

1986

The male abuser: Guidelines for counselors of small groups

Beverly Jane Fleshner
University of Northern Iowa

Let us know how access to this document benefits you

Copyright ©1986 Beverly Jane Fleshner

Follow this and additional works at: <https://scholarworks.uni.edu/grp>



Part of the [Education Commons](#)

Recommended Citation

Fleshner, Beverly Jane, "The male abuser: Guidelines for counselors of small groups" (1986). *Graduate Research Papers*. 2367.

<https://scholarworks.uni.edu/grp/2367>

This Open Access Graduate Research Paper is brought to you for free and open access by the Student Work at UNI ScholarWorks. It has been accepted for inclusion in Graduate Research Papers by an authorized administrator of UNI ScholarWorks. For more information, please contact scholarworks@uni.edu.

The male abuser: Guidelines for counselors of small groups

Abstract

The literature has demonstrated acknowledgement of and facilitative services for the female victims of abuse. Today, most metropolitan areas have, at the least, telephone hotlines and, at the most, safe shelters for women and their children, individual and group counseling, and services which help them with legal, medical, and employment questions. By not focusing as much attention on the male abuser similar services for these men have been slighted. By ignoring men, only half of the violence problem has been addressed. To break the pattern of abuse, treatment and services for men who batter are essential (Feazell, Mayers- & Deschner, 1984). As of 1982 there were fewer than a hundred programs, for helping the battering male, in the entire United States (Roberts, 1982).

THE MALE ABUSER: GUIDELINES FOR COUNSELORS OF SMALL GROUPS

A Research Paper

Presented to

The Department of Educational Administration

and Counseling

University of Northern Iowa

In Partial Fulfillment

of the Requirements for the Degree

Master of Arts

by

Beverly Jane Fleshner

December 1986

This Research Paper by: BEVERLY JANE FLESHNER

Entitled: THE MALE ABUSER: GUIDELINES FOR COUNSELORS OF SMALL GROUPS

has been approved as meeting the research paper requirements
for the Degree of Master of Arts.

10/14/86
Date Approved

William Kline
Advisor/Director of Research Paper

10/14/86
Date Approved

Robert T. Lembke
Second Reader of Research Paper

10/16/86
Date Received

Norman McCumsey
Head, Department of Educational
Administration and Counseling

The literature has demonstrated acknowledgement of and facilitative services for the female victims of abuse. Today, most metropolitan areas have, at the least, telephone hotlines and, at the most, safe shelters for women and their children, individual and group counseling, and services which help them with legal, medical, and employment questions. By not focusing as much attention on the male abuser similar services for these men have been slighted.

By ignoring men, only half of the violence problem has been addressed. To break the pattern of abuse, treatment and services for men who batter are essential (Fezell, Mayers & Deschner, 1984). As of 1982 there were fewer than a hundred programs, for helping the battering male, in the entire United States (Roberts, 1982).

Methods of treating the abuser have included individual, family, and group counseling. Individual counseling has been reported to be most effective when it is combined with group therapy (Adams & McCormick, 1982). Family therapy has limited success when the couple is separated or when the man goes for counseling with his partner only to fulfill a role of reformer. Counseling partners can also be dangerous for the victim if the violence hasn't stopped. Family therapy has been recommended as a companion therapy with group counseling, after the violence has stopped. Seventeen different

approaches for men who abuse their partners were identified in one study (Feazell, et al., 1984).

There are two principle reasons that group counseling has been the treatment of choice. First, men have learned their abusive behavior from other males, generally through the modeling of their fathers and/or other adult males. By entering a new male group they can relearn alternative behaviors and gain from the experience of their fellow group members' use of adaptive behaviors. Second, the development of self-help skills is fostered and changes can generalize to relationships at home. In addition, they gain insight into their own problems and help others to grow (Schlesinger, Benson, & Zornitzer, 1982).

Although the services described in the literature for the male perpetrator are limited, several authors have asserted that short-term group therapy is the treatment of choice (Brisson, 1982; Bern, 1982; Saunders, 1984; Feazell, et al., 1984; Edleson, 1984; Bern & Bern, 1984; Finn, 1985; Barling & Rosenbaum, 1986; Hazaleus & Deffenbacher, 1986).

The literature's definition of terminology in describing treatment approaches for the male perpetrator, used the terms abuse, victim, support group, group therapy, and self-help group. This paper has defined these terms as follows:

Abuse

Acts within an ongoing relationship which have a high potential for injuring, and are intentional or perceived as intentional. These acts include throwing an object at another person, pushing, grabbing, shoving, slapping, punching, kicking, biting, hitting with fists or a hard object, threats and/or use of a knife or gun. (Child abuse, sexual abuse, and psychological abuse are not addressed.)

Victim

The female receiving abuse in an ongoing, usually conjugal, relationship. The victim may be referred to as the spouse, wife, ex-wife, girlfriend, or partner. (Conversely, the abuser may be referred to as the spouse, husband, ex-husband, boyfriend, or partner. Females as the abuser and males as the victim are not addressed.)

Support Group

A group organized along homogeneous lines that tends to function most effectively. Support groups have as their basic goals augmenting men's coping abilities, developing of interpersonal insight, and educating men about the dynamics of abuse. The leader's fundamental function is as an organizer and educator, who uses feedback as a guidance system.

Therapy Group

A group which focuses on increasing awareness, individual self-analysis, and problem-solving, attempting deliberate changes in personality. The leadership is objective, nonpunitive, and confrontive.

Self-Help Group

A group that is more informal and less structured than either support or therapy groups. It develops cohesiveness which builds trust, confidence, and facilitates increased self-esteem. The leaders must be abusers or former abusers so that all members of the group have had very similar experiences (Rosenberg, 1984).

All three definitions of group treatments have overlapping characteristics. This paper will use the terms group treatment, therapy, or counseling to refer to any of the described groups.

The literature that has been reviewed for this paper has been chosen for its focus on examining the current status of the abuser in terms of his characteristics and need of treatment, and the special implications these components have for the counselors of small groups of abusive men. By confronting these factors and acknowledging the need to offer treatment, hopefully, further research regarding the batterer will be carried out and add to erudition.

Review of the Literature

A review of the literature has emphatically pointed out the dearth of published material on the treatment of male perpetrators. Before the 1980's M. A. Straus and R. V. Gelles, teaming with various co-authors, were the primary contributors to the literature concerning the treatment of male abusers. Since 1980 other authors have augmented the literature, although it has remained sparse.

A review of the literature has demonstrated the need for counseling abusive males and pointed out the importance of identifying their characteristics and understanding the factors contributing to abuse. Also described was the critical need for strong incentives for the batterer to enter and stay in counseling, therefore, therapeutic obstacles were identified.

Characteristics of the Abuser

Low self-esteem is one of the characteristics common to abusers. Studies supported the contention that wife-abuse is associated with deficiencies in the abusive husband's self-esteem and that these men are likely to interpret their wife's behavior as damaging to their self-esteem. This suggested a signal detection alternative: Perhaps, the husband's perceptions or a combination of his faulty perception plus the wife's behavior is the important factor.

This concept contends that techniques such as cognitive restructuring be aimed at correcting the misperceptions which batterers believe cause damage to their self-esteem. Once esteem is damaged it can become an etiological factor in future abusive situations (Coleman, 1980; Saunders, 1984; Goldstein & Rosenbaum, 1985).

Saunders (1984) has suggested that social and psychological theories can be combined by hypothesizing a reciprocal causal relationship between low self-esteem in abusers and their socialization and/or cultural conditioning. Abusers tend to be high achievers, emotionally tough, dominant over the opposite sex, and possessive of both people and objects. The link between violent behavior and an approval of violence is not consistent with these men's attitudes. Jealousy, depression and sensitivity to criticism, all common characteristics of the batterer, stem from low self-esteem. Self-esteem is such an important issue for the abuser that more research is needed (Goldstein & Rosenbaum, 1985).

Other representative batterer traits have included being shy, nonassertive, and depressed. These men are remorseful and self-reproaching after abusing. The aggressive abusers who lose friends and jobs because of their aggressiveness are the batterers who justify violence and appear to feel no

guilt, but they are generally hiding their depression (Saunders, 1984).

Factors Leading to Abuse

Almost any kind of problem has seemed to set off the abuser. Examples of catalysts include: troubles with the boss and/or co-workers, being laid off or fired from work, being arrested or convicted for a serious offense, the death of someone close, a foreclosure of a mortgage or loan, a pregnancy or birth of a child, serious sickness or injury of self or family members, sexual difficulties and/or jealousy, in-law troubles, financial problems, separation or divorce, moving, problems with children, alcohol and/or drug use by either partner, and the wife's desire to work outside the home (Straus, Gelles, & Steinmetz, 1981; Adams & McCormick, 1982).

Other factors are stereotypical male concerns. Achievement, competition, power and control, restrictive emotionality, career performance and development, interpersonal relationships, sexual performance, changing sex roles, homophobia, physical and psychological health, and intimacy are attributed to the etiology of abuse. Because of the range and combinations of these issues, generalizations have been difficult, assessment has been complicated, and the choice of treatment confused. The result is that the issues

which have created conflict have also made it difficult for men to enter and participate in groups (Heppner, 1981).

According to Heppner (1981), socialization has made it appear that men are vulnerable, weak, and dependent when they have problems, thus seeking help is unmanly. Scher (1981) observed that it is costly to males' self-esteem to be forced to admit they cannot solve a life problem. As a consequence, men hide their thoughts. There must be a powerful motive to persuade batterers to admit their need for help and enter counseling.

Once a strong incentive has brought the batterer to treatment, the treatment should, ideally, begin immediately to stop the violence. If the batterer discovers some of his needs are being met through treatment, he will be encouraged to stay in the group. Some workable incentives that the abuser needs to discover is that he is not the only man who batters, that his treatment will begin with his low self-esteem, and that he needs to learn new ways of expressing anger. These incentives may lead the abuser to seek help and stay in treatment if therapeutic obstacles can be overcome (Feazell, et al., 1984).

Therapeutic Obstacles

Therapeutic obstacles in group treatment are manifest in the form of issues related to self-disclosure, denial, and

intimacy within a group. Because men have often confused sex with intimacy the issue of homophobia becomes a barrier to interpersonal closeness and activities that foster intimacy, mostly touching (Heppner, 1981; Scher, 1981). In addition, men have generally been socialized to communicate at a cognitive level which tends to act as a barrier to affective expression (Collison, 1981).

Guidelines for Group Counselors

The literature has provided various guidelines for group leaders who work with abusers. These guidelines include desirable leadership characteristics, developing programs and training. The group counseling literature also suggested ethical procedures be given consideration.

Leadership

A crucial question has been whether male co-leaders or male-female co-leaders should lead groups of abusive men. Bern and Bern (1984) reported that in a male-female leadership situation, the men appeared somewhat hostile toward or ignored the female leader, but by the fourth session the men saw the female as more of a person and less as a stereotype. Collison (1981) felt that males have tended to express greater satisfaction at having a female co-leader. They tend to talk more about themselves and do more self-disclosing with female counselors. It is important to dispel the stereotypic myths

about women and male counselors have been less able to identify gender-role concerns of women. A female co-leader has taken the part of the wife in role-play to improve realism (Saunders, 1984). On the other hand, some men resented the presence of the female since the abuser perceives her as representative of his problem. Scher (1981) suggested that since the counselor should be a role model for the men, male leaders are most appropriate.

Counselor Characteristics

In counseling men who exhibit violence, it has been especially important not to place blame. Counselors need to be aware of the plight of these special men, as well as have an understanding of feminism and its implications for this population. To be of assistance, attitudes of patience, respect, support, and nurturance have been helpful counselor characteristics. To inspire trust in male clients, counselors have had to demonstrate qualities of firmness and strength and yet enable the abuser to feel that he has someone who will take care of him and not disintegrate when the going gets tough (Scher, 1981). The leaders have the role of helping the group believe being there (in the group) will make a difference in their lives. Self-disclosure is very difficult for these men, and the leaders need to foster cohesion so the feeling of alienation is lowered (Rosenberg, 1984).

Scher (1981) suggested the following guidelines for counselors of men: 1) Recognize that men are often constrained by their roles. 2) Men are particularly resistant to change. Point out that change is difficult but not impossible. 3) Because men are raised to be rational, logical, and intellectual, it is important to let them know that affect is as important as cognition. 4) It is not unmanly to ask for assistance. Counselors can emphasize that it takes a truly strong person to identify problems and seek help for them. 5) To survive and grow, nurturing oneself is essential. Counselors can guide clients in seeing they need to take care of themselves and that it is desirable to do so.

Counselors need to be aware of their own beliefs about men and how men should behave. A cognitive understanding of the socialization process of the traditional male has been an absolute necessity in understanding the concerns and difficulties that confront men (Heppner, 1981). Heppner suggested many implications for group counselors. It is essential for counselors to be aware of their own countertransference problems involving abusive men. It is also useful to identify how the stereotypical behaviors of abusers affect the counselor.

The competence of group counselors can be threatening, so counselors need to be aware of their reactions, and to learn

to use feelings as diagnostic cues not only for the client but for themselves. Counselors must be able to demonstrate their competence and portray sensitivity, maturity, patience, firmness, and gentleness. Counselors must discover, examine, and search themselves for bias in this area. Entering a group as a leader without self knowledge of possible bias is unethical.

Ethics

Collison (1981) pointed out that there are fewer counseling procedures designed for men than for women and "there are no codes of ethics or standards that exist for counseling men" (p. 220). Nevertheless, it is possible to set up workable ethical guidelines by using the ones recommended by various professional organizations and agencies. By carefully examining existing ethics, additions, deletions and combinations can be devised to fit into a code for ethical treatment of abusive men.

Even though the abusive male has most often been considered a reluctant client, he should still be apprised of the risks involved in participating in a support group, e.g., that people become vulnerable, that self-disclosure is misused by members occasionally, that scapegoating can and does occur in a group. He should be warned that group experience can disrupt his life, hopefully by changing it for the better

(Corey & Corey, 1982). Another ethical consideration especially important in the case of group work is confidentiality. For growth to take place, members need to talk about concerns and feelings that are very personal, sensitive, and difficult to reveal, therefore, the sooner the group becomes a cohesive unit the better, because that cohesiveness lessens the chance for a breach of confidence.

Programs and Training

Another issue that has implications for counselors has been creating a successful format for group therapy. Agencies have developed programs to treat the abuser without consultation from other sources even though training and consultation are accessible from existing programs (Finn, 1985). There has been training available upon request from the Emerge program in Boston (Feazell, et al., 1984) and Batterers Anonymous (Goffman, 1980). In creating a program for abusive men it is wise to include survival skills.

Kaplan and Wheeler (1983) have suggested that training in survival skills be included in the counselors' repertoire when they are working with potentially violent clients. They contend that counselors need to become aware that the major predictor of violence is a history of violence. Prediction allows a counselor to prepare for potentially violent events. If violence cannot be avoided the counselor needs to be aware

of the appropriate response. Kaplan and Wheeler stated that workshops have emphasized de-escalation skills, the ability to redirect and prevent a hostile, potentially violent situation from erupting. Learning about and being able to identify the triggering, escalation, crisis, recovery, and post-crisis depression phases has been valuable. Above all, Kaplan and Wheeler stressed being prepared. Be sure there is an agency policy in regard to violence. Make the members of the group aware of this policy and the consequences of noncompliance.

Summary

A coordinated approach to intervention through group process has been most efficient when the group leaders are competent and knowledgeable about the male perpetrator and the probability of his low self-esteem. Leaders who insist that members stop the violence immediately and stay nonviolent during the treatment period can have tremendous impact. Counselors can point out that victims have options in dealing with abuse as does the batterer. A variety of agencies and counselors are available for support which will not only assist the man toward a major change in behavior, but possibly his family as well.

References

- Adams, D. C., & McCormick, A. J. (1982). Men unlearning violence: A group approach based on the collective model. In Maria Roy (Ed.), The abusive partner (pp. 170-197). New York: Van Nostrand.
- Barling, J., & Rosenbaum, A. (1986). Work stressors and wife abuse. Journal of Applied Psychology, 71(2), 346-348.
- Bern, E. H. (1982). From violent incident to spouse abuse syndrome. Social Casework, 63(8), 41-45.
- Bern, E. H., & Bern, L. L. (1984). A group program for men who commit violence towards their wives. Social Work With Groups, 7(1), 63-77.
- Brisson, N. (1982). Helping men who batter women. Public Welfare, 40 29-34.
- Coleman, K. (1980). Conjugal violence: What 33 men report. Journal of Marital and Family Therapy, 6, 207-213.
- Collison, B. B. (1981). Counseling adult males. Personnel and Guidance Journal, 60(4), 219-222.
- Corey, G., & Corey, M. S. (1982). Groups: Process and practice. Brooks/Cole: Monterey, CA.
- Edleson, J. L. (1984). Working with men who batter. Social Work, 29, 237-242.

- Feazell, C. S., Mayers, R. S., & Deschner, J. (1984).
Services for men who batter: Implications for programs
and policies. Family Relations, 33, 217-223.
- Finn, J. (1985). Men's domestic violence treatment groups: A
statewide survey. Social Work With Groups, 8(3), 81-94.
- Goffman, J. M. (1980). Batterers anonymous: Mutual support
for counseling woman-batterers. CPAWC, P. O. Box 29,
Redlands, CA, 92223.
- Goldstein, D., & Rosenbaum, A. (1985). An evaluation of the
self-esteem of maritally violent men. Family Relations,
34(3), 425-428.
- Hazaleus, S. L., & Deffenbacher, J. L. (1986). Relaxation and
cognitive treatments of anger. Journal of Consulting and
Clinical Psychology, 54(2), 222-226.
- Hepner, P. P. (1981). Counseling men in groups. Personnel
and Guidance Journal, 60(4), 249-252.
- Kaplan, S. G., & Wheeler, E. G. (1983). Survival skills for
working with potentially violent clients. Social Casework,
64(6) 339-346.
- Krakowski, M., Volavke, J., & Brizer, D. (1986).
Psychopathology and violence: A review of the literature.
Comprehensive Psychology, 27(2), 131-148.

- Roberts, A. R. (1982). A national service for batterers. In Maria Roy (Ed.), The abusive partner (pp. 234-250). New York: Van Nostrand.
- Rosenberg, P. P. (1984). Support groups: A special therapeutic entity. Small Group Behavior, 15(2), 173-186.
- Saunders, D. G. (1984). Helping men who batter. Social Casework, 65, 347-353.
- Scher, M. (1981). Men in hiding: A challenge for the counselor. Personnel and Guidance Journal, 60(4), 199-202.
- Schlesinger, L. B., Benson, M., & Zornitzer, M. (1982). Classification of violent behavior for purposes of treatment planning: A three-pronged approach. In Maria Roy (Ed.), The abusive partner (pp. 163-180). New York: Van Nostrand.
- Straus, M. A., Gelles, R. J., & Steinmetz, S. K. (1981). Behind closed doors. New York: Anchor.