How We Make Her Stay: Understanding Myths and Misconceptions Regarding Domestic Violence

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Abstract

It is through our many interactions with both our clients and colleagues that we have become aware of how specific myths and misconceptions about domestic violence may lead to severe implications for the victims. The purpose of this article is to highlight myths and misconceptions that we have encountered in our work with victims of domestic violence and to offer our ideas regarding possible ways of addressing these.

Introduction

According to the National Resource Center on Domestic Violence (2014), domestic violence is defined as a “a pattern of abusive behaviors—including physical, sexual, and psychological attacks as well as economic coercion—used by one intimate partner against another to gain, maintain, or regain power and control in the relationship” (National Resource Center on Domestic Violence, 2014, para. 1.). Domestic violence is often also referred to as intimate partner violence, domestic abuse, among others. For the purposes of this article, the terms victim, survivor, and client will be utilized synonymously similarly to the words perpetrator and aggressor.

Recently, the Centers for Disease Control and Prevention (Breiding, Chen, & Black, 2014) reported that findings from their latest study indicated that women are disproportionately affected by intimate partner violence. Not only is this disproportion present in the lifetime prevalence of intimate partner violence incidents, but also in the severity of the incidents and the negative outcomes associated with them (Breiding et al., 2014). Although it is evident that there are also male victims of domestic violence, for purposes of this manuscript, particular focus will be placed on female victims.

It is estimated that globally, “nearly one-third of ever-partnered women, have experienced physical and/or sexual violence by an intimate partner” (World Health
Despite the alarming number of women affected by domestic violence, existing literature has called attention to the lack of domestic violence training obtained by mental health professionals. Bozorg-Omid (2006), for example, reported that only 50% of the counselors surveyed had received graduate training on the topic of intimate partner violence. Out of these participants, 78% indicated that this training was inadequate (Bozorg-Omid, 2006). Unfortunately this lack of training often leads to the perpetuation of existing myths and misconceptions regarding domestic violence.

The field of domestic violence is challenging not only because of the abundance of misleading information and additional layers of challenges (e.g., developing safety plans, assessing for risk), but because of the fact that many other professionals are often involved. These include police officers, attorneys, and social workers, among others. Because of this reason, we have included myths and misconceptions that are held by the general public as well as other professionals making the assumption that these may also apply to counselors and counselors-in-training. Based on our observations, it is important for mental health professionals to not only be aware of their own values and perceptions regarding domestic violence, but to also acknowledge the implications that the victim’s interactions with other professionals may have on their overall experience with domestic violence.

The purpose of this article is to highlight myths and misconceptions that we have encountered in our work with victims of domestic violence and to offer our ideas regarding possible ways of addressing these. We understand that there is a plethora of research addressing the mental health effects of domestic violence; however, we have found that despite all the available information, the following general misconceptions continue to be prevalent in domestic violence work. One of our goals is that the information presented will assist counselors and counselors-in-training who have received minimal training in domestic violence learn about some basic misconceptions that may potentially be detrimental to a counseling relationship with a client who has experienced intimate partner violence. Lastly, we hope that this article will serve as an advocacy piece by highlighting some of the oppressive information that exists regarding survivors of domestic violence.

**Myths and Misconceptions Regarding Working With Domestic Violence**

*“Why do you stay? If you leave the violence will end.”*

Although each profession plays a distinct role, most trained professionals working with victims of domestic violence would agree that asking, “Why do you stay?” is an ineffective way of assisting the victim. Although many helping professionals attempt to stay away from the “why do you stay?” question, too often, comments, questions, gestures, and overall reactions to the victim’s situation may be equivalent to making such a statement. For example, when being called for a domestic violence situation, the police officer or deputy might ask the victim, “Do you have a place to go? This is his residence too, maybe you should leave” or “I am not returning to this place again because you keep coming back to him.” Comments such as these imply that the victim is at fault for the violence against her for choosing to stay in the relationship.

Incidents such as the one described above minimize the fact that calling for police assistance may be the victim’s attempt to end the violence; that this is being done despite
the many challenges it may create. As discussed by Felson, Messner, Hoskin, and Deane (2002), some factors that keep victims from calling include the desire to keep the abuse private and the fear of their partner’s retaliation. In spite of that, many victims still call police officers for assistance, sometimes experiencing situations including police officers minimizing the severity of their situation or making humiliating comments such as those described by Stephens and Sinden (2000). Findings of this study showed that participants who had multiple encounters with police reported that police officers joked around about the victims’ situation and made statements such as “well, what do you want me to do about it? He’ll just be back tomorrow” (p. 539). In addition to making the challenging decision of calling for assistance, it is important to note that involving the police may increase the risk factor of further violence against the victim by the perpetrator.

From January 2013 through December 2013, we documented in writing 50 statements from women victims of domestic violence who reported that when responding to a domestic violence call at their homes, police officers indicated that they could not remove the alleged perpetrator from the home since he had the same right to the residence. The victims reported that such non-action by the police officers occurred often even when visible bruises were present. In all 50 documented cases, the victims reported that further physical abuse occurred against them by the same perpetrator after the law enforcement representative left.

Domestic violence is the only crime in which we tell the victim that if she leaves, the abuse against her will end. We would probably not suggest the same solution in generalized violence cases in which a person is the target of hate crime by others. Could you imagine law enforcement telling a victim of this type of crime, “Why don’t you leave?” Unfortunately, based on the experiences of many of our clients, this question is often asked or implied. Findings of previous research are congruent with what we often see and hear from our clients. Results from a study conducted by Stephens and Sinden (2000) indicated that in their sample of participants who had multiple encounters with police, they found that they perceived police officers as minimizing the situation, disbelieving the victim, and displaying an unsympathetic attitude toward the victim.

It is important for us to clarify that we discuss victim’s potential experiences with police officers because this serves as a clear example of the implied messages that may be displayed. However, this is not to suggest that police officers are the only professionals who inadvertently and sometimes directly ask the question “why do you stay.”

“It takes 7 times for a victim to leave her/his abuser.”

Another phrase commonly used by professionals, co-workers, advocates, and oftentimes conference speakers is, “It takes 7 times for a woman to leave her abuser.” It is important to note that although very commonly stated, there is no empirical data substantiating such a statement. What makes this statement more troubling is that it is a fatalistic perception about victims of domestic violence. Imagine that a victim presented to an office to seek assistance after stepping out physically for the first time after an assault by her partner. Does this mean that she still has 6 more times going back to the perpetrator before she “leaves?” Propagating such misconceptions about victims of domestic violence places the entire responsibility on the victim for ending the violence against her and communicates an expectation or lack of action on the victim’s part.
Additionally this releases the perpetrator from the responsibility that only he bares for the violence perpetrated against the victim. Is anyone counting how many times the perpetrator does not allow the victim to leave?

“**You are both the victim and the perpetrator?**”

Furthermore, based on our observations, one of the most common errors made by professionals working in the field of domestic violence is believing that both parties could be victims or perpetrators. This belief could be the result of lack of knowledge, training, and understanding of the dynamics surrounding domestic violence. Perhaps this belief also stems from the fact that many times the victim will also engage in violent behavior towards the perpetrator. If that is the case, it is important to understand what contributes to the victim’s behavior. Swan and Snow (2006) argued that many victims “have used violence against their partners at some time, as a survival strategy and in retaliation for abuse and humiliation” (p. 1027). Although specifically talking about women victims, Swan and Snow argued that the reasons why victims engage in violent behavior are for self-protection, out of fear, in an attempt to defend children, and to regain control of the relationship. Aside from incidents in which the victim displays violent behavior, another factor that may be contributing to this misconception is the increasing number of victims’ arrests when police officers are called to intervene. As discussed by Macy, Ermentrout, and Rizo (2012), these arrests might be caused by “stringent dual-arrest policies, the victim’s decision to avoid retaliation from the primary perpetrator by accepting culpability, authorities’ fears of appearing biased, authorities’ lack of training in determining the primary aggressor, or authorities’ negative preconceptions of women involved” (p. 454).

Domestic violence is rooted in power and control dynamics and stems from the belief that one person (the perpetrator) is entitled to have ultimate power and entitled to rule over the other person (the victim). Although physical differences and mental abilities are significant in all interrelationships, in incidents of domestic violence, the perpetrator has one purpose in mind, and that is to strip the victim of all power to make it easier for him/her to control and dominate the victim. Having the misconception that the two people involved in an abusive exchange can be both the victim and the perpetrator may result in overlooking the importance of assessing safety in regards to the victim and enforcing accountability for the perpetrator. This may also lead to establishing inappropriate treatment goals that may hurt the victim instead of helping the victim.

“**Couples counseling as an intervention.**”

Over the years we have met with a significant number of victims of domestic violence that reported attending couples counseling at the request of a helping professional. All of these victims indicated that another physical assault occurred against them by their intimate partner after they attended counseling together. These victims related that they were not open and honest when attending couples counseling due to fear of further emotional and physical violence by the partner/perpetrator, which impacts the effectiveness of the sessions. Furthermore, from our experience, it is evident that this type of intervention may provide the environment for the perpetrator to create excuses that may lead to denying, minimizing, and blaming of the victim for the abuse perpetrated against her. Although many professionals believe in the sanctity of marriage and in the
restoration of families, it is irresponsible and dangerous for any professional to have the expectation that when there is physical, emotional, and/or sexual abuse in a home, “talking things out” is going to resolve any conflict, much less keep the victim safe.

Implications for Practice

Changing Our Language

It is imperative for helping professionals, especially counselors, to be aware of the devastating implications and consequences that continuing to ask the “why do you stay?” question may have on the victim. It is important to understand that leaving is not only a physical act but an emotional and psychological process. Leaving is a process and not a onetime event. This question may place an additional layer of shame, guilt, and stress on the victims making their situation even more challenging. In every counseling session with victims of domestic violence, we have been able to identify measurable events in which the victim had initiated “stepping out” of the abusive relationship. These included acts such as telling the perpetrator, telling friends and family, calling law enforcement, talking to professionals, seeking spiritual guidance, and/or seeking outside resources. However, the reality is that their desire to leave the relationship is sometimes not sufficient; many factors play into this very important decision.

As true advocates of victims of intimate partner violence and in order to truly comprehend how victims begin their process of “stepping out,” we must first change our culture of language when describing the behaviors of victims of domestic violence. Instead of focusing on the “why does she stay,” we must start asking “what leads a person to abuse and threaten another person for the sole reason to dominate and control that other person?” “What stops a perpetrator from letting the victim go?” “What stops the perpetrator from leaving if he is so unhappy with the victim?” and “What makes the perpetrator believe that he is entitled to the victim’s life?” The emphasis on helping end domestic violence is to recognize that the problem and criminal behavior are the sole responsibility of the perpetrator and that no demand should be made of the victim to force the perpetrator to end the violence against the victim. As long as we continue to focus on why victims stay or what stops them from leaving, we will not advance in helping hold perpetrators accountable for their abusive behaviors. Through the primary authors’ thousands and thousands of hours of therapeutic work with victims and perpetrators of domestic violence, it became evident that the problem is not that the victim does not want to end the abusive relationship; the problem is that the perpetrator will not let the victim leave.

Furthermore, there is no substantial research or confirmed data that confirms that stepping out physically from the abusive relationship ends domestic violence against the victim definitively. However, there is research and confirmed cases that substantiate that victims are more likely to be killed when they decide to separate physically from their perpetrators. This is not to argue that the victims should stay, but to highlight the high stakes involved for the victims and to emphasize the need for all helping professionals to be sensitive to the fact that leaving implies more than packing a suitcase and walking out the door.

Lastly, it is important for mental health professionals to understand that there are many factors that contribute to the decision of staying in the relationship. As discussed by
Anderson et al. (2003), an overabundance of external factors such as lack of resources and family/social role expectations may keep the victims from leaving the relationship.

**Training for Other Helping Professionals**

Although it is imperative for mental health professionals to be aware of the potentially devastating effects that the “why do you stay?” question can have on the victim, it is clear that the effects of this question can be seen long before the victim walks in to the counseling session. More specifically, what we have seen is that often the victims’ interaction with the police can have an effect on how they perceive themselves, their situation, and their potential options and resources. As addressed by Griffin and Koss (2002), the victims’ belief that they are responsible for the abuse may stem not only from the abusers blaming the victims, but from messages they receive when police officers ask questions that imply blame. This along with the belief that there can be more than one perpetrator and the lack of knowledge about potential risk of not removing the perpetrator from the home, compounds the barriers that victims have to tackle.

Knowing the important role that police officers play in the safety of victims, it is imperative that mental health professionals continue advocating for the need for police officers and other professionals to engage in continued training in the area of domestic violence. This training, however, needs to have an increased focus on listening to the voices of the victims, as well as learning about empirical facts and domestic violence research. Horwitz et al. (2011) recommended that aside from additional training in domestic violence, police officers would also benefit from opportunities to debrief and receive feedback. Experiential activities such as role playing could be utilized to provide real-life examples in an effort to challenge professionals’ assumptions and preconceived ideas regarding victims of domestic violence.

**Training in Power and Control Dynamics**

As stated previously, throughout our domestic violence work, we have observed the challenges that counselors-in-training and other professionals have in relation to identifying the aggressor and the victim. It is imperative that counselors abandon the misconception that both partners are engaging in what is often referred to as "mutual battering." Developing a clear understanding of the power and control dynamics in a relationship is key in assisting mental health clinicians and other professionals (i.e., law enforcement) to more accurately identify who is the perpetrator and who is the victim in a domestic violence relationship or incident. Professionals involved in clinical work with victims need to keep in mind that domestic violence is a pattern of behavior utilized by one person in order to maintain power and control in a relationship. In domestic violence, the victim’s expression of violence is more likely to occur as self-preservation of life and not as an attempt to control the other person. The perpetrator’s violence is more likely to have the sole purpose of overpowering and controlling the other person.

One of the most helpful tools in obtaining a closer assessment of domestic violence cases is to utilize the Power and Control Wheel developed by the Domestic Abuse Intervention Project (National Center on Domestic and Sexual Violence, 2014). Although physical and sexual assaults are the most recognized forms of domestic violence, this wheel describes different ways in which a person attempts to obtain and continue a pattern of power and control in a relationship. These include utilizing coercion.
and threats, intimidation, isolation, emotional abuse, and economic abuse, among others. Obtaining an assessment of these other types of abuse will more than likely provide sufficient information for the counselor to determine who is the victim and who is the perpetrator. Having a clear understanding of these dynamics will lead to establishing more accurate goals for treatment.

**Domestic Violence and Couples’ Counseling**

One of the most important elements when conducting couples counseling with a victim and a perpetrator is understanding the potential detrimental effects that this approach may have on the victim if not done correctly. Foremost, it is imperative to ensure the client’s safety. It may be beneficial to make good practice of meeting with individuals separately before any couples counseling session to assess whether or not any physical, emotional, and/or sexual abuse is occurring in the relationship. Additionally, it may be helpful to play it safe by letting the couple know that you will decide if it is appropriate to see them together in follow-up counseling sessions. Inform the couple that even if they are seen separately it will be considered “couple counseling” if they chose to work on relationship issues. Thirdly, if abuse is present, it may be necessary to develop a safety plan with the victim by offering information about community resources, keeping in mind that you may have been the first person that she/he reached out to. Finally, it is necessary to make the proper referral by discussing with the batterer the importance about attending specialized treatment programs that could help him/her learn non-violent problem resolution skills focused on power and control dynamics.

**Conclusion**

In conclusion, it is imperative for all of us professionals who are somehow involved in helping end violence against victims of domestic violence, to examine our own biases regarding this social problem. We must be willing to educate ourselves by listening attentively to the victims’ stories instead of imposing our own views, beliefs, and assumptions on them. We need to acknowledge that ending domestic violence is not the responsibility of the victim, but rather that of the perpetrator. It is important to understand that a culture change needs to occur in the language used when assessing and providing services to victims of domestic violence and in the approaches used. The real question to be answered is not, why the victim stays but rather why the perpetrator does not let the victim leave? Only then will the focus and solution to the domestic violence epidemic shift to the perpetrator and not the victim. Finally, we need to understand that by utilizing shaming language, ineffective interventions, and unrealistic expectations, we are placing more barriers for the victims, hence making it more challenging for them to “to step out” of the abusive or violent relationship.
References


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