In order for counselors to more effectively serve their clients and contribute to an environment that is life enhancing for women and girls as well as for men and boys, they must advocate an end to all violence against women. In a national study of women who escaped from battering, participants rated the effectiveness of formal help sources from very effective to somewhat effective. Results from the study reveal that participants selected women’s groups and battered women’s shelters as more effective than counseling or social services. These results indicate that counselors have much work to do if they are to effectively serve clients and help end violence within society. This paper discusses domestic violence and provides statistical information concerning its occurrence. Social advocacy strategies, client advocacy, and legislative advocacy in relation to domestic violence are discussed. Counselors are encouraged to act as advocates for victims of domestic violence and to continue to push for the eradication of violence against women. A list of recommended readings and a list of websites, organizations, and hotlines are provided. (Contains 10 references.) (MKA)
Domestic Violence: The Case for Social Advocacy

Mary Smith Arnold & Karen Sobieraj

"You Black, you pore, you ugly, you a woman, God damn, he say, you ain't nothin at all."
— Alice Walker, A Color Purple

Counselors and other professionals who are concerned with violence against women have strong and opposing convictions about the causes and treatment of the violence (Gelles & Loseke, 1993). We believe that controversies over the genesis of violence obscure the fact that women overwhelmingly experience violence at the hands of their boyfriends, husbands, and other significant men in their lives. Explanations of why domestic violence occurs, whether it is due to psychopathology in the batterer, sociological factors in the batterer's background, or even the web of patriarchal values which structure society are all useless to the woman who is victimized by someone she loves or once loved. In order to avoid the obfuscation generated by divergent points of view on the etiology of violence, we advocate that domestic violence be viewed as a serious crime against the individual and society regardless of its cause(s). The phenomenon of violence against women in this society is as damaging to our national health as the wounds perpetrators inflict on their victims.

The view that women "ain't nothin at all" is so prevalent in our society that public sentiment has not challenged domestic violence as intolerable social behavior. Many people think that domestic violence is a natural outgrowth of intimate relationships. The right of men to control their wives and girlfriends is widely assumed in our society despite the economic and social gains made by women within the last 30 years. Again noting the words of Mr._ in the novel The Color Purple by Alice Walker as he explains...
to his son why he beats his wife, "Cause she my wife. Plus, she stubborn" (p.22). Mr. _, (fill in the name of the man you know who batters his wife or girlfriend) believes he is entitled to control his wife, his woman. Violence is rooted in disparities of power based on gender, race, class, sexual orientation, or interlocking combinations of these and other factors. Violence is an act which signifies domination and power over another person.

Although the term "domestic violence" is inclusive of psychological, emotional, and economic coercion (Walker, 1979), for purposes of this paper we will focus on physical assault and battery as the significant element. Therefore, we will use Kemp's (1998) definition of domestic violence as "A pattern of coercive behavior, which must include physical aggression or threat, commonly accompanied by other forms of controlling behaviors, that adults or adolescents use against their intimate partners" (p.226). Our focus on domestic violence is not to diminish the importance of ending all forms of violence but to reflect the urgency of the matter in relation to our work as counselors. The American Medical Association has stated that every five years the number of women killed due to family violence equals the number of Americans killed in the Vietnam War (Berry, 1995).

Domestic violence occurs across racial, ethnic, age, sexual orientation, religious, national origin, and socioeconomic lines. It eclipses all other forms of violence in the United States. Disenfranchised women who face other forms of vulnerability because of their sexual orientation, race, geographic location, immigrant status, or homelessness are just as likely to be victims of domestic violence as their more privileged sisters but they are less likely to report the abuse. Such women may also face the double jeopardy posed by maltreatment from institutions and social agencies, stemming from racism, heterosexism, classism, or xenophobia even as they struggle against their abusers.

We focus on domestic violence because it suggests that violence between intimates is still violence regardless of the gender configuration of the couple. More than 90% of reported cases of battering involve beating of women by men (Berry, 1995). Battering also occurs within same sex couples but it remains less visible because of the diminished status afforded these couples within our society. The portrayal of domestic violence as private violence or the personal acts between intimates serves as a barrier to fully eradicate this phenomenon. Somehow we accept that the physical assault of one's intimate partner is a lesser crime than assaulting a stranger on the street, leaving women and girls the most
The following statistics reveal the prevalence and impact of domestic violence in our society:

- According to the most conservative estimate, each year 1 million women suffer nonfatal violence by an intimate.
- By other estimates, 4 million women experience a serious assault by an intimate partner during an average 12-month period.
- Each year, between 50,000 and 100,000 lesbian women and as many as 500,000 gay men are battered by their partner or former partner.
- Nearly 1 in 3 adult women experience at least one assault by a partner in adulthood.
- Eighty-eight percent of victims of domestic violence fatalities had a documented history of physical abuse by their abuser (www.abanet.org/domviol/stats.html).

These statistics represent a crisis in our society's ability to provide a nurturing environment. As counselors we recognize the devastating personal impact of violence on the victim's psychological, emotional, and physical health. As counselors we know that violence cannot be contained at one level of the family — that when a woman is victimized so are her children. As counselors we know that stopping the violence is an essential first step in the healing process for both the victim and the perpetrator.

**Rationale**

In order to more effectively serve our clients and contribute to creating an environment that is life enhancing for women and girls as well as for men and boys we must advocate an end to all violence against women. In a national study of women who escaped from battering, participants rated the effectiveness of formal help sources from very effective to somewhat effective. Results from the study reveal that participants selected women's groups (60 percent) and battered women's shelters (56 percent) as more effective than counseling or social services agencies (47 percent; Bowker, 1993). These figures indicate that we have much work to do if we are to effectively serve clients and help end the violence within society.

Our treatment of women who are in abusive relationships has located much of the cause and maintenance of the violence in
individual women. Treatment concepts such as learned helplessness, Post Traumatic Stress Disorder, and even the notion of affiliation as the primary motivation in women, subtly suggest that fixing women will solve the problem. Although these perspectives on the effects of domestic violence on women have been groundbreaking in many respects, they may also prevent us from seeing and attending to the source of the problem: societal norms and gender socialization processes, disparities in power, and a society constructed to meet the needs of men at the expense of women.

A shift in our thinking as a profession about violence against women from individual victimization to viewing such violence as a symptom of societal ill health serves our clients and society better. Many have suggested that violence is a core element in the American consciousness and experience (Lee, 1998). A more accurate view is that violence is a core element in the social character of men, in contrast to women, in the United States (Stephenson, 1991). Placing the problem in its proper context allows us to address domestic and other forms of violence at its roots: societal values, norms, and institutions which encourage male violence. Lee (1998) stated, “[g]iven the continuing and insidious nature of violence in American society, professional counselors need to make further commitment to intervene not only on an interpersonal level but on a systemic level as well” (p.75). The need to work simultaneously at the interpersonal and systemic level with regard to victim and perpetrator issues is apparent. Challenging current social policies and practices which ultimately punish women for leaving or staying with their abuser would place professional counselors in a direct alliance with our clients which would strengthen our practice, empower clients, and contribute to reshaping the social context.

Social Advocacy Strategies

Ending violence against women requires fundamental social change in our gender relationships. However, to wait for such a thorough cultural transformation is to consign women to a perpetual state of victimization. What makes sense in responding to domestic violence is to activate our current criminal justice system to act in cases of domestic violence with the same conviction that it acts in cases of criminal assault and battery involving strangers. Domestic violence is a crime which calls for stiffer penalties and stronger enforcement of current laws. In every state
we have laws which cover battery, assault, harassment, and murder. However, in many states domestic violence is a misdemeanor rather than a felony (Felder & Victor, 1996). The following measures are directed at igniting the criminal justice system to serve and protect women and children:

- Advocate that the laws and penalties which apply to physical assault and battery be applied to assailants in domestic violence cases.
- Advocate against “dual arrests” and other measures which punish women for defending themselves against their assailants.
- Call for “must-arrest” legislation in your state or county in domestic violence cases; if they have it, support a group which monitors its enforcement.
- Encourage the courts to support treatment programs for first time offenders that are linked to sentencing as an alternative to incarceration as well as parole and probation.
- Work with interdisciplinary teams to establish written protocols, policies, and procedures for law enforcement personnel, prosecutors, and courts that are sensitive to victims.
- Publish and widely post flyers listing the legal rights of victims of an assault and battery and the penalties.
- Monitor and support law enforcement officials in order to discourage differential enforcement based on race, class, or sexual orientation.

The above strategies are directed at the legal system because we must become more effective at forcing the system to serve and protect women and children. The police, courts, and our legal statutes are the first line of defense for women who have been assaulted.

Client Advocacy

Counselors bring important strengths to social advocacy efforts: knowledge of common problems faced by clients and a set of interpersonal skills useful to community building (Lewis & Arnold, 1998). Counselors working within the principles of interdisciplinary collaboration (Bemak, 1998) can promote social change through the following strategies:

- Contact the National Council of Juvenile and Family Court Judges for their recommendations and model proposals.
for creating a state or county multidisciplinary and multi-
systems family violence coordinating councils.

a) Lobby local judges and victim advocates to establish
a family violence coordinating council comprised of
decision makers and stakeholders from public, not-
for-profit, and private sectors that are involved with
victims, perpetrators, and children and related issues
of family violence.

b) Partner with women's shelters and victim advocacy
groups to provide cross-training programs for staff
members, trainees, and most of all ourselves.

c) Partner with women's shelters and those who work
with perpetrators to develop intervention strategies,
coordinate services, and create integrated therapeutic
treatment plans to be used, when appropriate, with
couples and families.

d) Advocate that risk assessments for violent behavior
be a standard element of all protocols for child custody
cases and supervised visitation.

• Utilize public health strategies to alter the public
perception that domestic violence, and violence against
women in general, is an individual or familial disorder.
This would include the use of public health strategies to
promulgate that:

a) Domestic violence is as unacceptable as violence
toward strangers and that it equally violates the law
and society's standards for the health and well being
of its members.

b) Women and children are victimized by the abuser and
that they never court, "ask for it" or "deserve it" as a
rational consequence.

c) Non-violent individuals, families, and communities
promote the general prosperity and well-being of the
society and reflect the standard of acceptable
behavior.

d) It is the role and responsibility of all community
members to insure the physical safety and freedom
of vulnerable or dependent members of the
community.

e) Ensure that print, visual, and electronic media
accurately portray the message that violence against
women occurs across all groups and strata of our
society; and that they present domestic violence as a
societal problem rather than a symptom of distressed environments, substance abuse, poverty, lack of education, or ethnically determined behavior.

- Monitor and lobby print, advertising, and entertainment media to increase use of cooperative, symbiotic, and equitable images of men and women rather than promoting predator-prey relationships. Strategies would include:
  a) Write, call, or e-mail media executives when unacceptable images or themes are used in advertising, music, television, movies, and other forms of entertainment. Also, indicate your approval when appropriate.
  b) Campaign against products which promote sexualized violence and brutality against women.
  c) Boycott products or promotions which continue to demean the status or role of women or glorify predator-prey relationships.
  d) Actively support and organize efforts to highlight products and promotions which reflect equitable, symbiotic, non-violent male-female interactions.

- Include in your presentations, training workshops, and consultations accurate information regarding the etiology, assessment, intervention, and advocacy measures useful in prevention, early intervention, and treatment of the batterer and support for victims of abuse. This would include:
  a) Teaching clients, students, and social service personnel how to remove barriers to seeking help in domestic violence cases.
  b) Teaching intervention approaches which do not blame or further victimize women for the violence directed at them. This would include the elimination of the "all-or-nothing, leave him-or-suffer" tone which subtly place the responsibility for stopping or the continuing abuse on women rather than their abusers.
  c) Use treatment approaches which are culturally sensitive; value client self-determination; are problem solving oriented; assess the client's resources; and start where the client is affectively and behaviorally.
  d) Develop and teach interventions and techniques designed to assist perpetrators in taking responsibility for their actions and to learn non-violent means of interactions.
e) Include assessment of domestic violence as a "Standard of Care" for all medical and mental health providers at multiple stages during the service process.

- Encourage, participate, and conduct outcome-based research on prevention programs, treatment interventions, impact of incarceration, help-seeking behaviors of victims, and response behaviors, attitudes, and skill utilization of law officials, medical and social service personnel, judicial systems and, most importantly, counselors.
  a) Apply for grant funds through state and federal agencies such as the Department of Justice to improve training in the assessment, intervention, and referral of victims of domestic violence.

Legislative Advocacy

- Call your congressional representatives and lobby for the reauthorization of crucial components of the 1994 Violence Against Women Act for inclusion in the 1999 legislation to combat violence against women before the 106th Congress. Funds for the National Domestic Violence Hotline were eliminated as well as important funding for grants in the areas of prevention, education, and research. Demand that these measures be reinstated.
  a) Work with the ACA Public Policy and Legislation Committee to continue advocating for effective legislation to combat violence against women.

Conclusion

We offer a note of caution; as we write this paper new evidence is emerging regarding racial bias in the arrest and prosecution of men of color (*The Chicago Tribune*, January 10, 1999, A-1). Advocacy efforts would have to include an awareness of such bias as well as measures to guard against differential enforcement of laws. Privileged men are no more entitled to exercise violence against women than men of color or poor and working class men. Domestic violence must not become just another means to unfairly arrest and incarcerate innocent men of color thereby avoiding addressing the problem of violence at the systemic level in society.

Against the backdrop of the above caveat, great strides have occurred over the last 20 years in combating domestic violence.
due to the efforts of activists, practitioners, scholars, law enforcement, and judicial personnel. It is precisely because of these gains that it has become obvious that a shift in our thinking and our approach to this issue is necessary. We have yet to stem the tide of violence against women despite the collective efforts of legions of helping professionals. Eradicating domestic violence requires a broad societal consensus that violence against women is offensive to our national character. Counselors can help build that consensus.

References


**Recommended Readings**

*The Domestic Violence Source Book* by Dawn Bradley Berry, Contemporary Books, 1995


**Websites - Organizations - Hotlines**

American Bar Association
Commission on Domestic Violence
740 15th Street, NW 9th Floor
Washington, DC 20005-1022
e-mail: abacdv@abanet.org
Internet address: www.abanet.org/domviol/home.html/

Advocates for Abused and Battered Lesbians
P.O. Box 85596
Seattle, WA 98105-9998
e-mail: support@aabl.org
Internet address: www.aabl.org/
(This is not a national organization but it provides information about services in other parts of the country.)

Family Violence Prevention Fund
383 Rhode Island Street, Suite #304
San Francisco, CA 94103-5133
e-mail: fund@igc.apc.org
Internet address: www.igc.org/fund/

National Coalition Against Domestic Violence (NCADV)
P.O. Box 18749
Denver, CO 80218
Phone (303) 839-1852
Internet address: www.ncadv.org
NCADV - Public Policy Office
119 Constitution Avenue, NE
Washington, DC 20002
Phone (202) 544-7358 Fax (202) 544-7893

National Domestic Violence Hotline
1-800-799-7233 (SAFE)
TDD for the hearing impaired
1-800-787-3224

National Organization for Women (NOW)
P.O. Box 96824
Washington, DC 20090-6824
e-mail: now@now.org
Internet address: www.now.org/

NOW - Action Center
1000 16th Street, NW Suite 700
Washington, DC 20036
Phone: (202) 331-006 FAX (202) 785-8576
TTY: (202) 331-9002

Mary Smith Arnold is a professor in the psychology and counseling
department at Governors State University in University Park, Ill. Karen
Sobieraj is a professor of social work at Governors State University in
University Park, Ill.
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