

CALIFORNIA STATE UNIVERSITY, NORTHRIDGE

INTIMATE PARTNER VIOLENCE AND
THE AFRICAN AMERICAN COMMUNITY:
A FAITH-BASED, INTIMATE PARTNER VIOLENCE INTERVENTION
WITH INSTRUCTOR'S MANUAL AND GROUP CURRICULUM

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ABSTRACT

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The purpose of the project is to collaborate with African American churches to create an intervention curriculum addressing the needs of African American women survivors of domestic violence (DV).

The faith-based intervention includes an instructors' manual and group curriculum designed to increase awareness of intimate partner violence (IPV) and provide psychoeducation, empowerment, and guidance to African American women experiencing IPV. Faith-based institutions have traditionally played a significant role as a source of coping that promotes resilience in the African American community. For this reason, this program is geared for use by faith-based institutions prominent in the African American community. Church leaders, as well as other religious and spiritual leaders within the church will be given the tools to facilitate IPV groups for female adult members of the church congregation who are survivors of domestic violence. The mission of the workshop is to educate religious leaders and members of the church on IPV and religious and spiritual abuse; to educate African American women on IPV, warning signs,

resources, safety planning, and social support development; and to facilitate scriptural and spiritually based approaches in order to promote emotional and psychological healing, resilience, and wholeness for survivors of DV. The manual outlines a 12-week IPV workshop, which is to be implemented directly in the church setting. In each weekly session, the religious group leader utilizes psychoeducational materials, discussion, and activities to help members understand, learn, process and apply the material to their lives. By the end of the workshop series, each group member will leave with a greater understanding of IPV and various types of abuse, including spiritual and religious abuse. Members will also have an ability to preserve their safety and well-being by recognizing and identifying precursors of an abusive relationship before entering the cycle of abuse, learning safety-planning skills, and learning about the dynamics of a healthy relationship. Lastly, members will cultivate a sense of empowerment in taking control of their lives.

CHAPTER I: INTRODUCTION

Domestic Violence and Effective Interventions

Despite years of research, intervention, and attempts at reeducation, domestic violence (DV) continues to be a significant problem in society. DV is a pattern of coercive behaviors through the use of intimidation, threats, violence, harassment as a means to exert power and control over one's partner (Schechter & Ganley, 1995). It has been reported that every year in America, between 1.5 and 3.6 million women are raped or physically assaulted by an intimate partner (Tjaden & Thoennes, 2000; Matthews, 2004). The research reveals that this adds up to approximately 4 to 6 million intimate partner physical attacks and sexual assaults each year, with many more that go underreported (Tjaden & Thoennes, 2000; Matthews, 2004). Furthermore, the problem of DV appears even more pervasive in the African American Community, and much of the literature has failed to address DV among African Americans effectively. In fact, people of color continue to be ignored in much of the DV literature (Bent-Goodley, 2001). Although many different socioeconomic and ethnic groups experience DV, it has been estimated that African Americans experience a disproportionate amount of DV compared with white Americans (Hampton, Gelles, & Harrop, 1989; Rennison & Welchans, 2000). A review of the research reveals that gaps and inconsistencies remain in the literature surrounding DV among African Americans (Bent-Goodley, 2001). Research has found the rate of DV to be higher particularly with African Americans compared to other ethnicities (Ellison, Trinitapoli, Anderson, & Johnson, 2007). It is estimated that women of color experience nearly four times more partner violence, further substantiating the conjecture that DV poses an imminent threat to the preservation of Black families and

communities (Bent-Goodley, 2001), as discussed later in the paper. Given the frequency at which women of color experience DV, it is imperative that the nature of the problem be fully explored and that a culture-specific intervention be developed and implemented to address the issue.

DV among the African American population is a serious issue, and many DV survivors of color sustain serious and lethal injuries (Tjaden & Thoennes, 2000). In fact, survivors of color are three times more likely to be killed as a result of IPV than their Caucasian female counterparts (Campbell & Wolf, 2006). African American women are encouraged by social services to leave abusive relationships because of the threat that exists to their own health and safety and because of the resistance of batterers to intervention (Wang, Horne, Levitt, & Kleges, 2009). Current research has targeted the strong connection between health and social support as an additional reason to advocate for battered women to seek support among safe groups that bolster their self-worth and sense of community connection (Paranjape & Kaslow, 2010). Furthermore, many survivors of DV turn to their faith-based communities for support, guidance, and safety (Bent-Goodley & Fowler, 2006). This is especially true for African American women, as women of color frequently resort to their faith-based communities before they go to mental health, social service, or medical care providers (Bent-Goodley & Fowler, 2006).

One of the current focal points of research in the field of DV intervention is in developing further understanding of how interpersonal relationships beyond the nuclear family can contribute to the support and recovery of battered women (Fraser, McNutt, Clark, Williams-Muhammed, & Lee, 2002). One avenue of this research has focused on the role of religion in supporting women in leaving abusive relationships. Though the

current research has revealed the influence of religion in various other family-related processes and outcomes, until recently, the linkages between religious beliefs or practices and the occurrence of DV received short shrift in the literature (Gillum, Sullivan & Bybee, 2006). Solid research on DV in the Black community has confirmed, however, that African Americans tend to report comparatively higher levels of religiosity than European Americans from comparable social and economic backgrounds (Taylor, Chatters, & Levin, 2004). African Americans tend to regard religion as more personally important than Caucasians, attending religious services more frequently than Caucasians from comparable socioeconomic backgrounds (Watlington & Murphy, 2006). African Americans exhibit more religiosity than their respective Caucasian counterparts, showing higher levels of church membership, frequency of church attendance and higher levels of participating in other congregational activities and non-organizational practices of frequent prayer, perusal of religious material, religious media and religious beliefs (Ellison et al., 2007). Furthermore, current research on DV among African American's maintains the significance of the Black church and spirituality as anchors of the African American cultural experience (Bent-Goodley & Fowler, 2006). The use of religious institutions has been documented as traditional means of coping in the Black community (Hill, Hawkins, Raposa, & Cart, 1995) and has occupied an important position in that particular community (Taylor, Ellison, Chatters, Levin, & Lincoln, 2000). The overarching role of religion in the lives of African Americans can be linked to religion serving as a conduit to speak on issues of oppression and the quest for liberation, love, hope, and justice (Anderson & Black, 1995).

Throughout U.S. history, the Black church has served a range of functions within Black communities, including individual and collective self-help, racial socialization, and political mobilization (Lincoln & Mamiya, 1990). The Black church has also served as a forum to promote a sense of community, provide positive role models, and provide an outlet for shared experiences leading into a new identity (Moore, 1991). Spirituality in the context of the Black Church is also an anchor of the African American cultural experience, evolving during the life span as part of the developmental process of the individual and formulated on the basis of cultural influences and previous and current life experiences (Bent-Goodley & Fowler, 2006). Spirituality has played the role of transformational healing in the Black community, emphasizing belief in a higher power and internal expressions of faith, whereas religion focuses on external expressions of faith (Gilbert, 2000). Although there is a distinction between the two, spirituality and religion are so interconnected that they are often discussed interchangeably within the Black community (Bent-Goodley & Fowler, 2006). Spirituality is “the sense of the sacred and divine” (Martin & Martin, 2002, p. 1); it informs the way in which the individual views the world, and influences the way in which African Americans understand and interpret their life experiences with meanings attached to events and experiences often perceived as spiritual interpretations (Bent-Goodley & Fowler, 2006) . Spirituality contributes to resilience, holistic healing, the effective promotion of health, and enhanced coping mechanisms within the Black community (Bent-Goodley & Fowler, 2006). The African American community has demonstrated a reliance on the church and spirituality to the extent that research acknowledges addressing both spirituality and religion as part

of a culturally competent approach for understanding African Americans (Bent-Goodley & Fowler, 2006)

Furthermore, research in DV is turning increasingly toward studies of minority populations, including those who are culturally, racially, and linguistically diverse (Ellison et al., 2007; Smith, 2009). Studies of the African American community and African American women in particular have focused on how this population's diverse needs, beliefs, and roles in their community and in society impact their mental health needs and associated interventions (Hampton et al., 2003). Smith (2009) found that older African American women who exhibited resilience in other areas of their lives were more likely to seek help from mental health professionals. The authors defined *resilience* as the self-protective functions of perseverance, willingness to problem-solve, and appreciation for others' help. Paranjape and Kaslow (2010) showed in their study that spirituality and social support played strong protective roles in the health statuses of older African American women. Combining these two research results indicates the possibility that if African American women already have strong support from their church community, they are more likely to accept and seek help for a variety of psychosocial problems, including DV. Furthermore, research suggests that the central role of religion among African Americans serves as an outlet to address issues of oppression, the quest for liberation, and hope (Watlington & Murphy, 2006). Bent-Goodley and Fowler (2006) maintain that the Black church is central to the faith-based experience in the African American community and functions as a source of guidance and support in areas such as relationships, family preservation, health initiatives, politics, education, and civil rights.

Statement of the Problem

The Black church has the potential to provide African American women who experience intimate partner violence (IPV) with the knowledge, guidance and spiritual healing necessary to aid and empower these women in developing a way out. Although African Americans are known to utilize religion and spirituality at significant rates to deal with adversity (Potter, 2007), DV has not always been directly addressed as a serious issue in the church. In fact, research suggests that “within the teachings of certain religious groups, abuse of women by their intimate partners is excused, and pastors are often complicit in the battering parishioner’ behaviors” (Potter, 2007, p. 266). Many pastors and religious leaders often recommend a commonly referenced scripture pertaining to spousal relations that appears in the New Testament of the Bible, Ephesians 5:21-33 (King James Version), which helps perpetuate the control of women by their husbands (Giblin, 1999; Potter, 2007). In a recent qualitative study comprised of 40 self-identified African American women, 18 years old or older, who had experienced IPV, indicated the subjective experience of participants in their dealings with faith-based institutions during their involvement with abusive relationships. Potter (2007) reported that eight of the 40 participants sought counseling from religious leaders, suggesting the importance of clergy in supporting battered Black women; however, they reported receiving substandard support from clergy members during their time of need and receiving pastoral advice to “remain in the relationship and ‘work things out” (p. 272). Pastors also made recommendations for the women to “pray about the relationship and make greater attempts at being a ‘good wife” (p. 278). Though the Black church has the potential to address IPV and intervene in the significant issue of DV, many religious

leaders are not aware of the nature and severity of DV and are therefore ill equipped to identify and address the issue.

IPV is a growing epidemic in the African American community. Black women report significantly higher rates of IPV than their white counterparts (Black et al., 2011). Not only do African American women experience higher rates of DV than white women, but they are also more likely to sustain serious and lethal injuries because of the intimate partner abuse, than their white counterparts (Watlington & Murphy, 2006). Furthermore, statistics have indicated that homicide by an intimate partner is the leading cause of death among African American women (Watlington & Murphy, 2006). It is clear that that DV in the African American community is a significant problem that has detrimental, lasting negative psychological and physical effects. DV has been shown to predispose abused women to physical and mental health risks, including depression and posttraumatic stress disorder; moreover, identity crises have been attributed to African American women experiencing IPV (West, 1999). The proportion of deaths and serious injuries resulting from DV in African American communities is devastating. Addressing DV in a culturally relevant approach must become a priority mental health issue in the African American community, because the associated physical and mental health concerns for African American women survivors of DV are profound.

Purpose of the Project

The purpose of the faith-based IPV intervention instructors' manual and group curriculum is to increase IPV awareness and provide psycho-education, empowerment, and guidance to African American women experiencing IPV. Faith-based institutions

prominent in the African American community will be targeted. The mission of the workshop is three-fold: (a) to educate religious leaders on DV as well as religious and spiritual abuse; (b) to educate African American women on DV issues related to definitions, warning signs, behavioral cycles, resources, safety planning, and social support development; and (c) to offer scriptural and spiritually based approaches to promote emotional and psychological healing, resilience, and wholeness for survivors of DV. The manual outlines a 12-week DV workshop which is to be implemented directly in the predominantly African American church setting. Each of the 12 weekly sessions is described in detail with specific instructions for qualified religious and spiritual group leaders. In each 90-minute session, the religious group leader is provided with several psychoeducational materials that include discussion and process questions; activities geared toward increasing awareness of DV and furthering discussion; and group work aimed toward ensuring that the group members are understanding, learning, processing and applying the material to their lives. By the end of the workshop series, each group member will leave with a greater understanding of the nature of DV and recognition of the various types of abuse, including spiritual and religious abuse. Additionally, members will have an ability to preserve their safety and well-being by recognizing and identifying precursors of an abusive relationship before entering the cycle of abuse. Lastly, members will cultivate a sense of empowerment in taking control of their lives. The purpose of the project is to collaborate with African American churches to create an intervention curriculum addressing the needs of African American women survivors of DV.

Terminology

Given that the primary focus of this discussion is violence between men and women who are involved in an intimate, romantically based relationship, the term *intimate partner violence* (IPV) is used to characterize the specific relational context throughout the paper. For the purposes of this paper, this term refers to acts of violence that occur between current or former spouses, boyfriends, or girlfriends and includes violence between persons who have a current or former marital, dating, or cohabitating relationship (Hampton et al., 2003). Traditionally, violence between intimate partners was called *domestic violence* (DV), but Hampton et al. (2003) report that this term has become less of a standard because it excludes the violence that occurs between intimate partners who do not cohabit and because it implies marital relations. The term *intimate partner violence* (IPV) thus refers to any violent act between people in an intimate relationship, whether that act is in the context of marriage, divorce, or dating (Hampton et al., 2003). For convenience, the acronyms DV and IPV are used interchangeably throughout the paper.

For the purposes of this paper, *domestic violence* (DV) is defined as physical assault and sexual violence perpetuated by current and former dating partners, couples, and cohabitating partners (Tjaden & Thoennes, 2000). The use of the term in this paper also includes Bent-Goodley's (2001) definition of *domestic violence* as a cyclical pattern of assaultive and coercive behaviors including physical and sexual abuse.

The primary demographic discussed in this paper is people of African American descent. *African American culture* is a term that will also be used interchangeably with *Black culture* and is placed in the context of the

complex pastiche of symbolic forms e.g. folkways, mores, language, religion, gender roles, childrearing practices, rituals, metaphors, medicines, and healing practices, music and fighting behavior) employed and socially transmitted by people of African descent who have been socialized to the United States. (Potter, 2007, pp. 516-517)

This paper focuses on the population mentioned above.

The term *religiosity* is used in this paper to indicate one's level of commitment to the Christian religion, including levels of church membership, frequency of church attendance, and levels of participation in other congregational activities as well as nonorganizational practices (e.g., frequency of prayer, reading religious materials, and religious media consumptions), religious beliefs (e.g., regarding God, scripture, life after death), religious salience, and subjective religiosity (Taylor et al., 2004).

Cultural competence refers to a set of behaviors, attitudes, and policies that come together in a system or agency or among professionals and enable the system, agency, or professionals to work effectively with culturally diverse clients and communities (National Association of Social Workers, 2000). The term is used in this paper in relation to the degree of competence of the person, agency, or system in dealing with issues specific to the African American population.

Racial loyalty is identified here as an additional barrier to seeking assistance for DV services. *Oppressive racial loyalty* can be defined as an African American woman's decision "to withstand abuse and make a conscious self-sacrifice for what she perceives as the greater good of the community but to her own physical, psychological, and spiritual detriment" (Bent-Goodley, 2001, p. 323).

The term *African American churches* is used interchangeably with *Black churches* and is defined as Christian churches predominately made up of African American

congregations and typically characterized by distinctive worship styles including enthusiastic, uplifting music and preaching and by high levels of member participation and expressiveness (Ellison et al., 2007). The term *the Black church*, meaning churches with a predominantly Black congregation, is used as a sociological and theological shorthand reference to the pluralism of Black Christian churches in the United States (Lincoln & Mamiyah, 2003). The Black church is also defined as a religious institution operated and controlled by African Americans (Ellison et al., 2007)

For purposes of this paper, *African Americans* refers to people who live in America and speak English but who are mainly of African ancestry. This designation is also inclusive of first-generation African immigrants to America. *African American* refers to a range of diverse cultures with the common linkage of an ethnic connection to Africa. The term *Black community* is used interchangeably with *African American community* throughout this paper.

Spirituality and *religion* are so interconnected within communities of color that, for the purposes of this paper, these terms are used interchangeably. *Religion* is defined by acts of faith, and what supports faith is characterized as inextricably linked to communal worship in the form of religion (Bent-Goodley & Fowler, 2006).

Summary

The Black church can play an integral part in ending the cycle of abuse in the community and as such religious leaders must be equipped with tools to intervene. Through the IPV intervention instructor's manual and group curriculum, religious and spiritual leaders will be educated about DV, and equipped with the knowledge and

resources to address the issue of DV and assist victims seeking help within the safety of their church. Educating religious leaders about religious and spiritual abuse will also serve to strengthen the Black church and its ability to intervene in the epidemic of DV within the community. The purpose of the group is to provide a culturally relevant intervention involving the development of a psychoeducational support group that will promote pertinent knowledge, support, empowerment, and healing, and produce healthy outcomes for African American women experiencing DV.

This paper is organized into four main sections: first, a literature review which examines such topics such as the nature of IPV, factors contributing to IPV in the Black community among African American women, the psychological and physical effects of the abuse of Black women and their families, DV interventions utilized in the community, and the role of the Black church as an intervention for IPV; second, a section designated to presenting the implementation and delivery of the project; third, a complete IPV workshop manual for religious leaders to provide psychoeducation to members of their congregation within their church; and fourth, a summary of the IPV intervention instructor's manual and group curriculum's efficacy and potential limitations. My objective is to implement the use of this workshop manual by qualified religious and spiritual leaders within the confines of their faith-based institution.

CHAPTER II: LITERATURE REVIEW

The current literature on the subject of IPV in the African American community lacks robustness. A significant portion of the literature either studies IPV without reference to the particular African American population's needs or utilizes techniques that do not effectively discriminate between contributing factors such as socioeconomic status, structural factors, and cultural contexts. The following review addresses the current state of literature on IPV in the African American community and explores research on effective interventions. One significant gap found in the research of literature on this topic is in the area of religious involvement as serving a protective function in terms of IPV. Although a few studies have addressed this topic for the African American community, inconsistencies and gaps exist in the research on African Americans and IPV that have not yet been fully addressed.

The terms *African American population* and *intimate partner violence* or *domestic violence* have been defined in the terminology section above. In the context of this literature review, a comparative analysis will be conducted on the subject of IPV in the African American population. The purpose is to demonstrate the ongoing problem of IPV in the Black community and the role that the Black church has played positively and negatively in relation to intervention for this problem. Finally, it will be shown that the Black church and leaders within the church can play protective roles that increase life outcomes and resiliency for African American victims of IPV.

Prevalence of IPV Among African Americans

Reporting the incidence of IPV on the national level, Bent-Goodley and Fowler (2006) refer to the National Center for Injury Prevention and Control survey of thousands of citizens nationwide, which found that 5 million women of all races and ethnicities experience IPV every year. Hampton et al. (2003) review a plethora of past studies, including the National Crime Victimization Survey (NCVS), and found that when the African American population is studied individually, research consistently indicates that IPV is more prevalent in African American communities than in other racial or ethnic groups. In their article, “Domestic Violence in the African American Community,” Hampton et al. report that studies indicate that African American women were 35% more likely to experience IPV than white women (2003). The NCVS is a particularly strong quantitative statistical measure, because it surveys a population of thousands of random citizens across the nation and asks about both reported and unreported incidences of IPV. It is clear that IPV is a serious problem that traumatizes victims and self-perpetuates as victims become accustomed to abuse and expect it in their future relationships. Hampton et al. also found that DV is quickly developing into a major public health issue for all women, due to the pervasive and haphazard frequency of DV within all economical, racial, and ethnic demographics (2003). Moreover, DV poses an even greater public health issue for African American women than their European American counterparts because they are more likely to sustain serious and lethal injuries due to the violence they endure from an intimate partner (Fagan, 1996). Additionally, research shows that African Americans experience higher rates of IPV compared to their White counterparts (Hampton et al., 2003). According to the National Black Women’s Health Project, DV

has been identified as the number-one health issue among African American women (Bent-Goodley, 2001)

In summary, multiple statistically significant surveys indicate that African American women are more likely to experience IPV than women of other races and ethnicities.

The Impact of IPV on African American Women and Their Families

The wounds of IPV last long after any physical injury. DV in the Black community can result in a variety of permanent physical injuries, mental health problems, and death (Websdale, 1999; Wilson & Daly, 1992). Research purports that there are more IPV trauma-related injuries among African American women, with injuries including damage to back and limbs, internal injuries, broken bones, fractures and other severe injuries. Additionally, IPV has been associated with poor health outcomes among pregnant survivors, such as preterm labor, low-birth-weight infants and miscarriage. (Bent-Goodley, 2007). Additionally, homicide is the leading cause of death for African American female survivors of DV (Coker et al, 2002). Other physical health problems resulting from victims of DV among African American females include chronic pain in the back, abdominal, chest, and head areas, chronic irritable bowel syndrome (Goldberg & Tomlanovich, 1985). Research shows that low birth rate (LBW) and preterm delivery are disproportionately higher among African American women (Bent-Goodley, 2007). Research suggests a relationship between IPV during pregnancy and infants with LBW (Lacey, McPherson, Samuel, Sears, & Head, 2012). IPV during pregnancy is also linked to preterm delivery and infant mortality (Lacey et al., 2000). Indeed, the health consequences of DV are severe, and African American women have been found more

likely than their European American counterparts to sustain serious and lethal injuries because of the violence they endure from an intimate partner (Fagan, 1996).

Common psychological affects experienced by African American victims are suicidal ideation, depression, and posttraumatic stress disorder (PTSD), with symptoms such as reexperiencing the trauma, experiencing flashbacks, intrusive thoughts, or memories (American Psychiatric Association, 2013). Watlington and Murphy (2006) indicate that these problems are four times more likely to occur in victims of IPV than in other populations. Hampton et al. (2003) report that African American women who experience IPV are far more likely to be suicidal and suffer from depression. In fact, Campbell and Belknap (1997) found a significant association between depression and DV among African Americans; furthermore, PTSD in victims of IPV is more likely to cause long-term psychological problems resolved only by long-term mental health intervention (Watlington & Murphy, 2006). To expand more on PTSD, it is significant to note that African American women who reported DV were found to have experienced more lifetime and current episodes of depression, posttraumatic depression, and substance (Lacey et al., 2000) A majority of women who reported experiencing DV had PTSD symptoms with symptomology that included increased physiological arousal, persistent reexperiencing of the trauma (intrusive thinking), trouble sleeping, irritability, trouble concentrating, watchfulness, arousal, jumpiness, fear, avoidance, hypervigilance, and psychic numbing including disassociation (Hughes & Jones, 2000).

In addition to the psychological affects of DV such as PTSD, depression, and substance abuse, many other mental ailments have been reported (Hughes & Jones, 2000), including cognitive difficulties, such as a tendency to sustain perception and

memory failures as well as engage in ineffective and self-defeating problem solving, resulting from repeated battering that led to the development of perceptions that the victim is unable to resolve her current life situation successfully (Vitanza et al., 1995). Among many other mental problems reported is obsessive compulsiveness, which is viewed as an effort on the part of women to defend themselves against anxiety through various repetitive activities (Gleason, 1993). Traumatic bonding is another known response, whereby victims will often identify with the abuser, which contributes to the difficulty many of them have in leaving their abusers (Hughes & Jones, 2000). Hyperarousal psychoticism and paranoid ideation and psychosexual dysfunction (Lacey et al., 2000) are additionally noted among African American women survivors of DV. Clearly, the negative psychological sequelae associated with DV for women in the African American community is severe, and research suggests that depressive symptoms and many other mental ailments lasted beyond the abuse for African American women that were not ongoing for non-African American women (Campbell & Soeken, 1999).

Additional research found that many African American women who witnessed domestic abuse in their early years were later motivated to view the behavior as normal and allow it in their own adult lives (Hampton, LaTaillade, Dacey, & Marghi, 2008). Watlington and Murphy (2006) report that as a result of these psychological problems described above, African American victims are more likely to engage in destructive behaviors such as substance abuse. In addition, their study found that African American women are more likely to be killed by their abusers than other races or ethnicities. As reported by Watlington and Murphy in 2006, statistics indicate that homicide was then the leading cause of death for African American women between the ages of 15 and 34.

The impact of DV on women in the African American community is devastating for women as well as for children who experience direct physical abuse, and/or witness the abuse of their mothers. Furthermore, stressed African American victims of DV often abuse their children. Walker (1998) purported that victims were more likely to abuse a child when they are in a situation of DV than when they are safe. Researchers suggest that the more violent the behavior experienced by the victim, the more violent the victim is to her child (Straus, 1983). Rennison, and Welchans's (2000) findings indicate that children who witness IPV are more likely to exhibit behavioral and physical health problems including depression, anxiety, and violence towards peers. The researchers reported that these children are more likely to attempt suicide, abuse drugs and alcohol, run away from home, engage in teenage prostitution, and commit sexual assault crimes.

In the first National Family Violence survey conducted by Straus et al. (1980), results revealed that African American males showed higher rates of overall and severe violence toward their wives than did White husbands. The same studies have also shown that African American women were the victims of more than half of the domestically violent related deaths occurring in the homes of female homicide victims (Hampton et al., 2003). In summary, African American women who are victimized by IPV are at risk for a host of mental health problems and poor life outcomes, such as inability to maintain emotional and psychological well-being and decreased ability to maintain functional life due to symptoms that interfere with daily living, working, and social and work relationships. The poor life outcomes are beyond their control and require effective intervention if any resolution is to be found.

Factors Contributing to IPV in the African American Population

In order to identify effective interventions for African American women, it is important to understand the factors that contribute to the problem of IPV in this community. In an analysis of racial factors associated with IPV, socioeconomic factors were consistently associated with greater prevalence of IPV in all populations (Bent-Goodley, 2001). In addition, historical and sociocultural factors associated with racism and oppression are also evident in the African American population in particular. In her literature review, Bent-Goodley (2001) notes that the African American population experiences more structural problems such as intergenerational racism and oppression, institutional racism as a result of external barriers to success, and socioeconomic factors including chronic unemployment and economic underdevelopment. The socioeconomic factors contribute in turn to breakdowns in familial and cultural ties. These factors are evident in the erosion of social supports that increase experiences of social isolation (Bent-Goodley, 2004).

Among African American men, Hampton et al. (2003) found a growing pattern of a distorted view of manhood and a sense of frustration from the external barriers that impede their opportunities. The authors found that these external barriers often become internalized as men accept racist stereotypes as the reality of their identities. They note that the distorted view of manhood has resulted in institutionalized subordination of women as well as a view among Black men that their manhood is oppressed. Frustration, a sense of oppression, and socioeconomic stressors thus compound the problem of IPV in the African American population. The cumulative emotional toll of actual and perceived discrimination, identity issues, and other sources of strain may exacerbate feelings of

stress, frustration, and entrapment (Websdale, 2001). As such, these factors result in a reduced sense of self-efficacy and thereby increase the likelihood of family conflict and IPV (Hampton et al., 2003; Straus & Gelles, 1990).

Given the extensive research on the prevalence of DV in the African American community, the physical and psychological harm it causes for the women who experience DV, and the significant impact it has on African American families, it is clear that DV is a major issue that needs to be addressed in the community. Many interventions have been implemented to mitigate the issue of DV in the Black community and are examined in this review.

Effective Interventions for IPV Among African Americans

Unfortunately, many interventions for IPV are not culturally sensitive. Hampton et al. (2003) found that at the first level of intervention, law enforcement, African American women have traditionally felt undervalued and not taken seriously due to a history of discrimination, maltreatment, and abuse stemming from the days of slavery. In fact, Hampton et al. discovered that many African American women view the criminal justice system as inherently racist. A significant reason for the failure of law enforcement as an intervening agency is the fact that, as Hampton et al. report, African American women have traditionally viewed DV as a private matter that should be resolved within the family. The authors point out that, unfortunately, this familial value contrasts sharply with the disintegration of the family and of social support networks in the African American community. The historical impact of institutional racism has often been cited as having contributed to the need for keeping IPV quiet, as Black women have

traditionally been more inclined to endure the abuse rather than turn to social, law enforcement, or government agencies for help (Hampton et al., 2003).

Research has also suggested the involvement of racial loyalty as a factor contributing to African American families keeping IPV quiet. In fact, researchers state that “the African American woman may withstand abuse and make a conscious self-sacrifice for what she perceives as the greater good of the community but to her own physical, psychological and spiritual detriment, not reporting abuse to maintain racial loyalty” (Bent-Goodley, 2001, p. 323). Furthermore, researchers indicate that at the next level of intervention, individual counseling, group counseling, and community-based programs have reached out to victims of IPV but, again, have not stressed culturally relevant practices and interventions for the African American community (Hampton et al., 2003). In cases where culturally relevant interventions are utilized, however, the results are promising. Hampton et al. (2003) show the validity of using community-based centers that facilitate socioeconomic opportunities for displaced and dispossessed African Americans as a way to address some of the underlying causes of IPV in this population.

Individual mental health counseling is one intervention for domestic abuse survivors that has been researched in the literature. Hughes and Rasmussen (2010) indicate in their study that motivational interviewing (MI) is a particularly effective technique for treating those experiencing DV, because it focuses on facilitating a process of change from resistance to acceptance. The authors report results of a pilot study (Rasmussen, Hughes, & Murray, 2008) utilizing Motivational Interviewing (MI) with 20 African American women receiving services at a DV shelter that indicated that the MI was particularly effective. The experimental group ($n = 10$) received regular treatment

services (RTS) from shelter counselors who were trained in MI, whereas the control group, represented by ($n = 10$), only received regular treatment services (RTS). The results indicated that participants who received MI-enhanced RTS were significantly more motivated for change ($p = .029$), as measured through a dichotomous readiness for change motivational variable on an assessment developed by University of Rhode Island Change Assessment. Findings suggest that MI can be helpful in increasing the readiness for change in DV survivors who contemplate leaving abusive relationships.

According to Hughes and Rasmussen (2010), practitioners of MI expect that DV survivors will resist help and therefore utilize specific MI techniques to help DV survivors overcome that resistance. Because resistance to leaving abusers is one of the hallmark characteristics of domestic abuse victims, MI is particularly well positioned to be effective in their treatment. Hughes and Ramussen found that in their pilot study, women in both groups stayed in their abusive relationships because they feared repercussions from their spouse. Women in the MI experimental group, however, reported feeling more empowered to continue with their lives than their experimental counterparts. As such, the MI counseling proved to be more effective. The focus on empowerment and change in this individual therapy forwards the current research in showing the types of interventions that can occur at shelters beyond normal protocols. The success of MI in this regard also suggests its techniques as useful in the development of a curriculum for education and intervention within the faith-based Black community regarding DV, given the resistance of African American women to conventional resources.

Resistance to Conventional Treatment and Help-Seeking Behaviors

External Barriers

Hampton's et al. (2003) content analysis of structural and social contexts within the area of DV indicates that African American women traditionally have been less likely to turn to social, law enforcement, or government agencies for help in their time of need and are more inclined to endure the abuse. Furthermore, this extensive content analysis of DV within the African American community implicates the significance of culture in the resistance to help-seeking behaviors among DV victims. Hampton's et al. examination of factors contributing to resistance to help-seeking behaviors among female DV survivors highlights the influential nature of cultural and spiritual factors to promote increased reluctance of African American women to seek formal help and reach out to others to discuss personal problems. Hampton et al. characterize the cultural and spiritual impact on African American DV survivors as "factors that often trap battered African American women into silence, submission and continued victimization" (p. 535).

Moreover, in a critical analysis of barriers to help-seeking behaviors among DV survivors, research suggests this reluctance is often a reflection of feeling left out of the formal system and lacking learned behavior of survival skills (Bent-Goodley, 2007). In a content analysis of the current literature on DV using an inductive approach to examine the inconsistencies in the literature and issues relative to race and gender, Bent-Goodley (2007) identified several components of external barriers preventing African American women from freely seeking help, such as labeling, gender roles, and stereotypes. The content analysis includes a comprehensive examination of the historical context, socioeconomic status, external barriers, and internal barriers of African Americans as

related to DV. The research includes an analysis of the first national study on DV, conducted in 1975, with 7% of the participants identifying themselves as African Americans. The results of the study concluded that African Americans were more violent in the home than were White Americans. Additionally, Bent-Goodley reported that a replicated study 10 years later found that Black men were twice as likely to engage in intimate partner abuse as their White counterparts. She noted inconsistent results from these studies and highlighted the fact that race by itself did not distinguish violent and nonviolence couples and identified other influences such as environmental stress and structural associations experienced through family disruption, residential mobility, poverty, social dislocation, economic deprivation, unemployment, and population density. Bent-Goodley noted that access to social support systems increased, African American women were abused less than in White families and were more likely to reach out and utilize medical services, thus substantiating the significance of social economic factors pertaining to the help-seeking behaviors of African American DV survivors. Bent-Goodley's research also highlighted their finding that apart from the idea of learned self-survival, the labeling inherent in response to DV is a barrier to help-seeking behaviors in and of itself. The process of identifying oneself and being identified as a DV victim can be perceived as negative and alienating for African American clients (Bent-Goodley, 2001).

Another component of external barriers that serve to discourage battered African American women from help-seeking behaviors is cultural stereotyping. According to Bent-Goodley (2001), numerous studies show that African American women underutilize shelters due to culturally related, underlying stereotypes, and fear of not being welcome.

Bent-Goodley found that, according to this research, the fears of not being welcomed are not completely ungrounded; in fact, shelter workers have been found to operate on the perception that African American women do not need assistance from shelters because they do not sound distressed enough (2001). Furthermore, Bent-Goodley reported that racial stereotypes and the effects of negative labeling of African American women often fuel these perceptions. Among racial stereotypes is the idea that “Black women are hardened, tough, back-talking, strong, permissive, and undeserving of protection, women for whom blows might not be considered cruelty” (Kupenda, 1998, p. 8).

Internal Barriers

Along with the external barriers listed previously, research indicates several internal barriers that serve to discourage African American women from help seeking behaviors. Some of these internal barriers include sexism, gender roles, and racial loyalty. Bent-Goodley (2001) suggests that discussing the prevalence of sexism within the African American community can be viewed as divisive while concomitantly promoting self-imposed limitations and fostering an atmosphere where violence and grow. Hampton et al. (2003) posit that patriarchy clearly operates within the African American community. Accordingly, in order to maintain racial loyalty, many African American women do not report abuse (Bent-Goodley, 2001).

Within the African American culture, gender roles promote sexism. West (1999) suggests that “there are cultural cues that foster the notion that because of the racist oppression suffered by Black men, a sacrificial role is demanded of Black women” (p. 8). Subsequently, African American women may withstand domestic abuse and make a

conscious self-sacrifice while compromising their own physical, psychological, and spiritual health. Bent-Goodley (2001) further supports the observation that African American females are generally socialized to sacrifice their individual desires for the integration and survival of the family unit within society and notes that, therefore, African American women who are abused by their intimate male partners must often sacrifice survival of themselves as healthy and whole individuals for survival of their family. Research explains oppressive racial loyalty as an ingrained feature of the racialized social reality of African American battered women (Bent-Goodley, 2001). These cultural views rooted in racial loyalty deter African American women from engaging in help-seeking behaviors.

The Role of the Black Church in Intervention for IPV

One intervention pathway and resiliency factor for dealing with IPV that is understudied is that of religious involvement in the Black church. The Black church can be defined as the churches in the nation that are predominantly African American. Most of these churches are freedom-focused and politically and socially active as well as spiritually attuned and enriching. In the African American experience, the role of the Black church has traditionally been both liberating and spiritually fulfilling. The church has played a pivotal role in encouraging African Americans' self-worth, liberty, and identity (Lincoln & Mamiya, 1990).

Current research highlights the significance of the African American or Black church as a symbolic center of the community and one of the few social institutions operated and controlled by African Americans (Lincoln & Mamiya, 1990). Additionally,

throughout U.S. history, the Black church has served a range of functions within Black communities, such as individual and collective self-help, racial socialization, and political mobilization (Lincoln & Mamiya, 1990). Contemporary research suggests that African American congregations facilitate a wide range of community-based resources and programs including programs that provide aid to the poor, promote community development, assist families, foster health education, encourage civil rights, and support at-risk youth (Billingsley, 1992; Lincoln & Mamiya, 1990). The research elucidates the protective factors of the church, as a growing body of literature documents links between religious involvement and the health and well-being of African Americans, and suggests that religious involvement in the Black church has been associated with higher life satisfaction, greater feelings of self-esteem and personal mastery, lower levels of depression and psychological distress, lower levels of alcohol and substance use and abuse, and favorable overall physical self-rated health (Ellison et al., 2007). Literature also supports the role of religious involvement in the Black church as reducing feelings of depression and other negative emotions for African Americans, while also mitigating the effect of economic and other social stressors on well-being (Ellison et al., 2007). The following assessment of the positive and negative influence of the Black church regarding the particular problem of DV among African Americans is introduced with a discussion of the significance of religion among African American women.

The Significance of Religion in the Lives of African American Women

Research has shown the significance of religion in the lives of African American women; in fact, African American women are reportedly more religious than European

American women in that they regard religion as more personally significant and attend religious service more than European Americans (Watlington & Murphy, 2006). Furthermore, research purports that African Americans tend to be more religious than Whites from comparable social and economic backgrounds, with patterns extending to the levels of church membership, frequency of church attendance, and levels of participation in other congregational activities as well as nonorganization practices such as frequency of prayer; reading religious materials; religious media consumption; religious beliefs regarding God, scripture, life after death and the Christian doctrine; religious salience; and subjective religiosity and spirituality (Taylor et al., 2004). A review of several comparative studies suggests a strong linkage between religious involvement and mental health outcomes that may be stronger among African Americans than their White counterparts (Krause, 2004; Thomas & Holmes, 1992).

Due to the significant role religion plays in the African American experience, culturally competent researchers have examined the Black church and the intrinsic religiosity (i.e., a personal sense of importance of religion) of its members as a component of community-based intervention for PTSD symptoms of DV victims. Potter (2007) indicates that in the population of African American women who have experienced IPV, the Black church can have a significant impact by enabling them to develop the social support, strong self-esteem, and sense of self-worth that can motivate African American IPV victims to leave an abusive relationship and seek a better life. The church thus plays a protective role for victims of IPV. It also increases the mental health outcomes by reducing the risk of PTSD, depression, and suicidal ideation for African American IPV victims (Watlington & Murphy, 2006).

Astin, Lawrence, and Foy (1993) examined the impact of intrinsic religiosity, measured by a single item on PTSD symptomatology among a sample of 53 abused African American women. In the study, high levels of intrinsic religiosity were shown to be correlated with lower levels of PTSD, as measured by the Impact of Events Scale and PTSD symptoms checklist. Although more research is needed, Watlington and Murphy (2006) underscore a clear indication that in the current research, religious variables are related to less depression, anxiety, and hostility. The Black church plays a major role in opposing DV in the African American community from a culturally competent and strength-based standpoint. In the majority of cases, the church is a protective factor that increases resiliency and improves outcomes (Ellison et al., 2007).

The Protective Function of the Black Church

A significant amount of research provides support for the protective functioning of the Black church. In interviews with 17 African American women on the use of “inner resources” to address DV, Bent-Goodley (2001) explored how the women developed support systems, mobilized resources, identified signs of impending violence, and became resilient. Participation in the Black church provides a “spiritual approach that often supports the restoration of hope, acquiring a more balanced view about justice and injustice, safety and danger, good and evil” (Connor, Davidson, & Lee, 2003, p. 487). The spiritual approach also focuses on “personal and social transformation” as opposed to the medical model characterized by the “relief of symptoms” (Connor et al., 2003, p. 487). The spiritual model provides a more culturally competent approach for African Americans, focusing on comprehensively responding to the troubles and social ills of

individuals and communities through their natural support of networks and inner strength (Bent-Goodley & Fowler, 2006; Martin & Martin, 2002). According to research, spirituality is characterized as evolving during the life span as part of an individual's developmental process and progressing on the basis of cultural influences and previous and current life experience (Bent-Goodley & Fowler, 2006). Furthermore, in the qualitative study conducted by Bent-Goodley (2005), the interviewed women discussed their use of spirituality as a sustaining force and felt strong in their belief that God would protect them.

Several studies of DV have begun to consider the influence of the Black church increasing the likelihood of committing partner violence (Ellison et al., 2007). A study by Manetta, Bryant, Cavanaugh, and Gange (2003), for example, questioned whether traditional Christian values would impede or facilitate empowerment in battered women. Their findings were based on a sample size of 199 parishioners and 57 IPV victims. Results indicated that a significant percentage of participants (51%, in comparison to 24.2% of parishioners) believed that church teachings contribute to an atmosphere that supports IPV. Notably, in a separate study, findings indicate divergent results in that participants who attended church regularly experienced fewer incidences of IPV and acted more rapidly to protect themselves (Wang et al., 2009). In another study by Watlington and Murphy (2006), women who prayed often were found to have fewer depressive symptoms than their nonpraying counterparts. Research studies present evidence supporting both lower rates of IPV in the religious community, and a number of instances where there are higher IPV rates.

Religious and Spiritual Abuse of IPV Survivors Within the Faith-Based Community

As noted previously, African American survivors of DV often turn to their faith-based communities for support, guidance, and safety before they go to social services or to mental or medical care providers and institutions (Bent-Goodley & Fowler, 2006). Despite this general reliance on the Black church and the positive role the Black church plays in the lives of African Americans, many African American women who attempt to address their experiences of DV with leaders of their faith-based communities receive messages to stay in the abusive relationship, with justifications derived from distorted interpretations of biblical scripture (Bent-Goodley & Fowler, 2006). These justifications signify core features of religious abuse. Bent-Goodley and Fowler (2006) suggest that DV can be perpetuated in faith-based communities when “instead of being a source of refuge and order, scripture may become a means of stimulating confusion and anger when it is used to manipulate and control a partner, and reinforce oppressive patriarchal gender roles” (p. 284). Messages from religious leaders may coalesce with messages of the abusers, further subjecting women to “forgive their partners, pray for change, and not ‘abandon’ their relationships” (p. 284). Such religious messages further promote the “violation of spiritual integrity” (p. 284), whereby survivors may eventually begin to question their own faith in their Higher Power. Bent-Goodley and Fowler found that this spiritual damage facilitates a sense of hopelessness, which points to the detrimental act of spiritual abuse.

The Effect of Patriarchal Sanctions on Women

There is some concern that the Black church encourages traditional gender identities that would subordinate women (Hampton et al., 2003). Research conducted by Bent-Goodley and Fowler (2006) found that within the church, African American women may be undermined by religious ideology that frequently delineates male superiority and male privilege as divinely sanctioned. They discovered that many women are rejected by their faith-based leaders when they attempt to address DV in their lives and are encouraged to stay in the abusive relationship with justifications derived from interpretations of biblical scripture. Bent-Goodley and Fowler's research indicated the impact of the Black church regarding DV in a qualitative study that consisted of 122 African American participants who were women. Fifteen percent of these women were younger than 25, 15.3% were aged 26 to 34, 12.3% were aged 35 to 44, 20.5% were aged 45 to 55, 15.6% were aged 56 to 65, and 21.3% were aged 65 and up. The methods utilized were several focus groups using a purposive sample of 19 African American faith-based leaders and congregants, 13 women and 6 men. The findings from Bent-Goodley and Fowler's study indicated three major themes of concern among African American DV survivors: concerns about spiritual abuse, the use of spirituality and religion by others to perpetuate abuse, and the spiritual impact of abuse on the survivor. The research indicates the significant issues of religious and spiritual abuse and "violation of spiritual integrity" (p. 284). While women continue receiving encouragement from religious leaders to forgive their abusive partners, their belief in a higher power and a resistant abuser will not result in a positive outcome, despite the survivors' faith and prayer (p. 284). It is clear that within the Black church, spirituality

and religion can be used as mechanisms to oppress women and resign them to abusive relations.

Legitimization of IPV

Although much research supports the protective functioning of the Black church, several studies have also begun to consider the possible influence of African American faith-based institutions in legitimating the act of committing partner violence (Ellison et al., 2006). In fact, in their review of research, Ellison et al. (2006) report finding much speculation that, particularly among certain conservative denominations that emphasize male headship, traditionalist or patriarchal religious ideologies may legitimate or fail to condemn the practice of DV adequately. They found, however, that in the current research, studies of DV that have examined the role of religion and the Black church have not identified substantive support for this claim. It seems, therefore that the Black church is in a position to benefit from a curriculum to educate its leaders regarding acknowledgement of and responsiveness to the problem of DV.

Domestic Violence Programs and Issues of Diversity

In her research on DV among African American women, Grovert (2008) reports that DV is the leading cause of death for this population. With this in mind, the intervention, protection, and treatment of African American women is an issue of critical concern. Hampton et al. (2008) indicate that the response of law enforcement to African American women's calls for help are variable, with more white officers making arrests on behalf of the women than Black officers but less officers overall making these arrests,

with only 26% for Black women and 36% for white women. In addition, Black women report fewer positive experiences of support and protection in the court system. Hampton et al. report that Black women feel fearful of their aggressors in similar numbers to other ethnic groups, but they feel more guilt for prosecuting their attackers. The authors assert that one reported reason for this is that Black women feel guilty for increasing the number of Black men in prison. As such, they feel that they are letting down their community by being disloyal even though they are legitimately seeking help for their own protection and quality of life.

Additionally, among many cultural assumptions is the belief that Black women are self-sufficient, strong, and empowered (Kupenda, 1998, p. 8). This view contrasts directly with battered Black women's experiences of trauma from emotional and physical pain caused by DV. These stereotypes can play into both their advocates' and their own perceptions of the situations they face, causing victims to feel resistant to seeking help, and causing advocates to feel that these DV survivors do not need any help due to the stereotypes of being "self-sufficient and strong" (Kupenda, 1998, p. 8). With this in mind, it is clear that Black women have unique concerns and issues at play when they enter DV intervention programs. Hampton et al. (2008) suggest that a *restorative justice approach* would address these concerns directly and allow for growth and transformation that is truly empowering and is necessary. This approach to justice focuses on the needs of the victims and the offenders as well as the involved community rather than merely satisfying abstract legal principles. In this approach, victims take a more active role in the process, while offenders are encouraged to take responsibility for their actions. Hampton et al. also advocate for a systemic approach to care that coordinates the efforts of all

personnel involved in the women's cases; thus, law enforcement, mental health care providers, doctors, and legal representatives would be in contact and would coordinate response to the women's cases. The authors assert that this would achieve a high result of assistance for DV survivors.

Grovert (2008) identifies two hallmarks of domestic abuse: social isolation and severe experiences of victimization. *Social isolation* results when abusers prevent their victims' contact with family and friends who might help the victims or intervene on their behalf. Women may not realize that this is occurring, and once they are accustomed to this social isolation, they may expect it to continue and seek less help than they need. As Grovert notes, severe victimization leads to feelings of disempowerment, unworthiness, and helplessness. When these normative experiences for all battered women are combined with the cultural isolation and inadequacy of helping services and programs specifically for African American women, the great necessity for culturally sensitive programs and interventions is clear. Because African American women respond well to culturally appropriate programs, increases in the numbers and diversity of these interventions are likely to be highly beneficial.

Conclusion

This literature review indicates that IPV is a prevalent and serious problem in the African American community. Although interventions exist, most are not culturally sensitive. Although often hampered by allegiance to a patriarchal paradigm, the Black church, in its role as a protective factor for survivors of DV, is culturally sensitive and thus embodies significant potential as an effective intervention for this population. The

curriculum described in the following chapter and presented in Appendix A is intended to educate religious leaders about IPV and equip them to provide effective help to IPV victims in their congregations.

CHAPTER III: PROJECT AND IMPLEMENTATION FACTORS

The availability of interventions and access to protective resources is not lacking and therefore cannot be identified as the problem for the epidemic of DV in the Black community. Many interventions are available to assist African American IPV victims, including DV shelters, various approaches and orientations of therapy, comprehensive social services, and much more; however, the problem lies in the lack of culturally relevant interventions for this particular demographic. The use of religion and spirituality has been consistently documented in the research as a traditional means of coping in the African American community. Religious institutions have occupied a significant position in the lives of African Americans (Watlington & Murphy, 2006), particularly among African American women, who tend to be socialized into the Black church at a younger age than African American men and are more likely to use prayer to cope with obstacles than African American men (Watlington & Murphy, 2006). This research not only points to the importance of faith-based institutions in the Black community but also suggests the significance of examining and utilizing religious institutions as culturally relevant interventions for DV. This is an approach particularly critical for African American women, who tend to rely on religious and spiritual means of assistance more so than traditional mental health services (Watlington & Murphy, 2006). Additionally, in a quantitative study using Texas shelter data with a sample size of 5,708 African American women, the data indicated that African American women were more likely to call a minister or the police when facing DV, when seeking outside services at the point when the violence becomes life threatening (Thompson & Basile, 2000).

The significance of the Black church is clear; however, research indicates ways in which ill-informed but well-intentioned pastors and religious leaders use spirituality and religion to perpetuate violence through spiritual and religious abuse (Bent-Goodley & Fowler, 2006). A great need exists for educating both religious leaders and congregants experiencing DV about the specific ways in which spirituality and religion can be manipulated to become a tool of oppression for women (Bent-Goodley & Fowler, 2006), subjecting African American DV victims to abuse at the hands of their intimate partners. A need also exists for educating faith-based communities and their religious and spiritual leaders on culturally competent approaches to identifying, assessing, and responding to DV (Bent-Goodley & Fowler, 2006). Highlighting the ways in which spiritual and religious abuse affects victims of DV, women and children, and the impact of family violence on the faith environment indicates a strong and evident connection that, if emphasized, may serve to encourage religious and spiritual leaders and congregants to gain a better understanding of IPV (Bent-Goodley & Fowler, 2006).

The project presented here helps to provide the training curricula to educate faith-based leaders about both DV and spiritual and religious abuse, and it is a manual that provides faith-based leaders with the tools to educate African American female DV victims on issues related to DV, definitions of types of abuse, warning signs and red flags, behavioral cycles, resources, safety plans, and healthy social support network development. Social support systems are fostered throughout the 12-week workshop.

The project was created from my personal experience working with DV survivors at a local DV Shelter and hearing the personal struggles of each woman. The project was also created out of my review of the literature, my clinical background in community

mental health, and my experience working with survivors of DV and sexual assault. A detailed description of the development of the project is presented in this chapter along with an extensive description of the intended audience. The project is intended to be used by pastors, and other qualified religious leaders. In order to introduce the project, a detailed outline identifies each step involved.

Development of the Project

During my undergraduate years in college, I was afforded the opportunity to volunteer as a State Certified Rape Crisis Advocate with the Valley Trauma Center (VTC). After undergoing an extensive 60-hour DV training and obtaining a state certification, I was seemingly thrown into a world of the most traumatic cases I had ever known at that stage of my life. I would facilitate emotional healing and empower DV survivors who had endured significant trauma and many who suffered from psychological illnesses. In providing accompaniment and advocacy to these survivors, I discovered my passion for fostering emotional healing and wholeness in so many broken spirits. I soon dedicated my life to helping the “walking wounded,” which landed me at a Christian-based DV shelter, where I learned about the plights of African American DV survivors. I also discovered that there was a lack of education about DV that had prevented the Black church from being a momentous force against DV in the Black community. Being a Nigerian woman myself, rooted in the Christian faith, this experience hit close to home, and I decided to embark on a mission to assist the church in fostering the education, spiritual and emotional healing, and empowerment, that so many

of these women need to combat DV, and thereby help to disrupt the intergenerational cycle of abuse that is rampant in the Black community.

The manual that I created for this project (see Appendix A) was developed from my clinical background in community mental health and my volunteer experiences as an advocate for victims of DV and sexual assault. I developed the manual in consultation with both my graduate project chair and committee members, and my clinical supervisor. The organization of the manual follows a structure that begins with providing faith-based leaders with an in depth review of DV, spiritual and religious abuse, and the significance of the Black church in intervening. Additionally, each of the weekly group sessions are described in detail with specific instructions for religious group leaders. Check-In procedures, group rules, assignments, activities, and prepared discussion questions are included and clearly outlined in the manual to allow for ease of use among the group facilitators.

Intended Audience

This project is intended as a manual for faith-based leaders working with African American female adult DV victims within their churches. The manual, however, can also be utilized by religious-based clinicians and therapists collaborating with churches in the Black community. The purpose of the project is to serve members in the church congregation and requires for religious leaders to make an informed decision with regard to where to facilitate the group within the church setting.

Personal Qualifications for Users of the Manual

The manual is intended to be used by qualified religious and spiritual leaders who serve in the churches where they will be conducting the DV workshops. Although the manual is created to be accessible and easily understandable to religious leaders who do not have experience counseling or facilitating psychoeducational and process-oriented groups, prior experience with religious counseling and facilitating groups would enhance the credibility of the group facilitator, and thereby promote trust among group members.

Environment and Equipment

Religious leaders facilitating the group should take care to conduct the group in a safe space that would cater to confidentiality within the church setting. The sensitive nature of DV calls for an environment that is tailored to privacy and safety within the church. The group should be conducted in a closed room that allows for the use of tables and chairs corresponding to the number of members within the group. A level of security should be maintained that ensures that what is said within the group is not easily heard beyond the walls containing the group. To further promote safety and security, it would be wise for group leaders to implement white noise systems to block out the potential for the group to be heard by church members outside of the group room. Confidentiality contracts should also be implemented to reduce the potential for leakage of group experience to members outside of the group room.

Project Outline

The project is broken down into a 12-week group series. The weekly topics include an introduction to DV with detailed material on myths and facts about DV, the different types of abuse, and behavioral patterns of abuse. Topics also include material on the victim's perspective and the reasons many women stay in violent relationships as well as safety planning strategies. Understanding the perspective of the perpetrators of violence, characteristics of male abusers, and the impacts of abuse on children and parenting after experiencing abuse are also topics for group discussion. The last group sessions includes a sharing of experiences, reflecting on knowledge gained, and providing feedback to religious group facilitators. Each group session is structured to include:

1. Individual Check-In, Syllabus Review, Group Rules Review
2. A recap of the previous week's topic and positive and scriptural affirmation reading
3. Presentation of information or material about new topic
4. Activity related to material
5. An opportunity to share personal experiences with others in group
6. An inspirational and biblically based affirmation to reflect upon during the week

CHAPTER IV: CONCLUSION

Summary

The purpose of this project was to create an instructors' manual and group curriculum designed for faith-based leaders to both educate and increase IPV awareness in the faith community. This culturally relevant IPV intervention was developed to assist religious leaders in facilitating psychoeducational/ process groups in order to provide education, empowerment, and guidance to African American women experiencing IPV. The manual targets faith-based institutions prominent in the African American community and has a three-fold focus: (a) training religious leaders on DV as well as religious and spiritual abuse; (b) educating African American female members of the church on DV, including issues related to definitions, warning signs, behavioral cycles, resources, safety planning, and social support development; and (c) offering scriptural and spiritually based approaches to promote emotional and psychological healing, resilience, and wholeness. The manual (see Appendix A) outlines a 12-week DV workshop that can be implemented directly in the predominantly African American church setting. The manual equips religious group leaders with psychoeducational material, discussion and process questions, activities geared toward increasing awareness and furthering discussion. It also includes guidance for structuring group work geared toward ensuring that the group members understand, learn, process and apply the material in their lives.

Discussion

Through the development of my project, I found that the topic to address in my manual manifested within me almost effortlessly. I had recognized a vital need for

culturally competent healing, education, and support to intervene in the DV epidemic pervasive in the Black community. The difficulty was in approaching the topic with sufficient sensitivity so as not to offend or accuse predominantly African American churches with regards to their role in addressing DV. To elucidate the well-intentioned nature of many religious leaders, while also clarifying the issue of religious and spiritual abuse, was not an easy venture. I believe it is crucial to tread lightly in these areas, providing ample proof of the positive contribution that the Black church has made in the Black community while also articulating the research evidence identifying the prevalence of IPV in the religious community and the experiences of DV survivors desperate for help, who confide in the church only to be met with further abuse on a spiritual level, as spiritual and religious abuse threaten the spiritual integrity of the victim. I was greatly concerned with avoiding appearing accusatory of the Black church, as the church has been a pinnacle of the spirit and soul of the Black community, evoking transformational healing in the depths of racism, discrimination, self-hatred, and helplessness.

Future Research

Much research has yet to be conducted in the continuing discussion regarding the Black church and IPV and further addressing the significance of church support, DV-educated and equipped religious leaders, and overall awareness in the Black community toward ending the plight of DV. Research is needed to address the significance of the Black church in educating young African American women and men about healthy relationships and living as healthy and positive role models for their children; moreover, research needs to address the church's role in recognizing DV as a community issue. The

potential of the church's role must be understood in terms of guiding faith-based DV survivors in obtaining wholeness within through spiritual and religious healing and lifestyle changes in order to alleviate codependency and attachment to unhealthy and abusive relationships at the expense of personal well-being. My review of the literature revealed a lack of research regarding the use of the Black church in the prevention of abusive relationships particularly in terms of addressing indicators of potential abuse and providing resources to combat issues of social isolation, alcohol abuse, low-self esteem, anger management, unemployment, and other dynamics indicative of potential victimization and perpetration within the Black community. African American DV victims need a better understanding of what a healthy relationship looks and feels like; the education to know what is unhealthy; and the emotional and spiritual inner strength, self-esteem, and self-efficacy to settle for nothing less.

In the near future, I plan to have my project evaluated by clinical professionals who work with DV victims in the Black community as well as pastors and faith-based leaders serving in Christian-based churches in this community. The feedback from both psychological and religiously based sources would allow for the fine-tuning I need to develop the utility of my manual for future publication and implementation in predominantly African American churches worldwide. In addition to the manual, I would like to create a church-based DV video that introduces the issue of DV in the Black community and presents the DV workshop in an engaging manner that increases awareness and evokes desire for change and a will to help, all the while not casting blame or "stepping on the church's toes." The video will elucidate the need, provide a call to

action, and a way for the Black church to combat DV and, in turn, better the African American community.

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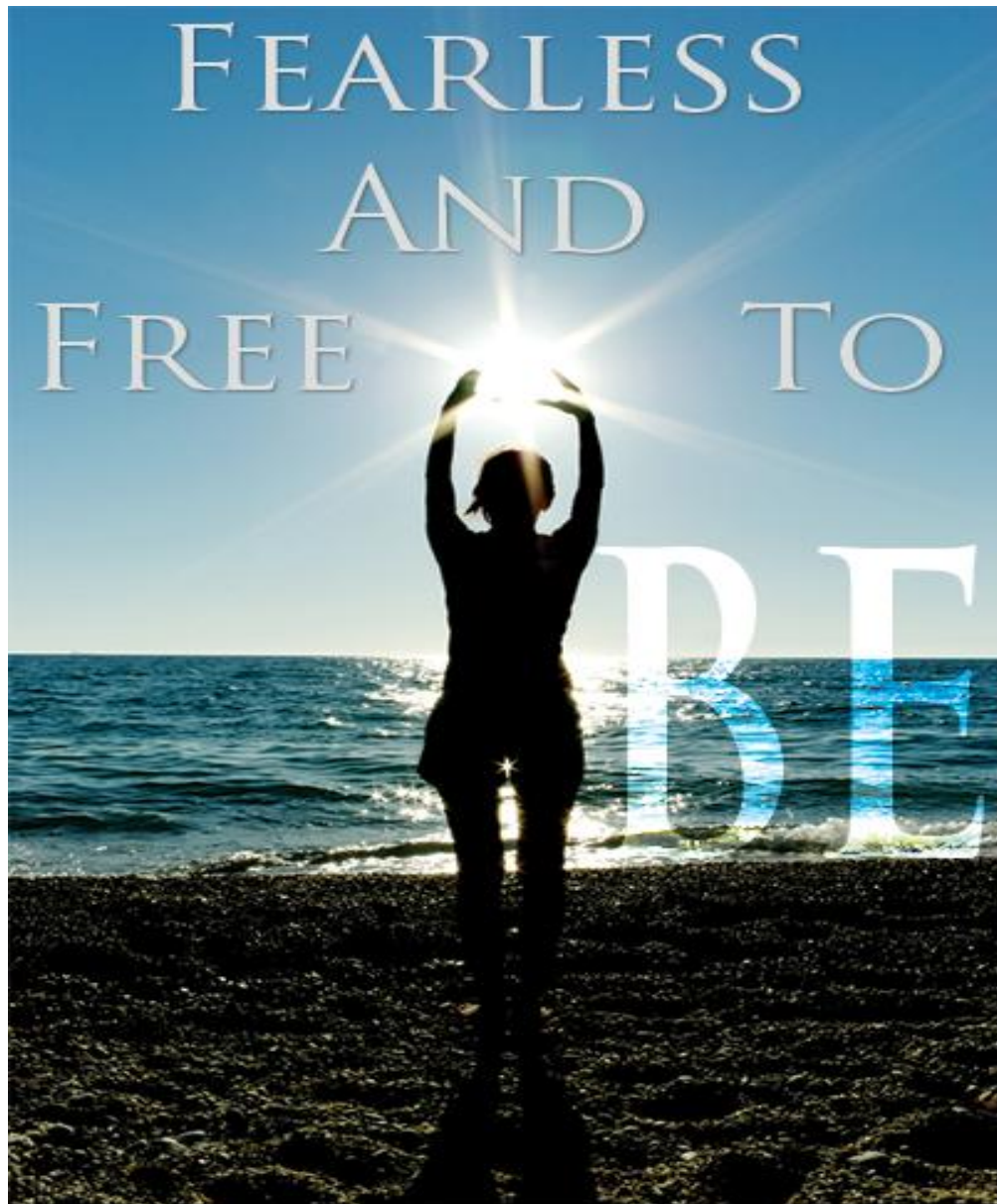
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APPENDIX A

Fearless and Free to Be Group Curriculum: A Faith-Based IPV Intervention With Instructor's Manual and Group Curriculum



FEARLESS AND FREE TO BE

A FAITH-BASED INTIMATE PARTNER VIOLENCE INTERVENTION WITH
INSTRUCTOR'S MANUAL AND GROUP CURRICULUM

Created by: Sarah Gbadebo

Introduction

Fearless and Free to BE is a faith-based (Christian) intervention for intimate partner violence (IPV) in the Black community. IPV is a serious issue among members of the Black community. Given the historical role the church has played in tending to the needs of the Black community, the church has the potential to intervene in this community issue and serve as a protective factor against IPV. The church has traditionally served as a positive force and source of healing in the African American community, and presently, there is an impetus for the church to respond to the call and take action.

Understanding that domestic violence (DV) is a relationship problem, the project is limited in that it attends to only one component of the problem, catering primarily to African American female victims of domestic violence while neglecting to tend to African American males. Further research is necessary to address the needs of African American men in the church. Included in the Fearless and Free to BE intervention program is an instructor's manual and group curriculum designed to equip religious and spiritual leaders with sophisticated and comprehensive tools to understand, identify, assess, and respond to domestic violence. The instructor's manual is intended to be used within the church setting by qualified faith-based leaders to facilitate groups for adult female domestic violence survivors who are members of the church congregation. The group facilitators will conduct a total of 12 weekly sessions, each roughly 90 minutes in length, to impart to survivors with domestic violence awareness some skills to recognize patterns of abuse in relationships, education on scriptural and religious abuse as it pertains to domestic violence, safety planning, empowerment, and spiritual healing. The

group facilitators should make an informed decision with regards to where they will facilitate the group within the church setting, ensuring safety and group confidentiality.

The Fearless and Free to BE Group curriculum's weekly topics include an introduction to domestic violence with detailed material on the history of DV, myths and facts about DV, the different types of abuse and behavioral patterns of abusers, and biblically based components of healthy and wholesome relationship dynamics. Topics also include material on the victim's perspective and the reasons that many women stay in violent relationships as well as safety planning strategies. Additional topics include examination of the perspective of DV perpetrators, characteristics of male abusers, impacts of abuse on children, and parenting after experiencing abuse. The last group session of the 12-week series includes sharing of experiences, reflecting on knowledge gained, and providing feedback to religious group facilitators. All group sessions include an individual check-in, a syllabus review, a review of the group's rules, a recap of the previous week's topic, positive and scriptural affirmation reading, a presentation of information or material about the new topic, an activity related to the material, an opportunity to share personal experiences with others in group, and an inspirational quote to reflect upon during the week

OVERVIEW OF FEARLESS AND FREE TO BE

GROUP CURRICULUM

Session 1: Wks 1&2

Instructions to Group Facilitators

In the first session, the purpose, overview, structure of the group, group rules, and course outline are presented. Most of the session is spent presenting information, verifying that the group members understand the information, and handing out copies of group syllabi and group rules. Then the facilitator takes the group members through an introductory exercise and a presentation of the domestic violence True/ False Quiz, definition of domestic violence, and Myths and Facts.

Suggested Commentary

(Present the following script, or put this in your own words.)

Purpose and Overview

The purpose of Fearless and Free to BE is to:

1. Learn skills to recognize patterns of abuse in relationships
2. Learn safety planning skills
3. Gain a comprehensive understanding of relationship abuse dynamics and the different types of abuse, including spiritual and religious abuse
4. Build self-esteem and self-worth through faith development and spiritual growth
5. Develop skills to access internal resources, develop a healthy social support network, and utilize external resources

Outline of Wks 1 &2:

- Instructions to Group Facilitators
- Opening Prayer
- Scriptural Affirmation Quotes
- Suggested Commentary
- Purpose and Overview
- Group Rules
- True or False Quiz
- Myths and Facts of DV
- Defining DV/ Stats
- Member Introductions
- Scriptural Affirmations
- Positive Affirmations

Group Rules

1. **Group Safety:** No violence, threats, derogatory comments, or foul language toward the facilitator and group members are allowed. It is imperative that members perceive the group as a safe atmosphere to share their experiences and feelings without threats, physical harm, or emotional damage.
2. **Confidentiality:** Group members should not discuss outside the group what group members say during the group sessions. Particularly, names of group members, and experiences discussed are not to be repeated outside of the group. While members are free to discuss their own personal inner experience, it is crucial that members refrain from sharing the experience and stories of other members and do not use names of members outside of the group. There is no exception to this component of the rule, as confidentiality is implemented to prevent imminent danger to any member of the group. There are, however limits to confidentiality. Health laws in the State of California govern how and when professionals must report certain actions to the proper authorities. Such actions include any disclosure indicating the knowledge of child abuse or the intent of homicide or suicide. Reporting abuse of these persons supersedes confidentiality laws involving group members and group facilitators. Similarly, if group member makes threats to physically harm or kill another person, the group leader is required, under the Tarasoff Ruling, to warn the intended victims and notify the police.
3. **Check-Ins:** Check-ins are to be performed by each group member in the beginning of every meeting. Each group member is given a Feelings Form [see IDV 0B: Check-In: “How Do You Feel Today,” in Appendix B] that lists several feeling words. Members are to circle the feeling word that they are experiencing in the present moment and articulate what they are feeling and a brief explanation for their feelings. Members use the same sheet each group meeting and should use a different colored pen or highlighter to mark the feelings each session. Each member should also provide each date in the same color corresponding with the date when particular feelings words were marked. Group members must also put their names on the forms. The basis is to allow members to visibly track the differences in their Here and Now feelings and their awareness of their inner experience as the meetings progress. After Check-Ins are completed in the beginning of session, group members will always need to collect the Feelings Forms from the group members. The group facilitator will need to file group members Check-Ins in a secure location onsite, in a locked file cabinet for confidentiality reasons, and must always remember to bring in each of the Feelings forms and give them back to the appropriate group member each session

only for the Check-In portion of the meeting. Again, after the Check-In session is over, group facilitators must collect and securely store the Feelings Forms.

4. **Homework Assignments:** Brief homework assignments will be given each week. The homework will never include tangible or physical paperwork, in order to ensure the safety of each member who may be put in imminent danger by bringing evidence of their participating in a domestic violence group. However, homework will consist of mental reflections of class discussions and activities, reflections of daily affirmations, safety planning, social support development, and utilization of available resources.
5. **Absences and Cancellations:** Members should call or otherwise notify the group facilitator in advance when they cannot attend a session. Because of the amount of material presented in each session, members must not miss more than three sessions. If a group member misses more than three sessions, she would not be able to adequately learn, practice and apply the concepts and skills taught in the group. She can continue to attend the group sessions but will need to make up the specific missed sessions during the next group series.
6. **Timeout:** The group facilitator reserves the right to call for a timeout or a group prayer. If a group member's affect begins to escalate in extreme anger, depression, hostility, and/or any otherwise disruptive emotional display that impedes the progression of the group, the group facilitator will ask that member to take a timeout from the topic and the discussion. This means that the member, along with the rest of the members of the group, will immediately stop talking about the issue that is causing the member's emotional dysregulation. If the member has escalated to the point that she cannot tolerate sitting in the group, the leader may ask the person to leave the group for 5 to 10 minutes or until she can cool down. The group member is then welcomed back to the group, provided she can tolerate continued discussion in the group. Failure to comply with the timeout rule may lead to termination from the group.

Introduction to Domestic Violence: Historical Background

Historically, laws have sanctioned spousal abuse and, more specifically, wife abuse. The expression "Rule of Thumb" came from the old English legal system which stipulated that the wife was the property of her husband and that chastisement of her was his responsibility and right. Thus a husband could take whatever means he saw fit, as long as the instrument of punishment was no thicker than his thumb.

The old Napoleonic Code stated: “A women and a walnut tree should be beaten every day.”

History has revealed that over one million women were executed as witches and were victims of atrocities for having miscarriages, for adultery, and for speaking out against men and doctrines of the church.

Encyclopedia of Domestic Violence, pg. 661, by Nicky Ali Jackson

Defining Domestic Violence: Some Operational Definitions

Domestic abuse, also known as intimate partner abuse or as spousal abuse, occurs when one person in an intimate relationship or marriage tries to dominate or control the other person. Whenever one person uses force to control or hurt another person’s body, mind, or spirit—this is abuse. Domestic abuse that includes physical violence is called *domestic violence* or *intimate partner violence*.

Domestic violence and abuse are used for the purpose of gaining and maintaining total and complete control over you. A perpetrator uses fear, guilt, shame, and intimidation and manipulation to maintain control over you. Your abuser may also threaten you, hurt you, or hurt those close to you, including your children.

Domestic violence and abuse does not discriminate. It occurs with heterosexual couples and in same-sex partnerships. It occurs within all age ranges, ethnic backgrounds, and economic levels. Abusive behavior is never acceptable, whether it is coming from a man, a woman, a teenager, or an older adult. You deserve to feel valued, respected, and safe.

Domestic violence does not go away on its own. It tends to get worse and become more frequent and more severe with time. The effect on children from witnessing the violence can be devastating, and without intervention can cause severe problems.

Adapted from www.ucdmc.ucdavis.edu/hr/hrdepts/asap/.../Domestic_Violence.pdf

Defining Spiritual & Religious Abuse and the Unique Role for Leaders to Respond to Domestic Violence

Spiritual and religious abuse is something that does occur in religious institutions. While there are many faith-based, religious leaders who continue to be a source of spiritual counsel and ensure the well-being of their congregant members, there are ways in which well-meaning leaders unintentionally facilitate spiritual and religions abuse. In many cases, patriarchal ideologies that sanction male dominance and female submissiveness in faith communities may legitimate or fail to adequately condemn domestic violence, despite the severity and prevalence of the issue (e.g., Nason-Clark, 1997, 2000). Strong beliefs about the sanctity of marriage and the vows taken before God may be upheld in

the face of a woman's personal safety. There is a lack of awareness and understanding about the epidemic of domestic violence in the Black community. The church, with powerful and historical curative presence in the Black community, has the power to address the issue of violence, and intervene. Studies have shown that indirect positive effects of the Black church (i.e., increased social support through rituals, sermons, and informal social interactions) reduced likelihood of substance abuse and decreased risk of psychological problems among domestic violence survivors in the Black community. Clearly, the church can serve as a protective factor against the perpetration of domestic violence (Ellison & Anderson, 2001). There is a need for church leaders and congregants to educate themselves about domestic violence and enhance their understanding of how congregants are affected by domestic violence, how spiritual and religious abuse affects survivors of domestic violence, both women and children, and the impact of family violence on the faith environment, with congregants who may perceive the pandemic of domestic violence as either acceptable or largely ignored and under-acknowledged within the faith community. With further education and awareness of the specific ways in which the church "can have a positive impact on families who are being destroyed by the vestiges of violence and oppression" (Bent-Goodley & Fowler, 2006, p. 292), faith-based leaders can be fully equipped to fuel the movement of eradicating domestic violence in the faith community.

By facilitating DV awareness and identifying specific ways that spirituality and religion can be manipulated as instruments of oppression, women can be empowered and affirmed that it is not their spiritual integrity that is in question but the very ways in which spirituality can be inadvertently used as a tool of oppression (Bent-Goodley & Fowler, 2006). Religious leaders can have the unique role of responding to the issues of domestic violence and an impetus for action by exposing the violence for what it is, facilitating discourse to challenge gender oppression associated with distorted misinterpretations of scripture, and fervently addressing an issue within the faith community.

As part of our collective self-recovery African Americans must once again courageously interrogate religious and spiritual practice that stands in the way of healthy self-esteem while simultaneously seeking out those forms of religious worship and spiritual practice that affirm the integrity of our being (Potter, 2007, p. 117)

Handouts

- IDV 0: Course Outline
- IDV 0A: Group Rules
- IDV 0B: Check-Ins

- IDV 0C: Positive and Spiritual Affirmations
- IDV 1A: True or False Quiz
- IDV 1B: Defining DV
- IDV 1C: Myths and Facts
- IDV 2A: Types of Abuse
- IDV 2B: DV and the Church
- IDV 2C: Religious and Spiritual Abuse

Topics for Group Discussion

1. Provide an overview of IDV 0-Course Outline, discussing the purpose and structure of the group.
2. Review IDV 0A: Group Rules, being sure to confirm that each member in the group acknowledges and agrees to the group rules.
3. Review IDV 0B: Check-Ins, ensure that each member is aware Check-Ins are to be done in the beginning of each group meeting.
4. Have the group member complete IDV 1A: True or False quiz to the best of their abilities prior to any new information. After group members complete the quiz, go over each answer with the group.
5. Go over handout IDV 1B: Defining DV and allow members to articulate their idea of what domestic violence is. Ask the group members to reflect on the historical context of DV and what it means to them.
6. Go over handout IDV 1C: Myths & Facts and ask the group members to try to determine and articulate the myths from the facts before proving group members with the answers
7. Go over handout IDV 2A: Types OF Abuse and allow members to provide examples of different types of abuse
8. Go over handout IDV 2B: DV & the Church and allow members to articulate their thoughts and beliefs and experiences as it pertains to the church and domestic violence in their specific experiences
9. Go over handout 1DV 2C: Religious and Spiritual Abuse

Closing

- Opportunity to share personal experience with others in the group
- Selected readings from scriptural and faith-based daily affirmations
- Homework assignment
- Closing prayer

OVERVIEW OF FEARLESS AND FREE TO BE GROUP CURRICULUM

Session 2 : Wks 3&4

Instructions to Group Facilitators

This session teaches group members about the dynamics of domestic violence, the power and control wheel, and the cycle of violence. It assists group members in identifying and understanding patterns of abuse. Begin this session with an opening prayer. Immediately after, have each group member provide a brief group check-in (a report of predominant current emotion).

Following check-in, facilitate affirmation readings and then proceed to recap previous week's topic and follow up on any homework assignment from the last week.

Suggested Commentary

(Present the following script, or put this in your own words.)

Recap Previous Week:

Purpose of Fearless and Free to BE, group rules, previous week topic-historical context of DV, operational definitions, myths and facts, types of abuse, spiritual and religious abuse, homework assignment follow-up.

Explaining the Check-In Procedure

Go over instructions for individual check-ins, affirmation readings, and necessity for opening and closing prayers

Outline of Wks 3&4

- Instructions to Group Facilitators
- Opening Prayer
- Group Member Check-ins
- Scriptural Affirmation Quotes
- Suggested Commentary
- Review of Previous Week's Material
- Power & Control Wheel
- Equality Wheel
- Healthy Relationships
- Positive Affirmations
- Closing Prayer

Handouts

- BTC 1A: Dynamics of Power & Control
- BTC 1B: Power & Control Wheel
- BTC 1C: Power & Control Wheel Wkst 1
- BTC 2A: Cycle of Violence
- BTC 2B: Cycle of Violence Wkst 1
- BTC 3A: Equality Wheel
- BTC 3B: Healthy Relationship Article 1

Topics for Group Discussion

1. Facilitate exploration and inquiry of group's perception of the underlying components of DV.
2. Go over handout BTC 1A: Dynamics of Power & Control. Allow members to share their examples or thoughts on components of the dynamics of Power & Control
3. Go over handout BTC 1C: Power & Control Wheel. Allow members to share their understanding of each component of the wheel and their thoughts, reflections and examples.
4. Go over instructions for BTC 1C: Worksheet Vignette. Have members take turns reading a vignette and allow members first to identify and write down the type of power and control from the wheel and then substantiate it with examples from the vignette.
5. Go over BTC 2A: Cycle of Violence. Have members take turns reading the quotes and scenarios in BTC 2B: Cycle of Violence Wkst, and allow members to discuss their answers.
6. Allow members to share and explore their perceptions, feelings, examples, thoughts about what makes a healthy relationship.
7. Go over handout BTC 3A: Equality Wheel. Proceed with BTC 3B: Worksheet Article similarly to activity in step #4. Allow members to reading article "Equally Yoked" and identify components of the Equality Wheel found in the article and substantiate with examples from the article.

Closing

- Opportunity to share personal experience with others in the group
- Selected readings from scriptural and faith-based daily affirmations
- Homework assignment
- Closing prayer

OVERVIEW OF FEARLESS AND FREE TO BE GROUP CURRICULUM

Session 3: Wks 5&6

Instructions to Group Facilitators

This session offers group members teaching about the reasons domestic violence survivors often stay in abusive relationships, extensive teaching of safety planning, provision of available resources and how to access resources, and social support development. It assists group members in gaining awareness and insight into their struggles in leaving abusive relationships, how to refute distorted and false beliefs about their selves as they relate to their abuse, how to refute cognitive distortions as they relate to their abuse, and learning skills to obtain measures for safety. Begin this session with an opening prayer. Immediately after, have each group member provide a brief group check-in (a report of predominant current emotion). Following check-in, facilitate affirmation readings, and then proceed to recap previous week's topic and a follow up on any homework assignment from the last week.

Suggested Commentary

(Present the following script, or put this in your own words.)

Recap Previous Week:

1. Dynamics of Power & Control in abusive relationships, Power & Control Wheel, Equality Wheel, Healthy Relationships, homework assignment follow-up.

Outline of Wks 5&6

- Instructions to Group Facilitators
- Opening Prayer
- Group Member Check-ins
- Scriptural Affirmation Quotes
- Suggested Commentary
- Review of Previous Week's Material
- Why We Stay
- Safety Planning
- Positive Affirmations
- Closing Prayer

2. Explain the check-in procedure.
3. Go over instructions for individual check-ins, affirmation readings, and necessity for opening and closing prayers.

Handouts

- UTV 1: Self Reflection/Why I Stayed
- UTV 2A: Reasons Why She Stays
- UTV 2B: Why Doesn't She Leave Role-Play Script
- UTV 3A: Safety Planning Check List
- UTV 3B: Questions About Leaving

Topics for Group Discussion

1. Allow members to complete handout UTV 1: Self Reflection/Why I Stayed and voluntarily share their reflections. Facilitate exploration of group member perceptions of why women often stay in abusive relationships.
2. Go over handout UTV 2A: Reasons Why She Stays and facilitate open discussion on thoughts, reflections, or examples of each of the reasons.
3. Facilitate group activity UTV 2B-Role Play Script. Allow members to pick a role to play from the script and act out the role-play. Facilitate open discussion of the role-play, allowing members to identify the reasons the DV victim in the script stayed in her abusive relationship. Allow members to write down the answers on their handout.
4. Go over handout UTV 3A: Safety Planning Check List and facilitate open discussion regarding what should be included in a safety plan.
5. Go over handout UTV 3B: Questions About Leaving and facilitate dialogue about common questions and concerns about leaving abusive relationships, accessing available resources.

Closing

- Opportunity to share personal experience with others in the group
- Selected readings from scriptural and faith-based daily affirmations
- Homework assignment
- Closing prayer

OVERVIEW OF FEARLESS AND FREE TO BE GROUP CURRICULUM

Session 4: Wks 7&8

Instructions to Group Facilitators

This session teaches group members about the characteristics of an abuser and common myths about DV perpetrators and allows group members to apply their new knowledge to vignettes of realistic scenarios. Begin this session with an opening prayer. Immediately after, have each group member provide a brief group check-in (a report of predominant current emotion). Following check-in, facilitate affirmation readings and then proceed to recap previous week's topic and follow up on any homework assignment from the last week.

Suggested Commentary

(Present the following script, or put this in your own words.)

Recap Previous Week:

1. Reasons why many women choose to stay in abusive relationships, safety planning, homework assignment follow-up.
2. Explaining the check-in procedure
3. Go over instructions for individual check-ins, affirmation readings, and necessity for opening and closing prayers

Handouts

- EA 1: Myths About Abusers
- EA 2: Characteristics of Abusive Men

Outline of Wks 7&8

- Instructions to Group Facilitators
- Opening Prayer
- Group Member Check-ins
- Scriptural Affirmation Quotes
- Suggested Commentary
- Review of Previous Week's Material
- Identifying Abusers
- Countering Myths
- Vignette on Abusers
- DV Abuser Quiz
- Positive Affirmations
- Closing Prayer

- EA 2A: Characteristics of Abusive Men
Wks 1
- EA 3: Into the Mind of a DV Perpetrator
True or False Quiz

Topics for Group Discussion

1. Provide group members with EA 1: Myths. Facilitate open discussion about the myths and group members' thoughts, reflections, about the myths.
2. Go over handout EA 2 and facilitate open discussion about the characteristics of abusers. Go over handout BTC 1C: Power & Control Wheel. Allow members to share their understanding of each component of the wheel, their thoughts, reflections and examples.
3. Go over instructions for EA 2A Worksheet vignette and allow members to take turns reading each vignette and then allow members to identify examples of characteristics of abusive men in the vignettes.
4. Go over instructions for EA 1: Quiz. Allow each member to complete the quiz on their own. After members have completed the quiz, facilitate a collective review of the answers.

Closing

- Opportunity to share personal experience with others in the group
- Selected readings from scriptural and faith-based daily affirmations
- Homework Assignment
- Closing Prayer

OVERVIEW OF FEARLESS AND FREE TO BE GROUP CURRICULUM

Session 5: Wks 9&10

Instructions to Group Facilitators

This session teaches group members about the effects of violence in the home and the effects of violence on children and explores how violence in the home might impact how their children respond to them. It also educates members about parenting after experiencing domestic violence and further reinforces the abusive nature of IPV perpetrators and the devastating impact that abuse has in the home as it relates to children and parenting. It also facilitates open discussion and exploration of better parenting strategies to mitigate the abuse and help bring about healing in children.

Begin this session with an opening prayer. Immediately after, have each group member provide a brief group check-in (a report of predominant current emotion). Following check-in, facilitate affirmation readings, and then proceed to recap previous week's topic and follow up on any homework assignment from the last week.

Suggested Commentary

(Present the following script, or put this in your own words.)

Recap Previous Week:

Characteristics of abusive men, countering myths, homework assignment follow-up

Outline of Wks 9&10

- Instructions to Group Facilitators
- Opening Prayer
- Group Member Check-ins
- Scriptural Affirmation Quotes
- Suggested Commentary
- Review of Previous Week's Material
- Abuse & Family Dynamics
- Abuser Checklist
- Abusive & Parenting
- Red Flags
- Self-defeating Thoughts
- Positive Affirmations
- Closing Prayer

Explaining the Check-in Procedure

Go over instructions for individual check-ins, affirmation readings, and necessity for opening and closing prayers

Handouts

- IOA 1: Abusive Men Affect Family Dynamics
- IOA 2: Abuser Checklist
- IOA 3: How Abusive Men Parent
- IOA 4: Red Flags
- IOA 5: Self-Defeating Thoughts

Topics for Group Discussion

1. Go over handout IOA: Abusive Men Affect Family Dynamics and allow members to complete the handout and voluntarily share their reflections. Facilitate exploration of group member perceptions of how abuse affects family dynamics.
2. Go over handout IOA 2: Abuser Checklist and facilitate open discussion on thoughts, reflections, or examples of items on the checklist.
3. Go over handout IOA 3: How Abusive Men Parent. Facilitate discussion on parenting tendencies evident in abusive men.
4. Go over handout IOA 4: Red Flags and facilitate open discussion regarding various red flags.
5. Go over handout IOA 5: Self-Defeating Thoughts and facilitate dialogue about self-defeating thoughts, with emphasis on the destructive nature of these thoughts and identification of counter thoughts/ realistic self- appraisals.

Closing

- Opportunity to share personal experience with others in the group
- Selected readings from scriptural and faith-based daily affirmations
- Homework assignment
- Closing prayer

OVERVIEW OF FEARLESS AND FREE TO BE GROUP CURRICULUM

Session 6: Wks 11&12

Instructions to Group Facilitators

This is the last session meeting and will reinforce what group members have learned throughout the group series through final exam and a review of key concepts. This session will also allow for development of social support networks through social and communal activities during the session. Begin this session with an opening prayer. Immediately after, have each group member provide a brief group check-in (a report of predominant current emotion). Following check-in, facilitate affirmation readings, then proceed to recap previous week's topic and follow up any homework assignment from the last week. Each group member can now review her check-in Feelings Form to track progression of feelings and may now keep the form.

Suggested Commentary

(Present the following script, or put this in your own words.)

Recap Previous Week:

The impact of abuse on family dynamics, violence in the home, impact of abuse on children, effective parenting techniques to evoke healing from abused children, red flags, self-defeating thoughts homework assignment follow-up.

Outline of Wks 11&12

- Instructions to Group Facilitators
- Opening Prayer
- Group Member Check-ins
- Scriptural Affirmation Quotes
- Suggested Commentary
- Review of Previous week's Material
- Final Exam
- Review of Exam Answers
- Reflection of group
- Group Activity
- Self-defeating Thoughts
- Positive Affirmations
- Closing Prayer

Explaining the Check-in Procedure

Go over instructions for individual check-ins, affirmation readings, and necessity for opening and closing prayers.

Handouts

- C 1: Final Exam
- C 2: Get To Know You

Topics for Group Discussion

1. This will be a time to wrap up, share experiences, provide feedback to facilitators, and celebrate with those who have completed the course.
2. Allow members to complete handout C 1: Final Exam individually during group. When all the group members have completed the exam, allow members to collectively go over the answers.
3. Facilitate open discussion on thoughts, reflections, or examples of the exam; of the group in general; and of each member's feeling of personal growth, sense of esteem and worth and their personal commitment to themselves, including but not limited to, leaving or avoiding abusive relationships, developing their spirituality, building their social support network, accessing available resources, maintaining daily practice of utilizing positive affirmations and spiritual affirmations, increasing church attendance, etc.
4. Facilitate group activity C 2: Get to Know You. Allow members to pick a partner to interview, answer the interview questions, and present their partner to the group.

Closing

- Opportunity to share personal experience with others in the group
- Selected readings from scriptural and faith based daily affirmations
- Homework assignment
- Closing prayer

APPENDIX B

Handouts For Fearless and Free to Be Group Sessions

The handouts on the following pages are to be used by group members within the group and with the facilitator's guidance. The handouts will help members of the group make the most of the weekly group meetings.

IDV O: COURSE OUTLINE

Fearless and Free to BE

Faith-Based Group Curriculum on Intimate Partner Violence:

Group Outline

Date:

Time:

Facilitators:

Class Description:

Fearless and Free to BE is a group curriculum implemented to equip intimate partner violence survivors with skills to recognize patterns of abuse in relationships, understand different aspects of relationship abuse and to educate survivors about spiritual and religious abuse as it pertains to domestic violence. The class consists of 12 weekly group sessions. Each class session will include:

- Opening prayer
- A recap of the previous week's topic and reading of our biblically based affirmations
- Presentation of information or material about a new topic
- Interactive activity and discussion related to the day's topic
- An opportunity to share personal experiences with others in group
- An inspirational quote to take with you during the week
- Closing prayer

Because each class builds upon the last, please do your best to attend class as regularly as possible.

Goals:

We hope that by the end of the quarter, each member of the class will leave with:

1. A greater understanding of what domestic violence is and what the various types of abuse look like.

2. An ability to preserve their safety and well-being by recognizing and identifying precursors of an abusive relationship before entering the cycle of abuse.
3. Cultivate a sense of empowerment in taking control of their lives.

Schedule:

The facilitators will keep to the schedule as closely as possible, but if there are unforeseen circumstances, changes may be made.

Section 1: Introduction to Domestic Violence

Talking About Abuse

- What is domestic violence?
- Myths and Facts: What's really true?

The Many Faces of Abuse

- Discovering the different types of abuse
- Discovering Religious and Spiritual abuse

Section 2: Breaking the Cycle

Understanding the Role of Control

- Power and control wheel Vs Equality Wheel

When Abuse Becomes a Pattern

- Cycle of violence

Section 3: Understanding the Victim

Leaving Is Difficult

- Uncovering the reasons why women may stay in violent relationships

Section 4: Leaving Is Difficult

- Continued discussion on why women stay in violent relationships
- Safety planning and how to get out

Section 5: Exploring the Abuser

Profile of an Abuser

- Characteristics of male abusers

Profile of an Abuser (Part 2)

- Continued discussion on characteristics of male abusers

Section 6: Impacts of Abuse

Abuse Affects Everyone

- Violence in the home

Abuse Affects Everyone (Part 2)

- Continued discussion on violence in the home

Moving Forward

- Parenting after experiencing abuse

CELEBRATION!

- This will be a time to wrap up, share experiences, provide feedback to facilitators, and celebrate with those who have completed the course.

Group Rules

- Maintain **confidentiality** outside of the group: Do not discuss what is said during group sessions or disclose names of group members outside of the group. What happens in group STAYS in group!
- Group Safety: No violence, threats, derogatory comments or foul language toward the facilitator and group members is allowed.
- Be on time. However, for absences and cancellations, members should call or otherwise notify group facilitator 24 hours in advance if she cannot attend session. If a group member misses more than 3 sessions she will need to make up the specific missed sessions.
- Stay for the remainder of group, don't leave early!
- No cell phones.
- Participate, don't dominate!
- Respect others in group by not interrupting or having side conversations.
- Be culturally sensitive by respecting differences.

IDV 0B: CHECK-IN

Name _____ Date _____

How Do You **Feel** Today?

Pleasant Feelings

Open, confident, accepting, receptive, satisfied, free, amazed, understanding, sympathetic, kind, happy, joyous, proud, lucky, fortunate, delighted, overjoyed, thankful, worthy, important, bubbly, lively, valued, ecstatic, glad, cheerful, elated, appreciative, appreciated, alive, energetic, positive, liberated, wonderful, courageous, playful, optimistic, impulsive, animated, spirited, thrilled, provocative, calm, peaceful, patient, at ease, relieved, respected, comfortable, encouraged, surprised, secure, thrilled, content, relaxed, serene, bright, blessed, reassured, loving, loved, understood, considerate, caring, affectionate, tender, devoted, loyal, attracted, passionate, admiration, warm, touched, comforted, concerned, affected, fascinated, intrigued, absorbed, inquisitive, eager, curious, engrossed, fixated, keen, intent, inspired, determined, excited, relentless, enthusiastic, bold, brave, daring, secure, dynamic, tenacious, unique, hopeful, delighted, pleased, vulnerable, enlivened, expressive, _____

Difficult/ Unpleasant Feelings

Withdrawn, reserved, misunderstood, alone, sensitive, anxious, overwhelmed, challenged, cautious, scattered, frustrated, tense, uneasy, stubborn, irritated, enraged, insulted, sore, annoyed, upset, worried, hateful, uncomfortable, offensive, bitter, aggressive, resentful, unloved, provoked, lousy, disappointed, discouraged, ashamed, powerless, unwanted, nervous, helpless, diminished, guilty, dissatisfied, revengeful, miserable, terrible, grief, doubtful, uncertain, confused, indecisive, perplexed, embarrassed, hesitant,

shy, distrustful, lost, unsure, skeptical, suspicious, nervous, muddled, disorganized, disbelieving, incapable, paralyzed, fragile, trapped, fatigued, exhausted, inadequate, exasperated, useless, inferior, vulnerable, empty, forced, despair, distressed, tragic, resistant, rebellious, infuriated, worked up, pessimistic, hopeless, uneasy, tense, dominated, insensitive, neutral, reserved, preoccupied, lifeless, nonchalant, disinterested, fearful, regretful, terrified, panic, alarmed, frightened, timid, shaky, restless, threatened, crushed, tormented, deprived, pained, hurt, rejected, victimized, heartbroken, humiliated, alienated, tearful, sorrowful, sad, unhappy, lonely, anguish, empty, numb, broken, horrified, pressured, out of place, awkward, inadequate, unloved,

Delving into Domestic Violence (DV)

True or False Quiz

DV only involves physical abuse.	True	False
DV does not affect women of all racial and socioeconomic backgrounds.	True	False
It has been reported that DV affects more than 5 million American women annually.	True	False
85% to 95% of reported DV survivors are women.	True	False
Research identifies DV as the number one health issue among African American women.	True	False
While physical and sexual violence are forms of domestic abuse, emotional and economic abuse are not considered components of DV.	True	False
DV victimization can have wide ranging longterm effects, and those who with abusive partners are at an increased risk for developing mental health problems, such as depression, anxiety and PTSD.	True	False
Using isolation is not included on the Power and Control Wheel as a component of DV	True	False
DV affects all individuals and communities, adults and teenagers, regardless of race, culture, ethnicity, socioeconomic status, or religion	True	False

DOMESTIC VIOLENCE HISTORY

Domestic violence has not always been against the law. In fact, it is a relatively recent law that states battery against one's spouse is illegal. Even with this law in place, it is still sometimes difficult to press charges and receive justice in even severe cases of spousal abuse. In 1986, police officers were given the right to press charges if spousal abuse was observed, even if the spouse did not press charges. The reason for this is partly due to the acknowledgement of a type of PTSD called Battered Women Syndrome. In many cases, victims of domestic violence experience this syndrome, which often inhibits the battered partner to press charges.

Domestic violence does not exclusively occur in male to female battering situations. Cases where battering against a male partner by a woman do exist. However, research indicates that about 97% of partner abuse cases are male to female battering. Case in point, the focus of the curriculum targets male to female domestic violence.

DV DEFINITION:

Domestic violence is a pattern of abusive and threatening behaviors including physical, emotional, economic and sexual violence, intimidation, isolation, and coercion used to establish and exert power and control over an intimate partner.
(<http://www.ovw.usdoj.gov/domviolence.htm>)

DV STATISTICS:

- Boys who grow up in violent homes are more likely to grow up to be abusive partners as adults.
- 4,000 women die each year as a result of beatings.
- In 60% of violent homes where the female partner is beaten, so are the children.
- Around the world, at least one in every three women has been beaten, coerced into sex or otherwise abused during her lifetime. Most often, the abuser is a member of her own family.
- Domestic violence is the leading cause of injury to women—more than car accidents, muggings, and rapes combined.
- Studies suggest that up to 10 million children witness some form of DV annually.
- Every day in the U.S., more than three women are murdered by their husbands or boyfriends.
- Domestic violence victims lose nearly 8 million days of paid work per year in the US alone—the equivalent of 32,000 full-time jobs.
- Based on reports from 10 countries, between 55 percent and 95 percent of women who had been physically abused by their partners had never contacted nongovernmental organizations, shelters, or the police for help.

- The costs of intimate partner violence in the US alone exceed \$5.8 billion per year: \$4.1 billion are for direct medical and health care services, while productivity losses account for nearly \$1.8 billion.
- Men who as children witnessed their parents' domestic violence were twice as likely to abuse their own wives as sons of nonviolent parents were.
- Battered women have twice as many miscarriages as nonbattered women.

Adapted from www.domesticviolencestatistics.org

MYTHS & FACTS ABOUT DOMESTIC VIOLENCE

MYTH	FACT
<p>DV is very rare and only affects a small percentage of the population.</p>	<ul style="list-style-type: none"> • 1 in 4 women will experience DV in her life time. • An estimated 1.3 million women are victims of physical assault by an intimate partner each year, according to national studies.
<p>DV is not a serious problem in the U.S.</p>	<ul style="list-style-type: none"> • Domestic violence is the leading cause of injury to women between the ages of 15 and 44. • Almost one-third of female homicide victims that are reported in police records are killed by intimate partners. • 1,500 women are murdered as a result of domestic violence each year in the U.S. • Intimate partner violence results in more than 18.5 million mental health care visits each year • Approximately 1.5 million women are raped and or physically assaulted by an intimate partner each year (Tjaden and Thoennes, 2000) • There are 16, 800 homicides and \$2.2 million medically treated injuries due to intimate partner violence annually.
<p>Only those who are poor, uneducated, or minorities experience domestic violence.</p>	<ul style="list-style-type: none"> • Studies of domestic violence consistently have found that battering occurs among all types of families, regardless of economic status, race, ethnicity, or educational status. (Center for Disease Control and Prevention, 2013)

<p>Alcohol consumption causes DV.</p>	<ul style="list-style-type: none"> • While there is a high correlation between alcohol, substances and battering, alcohol does not cause or excuse the abuse. • Perpetrators use drinking as one of a number of excuses for their violence.
<p>DV is usually a one-time, isolated event.</p>	<ul style="list-style-type: none"> • Domestic violence is a pattern of abusive and violent behaviors that happens over and over again and escalates in severity and dangerousness. It is not just one physical attack. It includes the repeated use of various tactics as displayed on the Power & Control Wheel.
<p>Men who commit domestic violence are often good fathers and have joint custody of their children when the couple separates.</p>	<ul style="list-style-type: none"> • Studies have shown that men who commit domestic violence also abuse their children in 70% of the cases. • When children are not directly abused, they suffer as a result of witnessing one parent abuse another. According to a recent American Bar Association report, experts estimate that between 3.3 and 10 million children witness domestic violence annually. The report cites numerous links between serious emotional and psychological problems from exposure to domestic violence, such as depression, hopelessness, sleep disorders, violence towards other children, identifying with the aggressor, and losing respect for the victim (American Bar Association, 1995). • 30% to 60% of perpetrators of intimate partner violence also abuse children in the household • In a national survey of more than 6,000 American families, 50 % of men who abused their wives also abused their children.

<p>Couples counseling is the best solution for DV.</p>	<ul style="list-style-type: none"> • Couples counseling is not recommended for couples trying to end domestic violence in their relationship. • It is more beneficial and safe for abusers to attend a state certified family violence intervention program and for survivors to seek assistance from a domestic violence program or advocate.
<p>Pregnant women are never victims of DV.</p>	<ul style="list-style-type: none"> • National surveys indicate that 5.3% of pregnant women each year experience domestic violence. This means as many as 324,000 women experience intimate partner violence during pregnancy. (Gazmararian, et al. 2000)
<p>Religious people do not commit DV.</p>	<ul style="list-style-type: none"> • Those who commit DV can be religious people, including clergy and other faith-based leaders. Many religious women who are victims of DV may feel obligated to stay in the abusive relationship and endure the violence, keeping the family together at all cost, because of deeply held religious beliefs.
<p>DV against the mother never has an impact on the behaviors of the children who witnessed the abuse.</p>	<ul style="list-style-type: none"> • Men who as children witness their fathers' abuse their mothers are twice as likely to abuse their wives as sons who have not witnessed abuse • A woman who witnesses her father abuse her mother has a much greater likelihood of becoming a battered woman herself (American Bar Association, 1995). • Children of DV are more likely to exhibit behavioral and physical health problems including, depression, anxiety, and violence towards peers. They are also more likely to attempt suicide, abuse alcohol and drugs, run away, commit sex crimes, and engage in prostitution. (Futures Without Violence, 2013)

<p>A person who abuses his wife or partner can only be considered abusive if he is also abusive in all his relationships with other people</p>	<ul style="list-style-type: none"> • Most abusers do not use violence in other non-intimate relationships to resolve conflict. In fact, they typically present a different personality outside the home than they do inside. This often complicates a victim's ability to describe her experiences to other people outside the relationship when seeking help (Wilson, 1997).
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Adapted from the following:

Saltzman, L. E., Johnson, C. H., Gilbert, B. C., Goodwin, M. M. (2003). Physical abuse around the time of pregnancy: An examination of prevalence and risk factors in 16 states. *Maternal and Child Health Journal*, 7, 31-43.

Gazmararian, J., Petersen, R., Spitz, A., Goodwin, M., Saltzman, L., & Marks, J. (2000). Violence and reproductive health: Current knowledge and future research directions. *Maternal and Child Health Journal*, 4(2), 79-84.

Wilson, K. J. (1997). *When violence begins at home: A comprehensive guide to understanding and ending domestic abuse*. Alameda, CA: Hunter House.

TYPES OF ABUSE

PSYCHOLOGICAL & EMOTIONAL ABUSE

A perpetrator's use of emotional or psychological abuse can include persistent verbal abuse, harassment, excessive possessiveness, isolation from friends or family, invalidating of feelings, ignoring feelings, or other behaviors designed to rob the victim of self-esteem, lower her self-respect, and cause the victim to feel worthless.

Examples of abuse:

- Private and public humiliation, intimidation, degradation
- Deprivation of resources to meet basic needs
- Putting partner down, name-calling, labeling, ridiculing
- Demeaning jokes and insults
- Minimizing or denying abuse, blaming victim as the cause of the abuse
- Ignoring, ridiculing, constant criticizing, insulting, belittling and dismissing the partner's needs
- Eliminating partners support system, including friends, family, church, and others
- Threatening to take the children away or harm them or have DCFS take children from the mom
- Threats of harm or acts of violence/ injury to family and friends of partner, or partner's pets
- Intentionally destroying personal items belonging to partner
- Blaming partner for circumstances beyond her control, false accusations
- Demanding partner's constant attention
- Driving recklessly to frighten and intimidate the partner
- Resenting and/or preventing partner's attention to her children
- Leaving the partner in a dangerous place
- Refusing to help when the victim is sick or injured
- Using partner's children against partner
- Challenging partner's sense of reality
- Exhibiting extreme jealousy and possessiveness

PHYSICAL ABUSE

- Slapping, jerking, punching, pushing, showing, shaking, hitting, holding, restraining, choking, or strangling partner
- Pulling or twisting partner's hair, or dragging the partner by hair or body parts
- Leaving bruises on partner, lacerations, cutting, stabbing

- Throwing items at partner, threats and use of weapons such as guns or knives or household items
- Targeting hitting, punching, or kicking to specific body parts of partner's body
- Attempting to harm partner's unborn child through targeting abuse
- Deprivation of food, water, medical attention
- Restraining partner against will
- Physical abuse during pregnancy
- Imprisonment of partner in home, bedroom, basement
- Causing broken bones or internal injuries, or causing disabling, disfiguring, or permanent injury
- Committing murder

ECONOMIC ABUSE

The perpetrator tries to exert power and control over the victim through deprivation of all of her economic resources, causing the victim to be completely dependent on the perpetrator for her economic and financial well-being.

Examples of abuse:

- Making or controlling all partner's economic decisions
- Refusing to provide sufficient funds for economic needs such as gas, food, personal needs
- Deciding what partner's personal needs are and how much money she can spend for these needs
- Putting partner down, name-calling, labeling, ridiculing, degrading jokes and insults
- Minimizing or denying abuse, blaming victim as the cause of the abuse
- Eliminating partner's support system, including friends, family, church, and others
- Threatening to take the children away or harm them or have DCFS take children from the mom
- Threatening to harm family and friends of partner
- Intentionally destroying personal items belonging to partner
- Blaming partner for circumstances beyond her control
- Demanding partner's constant attention
- Resenting/preventing partner's attention to her children, using partner's children against partner
- Challenging partner's sense of reality

SEXUAL ABUSE

Sexual violence committed by the perpetrator often occurs in conjunction with physical attacks. The victim may be forced to engage in sexual intercourse, subjected to sexual taunts, or forced to engage in any form of sexual activity against her will.

Examples of abuse:

- Rape, use of threats to demand and receive sex, forced sexual acts
- Minimizing sexual abuse, labeling sexual abuse as consensual behavior
- Touching, grabbing, physically assaulting sexual body parts, molestation
- Demanding sex from partner even if medically inadvisable
- Physically hurting the victim during sex or assaulting her genitals, using objects or weapons to inflict pain
- Forcing partner to watch pornography, photographing partner while nude against partner's will
- Forcing partner into prostitution, forcing her to dress in a way that makes her uncomfortable
- Calling partner degrading sexual names
- Preventing partner's use of birth control
- Exposing partner to STDs through abuser's frequent affairs and refusal to use a condom or through coercing partner to have sex without protection against pregnancy or STDs.

What are some other examples of emotional, psychological, physical, economic and sexual types of abuse?

DOMESTIC VIOLENCE AND THE CHURCH

The Role of the Church

The church has played a prominent role in the African American cultural experience, fostering a sense of community, providing role models, and promoting healing through the channeling of collective spirituality and expression of faith. As anchors of the black experience, the Black church and spirituality have traditionally served as a medium to address “issues of oppression, quest for liberation, love, hope, and justice” (Anderson & Black, 1995). The church has historically embodied a source of coping, healing and empowerment, particularly in the African American community, and has served a range of functions such as supporting individual and collective self-help, racial socialization, and political mobilization throughout the U.S. (Lincoln & Mamiya, 1990). The research shows the positive influence of the church in the community as a source of guidance and support in areas such as relationships, family preservation, health initiatives, politics, education, and civil rights. It is clear that the church has been and continues to work as a positive force in the Black community, and can be a primary force to ending the epidemic of domestic violence in the Black community. The Black Church has the potential to provide African American women who experience intimate partner violence with the knowledge, guidance, and spiritual healing necessary to aid and empower survivors to develop a way out.

Traditional Approach to DV in the Church

- While the church has played a major role in promoting a means for those in the community deal with adversity, domestic violence has not always been directly addressed as a serious issue in the church (Potter, 2007).
- Though the Black church has the potential to address intimate partner violence and intervene in this significant issue, many religious leaders are not aware of the nature and severity of domestic violence and are therefore ill-equipped to identify and address the issue.
- Many in the church community are unaware that intimate partner violence is a growing epidemic in the African American community, and Black women experience higher rates of domestic violence and sustain serious and lethal injuries than their Euro-American counterparts (Center for Disease Control and Prevention, 2000).
- Unfortunately, because of this lack of awareness, research shows that within the teachings of certain religious groups, abuse of women by their intimate partners is excused, and pastors are often complicit in the battering partners’ behaviors.
- Many pastors and religious leaders often recommend a commonly referenced scripture pertaining to spousal relations that appears in the New Testament of the Bible, Ephesians 5:21-33, that helps perpetuate the control of women by their husbands.

- In a recent study, 40 self-identified African American intimate partner violence survivor participants sought counseling from religious leaders, suggesting the importance of clergy in supporting abused women. Eight of the 40 women reported substandard support from clergy members during their time of need and the pastoral advice to “remain in the relationship and ‘work things out, . . . [to] pray about the relationship and make greater attempts to be a ‘good wife’” (Potter, 2007, p. 272).
- Many women encounter rejection from faith-based leaders when they attempt to address domestic violence in their lives. Many report receiving messages to stay in the relationship, with justifications derived from misinterpretations of the Bible (Adams & Fortune, 1995).

Spiritual & Religious Abuse

Spiritual and religious abuse is something that does occur in religious institutions. While there are many faith-based, religious leaders who continue to be a source of spiritual counsel and ensure the well-being of their congregant members, there are ways in which well-meaning leaders unintentionally facilitate spiritual and religious abuse. In many cases, patriarchal ideologies that sanction male dominance and female submissiveness in faith communities may legitimize or fail to adequately condemn domestic violence, despite the severity and prevalence of the issue (e.g., Nason-Clark, 1997, 2000). Strong beliefs about the sanctity of marriage and the vows taken before God may be upheld in the face of a woman's personal safety. A lack of awareness and understanding about the epidemic of domestic violence in the Black community exists within the church. There is a need for church leaders and congregants to educate themselves about domestic violence and enhance their understanding of how congregants are affected by domestic violence as well as how spiritual and religious abuse affects DV survivors, both women and children, and the impact of family violence on the faith environment with congregants who may perceive the pandemic of domestic violence as either acceptable or largely ignored and underacknowledged within the faith community. By facilitating DV awareness and identifying specific ways that spirituality and religion can be manipulated as instruments of oppression, women can be empowered and affirmed that it is not their spiritual integrity that is in question but instead the very ways in which spirituality can be inadvertently used as a tool of oppression (Bent-Goodley & Fowler, 2006).

Defining Spirituality and Religion

- Spirituality has been defined as “the sense of sacred and divine,” emphasizing one's belief in God (Bent-Goodley & Fowler 2006, p. 291).
- Religion focuses on external expressions of faith, and external expressions of one's belief in God.
- Spirituality and religion are interconnected and often discussed interchangeably (Martin & Martin, 2002).
- Spirituality manifests as “a source of refuge and order” (Bent-Goodley & Fowler, 2006, p. 291).
- Spirituality also serves as a principal coping mechanism for achieving resilience in the face of adversity.

Spiritual & Religious Abuse

- Improper and negative use of scripture to manipulate and control women in domestic violence relationships, to justify abuse, and to perpetuate domestic violence
- The practice of “proof texting” (selective use of a text, out of context, to support one’s position) in justifying the abuser’s actions, “thereby providing advice that supports the male perpetrator, whether the male abuser’s behavior is publicly substantiated or rests on the accounts of the domestic violence survivor” (Potter, 2007, p. 2).
- Abuse with an impact that goes “beyond emotional and psychological damage to what supports the essence of the person” (Bent-Goodley & Fowler, 2006, p. 291), as reported by many DV survivors.
- Causing scripture to become a means of stimulating confusion and anger when it is misinterpreted, distorted, and used to manipulate and control a partner.
- Violating “spiritual integrity” by causing a partner to become unsure of the capability of God to evoke change in her life, while the partner is encouraged to forgive the abuser, pray for change and not abandon the relationship (Fortune, 1998; Nason-Clark, 2004).
- Using similar methods that an abuser uses to keep a woman in the abusive relationship in order to maintain relationship (i.e., evoking guilt by stressing the need to forgive, denying or minimizing the dangerousness of the abuse, and advising the woman to stay in the relationship regardless of the abuse) (Bent-Goodley & Fowler, 2006).
- Using religion and spirituality as contributors to women’s vulnerability, which occurs when adherence to traditional roles of womanhood grounded in religious tenets (heterosexual relations, childbearing, childrearing and obeying the husband) are viewed as essential conditions of intimate unions, obligating women to subscribe to these conditions while being battered by an abusive partner (Potter, 2007).
- Causing a woman to question her own spiritual integrity and belief in God because of the actions of her abuser in light of pastoral guidance and advisement for her to stay in the abusive relationship and pray.

The Dynamics of Power & Control

Characteristics of a Batterer

Psychologists, social scientists and others have developed a number of theories to explain why some men use violence against women while others do not. These theories include:

- Growing up in dysfunctional families
- Inadequate communication and problem-solving skills
- Provocation by women
- Stress
- Chemical dependency
- Economic hardship and pressures

The National Council Against Domestic Violence (NCADV) asserts that although these issues may be associated with battering, they are not the cause of the behavior. As a result, removing these stressors from the batterer's life will not cease the violence.

NCADV reports that "the batterer begins and continues his behavior because violence is an effective method for gaining and keeping control over another person and he usually does not suffer consequences as a result of his behavior" (National Coalition Against Domestic Violence Organization, 2011).

There is no typical, readily recognized profile of the domestic violence perpetrator or abuser. Those who batter come from every race, background, socioeconomic status, age, and profession in society. However, NCADV has developed some general characteristics of a batterer:

- A batterer objectifies women. He does not see women as people. He does not respect women as a group. Overall, he sees women as property or sexual objects.
- A batterer has low self-esteem and feels powerless and ineffective in the world. He may appear successful but inside he feels inadequate.
- A batterer externalizes the causes of his behavior. He blames his violence on circumstances such as stress, his partner's behavior, a "bad day," alcohol or other factors.

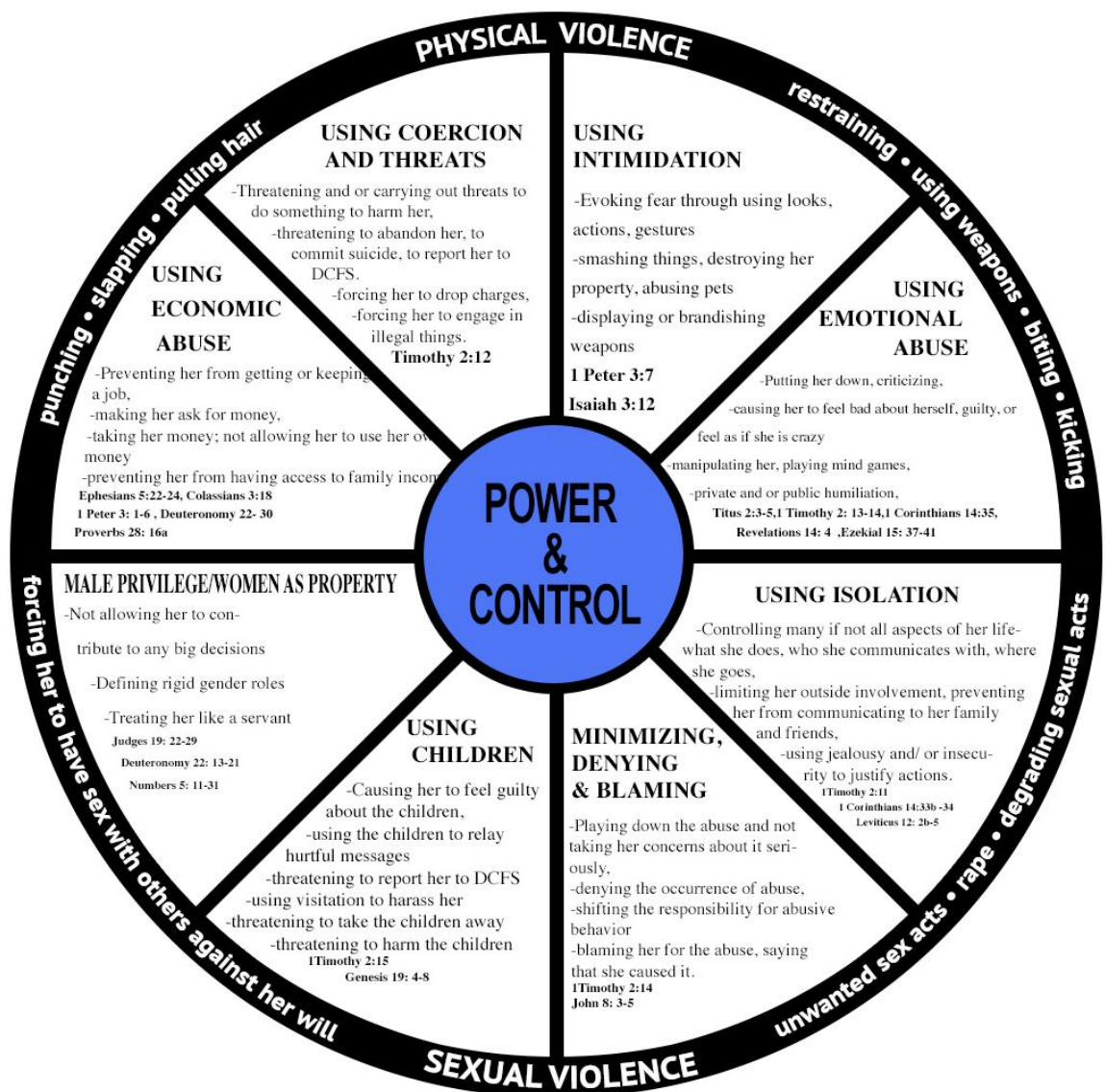
- A batterer may be pleasant and charming between periods of violence, and is often seen as a “nice guy” to outsiders.
- Some behavioral warning signs of a potential batterer include extreme jealousy, possessiveness, a bad temper, unpredictability, cruelty to animals, and verbal abusiveness.

Information retrieved from www.ncadv.org

THE POWER & CONTROL WHEEL

The diagram below shows the relationship of physical abuse to other forms of abuse evident in domestic violence relationships. As you will see, each part of the Power and Control Wheel depicts ways in which abusers control or gain power. You will be able to examine the behaviors abusers use to obtain and maintain control in their relationships. Physical and sexual abuse is only one part of the system of abusive behaviors, as you will see in the diagram below.

Adapted from Ellen Pence and Michael Paymar, *Power and Control: Tactics of Men Who Batter*, Minnesota Program Development, Inc., Duluth, 1986.



Power and Control Wheel

Vignette #1:

Sherice has been married to Davon for 2 years, and together they have two young children, a 3-year-old boy and a 5-year-old girl. Sherice met Davon in high school, was engaged at 18 and was married at 19. While dating, Davon wanted Sherice to text him every time she went out with friends and required her to check in with him on days that they did not see each other. When Sherice addressed her concern with Damien, he replied, “Baby, I’m just looking out for you. I want to make sure you’re safe.” Feeling like Davon really cared for her, she obliged with the mandatory texts and continued with the relationship. Davon’s control increased over the years. After they were married, Davon and Sherice moved into an apartment in a city over an hour away from Sherice’s family because of a job opportunity for Davon. Sherice stayed at home taking care of the children, because Davon said that they could not afford childcare for her to be able to leave the house to get a job or attend college. Davon also said that because there were not two incomes, they could not afford internet services so Sherice could attend online college courses. Sherice believed Davon because he never disclosed how much money there was left over at the end of the month. “Men take care of the finances, women take care of the house and children,” Davon would say. Feeling like they were each doing their part, Sherice stayed home and would ask Davon for money to purchase items for their children or the house.

Examples of power and control in this relationship: Please write the type of power and control from the wheel and back it up with examples from the vignette:

1.

2.

3.

Vignette #2:

Tierra has been in a relationship with her boyfriend, Marquis, for 7 months. Marquis told Tierra that he was falling in love with her and asked her to move in with him. Feeling like Marquis might be the one for her, Tierra excitedly accepted his invitation and moved in 1 month later. Shortly after moving in with Marquis, Tierra noticed that their relationship was changing. The Marquis who used to compliment her and tell her how beautiful she was, was now constantly putting her down. He commented on her clothing size, stating that “she would never find anyone who loves a fat cow as much as he does,” and he often made “mooring” sounds when she was in the room. Marquis overheard Tierra talking to a friend about how she was going to end their relationship. That night Marquis told her that if she left him, she would be sorry that she did and that she’d “better think twice,” while making gun gestures with his hand. Immediately after telling her this, Marquis picked up a nearby lamp and threw it across the room and then slammed the door as he left. The next day, Marquis apologized for “losing his cool” and then stated that he loved her and that he would never behave in that way again.

Examples of power and control in this relationship: Please write the type of power and control from the wheel and back it up with examples from the vignette:

1.

2.

3.

Vignette #3:

“My husband and I were high school sweethearts. He had a love for politics, sports, life, and he knew exactly where he was going. We had a perfect marriage—until that first hit. At first, I took his behavior as total love and protection for me. He controlled my every action, my every move—even going to the bathroom. He was an awesome father to my children, but he was unbelievably mean to me. He would often beat me, and one night he raped me. I had wanted to do everything I possibly could to keep my family together for so long. When I finally decided to leave, I wanted to say I had given my marriage my all. I did everything I could and realized that it was not enough. . . . I left even though he threatened to take our children away from me. I knew I had to go when I realized the message I was sending to my children about abuse.”—Nia

Examples of power and control in this relationship: Please write the type of power and control from the wheel and back it up with examples from the vignette:

1.

2.

3.

Vignette #4:

Lisa is a 52-year-old married female from a prominent, wealthy Anglo-Protestant family. She had been an active volunteer, working around her husband's schedule and commitments. Behind her facade of perfection, however, lay her misery that resulted from her husband's periodic physical assaults (sometimes resulting in serious bruises) and verbal assaults ("You're fat, ugly, you have no skills and no brains"). She has told no one of her problems, not even her best friend. Because the violence has been well-concealed, and because her husband's power and standing in the community is so strong, she thinks that no one will believe her about the abuse, including a judge. She is frightened to be on her own because she must support herself for the first time in her life. He had always prevented her from working and having financial independence. Other than being a good hostess in the home, Lisa believes she has no occupational skills.

Examples of power and control in this relationship: Please write the type of power and control from the wheel and back it up with examples from the vignette:

1.

2.

3.

Answer Key:

Vignette #1:

1. Isolation: moved away from family; prevented Sherice from leaving the house, under the guise of childcare; preventing her from signing up for online college courses.
2. Economic abuse: not allowing her to know financial details; requiring permission to purchase items
3. Male privilege: making the decisions of the house without her input; stating gender roles for men and women
4. Minimizing/denying/blaming: minimizing her concerns over reporting where she was going

Vignette #2:

1. Emotional abuse: putting Tierra down about her weight; mooring when she was in the room; telling her how much he loved her after threatening (mind games)
2. Intimidation: made gun gestures with his hand; threw a lamp across the room
3. Coercion/threats: told her that she would be sorry for leaving; threatened to harm her if she did

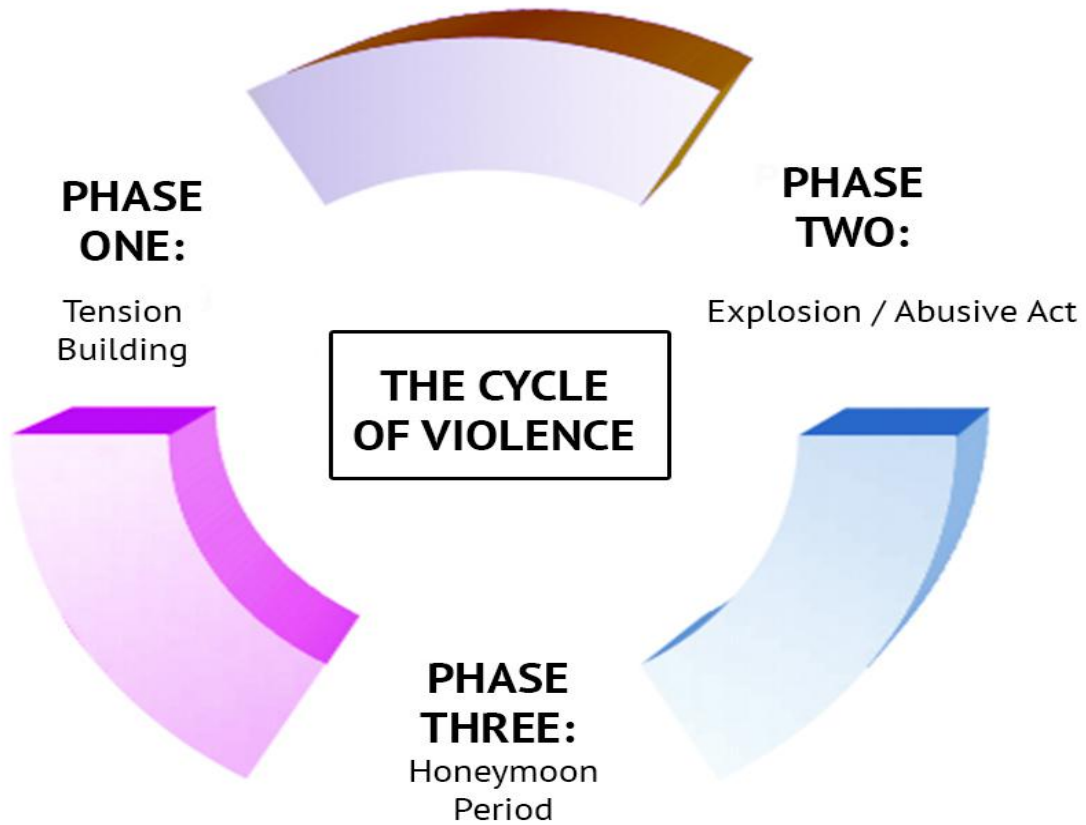
Vignette #3:

1. Physical abuse: hit Nia/ beat her
2. Sexual abuse: raped her
3. Using children: threatened to take away children

Vignette #4:

1. Physical abuse: physical assaults on Lisa sometimes resulting in serious bruises
2. Emotional abuse: telling her she's fat, ugly, and has no skills or brains
3. Economic abuse: preventing her from having a job and financial independence

BTC 2A: CYCLE OF VIOLENCE WHEEL



Phase I	Phase II	Phase III
Tension begins to mount as the abuser increases threats of violence, often calling the victims names, pushing, or shoving her around.	Abuser is unpredictable; and violence erupts as the abuser throws objects, hits, slaps, kicks, chokes or beats partner with fists; abuses her sexually; or uses weapons such as belts, shoes, sticks, knives, or guns.	Abuser is excessively apologetic, expresses guilt and shame, and promises the violent behavior will never happen again.
Victim minimizes problems and often will make increasing futile efforts to please the abuser or calm him down.	Victim is helpless; feels trapped, and may also experience denial of the abuser's responsibility for what is occurring.	Abuser appears loving, attentive, and affectionate, often buying gifts for the victim. Victim has mixed feelings.

Phase I	Phase II	Phase III
Abuser increases threats and controls more.	Abuser blames the victim as being the cause of the abuse.	Abuser is manipulative and may minimize the violence or blame the violence on the victim, stating that it never would have happened if the victim hadn't said or done something to make the abuser angry.
Tension becomes intolerable and victim feels as if she is walking on egg shells.	Victim may believe that she is the cause of the abuse.	Victim feels guilty and responsible and often recants and minimizes abuse. Abuser promises change. Victim often considers reconciliation.

Partially adapted from www.hruth.org

Cycle of Violence

Each quote or scenario below represents one of the phases of abuse (Tension, Explosion, Honeymoon). Take turns reading the quotes below. As a group, we will discuss which phase the quote belongs in and why.

1. “If I can complete all of the housework and have dinner on the table by the time Adam comes home, he should be content. He will have dinner, drink a couple beers and fall asleep watching TV. I just need to keep the kids quiet in their rooms, if they wake him up, Lord only knows what he’ll do next.”

Phase: _____

2. “I’m terrified. There’s broken glass everywhere and I’m scared that me and my children will never be able to be safe. As long as I can keep the attention on myself he will leave the kids alone. I will do whatever it takes to keep him from walking remotely close to their door when he’s in a fit of rage. How did I let it get to this point?”

Phase: _____

3. “Adam came home with a brand new vase to replace the one he broke last night. That must mean he realizes what he did and he has to change now that he is aware of what his anger does to us—to his family. We’ve been together for 5 years, there’s no way I can leave him now. Maybe things will change, maybe I can change him.”

Phase: _____

4. “I went into the house and saw him in the kitchen. He was looking for something to eat. It was apparent that he was in a bad mood, slamming cabinet doors and cursing to himself. ‘How come there isn't any food in the house?!’ he shouted. I had to tread carefully, and make sure I chose the right words. At that moment, I knew that anything I said could set him off.”

Phase: _____

5. "We met at a dance and almost immediately we became inseparable. He was cute and funny and seemed to not be able to get enough of me. After 15 years of a man who did not seem to like me much this was a refreshing situation. He called and dropped by with flowers and was just so charming. He even seemed to get along with my sons, who at that time were early teens and hard to get along with. I knew he had just gotten out of prison, but as he always said, he had learned his lesson. I should have seen the warning signs right then and there but I did not.

He moved in rather quickly, I just love to do things fast, and things seemed so blissful. He made coffee in the morning and cleaned up after himself and just could not get enough of the togetherness I had been craving. The abuse did not start out physical, it started with: I was lucky to have him, he could do so much better than me, the house needed to be cleaner, the boys needed to be quieter, and I needed to be

home with him when he was, that my friends were not really my friends, and on and on.

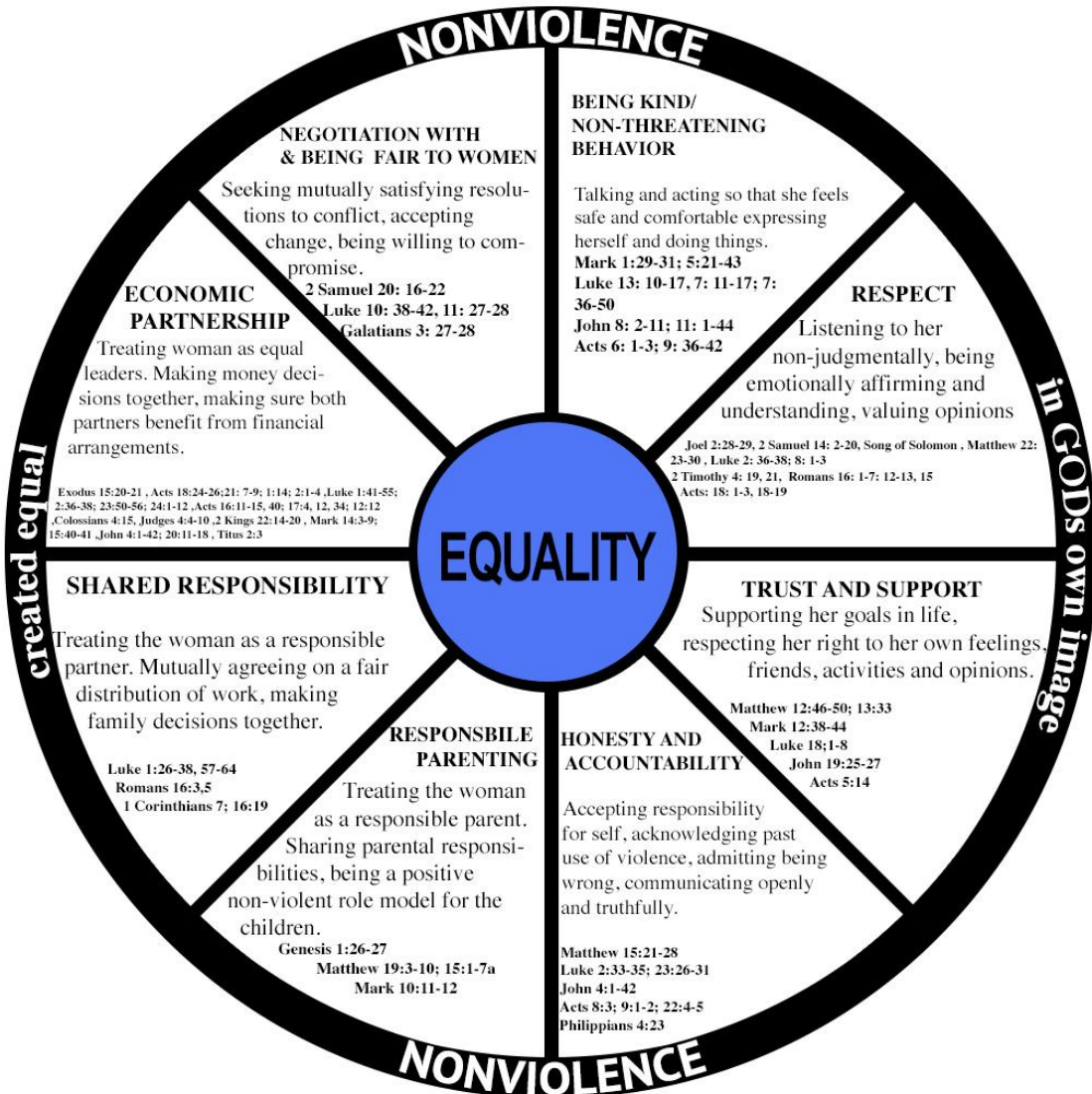
The first sign of the physical abuse started not with hitting but pushing and grabbing. First came the apologies: 'I am so sorry I did not mean to grab you so hard but if you had only listened or did something right the first time we would have not had to go through that fight.' As time went on, the abuse got worse and happened at a faster pace. He started punching and kicking and burning and cutting. I was hiding all this from people who loved me, so I had no one to turn to."

Phase: _____

6. "I woke up the next morning, my body bruised from several harsh blows. I looked in the mirror to see a purple ring around my right eye. Last night was a disaster. I had come home late last night after work. That didn't sit well with my husband. I walked into the kitchen and found a bouquet of roses perched in the center of the kitchen table. Beside the bouquet was a beautiful card. It read, 'I'm sorry, and I love you.' I sighed, same as usual. I guess he's going to be sweet to me today, let's see how it is tomorrow."

Phase: _____

BTC 3A: EQUALITY WHEEL



Partially adapted from: Ellen Pence and Michael Paymar, *Equality Wheel*, Minnesota Program Development, Inc., Duluth, 1986.

What Does The Bible Have To Say About...

Verbal Abuse: Scripture reveals to us that the words we speak can be considered a form of violence.

Ephesians 4:29: Let no corrupt communication proceed out of your mouth, but that which is good to the use of edifying, that it may minister grace unto the hearers.

James 1:26: If any man among you seem to be religious, and bridleth not his tongue, but deceiveth his own heart, this man's religion is vain.

James 3:10: Out of the same mouth proceedeth blessing and cursing. My brethren, these things ought not be so.

Ephesians 4:31: Let all bitterness, and wrath and anger and clamour and evil speaking be put away from you, with all malice.

Proverbs 10:6: Blessings are upon the head of the just; but violence covereth the mouth of the wicked.

Proverbs 10:11: The mouth of a righteous man is a well of life: but violence covereth the mouth of the wicked.

Colossians 3: 8: But now ye also put off all these: anger, wrath, malice, blasphemy, filthy communication out of your mouth.

The Bible Condemns Violence: Many passages in the Bible speak out on the issue of violence and reveal God's attitude toward those that repeatedly use violence.

Zephaniah 1:9: In the same day also will I punish all those that leap on the threshold, which fill their masters' houses with violence and deceit.

Psalms 11:5: The Lord trieth the righteous: but the wicked and him that loveth violence his soul hateth.

Malachi 2:16-17: "I hate [...] a man's covering his wife with violence, as well as with his garment." Says the Lord Almighty..."? You have wearied the Lord with your words..."

James 1:19, 20: Wherefore, my beloved brethren, let every man be swift to hear, slow to speak, slow to wrath: For the wrath of the man worketh not the righteousness of God.

The Responsibility of the Church to Hold Abusers Accountable: Religious leaders are encouraged to hold their fellow believers accountable by showing a sinning Brother or Sister the error of their ways. In the Old Testament, those who had a position of being the spiritual guides of God's people likewise had an obligation to warn those who were doing wrong of the consequences that would ensue if they did not change their ways.

Romans 15:14: And I myself also am persuaded of you, my brethren, that ye also are full of goodness, filled with all knowledge, able also to admonish one another.

James 5:19, 20: Brethren, if any of you do err from the truth, and one convert him; Let him know, that he which converteth the sinner from the error of his way shall save a soul from death, and shall hide a multitude of sins.

Men in Healthy Relationships

Colossians 3:19: Husbands, love your wives, and be not bitter against them.

1 Timothy 3:2: Therefore an overseer must be above reproach, the husband of one wife, sober-minded, self-controlled, respectable, hospitable, and able to teach.

Ephesians 5:25: Husbands love your wife, even as Christ also loved the church and gave himself for it.

Ephesians 5:33: Nevertheless let every one of you in particular so love his wife as himself; and the wife see that she reverence her husband.

Colossians 3:21: Fathers, provoke not your children to anger, lest they be discouraged.

Ephesians 5:3-5: For this ye know, that no whoremonger, nor unclean person, nor covetous man, who is an idolater, hath any inheritance in the kingdom of Christ and of God.

Women in Healthy Relationships

Colossians 3:18: Wives, submit yourselves unto your own husbands, as it is fit in the Lord.

Partnership

Ephesians 5:31: For this cause shall a man leave his father and mother and shall be joined unto his wife and they two shall be one flesh.

Children

Colossians 3:20: Children, obey your parents in all things: for this is well pleasing unto the Lord.

1 John 3:18: My little children, let us not love in word, neither in tongue; but in deed and in truth.

Living In Abuse

2 Thessalonians 3:6: Now we command you...in the name of our Lord Jesus Christ, that ye withdraw yourselves from every brother that walketh disorderly, and not after the traditions which he received of us.

Jonathan Aigner and Kelsey Seifert: “I was raised as a Southern Baptist homeschooler deep in the heart of Texas.”

By Jenny Rae Armstrong on February 11, 2013 in equally yoked

I first stumbled across Jonathan Aigner’s writing in an article he wrote for Mutuality. I was struck by his ability to express his points clearly and simply, without sacrificing the personal elements that make his story so compelling. I’m thrilled to have him blogging for Equally Yoked today, and hope you enjoy his post as much as I do!

Egalitarian is a bad word where I’m from. Actually, it’s a concept so foreign to the people I grew up with, I usually have to explain it, and then it becomes a bad word.

See, I was raised as a Southern Baptist homeschooler deep in the heart of Texas, where we like our steaks rare, our trucks big, and our women in their place. Patriarchy dominated our homes, our preaching, our homeschooling conferences. It was an essential doctrine, right next to the virgin birth and bodily resurrection.

Things changed for me during grad school in the far away land of Illinois. By the time I married my strong, capable, beautiful wife, I was an egalitarian, at least theoretically.

Many of my complementarian friends are constantly preoccupied with how to best contort themselves into being good stereotypical husbands and wives. The men labor under the crushing weight of having to always be protectors, providers, and priests. The women allow their own unique gifts and sense of calling to be buried in the name of being a “cheerful helpmeet.” Sadly, individuality is far too often lost in the name of “biblical” manhood and womanhood.

Thankfully, that’s not been my experience. It isn’t always easy. Old habits die hard and hierarchical roots run deep, but I’m finding egalitarian marriage to be increasingly natural.

Here are the things I appreciate most about being “equally yoked.”

We fulfill functions, not roles.

Of course, we’re still male and female as God created us, but our gender doesn’t predestine how our relationship is going to work itself out. We both provide. We both protect. We both lead spiritually. We both do housework. We both lead and we both submit. Sometimes it’s decided by our particular strengths. Other times it’s decided by our circumstances. The one constant is that we both are willing to step up whenever and

wherever we're needed. After all, reducing someone's entire existence to a set of rules is more than just stereotyping, it's dehumanizing.

We discover each other anew every day.

We are better able to understand each other because we don't assume anything. We don't assume that I have blue ears and she has pink. Neither of us fit into these traditional stereotypes, and I don't think we can ever really get to know each other if we boil manhood and womanhood down that way. It's deeply honoring to have a spouse that really seeks to understand you. We approach each other as mysteries to be discovered and that makes life endlessly exciting and love endlessly regenerating.

We don't have to play silly "gender" games.

A friend once cautioned Kelsey not to take on too many home maintenance tasks, since that sort of thing was supposed to be my responsibility. Such a concept was hilarious to us, since Kelsey is much better at working with her hands than I am. She doesn't have to tiptoe around, taking great care not to bruise my fragile male ego. On the other hand, of the two of us, I'm better in the kitchen, and that isn't at all threatening to Kelsey's sense of self-worth.

Being equal means we just don't have to worry about all that stuff.

We collaborate in planning our life direction.

I'm sharpened by a wife who is free to take me to task over my decisions and motivations. She can push back when she disagrees without worrying that I'm going to meltdown into a "manly" temper tantrum or throw my weight around. When we disagree, we talk about it. I recently saw a video produced by a hierarchical organization that said husbands should "dominate in all areas of eternal significance," especially in marriage and family. I think that's a grave error. It's a real joy for us to work together in figuring out our next steps.

We learn how to really listen and understand.

Most complementarians don't get how egalitarians settle differences. How we listen to each other when we disagree, trying to find the core of the concern. How we don't pressure issues and take time – sometimes months or years to be prayerful and understanding. How we never use power plays to convince or coerce the other. Nobody has a veto. Nobody has the final word. We just pray and listen to each other till we agree.

We've learned we really don't disagree very much and when we do there is usually growing we both need to do. If we don't agree we just aren't done talking, understanding and praying. Marrying a counselor definitely helps in this area, but I suspect this kind of communication is common within egalitarian marriages.

We have a deep and fun friendship.

Because we are constantly growing together, we really prefer to spend time together than with anyone else. In fact, we have to remind ourselves to schedule time with friends. We uncover new ways of having fun and can laugh at ourselves and each other because of the safe vulnerability between us.

I don't always have to be the strong one.

Either one of us can be strong when the other one is weak.

I married a strong person. She's not intimidated by anyone. In fact, on multiple occasions I've seen Kelsey's natural confidence intimidate the most brazenly egotistical of men. I used to feel threatened by strong women, but I've found it to be a great source of comfort in our marriage, particularly during the times I've struggled most. In a lot of hierarchical marriages, I've seen men treat their wives as if they were not quite adults. But I have a full partner who is quite capable of helping me, even carrying me, through the darkest times.

We are one, but we are still two.

This is where I've found the redemptive message of mutuality to be most life-giving. We aren't some strange amalgamation of Kelsey and Jonathan (Kelsathan?). We're still Kelsey and Jonathan.

Sometimes I think my complementarian friends are just watching us, waiting for the bottom to fall out. They see us, a male elementary music teacher married to a professional, independent woman with a different last name, and they seem to be skeptical that we can function so well. I tell them that it's easier. It's easier when we're both free to be ourselves, manifesting unique set of gifts, inclinations, and abilities. I think it makes for a much more dynamic relationship.

After all, I'm convinced that the paradigms of "biblical" manhood and womanhood are fabrications. The highest calling of any person is to follow Christ wholeheartedly. A marriage relationship free of gender rigidity has given me the freedom to do so.

See more at: <http://www.jennyraearmstrong.com/2013/02/11/jonathan-aigner-and-kelsey-seifert-i-was-raised-as-a-southern-baptist-homeschooler-deep-in-the-heart-of-texas-where-we-like-our-steaks-rare-our-trucks-big-and-our-women-in-their-place/#sthash.8t0XqEGN.dpuf>

Included with permission from the author, Jenny Rae Armstrong

Why I Stayed

There are many different reasons why women stay in abusive relationships. This is MY story...

My reasons for staying were:

My thoughts for staying were:

These people thought:

My family _____

My friends _____

My children _____

What I feared most was:

What it took for me to leave was:

REASONS WHY SHE STAYS

People who have not experienced abuse by an intimate partner often maintain that they if their partner abused them they would instantly leave the relationship. However, remaining in or leaving an abusive relationship is a complex decision that may serve as a very rational survival mechanism. Domestic violence represents a serious violent crime, and there are many emotional, physical, financial, social, and spiritual obstacles to overcome in leaving an abusive relationship. The following is an abbreviated list of some reasons victims of abuse often choose to stay in or return to an abusive relationship.

- Denial/excuses: A DV survivor may find it difficult to classify herself as abused or battered, and deny that there is a problem. Victims may believe the abusers excuses to justify the violence, i.e., job stress, substance abuse
- Traumatic bonding: When the person who is isolating, abusing, and dehumanizing the victim is the same person providing her with the basics needed for survival (i.e., food, shelter, or some pain relief or affection) a form of traumatic bonding can occur, which leads to an irrational feeling of bonding to the abuser, and this feeling of being traumatically bonded is often mistaken for love. The victim may lose her own beliefs and identity and identify with her abuser.
- Guilt/self-blame: The victim may believe that the abuse is her fault, that she provoked it and deserves it. Victims may also believe that abuse is an unavoidable part of their lives.
- Spiritual/religious, distorted religious beliefs and misguided teachings: Such beliefs may lead victims to think they have to tolerate the abuse to show their adherence to the faith.
- Family pressure: Pressure by those who either believe that there is no excuse for leaving a marriage or have been deceived into denial by the abusers charismatic behavior.
- Cultural and racial defenses and stereotypes: These may be cited by offenders, victims, and other community members who may not be cognizant that although domestic violence occurs among all races, no excuses, save self-defense, ever justifies the abuse.
- Fear of retaliation or reprisal/belief of abuser's threats to kill her and her children if she attempts to leave: It is estimated that a battered woman is 75% more likely to be murdered when she tries to flee or has fled than when she stays. It is dangerous for counsel to advise a victim simply to leave without ensuring that a trained advocate or attorney has worked with her to conduct extensive safety planning.
- Fear of losing child custody: This fear can immobilize even the most determined abuse victim. Abusers frequently use threats of obtaining custody to exact agreement to their liking.
- Gratitude toward the abuser because he has helped support and raise her children from a previous relationship: Additionally, a victim who is obese, has mental health, medical or other

serious problems, or is illiterate often appreciates that the abuser professes his love, despite the victim's perceived faults. Through constant psychological abuse many abusers fuel the victim's low self-esteem and reinforce her belief that she deserves no better than an abusive partner.

- No place to go/fear of homelessness/financial abuse/ Victim may feel that she has no other place to turn to for money, shelter, support, etc.
- Keeping the family unit together; children's best interest: Some survivors believe it is in the children's best interest to have both parents in the home. The victims-as well as their counsel, may be unaware of the traumatic impact of children witnessing domestic violence, whether or not they have been beaten by the abuser.
- Love/ Hope for the violence to stop
- Cultural values and beliefs/ Racial Loyalty: There may be cultural pressures to stay. For instance, many African American women may subscribe to the belief that they must be strong (pride) deny violence, deny vulnerability; psycho-cultural implications exist for Black women who have internalized the notion that they must remain unwaveringly strong in the face of all adversity (Bell & Mattis, 2000). In subscribing to **Racial Loyalty**, many African American women in domestic violence relationships must confront a racial ideology that tends to accuse abused woman of betraying their race in those instances when they opt to report their victimization to the police or other formal public authority (Few, 2000). Crenshaw (2000) described this oppressive racial loyalty as an ingrained feature of the racialized social reality of African American abused women.
- Religious views: God will take care of it; pray; the Lord will change him.
- Socialized to sacrifice: Research shows that many African American females are generally socialized to sacrifice their individual desires for the integration and survival of the family unit within society, thus Black women who are abused must often choose between survival of their family and survival of themselves as healthy whole individuals (Billingsley, 1992). "The African American woman may withstand abuse and make a conscious self-sacrifice for what she perceives as the greater good of the community but to her own physical, psychological and spiritual detriment" (Bent-Goodley, 2001, p. 323).

Partially adapted from Buel, S.M.,(1999). Fifty Obstacles to Leaving, a.k.a., Why Abuse Victims Stay. *The Colorado Lawyer* (28) 10-19

Why Does She Stay Worksheet

Dialogue #1

Milvia (DV Victim): Jerard was really upset last night. He came home from work and something was wrong. I could just tell. He came into the kitchen while I was making dinner. I was almost finished, just waiting for the chicken to finish baking in the oven. I guess he wanted dinner as soon as he got home because he started throwing the plates against the wall. He picked up a boiling pot of water and threw it at me.

Jenna (Friend): Are you OK? Did you get burned?!

Milvia (DV Victim) : I moved out of the way just in time. Some water splashed on my foot but I was still wearing shoes, so I didn't get burned.

Jenna (Friend): You have got to leave, next time it might be your face! I'm worried about you.

Milvia (DV Victim): Jerard was just having a stressful day at work, he doesn't come home and behave like that usually. If I had dinner ready on time, this situation would have never occurred.

Jenna (Friend): You deserve to be treated better than this, Milvia. It's not okay that you're going through this.

Milvia (DV Victim): I know he doesn't mean it. I love him, Kristen, and I have to do what is necessary to keep my marriage together. You know my faith doesn't want me to practice divorce.

Why is Milvia staying?

1. _____

2. _____

3. _____

Why is Melissa staying?

1. _____

2. _____

3. _____

Dialogue #2:

Tarvia (friend): It's summer and you're wearing long sleeves! Are you feeling okay?

Denice (DV Victim): Yeah, I'm OK. You know the valley gets cold in the evenings Tarvia.

Tarvia (friend): You're hiding something, I know you too well. Did he hit you again?

Denice (DV Victim): We...had an argument last night. He doesn't want to spend Thanksgiving with my family this year. I disagreed; you know I don't see my mom very often. He flipped. He grabbed my arms as I tried to walk away and then threw me on the coffee table.

Tarvia (friend): Will you please come stay with me? You could've been hurt.

Denice (DV Victim): I can't leave. I don't want my family to know what's going on. Maybe he'll agree to go to anger management classes or counseling. You know he was abused growing up, I don't think he can help it. He's not a monster.

Tarvia (friend): I don't know. It keeps happening, and every time is worse than before. I'm scared for your life, friend.

Denice (DV Victim): I know you are. But if I leave instead of trying to get him help, he may come after me and then what do I do? I don't think I can survive financially without him. LA is expensive, and I haven't worked in several years.

Why is Denice staying?

1. _____

2. _____

3. _____

Dialogue #3:

Rita (Mother): I can never get in contact with you anymore. It's been a year since we've spoken. Ever since you got into a relationship with Brian, you've been so distant from me. I can't believe you moved all the way to Texas, when your family is here in California.

Yvette (DV Victim): I'm sorry mom. I should never have moved so far away and left everyone behind. I miss you, and my sisters. I really do want to call you more often, it's just so hard sometimes....

Rita (Mother): What's hard about just picking up the phone and calling me? Don't you know I want to hear from you? I worry about you.

Yvette (DV Victim): You don't understand mom. I'm not allowed to contact anyone! Not you, not my friends, not anyone! It's a risk talking to you right now. If Brian finds out, I know he'll hurt me again.

Rita (Mother): Oh my goodness, I can't believe this is happening to you! You have to leave him! He's taking you away from your family!

Yvette (DV Victim): I know, but he tells me all the time that he's the only family I need. He said if I really love him, I wouldn't need anyone else but him. I do love him, so I try to do what he says. But, then when I am alone with him, he beats me. It just doesn't make sense. Before I moved to Texas, he never laid a finger on me. Now that I have no one around me, he's become this monster!

Rita (Mother): Please come back home, honey, you're not safe over there.

Yvette (DV Victim): I want to so bad mom, but I can't. I have no money, and no means of transportation. As soon as I moved to Texas with him last year, he never let me work. He also took all the money that I had, so that I would have to ask him for money whenever I needed something. There's nothing I can do but keep believing that things will get better. I am certain that if I try to leave, it could get much worse than it is now.

Why is Yvette staying?

1. _____

2. _____

3. _____

Dialogue #4:

Malia (friend): What's with the sun glasses in the house? There's not sunlight in here.
(Malia reaches towards Alenia and remove's Alenika sunglasses, as Alenika gasps in horror.)

Alenika (DV Victim): I didn't want you to see my bruises.

Malia (friend): That lunatic! I can't believe he hit you. Are you OK? I knew Allen was crazy from the moment I first saw him!

Alenika (DV Victim): It's OK, it's really not that bad. I'm fine. He was just a little angry when I got home late from work. He promised me that he won't hit me again. Besides, I am partly to blame...I was 15 minutes late when I got home!

Malia (friend): Are you seriously blaming yourself for Allen’s abusiveness? You seriously need to leave him, girl! Alenika, come stay with me. I can help you get a restraining order against him. I’ll help you through this.

Alenika (DV Victim): Thank you Malia, but I can’t leave. We have two children together, and he always tells me that if I left him...he would take my babies away from me. I can’t live without my children. I need my family to be together no matter what. Please don’t worry about me. Like I said, it’s not that bad. Everything is going to be OK.

Why is Alenika staying?

1. _____

2. _____

3. _____

Answer Key:

Dialogue #1:

1. Denial
2. Hope for Change
3. Love
4. Religious pressure
5. Believes the myths about domestic violence

Dialogue #2:

1. Economic dependence
2. Danger of leaving
3. Isolation
4. Pressure to be nurturing
5. Shame/embarrassment

Dialogue #3

1. Social isolation
2. Economic dependence
3. Fear of leaving
4. Hope for violence to cease
5. Love for the perpetrator

Dialogue #4

1. Denial about the abuse
2. Fear of losing children
3. Keeping the family together
4. Hope for change
5. Guilt/ self blame

Safety Planning Check List

SAFETY CHECKLIST:

Domestic violence professionals say a restraining order is one tool to use toward personal safety, but there are also other precautions that an abused woman should follow up with to aid in her safety.

- ✓ Change the locks.
- ✓ Install security system, smoke alarms, and an outside lighting system.
- ✓ Preprogram emergency numbers into the telephone, including 911.
- ✓ Notify neighbors about the restraining order or separation and ask them to call police immediately if they see the abuser near the home.
- ✓ Tell those who care for your children, and make sure they know those who have authorization to pick up the kids.
- ✓ Avoid bank stores and other places that you frequented when living with the batterer.
- ✓ Notify work and try to arrange for your calls to be screened.
- ✓ Report abuse of a restraining order immediately, even if it seems innocuous, such as a telephone call or letter.

Superior Court orders for relief:

As a DV survivor you have the right to go to the Superior Court and file a petition requesting any of the following orders for relief:

- ✓ Restraining the attacker from abusing victim and other family members
- ✓ Directing attacker to leave household
- ✓ Preventing the attacker from entering the residence, school, business, or place of employment of the victim
- ✓ Awarding the victim or the other parent custody of or visitation with a minor child or children
- ✓ Restraining the attacker from molesting or interfering with minor children in the custody of the victim
- ✓ Directing the defendant to make specified debit payments coming due while the order is in effect
- ✓ Directing the party NOT granted custody to pay support of minor children, if that party has a legal obligation to do so

- ✓ Directing the defendant to make specified debit payments coming due while the order is in effect
- ✓ Directing one or both parties to participate in counseling

Questions About Leaving

1. Where will I go?

- Stay with a friend or relatives
- Avoid staying with a man unless he is a relative. (Living with a man you are not married to could hurt your chances of getting custody of your children and spousal support.)
- Go to a battered women's shelter with your children. There you can obtain help regarding legal and financial resources from the staff as well as counseling, emotional support, and advocacy for you and your children
- You can call 211 for domestic violence shelters and programs
- If you or your children are in immediate danger contact the police immediately. You may then arrange for temporary protective custody. Permanent custody will be decided later by a judge.

2. Can I take my children with me when I leave?

- Yes you can, if you can do this safely.
- It is imperative that you get legal custody within a few days.
- If you do not have your children with you, it may be difficult filing for temporary custody of your children. The parent who has the physical possession of the children may have an advantage getting temporary custody.
- Your partner may attempt to kidnap or harm the children to get you to return. Call 911 if in immediate danger.

Myths about Abusers

Myth: Alcohol causes battering. People who batter are alcoholics.

Fact: Very often, drinking and battering do go together, and alcohol accelerates the battering problem. But drinking does NOT cause battering. Drinking may allow someone to let down his or her inhibitions and become violent. Someone who drinks and is violent can learn to control both of these behaviors, and get help to do so.

Myth: Once a batterer, always a batterer.

Fact: Although the prognosis for change is dim (Gallup, 1990), some men do stop their violent behavior. Men have more success at stopping physical violence than they do at stopping verbal and emotional violence. It is estimated that it will take between 3 and 5 years of weekly therapy for a man to make a significant, lasting change in all aspects of his violent behavior (Standards for Treatment, 1989).

Myth: “I just lost it.”

Fact: Batterers say they could not help themselves from using violence. Most men who batter use other methods of dealing with frustration, anger or “provocation” when it is convenient for them. When the batterer feels angry, he does not beat up his boss, his secretary, the neighbor, a stranger on the street, or children playing in the next yard. Only in the privacy of his own home or when he perceives he will receive no negative consequences will he choose to use violence toward his female partner and possibly his children. In the vast majority of cases, he will batter no one else (Ewing et al., 1984; Ptacek, 1988; Stordeur & Stille, 1989).

When the perpetrator uses violence, it is because he has made an assessment of the situation and has determined that:

- What I am doing is not wrong.
- If it is wrong, I will not get caught.
- If I get caught, I can talk my way out.
- If I cannot talk my way out, the penalties will be minor. I will decide what the penalties are. (Lindsey, 1990)

In these “I just lost it” episodes of violence, batterers say and do things they know will hurt their victim. They yell obscenities and threats. They kick pregnant women in the stomach. They hit the victim in places that will be seen or hidden, depending on the message they want to be delivered by the violence. Batterers use violence because they know they can and no one will stop them or apply negative consequences.

Myth: Abusers batter because they have low self-esteem.

Fact: Many people believe that batterers are violent because they feel bad about themselves. They pick on their partners to make themselves feel better. While it may be true that many or all batterers have low self-esteem, this does not explain why they batter. There are many men and women with low self-esteem who are not violent.

Myth: Batterers are mentally ill.

Fact: It is worth noting that in an extremely small percentage of cases, violent behavior may stem from a brain disorder or damage. However, people with this condition commit violent acts at random toward those with whom they're in contact. This is not the case in the vast majority of battering relationships. While some batterers use such excuses as physical problems, drinking, and war flashbacks to justify their actions, these "afflictions" usually do not cause them to harm anyone else except their partners. Battering is not a disease but rather a learned behavior. Abusive behavior is within a person's control. A person uses violence to obtain and maintain control over another person. More importantly, battering can be lethal; it is a deadly crime that can be perpetuated by social institutions unless they intervene to stop it.

Myth: He was abused as a child and needs therapy for it.

Fact: Multiple research studies have examined the question of whether men who abuse women tend to be survivors of childhood abuse, and the link has turned out to be weak. A bad childhood doesn't cause a man to become an abuser, but it can contribute to making a man who is abusive especially dangerous. For some abusive men, the blame-the-childhood approach has an additional reason for being appealing: By focusing on what his mother did wrong, he gets to blame a woman for his mistreatment of women. This explanation can also appeal to the abused woman herself, since it makes sense out of his behavior and gives her someone safe to be angry at, since getting angry at him always seems to blow up in her face. The abuser only wants to draw attention to his terrible childhood if it's an excuse to stay the same, not if it's a reason to change. (*Why Does He Do That?* by Lundy Bancroft).

Myth: He is abusive because he feels so strongly for me.

Fact: Most abusive men have close relationships with people other than their wives or girlfriends. My clients may feel deep fondness for one or both of their parents, a sibling, a dear friend, an aunt or uncle. Do they abuse their other loved ones? Rarely. It isn't the love or deep affection that causes his behavior problem. (*Why Does He Do That?* by Lundy Bancroft).

Adapted from <http://www.safehavenshelter.org/myths-about-abusers/>

Characteristics of Abusive Men

1. **Pressures you for quick involvement:** Pressures you for an exclusive commitment right away.
2. **Exhibits jealousy:** Excessively possessive and is threatened by your relationship with your friends and/or family. Frequently calls you to “check up” on you and see if you are with someone else. Is very aware of time and will question where you have been, since he knows how long it takes for you to get places and wants you to be accountable for your whereabouts. The abuser may check the mileage on your vehicle.
3. **Controlling:** Frequently checks your phone and email and closely monitors your chargers. Limits your visits to friends and family members. Interrogates you regarding who you spend your time with and where you have been. Restricts phone calls. Discourages you from attending school, church or social events. Controls the money and requires that you ask permission before going anywhere. May dictate the type of clothing you wear and how you wear your hair. May place you in a double-bind when he wants you to dress up and then accuse you of dressing seductively when you do.
4. **Unrealistic expectations:** Wants you to be perfect and meet his every need. Has little sympathy or empathy for others and is self-absorbed.
5. **Isolation:** Tries to cut you off from your family and friends so you are easier to control. Accuses your friends of being against him. Will be threatened by your holding a job, since you might meet other men there.
6. **Blames others for his problems or mistakes:** Shifts the responsibility onto others for his actions.
7. **Makes others responsible for his feelings:** Feels that his feelings are caused by others and does not see his part in how he feels.
8. **Hypersensitivity:** Is overly sensitive and “makes a mountain out of a molehill.” Feels overly persecuted and “personalizes” things rather than seeing that people are just doing their job. Feels that things are unfair. May be paranoid and believe that you are purposefully doing things to upset him.
9. **Force during sex or play fighting:** Is inappropriately physically aggressive at times.
10. **Verbal abuse:** Is critical of you and calls you names that attack areas where you are more insecure (weight, parenting, intelligence, etc.). May humiliate and embarrass you in front of your friends or family. Plays mind games.
11. **Inflexible sex-roles:** Treats you like a servant. Expects to be the one to tell you what each of you should be doing. Expects immediate compliance.

12. **Rapid mood swings:** Abrupt, shifting mood swings: for example, calm and affectionate one moment and angry and distant the next. May drive his vehicle in an intimidating manner to frighten you when he is angry. May strike out at things or throw objects and then minimize his actions.
13. **History of battering:** Admits that he has been abusive with past partners but says that they deserved this or provoked the abuse.
14. **Threats of violence:** Makes statements that he will kill you or threatens you and then dismisses it as no big deal when he is confronted. Minimizes or denies that he has made these statements.

Adapted from pricketts@interlynx.net

Characteristics of Abusive Men

Vignette #1: Kara

I met Daniel at a friend's birthday party. He was charming, funny, and very attractive. I knew after talking to him that I wanted to go out and see if we had a connection. I was so excited when he asked for my number and if he could take me out! We went out on a couple dates, and I could tell there was something different about him, and I was intrigued. Daniel said that he had never felt this comfortable with anyone. He said he could trust me, and after three dates, he asked me to be his girlfriend, because he couldn't imagine spending his time with anyone else. About a month after we started our relationship I began to see differences. We were out eating dinner one night, and he became so upset. One of the servers tripped, and someone else's drink spilled on his new shirt. He made a scene in the restaurant, yelling at the server and talking to the manager about what happened. See, the funny thing was that he tripped the server with his chair when he was getting up. It wasn't the server's fault but it was like he was oblivious to what he did. I was embarrassed. On the drive home, I tried to explain the part he had in the incident but it only made him angrier. He said that I was taking the server's side and that I didn't care about his feelings or his ruined shirt. He called the server incompetent and said that maybe my boss was right in calling me incompetent, since I didn't see his point of view. I didn't want to say anything else, because, clearly, he was not going to listen to me, and I didn't want to argue. I was hurt by his comment, because I just received a low performance evaluation at work and was put on an action plan. I was scared of losing my only source of income and was doubting my abilities at work. How could he use what I told him in confidence against me like that? Over a stain on a shirt? We sat in silence on the car ride home and I wondered how he would be when it came to issues that were actually important.

Examples of characteristics of abusive men: Write the characteristic displayed and back it up with examples from the vignette:

1.

2.

3.

Vignette #2: Alexis

I have been with Carlos for 3 years, and we have a 3-month-old son, Manuel. I'm a stay-at-home mom because daycare is expensive, and it would take my whole paycheck to afford it. I enjoy the one-on-one time with my son; however, Carlos has changed his behavior drastically since our son was born. He expects me to fulfill the same roles as I did pre-baby: keep the house clean, cook all of the meals, and spend time with him every evening. The baby keeps me busy, waking up constantly to be fed or changed. Carlos doesn't seem to understand. He doesn't want to see piles of laundry, the trash needing to be taken out, or even some dust on the TV stand. Everything needs to be spotless in the house, and that's difficult to do with an infant. I tried to reason with him—I suggested we move closer to my mother so she can help with some of the care-giving responsibilities, but he won't have it. He said that I should be able to manage everything, that I should just "get it together." He makes comments that I am a disappointment as a wife and mother. I'm trying my best, and it's hurtful to hear the man I love make statements like that. He's banned my friends from coming over to the house recently. He said that they're distracting me from my responsibilities. Really, they were my saving grace. Lately, I feel like I don't even know the man I married. This is definitely not what I had in mind when we were going to start our family, and I want desperately for things to be the way they used to be. His actions make me think twice about how honest he was when he told me about his previous marriage. Maybe she did not have anger management problems. I'm starting to wonder if he was the one who was abusive and not her—maybe there was no such thing as self-defense after all.

Examples of characteristics of abusive men: Write the characteristic displayed and back it up with examples from the vignette:

1.

2.

3.

Answer Key:

Vignette #1:

1. Pushes for quick involvement
2. Blames others for his problems or mistakes
3. Hypersensitivity
4. Verbally abusive

Vignette #2:

1. Unrealistic expectations
2. Isolation
3. Verbally abusive
4. Rigid sex roles
5. Past battering

Into the Mind of a DV Perpetrator Quiz

Write True or False in the space provided

1. The abuser may demonstrate extreme jealousy with your attachment with your friends and family _____
2. The abuser never try to control you or any aspect of your life _____
3. An abuser may pressure you for an exclusive commitment right away and claim that he has never felt that way with anyone else _____
4. An abuser always takes responsibility and never shifts the responsibility onto others for his actions. _____
5. An abuser would never attempt to isolate you from your family and friends _____
6. An abuser would never blame the victim for how he feels. He never feels that his feelings are caused by others. _____
7. An abuser can seem understanding one minute, and then suddenly switch to being angry and distant the next DV _____
8. An abuser would never say that the victim deserved the abuse. _____

9. IOA 1: ABUSE AND FAMILY DYNAMICS

ABUSIVE MEN AND FAMILY DYNAMICS

1. Promoting disrespect for the mother and her parental authority

Effects of violence, verbal abuse, and victim blaming

Children may identify with the abuser and begin see their mother as pathetic, helpless, stupid, incompetent, weak, unworthy of respect, and some will even see her as a legitimate target of the abuse perpetrated against her.

Calculated Strategies

Abuser disrupts the mother's attempts to create structure and stability; contradicts her rules; reinforces and rewards child's disrespectful behavior toward the mother.

After separation

Abuser may alienate child from mother; may seek custody as vengeance.

2. Negatively influencing the mother /child relationship

Direct impact

Abuser may prevent mother from comforting distressed child; may force children to watch distressed mother during abuse.

Indirect impact

Abuse promotes a variety of problems including depression, anxiety, poor sleeping, rage, PTSD, loss of confidence so mother cannot focus on the needs of children; may increase likelihood of maltreatment, use of drugs/alcohol, or permissive and parental neglect.

Children's disengaging from mother	More pronounced in boys and teenagers of either sex, the development of identification with the abuser and contempt for the mother or being ashamed to be associated with her.
Violence by children against mother	Also more common in boys, and most often after a separation, a child takes on the role of perpetrator, sometimes to win the approval of the absent abuser.
3. Using the child as a means to perpetrate abuse	
During relationship	Abuser maltreats, neglects, or perpetrates other behavior harmful to child (e.g., destroying personal property to hurt mother; having child spy on mother; deliberate endangering child; threatening to harm, kidnap or kill child; leaving the family destitute; or reporting the mother to DCFS).
After relationship	Abuser blames mother for separation; enlists child's support to pressure mother for reconciliation; uses child to communicate with or spy on mother; seeks custody.
4. Impact on the family system	
Chronic fear and emotional deprivation	Unhealthy, dysfunctional dynamics become solidified among family members; children may compete for abuser's attention because his attention and affection are scarce.
Role reversal	Parentification of children (i.e., adopting or being given a parental role in the family) and infantilizing of mother (i.e., treating her like a child) may over time see the woman being protected by child; child may try to predict and prevent violence by the abuser.

Adapted from http://www.lfcc.on.ca/HCT_SWASM.pdf

Red Flags in Relationships

Psychologist Lundy Bancroft has compiled a list of warning signs that help aid women in early detection of potential abuse down the road early in ones relationship in his book entitled *Why Does He Do That? Inside the Minds of Angry and Controlling Men*. Below is a listing of several red flag indicators revealed in the book.

1. He speaks disrespectfully about former partners

It is very common for people to have difficult feelings after ending a relationship but pay particular attention if his anger toward the previous partner is not uncommon for people to have hard feelings after a break-up but be careful if his anger toward a previous partner (or partners) is unusually resentful and you notice any of these things:

- The abuser uses insults and degrading language to describe a former partner.
- He assumes the role of a victim of abuse by her.
- He claims she wrongly accused him of abuse.
- He blames all problems in their relationship on her and accepts no responsibility
- He admits he abused a past partner but justifies his abuse with an excuse (e.g., drinking, former abuse history, or stating she caused the abuse.)
- He praises you for being better than she was.
- He claims you are the only woman who really understands him.

How do you think and feel in response?

- You feel sympathetic toward him because of how badly his ex-partner treated or treats him.
- You compete to be a good partner and better than she was .

2. He treats you in a disrespectful manner

You may be ideal at first, but he eventually finds fault with nearly everything you say and do.

- He insults you, puts you down, criticizes, and ridicules you.
- He doesn't respect your opinions, discounts you.
- He humiliates you in front of other people and in private.
- He compares you to previous partners and says you are not as good as they were.
- He blames you for things he himself does wrong.
- He criticizes you if you dispute against disrespectful treatment.

3. He makes you uncomfortable by doing favours or being generous

This sounds great at first, but pay attention to your level of discomfort.

- He insists on doing favors for you no matter how much you protest.
- He claims you owe him favourable treatment because of his favours to you.
- He brings up his past favours and makes you feel guilty if you do something he disapproves of.

4. He is controlling and possessive

This starts subtly and can initially be mistaken for his intense interest in you. These are some ways control can look early in a relationship:

- He has activities all planned out for your dates.
- He is not interested in hearing your ideas for activities or contributions to planning them.
- He has strong opinions on how you should dress and look.
- He pressures you to spend all your time with him.
- He gives you advice you didn't ask for.

Adapted from from: *Helping Abused Women in Shelters: 101 Things to Know, Say & Do*
(Cunningham & Baker 2008)

Red Flags In Relationships: Worksheet 1

Vignette #1: Kiani

I was in a domestic violence relationship for a year with the man who I thought was my soul mate. It was difficult to leave, but with the help of my mother, I was able to get out and get a restraining order to keep me safe. That was 3 years ago. Fast forward to 1 month ago...I started dating again. I was scared to end up in the same situation again but I felt more confident this time. Never again would I be hurt like that. I met Chris through an online dating website. After meeting 2 guys before him and not feeling a connection, I was skeptical but changed my mind after our first date. Chris planned everything for our date—a romantic restaurant and a walk on the pier. He planned our next several dates in order to surprise me. He would tell me how to dress for the date, so I was prepared. The dates were always fun, and I thought it was sweet that he took time out for me like that. Our relationship progressed fast, and before I knew it, I was spending all of my time with Chris. Whenever he was not at work or with friends, he was with me. He called me on his breaks at work to see how I was doing and said he couldn't wait to see me again. He started planning vacations together months in advance, because he knew that this was going to be a long-term relationship a month into it. I thought it was too soon for that, but then again, things were going great. While at his house one evening, Chris talked to me about his family. He talked about how his dad provided for the family while his mom took care of the children and the house. Chris said that it was the men's responsibility to take care of the weaker sex—after all they got higher paying jobs. I'm working to become an accountant and shared my opinion on how society has changed and that women can do a lot more than he's giving them credit for. He became upset and said that my opinion was invalid. He raised his voice and made a comment how none of his past girlfriends would ever be stupid enough to say something like that

What red flags are present in Kiani's relationship with Chris? Write what you see and back it up with examples from the vignette:

1.

2.

3.

Vignette #2: Autumn

Will and I met through one of my mother’s coworkers. We haven’t been dating long, only 3 months, but I enjoy our time together, and I think he may be the one. I know it’s too soon to tell, but he makes me feel special. He always pays for everything—whenever I ask to help out, he insists that he pays. He says it’s his way of letting me know how much he cares for me. After a month of dating, we were alone at his place and started kissing intensely. One thing lead to another, and Will was asking to have sex. It was too soon for me, and I let him know, but he wouldn’t let it go. He said we both felt like things were going well. He said he has done a lot for me that he would’ve never done for past girlfriends, like the time he came to change my flat tire early in the morning so I could make it to work on time. He was right, it felt like we had known each other much longer, so I gave in to the moment. Will told me how thankful he was for meeting me because his last relationship was a nightmare. He told me about how she used to put him down and how she used to destroy things in the house during arguments. One time, she even called the police on him, claiming domestic violence. Will said I was nothing like her....I was smart, creative and beautiful. Those were all characteristics he admired. I felt bad for him because he was a caring and generous man. He worked hard to meet his goals, and he, of all people, didn’t deserve to be treated like that. The only problem that Will had was that he was struggling to stop using prescription pain pills. The pills were prescribed to him after his knee surgery 8 months ago. He admits that sometimes he continues using the pills to prevent withdrawal symptoms. I expressed my concerns and told him he needs to seek help, but he dismissed my advice and said he could do it on his own.

What red flags are present in Autumn’s relationship with Will? Write what you see and back it up with examples from the vignette:

- 1. _____

- 2. _____

- 3. _____

Vignette #3: Karla Part 1

Mike and I met through an online dating website. We've only been dating for a week, but it feels like it's already grown into a serious relationship. That probably just means this relationship is really meant to be. Our first date was amazing! It was so refreshing to finally be going on a date after being single for so long. I remember being so excited that I went out and bought a brand new outfit, with accessories and all, just for this date. I went and had my hair professionally done into a cute bun, and I had my make up done. I wanted this date to be perfect. I must say—I was a little disappointed when Mike insisted that I specifically wear a red minidress that he bought for me for our first date. He had special plans for the date, and told me how important it was for me to wear that specific dress. That was a little strange to me, but I did appreciate the fact that he bought me a brand new dress. So he told me to be ready by 6 pm on Friday night, and offered to pick me up. I felt more comfortable driving to meet him at the spot, since this was a first date, and I really didn't know him all that well. Funny thing happened—his offer sort of turned into a demand, as he insisted on picking me up. Mike believed that it wouldn't be romantic if he didn't pick me up. That made a little sense to me. It was annoying, but not a big deal, so I acquiesced, although, in my mind I was thinking that this would probably be the first and the last date with Mike. Fast-forward to Friday night, Mike arrives early with roses in one hand and my red dress in the other. I felt so special at that moment! I hurriedly put on the red dress, and left to embark on this mystery date. After half an hour of driving, we get to this fancy restraint. The waitress comes to take my order, and Mike orders for me. I was shocked. I wanted to say something, but...it wasn't like I'm paying for my food. So, I just smiled and sat there, even though I was incredibly uncomfortable with this. When my order arrived, it was pretty good, so I wasn't as bothered. The date went fairly well overall, except for when Mike would make comments about my hair and makeup. That really bothered me, because I had done my hair and makeup specifically for this date! He would tell me that he likes my hair down and literally had the nerve to tell me to take the bun down. He said the bun makes me look old. I was a little upset, but when I took it down he groveled about how beautiful I was. He would tell me how well my hair frames my face and brings out my eyes. He sure knew how to make me feel special after making me feel bad. He's not that bad, but I don't know about a second date.

What red flags are present in Karla's relationship with Mike? Write what you see and back it up with examples from the vignette:

1. _____

2. _____

3. _____

Vignette #4 Karla Part 2

I actually never intended to go on a second date with Mike. But, to my surprise, during the end of our first date, Mike had already planned the second date. Again, he insisted on picking me up sometime in the evening the next day. He picked me up on time, but this time, instead of buying me an outfit, he told me to dress casual. He also insisted that I wear my hair down. I felt really uncomfortable with being told what to wear, but figured there might be a good reason. Anyway, we had lunch at a nice restaurant, and after that we went hiking. Mike kept complementing me on my fun and carefree personality and comparing me to his ex-girlfriend. He told me that his ex-girlfriend was never fun to be around and that she was stupid and made it difficult for him to be the man of the relationship. I wondered what he meant by that. He continued to say that his ex-girlfriend was stupid to think women were equal to men. Mike went on and on about how we are such a perfect couple. I didn't even know we were a couple yet! Nothing ever moved this fast with me, I was having a hard time keeping up.

What red flags are present in Karla's relationship with Mike? Write what you see and back it up with examples from the vignette:

1. _____

2. _____

3. _____

IOA 4: RED FLAGS ANSWER KEY

Answer Key:

Vignette #1:

1. He's controlling
 - a. Has activities planned for all dates
 - b. Has opinions on how she should dress

2. He's possessive
 - a. Calls several times a day to check-in
 - b. Wants to spend every minute with her, when it's convenient for him

3. Gets serious too quickly
 - a. Planning vacations a month into dating

4. Has negative attitudes about women
 - a. They're the weaker sex
 - b. Men take care of them
 - c. Women are caretakers, get paid less

5. He's disrespectful
 - a. Insults and puts down
 - b. Doesn't respect opinions
 - c. Compares to previous partners

Vignette #2:

1. Makes her uncomfortable by doing favors or being generous
 - a. Insists on doing something (paying for everything)
 - b. Brings up past favors (changing flat tire) and makes her feel guilty

2. Pressures for sex

3. Speaks disrespectfully about former partners
 - a. Started soon after meeting
 - b. Claims she falsely accused of abuse
 - c. Paints himself as a victim
 - d. Praises for being better than she was
 - e. Expects her to feel sorry for him because of how badly he was treated

4. Abuses drugs or alcohol

Vignette #3 Part 1 and Part 2

1. Makes her uncomfortable by doing favors or being generous
 - a. Insists on doing something (paying for everything, picking her up from home, buying her dress)
2. Disrespectful
 - a. Insults, puts down
 - b. Compares to previous partners
3. Controlling
 - a. Has activities planned, tells her what to wear and how to style her hair
 - b. Insists on picking her up

What Are Your Self-Defeating Thoughts?

Name:

What is a negative or self-defeating thought that brings you down?:

How can you change that thought to make it positive and self-motivating?:

Draw a depiction of how the negative or self-defeating thought makes you feel and how the positive or self-motivating thought makes you feel. It may be a literal drawing of the emotion or a creative representation how you feel.

C1: FINAL EXAM

DV only involves physical abuse.	True	False
The Power and Control Wheel includes physical and emotional abuse, but does not include sexual and economic abuse.	True	False
DV is centered on a person's abusive use of power to control another.	True	False
An abuser always takes responsibility for his actions and never shifts the responsibility to his victim.	True	False
Research identifies DV as the number one health issue among African American women.	True	False
An abuser would never attempt to isolate his victims from her friends and family.	True	False
An abuser would never blame his victim for how he feels. He never feels that his feelings are cause by others.	True	False
An abuser can seem understanding one minute and then suddenly switch to being angry and distant the next.	True	False
Entitlement is identified as the "overarching attitudinal characteristic" of abusive men.	True	False
Children who witness domestic violence in their homes are largely unaffected.	True	False
The abuser would never say that the victim deserves her abuse.	True	False

1. Identify five types of abuse that are included in the Power and Control Wheel:

2. Give an example of each of the five types of abuse:

3. There are three phases in the Cycle of Violence that shows how domestic violence involves a cyclical set of behaviors. Those three phases are: Tension Building Phase, Explosion Phase, and Honeymoon Phase. Provide a description of each phase:

4. Write out one positive affirmation that appeals to you. (You can come up with one on your own or write one that you have heard before.):

5. List four components of the Equality Wheel:

What are four qualities in a healthy relationship?:

6. List five safety planning strategies:

C2: GET TO KNOW YOU

How Well Do You Know Me?

Choose a partner with whom you would like to engage in a conversation. Discuss with your partner the nine items below. Listen carefully to your partner's answers and be prepared to present what your partner has discussed with you. You may list your partner's interview answers on a sheet of paper to guide your presentation.

1. Identify your name and where you're from.
2. What's your favorite color, type of food, and hobby?
3. What have you learned so far from the Violence Prevention classes that you've attended?
4. What VP information do you find the most applicable to your life?
5. If you're life could be exactly as you want it to be, what would it look like? What would you be doing and where would you be? What would a perfect life look like for you?
6. If you could travel anywhere, where would you go?
7. What are two things you love about yourself?
8. What is one thing you would like to improve about yourself?
9. Identify two things that make you feel better when you're feeling down?
10. Identify one thing you like about your activity partner?

C2: GET TO KNOW YOU

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____
- 11 _____
- 12 _____
- 13 _____
- 14 _____
- 15 _____
- 16 _____
- 17 _____
- 18 _____
- 19 _____
- 20 _____

C3: Affirmations

Scriptural Affirmations

1. I will follow after the things which bring peace, and things wherewith I may edify another. (Romans 14:19)
2. I choose to forgive, even as God for Christ's sake has forgiven me. (Ephesians 4:32)
3. I did not receive the spirit of slavery to fall back into fear, but I have received the Spirit. (Romans 8:15)
4. For God gave me a spirit not of fear but of power and love and self control. (2 Timothy 7:7)
5. The Lord is my Helper- I will not fear: what can man do to me? (Hebrews 13:6)
6. I will not throw away my confidence, which has a great reward. (Hebrews 10:35-36)
7. In all my ways, I will acknowledge the Lord and He will make straight my paths. (Proverbs 3:6)
8. There is no fear in love, but perfect love casts out fear. (1 John 4:18)
9. He said to me, "My grace is sufficient for you, for my power is made perfect in weakness." (2nd Corinthians 12:19)
10. I will fear not, for HE is with me. I will not be dismayed, for He is my God and my God will strengthen me, help me and uphold me with HIS righteous right hand. (Isaiah 41:10)
11. Love is patient and kind, love does not envy or boast; it is not arrogant or rude. It doesn't insist on its own way; It is not irritable or resentful; It doesn't rejoice in wrongdoing, but rejoices with the truth. Love bears all things, believes all things, hopes all things, endures all things. (1 Corinthians 13: 4-7)
12. O Lord, you hear the desire of the afflicted, you will strengthen my heart, and You will incline your ear to do justice to the fatherless and the oppressed, so that the man who is of the earth may strike terror no more. (Psalm 10:17-18)
13. Today I am be slow to speak, quick to hear, slow to anger. (James 1:19-20)
14. Not by might, not by power, but by My Spirit saith the Lord of Hosts. (Zechariah 4:6)
15. I can do all things through Christ who strengthens me. (Philippians 4:13)
16. I praise you—for I am fearfully and wonderfully made. (Psalm 139:14)
17. For everyone who calls on the name of the Lord will be saved. (Romans 10:13)

18. I am developing my Spiritual gifts each day. (I Corinthians 12:28)
19. Today I let go of useless anger. (Proverbs 29:11)
20. Today I will focus on the present moment. (Isaiah 30:15)
21. I seek positive experiences. (Psalm 8:3)
22. I cast my cares upon Jesus, as he gives me rest. (Matthew 11:28)
23. Today I speak out strongly what I have to say. (Exodus 7:2)
24. Today I confidently approach tough situations. (Hebrews 4:16)
25. I find meaning and purpose in Jesus. (Romans 8:28)
26. I encourage myself while encouraging others. (Hebrews 10:28)

C3: Affirmations

Positive Affirmations

1. I treat myself with kindness.
2. I am a worthwhile person.
3. I set appropriate boundaries and enforce them.
4. I respect other people's boundaries.
5. With my Higher Power's help, my direction in life is clear.
6. I release my fear of truly feeling my feelings.
7. Today, I am willing.
8. I observe the good things that happen in my life.
9. There is a lot to be happy for—God has a plan for me.
10. I am perfectly me.
11. I celebrate all my successes, large and small.
12. I trust myself.
13. As I turn negatives into positives, my life changes for the better.
14. I am loving—I am loved—I am lovable.
15. I keep improving.
16. I am healing.
17. Today, I have whatever I need.
18. I open myself to receive love—and to love others.

19. I am enough.
20. I am enough, and I have enough.
21. Today, and every day, I allow myself to be me.
22. I am all right; I am OK; I am successful in whatever I do.
23. I am grateful for all that I am.
24. I can never fail at being me.
25. I can handle it, whatever it is.
26. I respect myself and act in accordance with my own values.
27. I am capable of change.
28. I make amends when appropriate.
29. I matter.
30. I forgive others and myself.
31. I am changing.
32. I am worth listening to.
33. I trust my emotions and my thoughts.
34. I feel. I share. I trust.
35. I can feel my emotions without being overwhelmed by my emotions.
36. I am grateful for my friends.
37. I am comfortable with myself.
38. I am comfortable with others and myself.
39. I am able to say “no.”

40. I express my anger appropriately.
41. I am uniquely me, and I share my humanity with all.
42. I am honest and direct.
43. I like myself and accept myself as I am.
44. I am on a wonderful journey of healing.
45. I have choices in life.
46. I take care of myself physically and emotionally.
47. I love and I am loved, by myself and by my God.
48. I am capable human being.
49. I am a skillful and artistic person.
50. Nothing is worth losing my sanity over.
51. I am responsible for my own feelings.
52. I have the right to feel the way I do.
53. I am able to handle the problems I face with the help of my God