought the issue of violence by men toward women to public attention. The battered women's movement is based upon a philosophy of feminist change challenging patriarchy. The movement allowed for flexibility of goals in different regions in order to meet the special needs of battered women throughout the country. Furthermore, "incentives for sponsors" to provide resources allowed for rapid diffusion of the issue (Tierney, 1982:211). Those agencies interested in helping battered women were sought. The issue of domestic violence also grew through such means as the media. Media attention became essential in the production of this social problem. Books, popular women's magazines and television brought the victimization of women within the household to public attention.

The need to spread awareness of battering has led to coalitions with various interests for support and resources. The building of coalitions with the mental health community has conflicted with the grass-roots movement challenging patriarchy. The feminist grass-roots movement focus on challenging patriarchy is diluted by the therapeutic community's interest in the provision of services to
individuals. Furthermore, the growth of the mental health treatment system has created a need for more clientele to justify continuing and increasing funding from the state (Weisner & Room, 1984:175). The very need to draw state funds often rests on the ability of the mental health community to expand the type of problem defined as being in need of treatment (Weisner & Room, 1984:175). However, treatment has only served to maintain the patriarchal relationships in society.

Feminists argue that any individualization or sharing of responsibility in battering fails to address the patriarchal structures.

**The Treatment of Batterers has Failed to Challenge the Patriarchal Structures**

Two conflicting approaches I reviewed are the pro-feminist approach and the therapeutic approach toward treating batterers. The pro-feminist approaches to battering views men as the instigators of violence. Pro-feminists view battering as a means of power and control over women. The therapeutic approaches treat battering as a problem within the individual or within the family. Individualization of battering reduces battering to a problem within a few mentally ill individuals. The dysfunctional family view of battering often diffuses the responsibility for violence within a family relationship. Violence is seen as mutual; both the husband and wife batter each other. Furthermore, when addiction concepts are applied to battering a disease model perspective results.
The pro-feminist approach hopes to challenge patriarchal beliefs while the therapeutic approach maintains subordination of women in society by not challenging the structural status quo.

The mental health system has an interest in the treatment of batterers. Court-mandated batterers are a steady source of clientele that can be used for the growth of the mental health community. In order for community mental health systems to draw more state monies, they must enlarge the number of people they are treating.

The criminal justice system also has an interest in the treatment, rather than sentencing of batterers. Building more jails would be very costly to the criminal justice system. Furthermore, jailing batterers in existing jails for three months or longer is more costly than sentencing a batterer into treatment. Another alternative would be for criminal justice system to make priorities on what crimes should be jailed. Currently most cases of battering involve a misdemeanor charge while drug crimes are often felony cases. The criminal justice system could make battering a felony and reduce drug prosecutions to misdemeanors. The court-mandating of batterers to treatment serves to save the criminal justice system acute financial cost while maintaining the status quo.

Radical feminists argue that the laws are in the interest of men and are based on patriarchal assumptions. Therefore the criminal justice system faces a difficult, if not impossible, task of fighting patriarchy. Courts appear interested in ending
violent relationships. Violent relationships are viewed as marital problems or mutual battering. Furthermore, the criminal justice system often court-mandates both the husband and wife into treatment. From a radical feminist perspective, the court-mandating of batterers into treatment, rather than jailing, is an example of the patriarchal structure of the state. A batterer may be charged with a misdemeanor assault charge that carries a penalty for violating a domestic violence order of only fifteen days in jail. These penalties for battering are a value judgement by the courts that this crime is not significant or serious.

Suggestions for Further Studies

Due to the highly subjective nature of my research, further research on the relationships between court-mandated treatment and the effectiveness of the therapeutic approach is needed. Further clarification is also needed between the difference, if any, between court mandated treatment and voluntary treatment for batterers. My attention on the therapeutic treatment of batterers is directly related to the court-mandating, rather than sentencing of batterers. Further research needs to be directed toward the relationship of the criminal justice system and the therapeutic community. My assessment was largely on the therapeutic failure to challenge patriarchy.
Conclusion: The Failure of the Mental Health System to Lower Rates of Battering

The mental health treatment of battering has failed to challenge patriarchal assumptions and structures. Treatment views battering as a disease and diffuses the causes for battering within the family. Furthermore, the different batterer programs I assessed provide different services independently of the others. There appears to be no therapeutic consistency in batterer treatment. The court-mandating of batterers is in the interests of both the criminal justice system and therapeutic community; however, it contradicts to the aims of the grass-roots battered women’s movement’s fight against patriarchy. The court-mandating of batterers serves to create a new class of clientele for the mental health care system, rather than collectively working toward reducing rates of violence by men against women. My assessment of the therapeutic approaches is that they fail to challenge the patriarchal relationship between men and women in society. This is not to mean there is a conspiracy going on, rather the way organizations tend to re-produce the existing social order. Thus, the therapeutic approaches only serve the structures of patriarchy through maintaining the status quo in society.
APPENDIX I: Treatment Milieus

Looney Tunes Batterer Program:
Individual milieu first two to three sessions
Followed by separate batterer and victim groups
Concluding with couple counseling

Sesame Street’s Batterer Program:
Educational groups for the batterers
Victims and children also seen in separate groups

Smurfville’s Batterer Program:
Court-mandated group is psycho-educational group only.
Treatment group is voluntary clientele
Within the treatment group individual, group and
couples counseling is used.

Walt Disney’s Batterer Program:
Psycho-education group with the exception of individual
therapy for special cases.

Peanuts’ Batterer Program:
Individual sessions first two to three session
Followed by separate batterer and victim groups
Concluded with couple counseling

<table>
<thead>
<tr>
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<th>INDIVIDUAL</th>
<th>BATTERER GROUP</th>
<th>VICTIM GROUP</th>
<th>CHILDREN GROUP</th>
<th>COUPLES</th>
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APPENDIX II: The Cycle of Violence

Inter-generational cycle of violence: Violence learned while growing up in the home.

Intra-cycle of violence: The three phases.

- Phase I: Tension Builds
- Phase II: Violent Explosion
- Phase III: Repentence

Phase I: Tension Builds
Phase II: Violent Explosion
Phase III: Repentence
APPENDIX III: Glossary

addiction: Compulsive and Obsessive behavior; continued engagement in a behavior that results in harm to an individual.

addictive relationships: The addiction to interpersonal relationships that result in harm to those involved.

alcoholics: people who abuse and depend upon alcohol.

alcoholism: The dependence upon alcohol.

antisocial personality: A type of delinquency characterized an impulsive inability to delay gratification, an inability to profit from punishment, and lack of guilt feelings for wrongdoing.

antisocial personality disorder: A personality disorder characterized by the failure to conform to social and legal norms.

Adult Child of an Alcoholic (ACoA): Children who have been raised within dysfunctional alcoholic families.

battering: A form of coercion used to control and dominate another individual: includes physical attacks, sexual attacks, psychological attacks, and destruction of property.

behavioral models: Theories of psychopathology that are concerned with the role of learning in abnormal behaviors.
borderline personality disorder: A personality disorder characterized by severe changes in mood and self-image.

co-battering: Battering in which the responsibility is shared: both the male and female batter.

dependency: The addiction that something outside ourself can bring happiness and fulfillment.

cognition: The process of thinking, perceiving and judging.

Cognitive behavioral therapy: A therapy approach directed toward helping people restructure their thoughts.

community mental health centers: Centrally located mental health agencies that provide numerous mental health services such as short-term therapy, long-term care to mentally ill, emergency services and community education.

confidentiality: An ethical standard that serves to protect clients from disclosure of information without written consent.

cojoint family therapy: A type of therapy in which family members are taught communication skills.

depression: An emotional state characterized by sadness, feelings of worthlessness, and withdrawal from others.

denial: The inability of a client to take responsibility that a problem exist.

placement: A defense mechanism in which an individual’s negative feelings are expressed toward a substitute target.
diversion agreement: A court agreement with an individual which is a mutual agreement between the court and an individual that is an alternative to jail time.

DSM III-R: The diagnostic and statistical manual of mental disorders published by the American Psychiatric Association; contains the diagnostic criteria for different diagnosis of abnormal behavior.

dysfunction home: A home-life characterized by abnormal behaviors; a lack of family harmony.

family counseling: A professional field of psychology focusing on relationships within the family.

family therapy: Group therapy that seeks to change relationships within the family in such a way as to achieve harmony.

group therapy: A form of therapy involving two or more clients.

impulse control disorder: A disorder characterized by the inability to resist an impulse, drive, or temptation to perform a harmful act to the person or others.

intermittent explosive disorder: Loss of control over aggressive impulses, resulting in serious assaults and destruction.

learned helplessness: Acknowledgement of a belief that one is helpless and cannot affect the outcomes in one's life.
marital problem: A V-code used when the focus of treatment is a marital problem that is not due to a mental disorder.

marital therapy: A treatment aimed at helping couples understand and clarify their communication process, role relationships, and unrealistic expectations from the relationship.

medical model: A model of psychopathology that conceptualizes abnormal behavior in relation to physical disorders.

mental disorder: Any of a range of patterns of abnormal behavior.

minimizing: The process during psychoanalysis in which the client intentionally distorts the severity of a behavior.

Minnesota Multiphasic Personality Inventory (MMPI): An objective personality inventory used by clinical psychologists to assess psychological disturbances and abnormalities.

mutual combat: Equal levels of battering between the man and woman.

other specified family circumstances: A V-code category where the focus of treatment is a family circumstance that is not due to a mental disorder.

organic brain disorders: Any of a class of brain disorder resulting in cognitive impairment.
personality disorder: A behavior pattern characterized by inflexible and maladaptive behavioral patterns.

posttraumatic stress disorder: An anxiety disorder that develops in response to an event outside the normal range of human experiences; it's characterized by memories of the traumatic incident.

prognosis: A prediction of the course of an untreated disorder.

psychopathology: Abnormal behavior.

recovery: The process of healing from a chronic illness; the disease is arrested.

relapse: To fall back to a former position or state of illness.

relearning: Refers to the client's opportunity to unlearn, develop, or change a behavior.

resistance: The process during psychoanalysis in which the client unconsciously attempts to avoid therapy by preventing the exposure of repressed information.

schizophrenia: A group of disorders characterized by severe impairment in cognitive processes, personality confusion, and social withdrawal.

V-code: A group of clinical syndromes not attributable to a mental disorder that are a focus of attention or treatment.
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