Working relationally with couples where there is situational violence

Situational couple violence requires a different kind of intervention from that required to address intimate terrorism.

Summary

• Assessing and monitoring risk is of paramount importance when working with couples or individuals where there is actual or suspected violence in their relationship.

• Responsibility for violence lies with the person who commits it.

• In the interests of those affected, including children, it is vital we refine our understanding of inter-personal violence.

• There is growing recognition that intimate terrorism (violent coercive control) and situational couple violence (situationally-provoked violence) may need to be addressed in different ways.

• Relational approaches when dealing with intimate terrorism (violent coercive control) are not appropriate. However, relational approaches when dealing with some situational couple violence (situationally-provoked violence) can, in circumstances where risk has been adequately assessed and is monitored on an ongoing basis, be appropriate and effective.

• Services need to respond effectively to situational couple violence where both members of the couple wish to work together on their relationship.

• Research is beginning to evidence that couple therapy can be appropriate and helpful for addressing particular kinds of inter-personal violence in couple relationships.
Prevalence and impact

Domestic abuse (also called intimate partner violence) is a widespread phenomenon; indeed 30% of women and 16.3% of men will experience domestic abuse\(^1\) during their lifetimes (Smith, 2010)\(^2\), and one in four children are exposed to domestic abuse (Radford, 2011)\(^3\). Data from the Office of National Statistics show that, in 2013-14, 84 women were killed in England and Wales by their current or former partners (ONS, 2015). Domestic abuse is acknowledged to be an important cause of long-term (and indeed intergenerational) difficulties for families, for children and for communities (EIF, 2014).

Regarding children’s outcomes in particular, research indicates that children exposed to domestic violence and high couple conflict, but who have not suffered direct physical harm themselves, display similar psychological and social outcomes as children who have been directly abused. Symptoms include increased fear, inhibition and other internalising behaviours, and such children are more anxious and more depressed than other children (Kitzmann, 2003) (Harold and Leve, 2012). Furthermore, witnessing severe domestic violence has been shown to be associated with a tripling in the likelihood of a child having conduct disorder (Meltzer, 2009); younger children aged six and under appear to be most affected by witnessing domestic violence (Meltzer, 2009).

UK policy

Government policy on preventing and tackling domestic violence over the past decade has included the National Domestic Violence Delivery Plan (2005), a strategy which outlined objectives to reduce domestic violence and domestic violence-related homicides. In response to criticism from the Home Affairs Select Committee regarding a perceived lack of focus on early intervention and prevention in this plan, the Home Office published Together we can end violence against women and girls (HM Government, 2009), which contained a set of proposals explicitly focusing on the everyday impact of violence on women and girls.

During the last parliament, the Coalition Government published a Call to End Violence against Women and Girls: strategic vision (2010), with action plans related to this published annually. In 2013, following consultation, the Government amended its definition of domestic violence to include that of coercive control. The Serious Crime Act, which received Royal Assent in 2015, then criminalised patterns of repeated or continuous coercive or controlling behaviour where perpetrated against an intimate partner or family member.

In March 2016, the Government published a new Ending Violence Against Women and Girls strategy, for the period 2016 to 2020 (HMG, 2016).

Typologies of domestic violence

Much of the most recent research is showing that not all violence experienced in intimate relationships is the same. It does not all spring from the same causes; nor does it all have the same intentions/objectives, as the typology of domestic abuse drawn up by Michael Johnson, a leading researcher in the field of sociology and women’s studies, sets out (see Table 1).

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\(^1\) The Government defines domestic abuse as: “any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality.” The behaviour captured in this definition includes: “…a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.” https://www.gov.uk/domestic-violence-and-abuse

\(^2\) This study defines domestic abuse as covering partner abuse (non-sexual); family abuse (non-sexual); sexual assault; or stalking carried out by a current or former partner or other family member

\(^3\) “While the most frequently reported behaviour was one parent throwing or breaking things in the context of a row, an indication of the severity of domestic violence in some families can be provided by the responses to the question that asked participants if the child had ever witnessed one parent being kicked, choked or beaten up by the other parent. 3.5 per cent of under 11s, 4.1 per cent of 11–17s and 8 per cent of 18–24s reported this had happened during childhood. This compares very similarly with a rate of 4 per cent of 11–17s who reported exposure to severe domestic violence during childhood in a survey of 7,865 children and young people in the UK by Meltzer.” (Radford, 2011)

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Intimate terrorism (violent coercive control)

- Involves a pattern of violent coercive control in which one partner uses a variety of violent and non-violent tactics to try to take complete control over their partner (vast majority of this type of violence in heterosexual relationships perpetrated by men).
- Can include coercion and threats, intimidation, emotional abuse, isolation, economic abuse and abuse of partner’s children.
- Men who are more typically ‘traditional’ in terms of their gendered identity more likely to be involved in intimate terrorism than in situational couple violence.
- Alcohol is not a major factor in the incidence of violence in intimate terrorism (although alcohol does affect the severity of violence given the relationship between alcohol and escalation of violence).
- Sub-types of intimate terrorism (psychological dynamics):
  - Emotionally dependent – men who love their partners but have attachment issues, fear of loss of their partner, and try to exert complete control in order to keep them. High score on symptoms of borderline personality.
  - Anti-social – men who are violent towards their partner and others, may be involved in the criminal justice system; manipulative, aim to get what they want by any means (Jacobson and Gottman 1998)

Violent resistance

- Perpetrated by a victim of intimate terrorism (can include self-defence, but also violence that is not self-defence, e.g. retaliation). Can include partner (i.e. predominantly women) murdering abusive partner (predominantly men) in context of being attacked or in context of imminent attack on her or her children.

Situational couple violence (SCV) (situationally-provoked violence)

- Violence that occurs because the couple has conflict which turns into arguments that can escalate into emotional and possibly physical violence.
- SCV often involves both partners (as opposed to intimate terrorism).
- Women as likely as men to engage in SCV but impact on women (when committed by men) is much larger (due to physical size etc.) in terms of physical injury as well as fear and psychological consequences (in about a quarter of cases it is only the man who is violent; in about a quarter of cases it is only the woman who is violent, and in the other half of cases both the man and the woman have been violent at some point in the relationship).
- Violence can on occasions escalate to become chronic and severe.
- SCV follows a socio-economic gradient and is more prevalent in poorer families. Substance misuse, anger management issues and communication issues are deeply implicated. SCV is more common than intimate terrorism in co-habiting relationships than in marriages.
- Alcohol plays a significant role in SCV as a source of conflict in itself and as a factor which leads to escalation of violence.
- In 40% of couples characterised by this type of violence, the SCV comprises one incident (such as a slap, or a push). The couple is horrified by what has happened, deals with it, and there is no further violence within the relationship. For the remainder, there is chronic violence (ranging from a few incidents per year to chronic arguing that frequently turns to violence).

Table 1: Typology of domestic abuse and violence (intimate partner violence) (Johnson, 2008)

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<thead>
<tr>
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<th>Situational couple violence</th>
<th>Intimate terrorism</th>
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</thead>
<tbody>
<tr>
<td>Prevalence in heterosexual relationships</td>
<td>12-18% (Johnson, 2014)</td>
<td>2-4% (Johnson, 2014)</td>
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<tr>
<td>Prevalence in same-sex relationships</td>
<td>‘Common’ (Bartholomew, 2008), (Stanley, 2006)</td>
<td>‘Sizeable minority’ (Bartholomew, 2008), (Stanley, 2006)</td>
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<tr>
<td>Frequency of violence</td>
<td>8% (Ansara, 2010)</td>
<td>57% (Ansara, 2010)</td>
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<tr>
<td>Fearing for one’s life</td>
<td>9% (Ansara, 2010)</td>
<td>60% (Ansara, 2010)</td>
</tr>
<tr>
<td>Severity of violence (i.e. injury requiring medical attention)</td>
<td>13% (Graham-Kevan, 2003)</td>
<td>43% (Graham-Kevan, 2003)</td>
</tr>
<tr>
<td>Low marital/relationship quality</td>
<td>13% (Frieze, 1989)</td>
<td>50% (Frieze, 1989)</td>
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<tr>
<td>Likelihood of leaving the relationship more than once</td>
<td>26% (Frieze, 1989)</td>
<td>74% (Frieze, 1989)</td>
</tr>
<tr>
<td>Likelihood of violence escalating</td>
<td>20% (Graham-Kevan, 2003)</td>
<td>78% (Graham-Kevan, 2003)</td>
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Tavistock Relationships’ perspective

Tavistock Relationships takes the view that the responsibility for abusive behaviour rests firmly with the person or persons who commit it. However, we also believe that our response as a society to intimate partner violence needs further development and is currently inadequate in key ways. Responses and services categorise partners in couples as victims and perpetrators, offering separate interventions accordingly.

It is extremely rare for services to identify and respond to the dynamic processes within the couple relationship and other important contributory factors that influence the prevalence of inter-personal violence. Attempts to encourage approaches that address the relational aspects of violence are sometimes characterised as attempts to blame the victim for the abuse or excuse the perpetrator. While abusive or violent behaviour is always the personal responsibility of the man or woman who commits it, it is important, in our view, to include an analysis that addresses the complexity of relational dynamics that are often at the root of situational intimate partner violence. Treatment which does not assess these aspects can be ineffective and may explain why some violent and abusive couples reunite time and again.

Moreover, in situational couple violence, the victim/perpetrator distinction may not be clearly delineated as violence may be bi-directional, involving both partners as “perpetrators”. Where a relational approach can be safely adopted (Humphries and McCann, 2015), it may provide a valuable means of reducing and eliminating abusive behaviour in the current relationship, and of avoiding abusive behaviour in future relationships.

To some extent, preventative approaches to domestic abuse already exist; generally speaking, however, much of the UK’s approach to tackling existing domestic abuse is based on a ‘perpetrator’ rather than a relational model.

While the over-riding (and laudable) concerns of current programmes are violence reduction and the safety of victims of domestic abuse, there is also a place for relational approaches within a safe and appropriate context. For example, relationship-focused parenting interventions such as the Parents as Partners programme, a groupwork relational approach with couples operated by the Tavistock Relationships in the UK, has an evidence-based approach that has been shown to reduce violent problem-solving (EIF, 2014). These approaches can offer a couple an opportunity to work together on their difficulties, with the aim of helping them establish better ways of managing relational stressors and interpersonal problems (Antunes-Alves and De Stefano, 2014) (Stith, 2012).

Moreover, couple-based relational approaches are clearly the intervention of choice for many affected by inter-personal violence. For example, a recent survey of couples seeking counselling and psychotherapy at Tavistock Relationships found that nearly half involved some degree of physical violence; while studies of domestic abuse in LGBT couples find that couple therapy is often sought when relationships go wrong (Donovan, 2014) (Donovan, 2006).

Towards a more relational conceptualisation of, and approach towards tackling, domestic violence

The prevailing discourse in the field of domestic abuse has essentially been that of a feminist critique of power and control exerted by men over women and children. While such a perspective is undoubtedly important to understanding this complex field, its dominance has resulted in something of a one size fits all approach to this area. This has a number of ramifications, including a reluctance of some professionals involved in child safeguarding to assess the relational dynamics of domestic violence, with the result that interventions that may be effective are overlooked (Fatherhood Institute, 2014).

4 Prior to the emergence of domestic violence perpetrator programmes (DVPPs) in the late 80s/early 90s, domestic violence activism and practice had mainly focused on the protection of women and children (e.g. the Duluth model). DVPPs aim to help people who have been abusive towards their partners or ex-partners change their behaviour and develop respectful, non-abusive relationships. The majority of European programmes use multiple combined techniques including psychodynamic treatments and cognitive behavioural therapy. Though DVPPs were initially facilitated by the Probation Service of England and Wales in collaboration with the voluntary and community sectors, in recent years the Probation Service has created more generic criminal justice programmes including the Integrated Domestic Abuse Programmes (IDAP) and the Community Domestic Violence Programme (CDVP). Currently, The National Offender Management Service (NOMS) aims to replace these programmes with the Building Better Relationships (BBR) programme for a less gendered approach.

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Couple-based relational approaches are the intervention of choice for many affected by inter-personal violence
The lack of training for frontline practitioners in this area effectively results in a systemic barrier to the provision of nuanced services. Furthermore, the lack of any relational perspective in the 2014 NICE Guideline on Domestic Violence (NICE, 2014) – which focuses on coercive, controlling violence – deprives our care system of a viewpoint and an approach which could be beneficial to many couples.

This matters because the current conceptualisation of domestic violence runs counter to the clinical experience of organisations who work with couples in distress. For while it is of course the case that some domestic abuse is committed in the context of a male perpetrator’s (perceived and erroneous) entitlement to abuse a female partner, many presentations of inter-personal violence conform more closely to the situational couple violence outlined by Johnson in his typology (Johnson, 2008).

For while not at the extreme end of the spectrum, a recent survey of couples presenting to Tavistock Relationships for therapy found that 44% of all cases involved some degree of violence, the majority being of a non-physical nature (verbal abuse, such as making threats) and physical behaviour not directed at partner (e.g. hitting/throwing/breaking objects)). The dominant discourse around domestic abuse has resulted in there being almost no funding for couples whose violence would be best addressed through relational approaches.

Indeed, if domestic abuse is viewed exclusively through the lens of patriarchy, the solutions we have available will not lead to the significant cultural shift we need. Essentially, much situational couple violence requires a different kind of intervention from that required to address intimate terrorism, and there needs to be more space in the policy arena to consider other approaches that might be helpful.

Considering risk in a relational approach to dealing with situational couple violence

It would be wrong to think that all violent couples could safely be worked with in a couple therapeutic setting (most obviously those where one partner would be classified as an intimate terrorist; though it is also important to acknowledge that situational violence can be dangerous and life-threatening). However, there is a great deal of established practice, and some research, which suggests that couple therapy can be appropriate for some couples (Antunes-Alves and Stefano, 2014) (Stith, 2012). Assessment and monitoring of risk, of course, is of paramount importance in any work where violence is a factor.

A key aspect of understanding and addressing risk is the openness of professionals involved to understand the couple relationship dynamics involved in cases for which they have responsibility. An understanding of attachment theory and couple relationship dynamics should be a prerequisite for all those working to safeguard victims of domestic violence (e.g. those sitting on multi-agency risk assessment conferences).

For organisations working directly with couples where there has been history of situational couple violence, it is vital that they have a robust policy and set of procedures that will help clinicians in their assessment and management of risk (including a child protection policy). In addition, systems should be in place that allow for a prompt link-up with other agencies (e.g. court services) where situational couple violence becomes chronic and/or severe.

Organisations advocating couple therapy where there has been regular violent or other abusive behaviour in the context of the relationship need to think carefully about what they are offering in terms of risk management and supervision. Furthermore, all staff providing such services should be required to attend specific training, as per recommendation no.6 in the NICE guideline on domestic abuse and violence (NICE, 2014). Although studies of mild to moderate interpersonal violence have found that conjoint therapy does not place women at greater risk of violence (Stith, 2003), the question regarding of whether the couple should be seen together or separately should be kept under review and separate assessment processes are likely to be clinically indicated.

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5 Antunes-Alves and De Stefano advocate that conjoint couple therapy should be considered when “(a) there is no substance abuse or mental health issues that may compromise safety; (b) the couple experiences common couple violence of mild to moderate severity; (c) the violence is a result of poor problem solving (i.e., situational) and is not motivated by need for control; and (d) the violent individual takes responsibility and does not blame the partner for the violence”.

Implications for research and policy

- The Government’s strategy for Ending Violence Against Women and Girls sets out its ambition that ‘women and girls will be able to access the support they need, when they need it, helped by the information they need to make an informed choice’. Tavistock Relationships believes that the approach set out in this briefing should constitute one element of such support.

- To be most effective, however, we believe that the Government’s strategy in this arena should acknowledge the heterogeneity of different types of intimate partner violence, as well as reflect what we know about how people change and recover.

- NICE should recruit a guideline development group fully representative of the range of perspectives which exists among practitioners and researchers in this field to review the evidence on relational approaches to situational couple violence and produce a specific guideline on this subject.

- All children and young people must have access to relationship and sex education, which should be a compulsory part of the national curriculum. In addition to helping young people understand healthy relationships and develop relational capability, such a move would engage young people in violence prevention, thus enabling them to be better able to recognise and avoid abusive relationships.

References

11. HM Government (2009) Together we can end violence against women and girls
23. NICE (2014) Domestic violence and abuse: how health services, social care and the organisations they work with can respond effectively. NICE