

**The Subject of Violence:
A Response-based Approach to Working with Men who have Abused Others**

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(2009)

This chapter outlines a response-based approach we have developed in working with men who have been violent and abusive to others. These ideas were primarily developed during our work at the Men's Counselling Service, a counselling program for male partners of women using the Calgary Women's Emergency Shelter and any other men in the community wishing to address their controlling, violent or abusive behaviour. We have also applied these ideas to work with men incarcerated for violent crimes, men in the community presenting at general counselling services, and at a residential program for youth who have experienced severe domestic violence in their families of origin and who have acted aggressively toward others (Stewart, Todd, & Kopeck, 2009).

The response-based approach was first developed as an approach to helping victims of violence reconnect with their histories of resistance (Wade, 1997, 2000, 2007). Since many men who abuse others have also experienced mistreatment themselves, we initially thought that engaging the men through an exploration of their own acts of resistance might be helpful. However, we soon discovered that this approach seemed to create more problems than it solved, as it often inflamed an unhelpful sense of entitlement (Jenkins, 1991). Instead, we began to orient to the response-based distinction between a language of effects and a language of responses (Wade, 1997, 2000; Todd, 2000; Coates, Todd, & Wade, 2003; Todd, Wade, & Renoux, 2004) as a more helpful way to approach the challenge of helping these men change. The key to success, we found, was to focus on language – how the man represented his actions as he talked about

what he had done. By paying attention to the complexity and subtlety of how he positioned himself as the agent of his own actions, we began to find ways to work with our clients that were both engaging and respectful.

We begin with a review of six key ideas we have adopted or developed that form the conceptual basis of our intervention strategies:

- 1) Abusive behaviour is a deliberate, conscious choice: Though it is often represented both clinically and theoretically in ways that suggest it is an effect of causes a man could not reasonably be expected to control, close examination of abusive conduct reveals it is largely volitional (Coates, Todd, & Wade, 2003; Coates & Wade, 2004, 2007).
- 2) The assumption of pre-existing ability (Wade, 1997): Men who have been abusive already possess good social skills and the awareness and ability they need to control their emotions and behaviour.
- 3) Violence as an effect: Abusive behaviour can be represented in a language of effects or a language of responses. Notwithstanding their pre-existing ability to make constructive behavioural choices, those who have acted abusively often employ a language of effects to portray their behaviour as something over which they had little control (Todd, 2000).
- 4) Violence as a response: The talk of those who have mistreated others also contains moments when they spontaneously use the language of responses to acknowledge they have acted poorly and could have made better choices. These “frame breaks” are prime moments for counselling intervention (O’Connor, 2000; Todd, 2000).
- 5) Excuses and other forms of justifying abusive conduct are valuable sources of therapeutic material (Maruna, 2004). Excuses often embed pro-social values that may provide the beginnings of a commitment to change.
- 6) Self correction is preferable to correction by others: There is little dignity in correcting a client, and little need to do so when we are able to align with small acts of self correction that he is already undertaking.

We will first expand on the above assumptions and begin to develop their implications for intervention with men who have acted aggressively and violently toward others. We then present a model of engagement that consists of five levels in working with men

toward resolution of their mistreatment of others. Wherever possible, we will illustrate the work with clinical examples.

Counselling Assumptions

1) Abusive behaviour is deliberate.

The best evidence for the deliberate nature of abusive behaviour comes from Allan Wade's (1995, 1997, 2000) research on resistance to violence. Wade found that victims of violence invariably resist mistreatment, though this resistance is often not recognized by onlookers or helping professionals. However, one group of people that does not overlook victims' resistance is perpetrators: "Unlike many therapists, theorists, and researchers who have tended to overlook resistance, the perpetrators of violence and oppression anticipate resistance from their victims and take specific steps to suppress or conceal it" (Wade, 2000, p. 129). As examples, Wade first points out the fact that bullies do not pick on larger children and thieves do not undertake break-and-enter style robberies on biker hang-outs where they are likely to encounter obvious resistance. He then outlines the pre-emptive strategies used by rapists, child molesters and abusive husbands to suppress their victims' resistance.

Wade (2000) points out that "violent husbands and battered women know that the answer to the question, 'Why doesn't she just leave?' is that offenders use dozens of strategies to prevent this obvious form of resistance" (p. 133). These strategies include isolating the victim, using economic control, and undermining the victim's credibility, as well as the more direct use of threats and physical retaliation to suppress the victim's resistance. For example, a man who lived on an isolated farm in rural Alberta ensured that his wife would have great difficulty escaping from him when he was away at work

by leaving each morning with one shoe from every pair she owned as well as the distributor cap from her car. Taking just one shoe meant his wife could complete her farm chores wearing mismatched shoes, but made it difficult for her and the children to walk the long distance required to obtain help, and taking the distributor cap meant their only option for leaving would be to walk. Another man tried to stop his wife (who was at home with their baby) from reaching out to her family and friends by bringing the household phones with him to work.

Recognizing the many strategies that perpetrators use to suppress and conceal victims' resistance reveals the volitional nature of abusive conduct. One way we try to get at this volition in therapy is by probing for details of the man's decision making processes during his abusive actions. For example, in working with a man who had escalated to physical violence during a verbal tirade directed at his wife, the counsellor suggested they slow things down and dissect the incident. When asked how his wife responded to his verbal abuse, the client replied that she had been very angry with him, and had told him she was not prepared to tolerate his abuse. He said her comments made him even angrier because she was not focusing on his concerns and so "things got really crazy and I hit her." The counsellor then asked him what was going through his mind when he decided to hit her. He replied, "I just wanted her to shut up." When asked if it worked, he replied that it did, in fact, "make her go quiet." When clients talk about the details of their intentions and actions in this way, they often will then express regret about their behaviour and talk in self corrective ways. In this example, the client went on to say, "I shouldn't have hit her. She was curled up in the foetal position and was really scared of me. I don't want that."

2) Men already know how to behave non-abusively.

This observation is based on what Wade (2000) calls the “assumption of pre-existing ability, that is, the view that people possess the ability to respond skilfully and appropriately” to the challenges that they face, even before they engage in therapy (p. 62). The fact that men who have been abusive already know how to behave well has been emphasized by Jenkins (1990), who points out that factors that are sometimes considered to cause abuse are in fact simply antecedent conditions to which the person could potentially respond in a variety of ways: “For example, a man who was abused himself as a child, who is experiencing considerable financial and marital stress and who at times drinks heavily, may not behave abusively and may relate respectfully to others” (Jenkins, 1990, p. 32).

Jenkins’ observation highlights the fact that many men with poor communication skills, lack of self-esteem, lack of empathy, histories of abuse, emotional problems, poor attachment, substance abuse problems, a need to control, and so forth, are not abusive, and may choose instead to commit themselves in the opposite direction to the examples they saw growing up. Traditional approaches to helping abusive men change tend to overlook this key element of choice and focus instead on personal deficits the men are assumed to have inherited from their backgrounds and society. From a response-based point of view, such effects-based approaches further obscure the volitional aspects of abusive behaviour and postpone change until the personal defects seen to be ultimately causing the violence can be treated. We prefer instead to see the choice to change as immediately available. For example, one man had exceptional skills at being able to mediate conflict and deal calmly with volatile people and situations at work, yet at home

was a tyrant. He was a manager on a construction site, where he was oversaw a large crew of workers. He talked about numerous incidents in which he had responded calmly and professionally when members of his crew were behaving badly. In addition, he said “I know I have the skills, I just don’t want to have to use them when I go home.” This led him to further examine his actions, and he decided that, in fact, it was even more important to him to keep his marriage than to do a good job at work. He decided it was worth the effort to consistently use his skills at home as well as at work. He coupled this commitment to himself with action by treating his wife more respectfully even when she dealt with issues differently from him or even outright disagreed with him.

3) Men who have been abusive sometimes talk as if they had no choice.

Notwithstanding the fact that a close examination of abusive behaviour reveals its voluntary nature, perpetrators often talk about their conduct as if they had little choice but to do what they did. Patricia O’Connor (2000) examined how criminals talked about their crimes. She found that there was often a subtlety and complexity to how criminals positioned themselves with respect to their own criminal acts. She uses the term “agentive positioning” to describe and highlight “a speaker’s positioning toward [an] event and toward [their] involvement in that event” (p. 38). She noticed that how these men positioned themselves with respect to their criminal actions could be “figured along a continuum of responsibility” (O’Connor, 2000, p. 39). Thus, how a person positions themselves as the agent of an action they are describing can be considered an index of the level of responsibility they are willing to claim for what they have done.

As an illustration of agentive positioning, O’Connor (2000, p. 41) gives the following examples of different ways a person could describe getting a speeding ticket:

I got a ticket for speeding.
I got caught speeding.

O'Connor points out that these statements are subtly different in the degree of personal responsibility the person is taking; that is, in how the speaker positions themselves as an agent with respect to their own actions. The speaker in the first statement more directly acknowledges their own agency than does the speaker of the second statement, who deflects the question of their own agency by presenting themselves as the object of the agency of the authorities. Neither of these statements, says O'Connor (2000), is as clear an admission of responsibility as a statement such as, "I was speeding yesterday, so a cop stopped me and gave me a ticket" (p. 42), in which the speaker more clearly positions themselves as the culpable agent of their own actions.

O'Connor's work on how criminals deflect personal responsibility corresponds well with the response-based distinction between a language of effects and a language of responses (Wade, 1997, 2000; Todd, 2000; Todd & Wade, 2001; Coates, Todd, & Wade, 2003). According to this view, the language of effects represents the behaviour and subjective states of victims and perpetrators as the predetermined outcome from a variety of supposed causes. Todd (2000) and Todd and Wade (2001) found that using the language of effects to represent the actions and subjective states of perpetrators "has the ... effect of describing [them] in terms which suggest that they are really victims of internal and external forces over which they could be expected to exert little control" (Todd & Wade, 2001, p. 8). Todd (2000) noted that using the language of effects to represent themselves as having had little choice but to do what they did is one of the primary ways in which perpetrators avoid taking responsibility for their abusive conduct. We have found this distinction between the language of effects and the language of

responses to be very useful in counselling conversations with men who have been abusive. In the following excerpt from an actual counselling session, the client initially presents his actions as an involuntary effect of “seeing red” and “blacking out.” By simply asking about details of a specific incident in which he acted abusively toward his wife, the counsellor is able to construct with the client a response-based account which more clearly articulates the man’s conscious choices which both align with and contradict his stated intentions:

- Client: I just black out when I’m angry – I see red and I have no control over what I do. This anger just takes over me.
- Therapist: Can you tell me about the last time you felt like you blacked out?
- C: Well, probably the time I threw a chair at my wife – I blacked out then – I don’t even remember it.
- T: Can you talk about what you do remember?
- C: I was just so mad at her – she really knows how to push my buttons. My wife is a petite little thing. I could really hurt her.
- T: Did you hurt her?
- C: No, no. I threw the chair at her but it didn’t connect with her.
- T: Can you tell me more about that? How was it that you didn’t hit her with it?
- C: Oh, I threw the chair beside her – at the wall. I didn’t want to hit her with it ‘cause I know that would have really hurt her.
- T: So it was important to you not to hurt her? What was important about that?
- C: I’m twice her size and I work out you know, so I know I could probably really hurt her. That scares me. I don’t want to hurt her.

Detailing the man’s choices in this way gives him the opportunity to decide which ones align with his stated intentions of “not hurting her.” This in turn sets the stage for further discussion on how he is hurting his wife in other than physical ways. Also notable in this excerpt is how the client diffuses responsibility for his actions by suggesting that it was the chair itself that “didn’t connect with her.” The positioning of the chair as the agent of the potential harm and the anomalous use of the ostensibly affectionate term “connect” show how adept speakers are at using language to mitigate culpability for their actions.

At the same time the man admits to a considerable amount. We will detail in later sections how we attempt to use this rich ambivalence in agentic positioning to generate therapeutic progress.

O'Connor's work on agentic positioning makes the case that it is uncommon, even in everyday, low-stakes examples such as speeding tickets, for people to unambiguously position themselves as the agent of socially undesirable actions. In relating events that are overtly criminal or harmful to others, it is even more unusual to hear speakers relate what happened in morally unambiguous terms. This suggests that a focus on the subtleties of how our clients position themselves with respect to their socially undesirable actions is likely to yield a greater sense of agency and social competence than pressuring them to "take ownership" of their abusive choices. The time spent in treatment, then, can be conceived of not as necessary to overcome personal deficits or to learn to take responsibility, but as part of choices men make as they examine their behaviour and negotiate an exchange of object versus subject positions in relation to their own actions.

- 4) Perpetrators also spontaneously talk in ways in which they take responsibility for abusive conduct.

A second useful concept highlighted by O'Connor (2000) is that of "reflexive frame breaks" (p. 119). Building on the work of Alberta-born sociologist Erving Goffman (1974), O'Connor defines frame breaks as those moments when a speaker breaks from the frame of an account they are developing, such as describing a crime they committed, to comment on what they are saying. O'Connor (2000) gives as an example a brief comment from a criminal who, in describing an incident in which he shot someone, broke from his account to comment, "I don't know if instincts had me shoot that guy?" (p. 40).

According to O'Connor, frame breaks such as these are moments when speakers "problematize" their own agency, and are therefore "key moments" in a counselling conversation which are "fruitful to the rehabilitative and therapeutic processes" (p. 40). In this case, by briefly speculating on his reasons for shooting his victim, the speaker raises the issue of his own agency, no matter how obliquely. O'Connor argues that such moments represent a natural "opportunity for fruitful probing" and, as such, "can be a starting point for establishing productive rehabilitative talk" (p. 152).). For example, if O'Connor's subject had posed his remark during a therapeutic interview, he could have been asked: "What do you mean?" (less demand); "Do you find yourself wondering about that?" (moderately demanding); or, "What makes you think there might have been more to it than instinct?" (more demanding).

The concept of reflexive frame breaks is again compatible with the interactional and discursive framework developed by Coates, Todd, and Wade (2003). Todd (2000) noted that men who have been abusive often arrive at counselling favouring the language of effects as the predominant interpretive repertoire for representing themselves and their actions. However, notes Todd, their talk also contains many instances where they represent themselves in a language of responses as competent social agents who could have made better choices. Similarly to O'Connor, Todd maintains that these transitions from one kind of talk to another are prime moments for therapeutic intervention. The following excerpt from a counselling session illustrates this point:

Client: My wife is so messy. I'd come through the house at the end of the day kicking everything out of the way. Like, why couldn't she just put things away? I like a really clean floor, clean lines, everything tidy. When I came home, there's the kids boots and snow pants in front of the door, backpacks on the floor, dishes from the day on the kitchen table. I've worked hard all day and I'm tired, and I don't want to come home to a big

mess and clutter everywhere. She knew this really bugged me, so why couldn't she just put stuff away, you know? It would drive me crazy. But I probably shouldn't have reacted the way I did, I shouldn't have got so mad.

Therapist: What did you do that you weren't comfortable with?

Client: Oh, when I came through the house kicking everything out of the way and yelling, I think I scared everybody. I don't want that.

What is notable in this exchange is that it is not necessary for the counsellor to interrupt or confront the client on his aggressive behaviour, only to wait until he offers the spontaneous frame break, "I probably shouldn't have reacted the way I did", and then take advantage of this "opportunity for fruitful probing" (O'Connor, 2000, p. 152).

5) Excuses can provide implicit evidence of responsibility taking.

One of the most prominent features of abusive conduct is that it is almost always accompanied by excuses or other attempts to justify it on the part of the perpetrator. Traditionally, treatment programs for abusive men have taken a dim view of these verbal offerings, dismissing them as evidence of faulty thinking which must be changed before the men can be expected to make better choices. As McKendy (2006) noted, counsellors tend to "treat as axiomatic that acknowledging responsibility for past criminal acts is an essential first step towards rehabilitation," despite the fact that the evidence for a connection between "avowing responsibility and recidivism ... is virtually non-existent" (p. 477). Consequently, correctional and counselling services often pressure their clients to "take responsibility" by talking in idealized ways that are erroneously assumed to be associated with improved future conduct. Maruna (2004) borrowed the term "responsibilization" from Garland (1997) to refer to this agenda of trying to get offenders to take the subject position with respect to their abusive actions.

Maruna (2001, 2004) offers an alternative view of the value of excuses, arguing that they are a natural response to social breaches that show a pro-social commitment on the part of the excuse maker. A man who blames his abusive conduct on a “drinking problem”, for instance, is acknowledging that being abusive is not something a sober person should engage in. Maruna (2004) quotes Felson and Ribner (1981) in proposing that excuses and justifications can be understood as “a type of aligning action indicating to the audience that the actor is aligned with the social order even though he or she has violated it” (p. 193). Maruna suggests that excuses contain important clues from which therapists can draw inferences about a client’s explanatory style, awareness of socially appropriate behaviour, and thoughts as to how to be a better person and live a better life. As McKendy (2006) points out, Maruna goes even further to suggest that externalizing responsibility (i.e., blaming) might actually be associated with greater desistance of criminal behaviour since it allows the individual “to sustain a ‘normal’ identity, and thus stand a greater chance of reorienting their lives,” than does accepting the responsabilizing notion that the perpetrator’s ways of thinking and behaving are plagued by cognitive distortions, sexist beliefs, and other “enduring internal qualities” (McKendy, 2006, p. 478). Maruna and Mann (2006) therefore urge that “counsellors listen with interest to the messy, realistic, explanations that clients offer, rather than rejecting these automatically as cover-ups. Honouring accounts in this way not only builds trust and promotes co-operation, it also generates more valuable material for therapeutic work” (p. 168).

From a response-based point of view, the responsabilizing agenda derives from the effects-based assumption that abusive behaviour stems from personal defects such as “cognitive distortions” and “dysfunctional beliefs” which must be overcome with expert

corrective intervention. This effectively excuses the perpetrator from taking immediate responsibility, since he cannot logically be expected to be fully accountable at the same time he is being constructed as psychologically deficient. An irony of this perspective is that when perpetrators make excuses, they are often accused of being “in denial.” In fact, if the effects-based portrayal of the perpetrator as compromised by psychological deficits were true, then his protestations that he is not responsible for what he has done would amount to little more than accurate insight. Viewing excuses as denial also incites the counsellor to re-double his or her responsabilizing efforts, which in turn invites the client to become preoccupied with defending the validity of his positions and demonstrating the crudity of the counsellor’s agenda. This vicious circle, apart from being a recipe for burnout, results in disparaging views of perpetrators as refusing to take responsibility for their actions and the corresponding self-aggrandizement of the counsellors as hard-working, tough-minded individuals who selflessly confront these hopeless characters day after day.

Rather than pressure clients to take the subject position with respect to their offending behaviour, we have found it more useful to regard the man as a responding social agent who is making choices in how he represents himself and his abusive behaviour. When the client chooses to take the object position with respect to some putative reason for his violence, we have found it useful to pay attention to the pro-social values embedded in the excuses and justifications he employs. For example, if a man says “I wouldn’t have hit her if she hadn’t kept bringing up that stuff about my family”, we might respond with, “So you wouldn’t go around hitting someone unless you felt you had a good reason. Can you tell me more about that? Why is it important for you that there is

a reason for your violence? What makes this a good enough reason for you to decide to hit her?” This response acknowledges that the man did not indiscriminately commit an act of violence – there was a rationale in place, however inadequate the rationale may be to outside observers – and invites him to re-examine his rationales in a formal social setting and decide for himself if they are adequate or not. Acknowledging the rationales given by men for their current behaviour and aligning with the pro-social commitments embedded in them is a way of engaging with clients as they examine and evaluate their use of violence and aggressive behaviour. It also constructs their violence as volitional and therefore something they are capable of immediately taking responsibility for and changing. Commenting on this process, one client remarked:

[The counselling was helpful] just by being there when I needed to say something. Like when I needed to talk to somebody to hear kind of the junk coming out my own mouth and just bring it more into focus ... excuses, you know, situations, you know, just talking to people about what had happened during my week and then, like I said, once I could hear it out loud, I could realize how much of it was like, okay, that’s nothing more than an excuse. (Weaver, Samantaraya, Todd, 2005, p. 26)

- 6) Correcting one’s self is preferable to being corrected by others.

Taken together, the above ideas provide an alternative to the traditional idea that the thinking and behaviour of those who have abused others must be corrected by an external authority. Even collaborative approaches often have an implicit goal of getting the client to “take responsibility” or otherwise talk in idealized ways (e.g., to focus on solution talk instead of problem talk (Lee, Sebold, & Uken, 2003)). This implies that the counsellor knows the path to non-violence better than does the client and therefore invites the counsellor into a hierarchical position with respect to the client. We have found that simply looking for the small ways in which the men are already correcting themselves

through their uses of frame breaks and excuses, as well as their more overt commitments to change, allows us to reduce this hierarchy as we follow the client's idiosyncratic path toward non-violence.

The following comments describe this difference between self and other correction and indicate how objectionable hierarchical intervention practices can be from a client's perspective:

I like this (the response-based counselling) better for myself, it's helping me and this is what I want to do. But other counselling, like, they didn't do nothing for me. They were pointing fingers at me; here they don't point fingers at ... my wife or myself ... Here they're very calm. I've seen a lot of counsellors ... [The counsellors at MCS] never make me feel ashamed, which the other ones did; you know, they always pointed fingers at me because I'm the man – "I am more powerful" [said in a deep, sarcastic tone]. It's not about power, it's about how can you help me, you know? (Samantaraya, & Todd, 2005, p. 32)

We have found that focusing on the man's own acts of self-correction, rather than burdening ourselves and him with the notion that we must somehow steer him in the right direction, creates a more effective and collaborative therapeutic relationship.

Changing Talk: Ideas in Action

We have found that the above ideas have significant implications for intervention with those who have abused others. The perspective that men who act abusively do so deliberately and already know how to treat others respectfully suggests that a focus on imparting knowledge and skills is less important than a focus on connecting with the men's pre-existing ability to make the choice to treat others respectfully even when facing their own internal and external stressors. This in turn suggests that intervention strategies should emphasize ways to foster the development of more agentive and

reflexive language in creating an overall culture in which the language of responses predominates over the language of effects.

O'Connor's (2000) remarks on the difficulty people have in unambiguously identifying themselves as the agent of socially undesirable actions suggest that any intervention strategy should be built on a foundation of therapeutic safety whereby clients are given time to gradually orient to what they want to do differently. As Jenkins (1990) has suggested, once this foundation of safety is established for the client with the counsellor, it can be expected that participants will be more likely to move toward disclosing their own abusive behaviour. As this disclosure begins to happen, the research of O'Connor (2000) and Coates, Todd, and Wade (2003) suggests that most participants will begin to give a variety of accounts of their own behaviour, at least some of which express ambivalence about their behavioural choices. We have found that this ambivalence is the key to therapeutic change.

In summary, these ideas suggest a five level model of therapeutic engagement that we have found useful to diagram as follows (Figure 1):

(Figure 1):

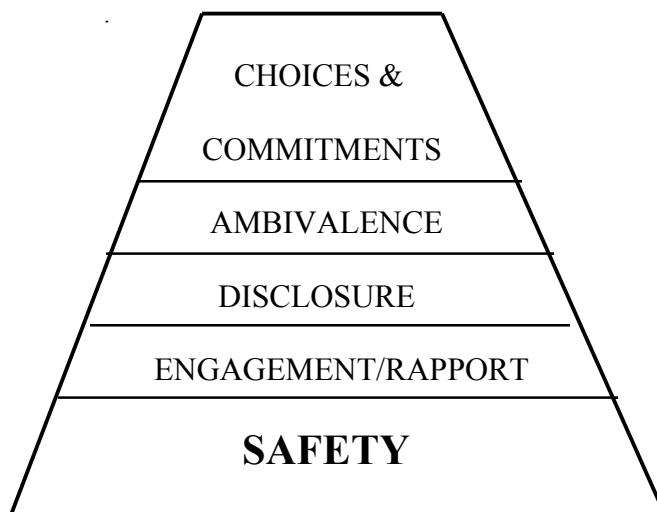


Figure 1: A framework for working with those who have offended against others.

This framework provides a blueprint for our work with men who have been abusive suggesting that establishing a foundation of therapeutic safety with the counsellor is fundamental to creating conditions in which participants will disclose details about their own behavioural choices, explore their ambivalence about what they have done, and, finally, begin to commit themselves to making different choices in the future. The remainder of this paper will be organized according to these five levels of engagement. Where appropriate we will include client feedback in order to illustrate the importance of the relevant issues from their perspective.

1) Therapeutic Safety

One important aspect of creating therapeutic safety in the counselling relationship is to establish clear parameters concerning confidentiality. In working with perpetrators

of violence, this issue is sometimes compounded by concerns that, for example, any violence they disclose might be reported to the police. In our work at the Men's Counselling Service, at the first appointment men are given a written counselling agreement outlining the terms of confidentiality and lets the men know that we will be contacting their partners "in order to monitor progress and safety" (Men's Counselling Service literature, quoted in Dankwort & Austin, 1995, Appendix J). They are also offered a copy of a handbook after the initial session, which outlines our views on the issues of violence and offers a description of the counselling process, so that they can make a more informed decision about the merits of attending counselling with us (Todd, Ogden, & Weaver-Dunlop, 2009). We emphasize that it is the man's choice whether he wishes to continue working with us at all; and if he does, he decides whether he wants to continue working individually, participate in a group, or participate in both.

Another way we try to establish therapeutic safety is that, as indicated previously, we attempt to reduce the counsellor-client hierarchy as much as possible, positioning the client in the driver's seat and respecting him as the person best positioned to know his route to a non-violent future. We also seek to enhance therapeutic safety by engaging individually with the men before they are invited to attend group. Thus, all clients have a minimum of one individual session before they attend group, and most men choose to do some additional individual work before they start group. Men have reported that it is useful for them to be able to begin talking about their abusive behaviours privately before sharing it with a group of men, since often they have not talked openly about their behaviours before:

You feel you want to talk privately about it first. And then once you feel confident enough where you can talk to somebody privately about it, you seem to be a little

more freer to open up to it because you can admit to it, finally. I don't know if it's admit to it, but don't feel ashamed about it, because you've been able to express it at one point in time in a private situation and then it's nice where you can go out into a group and then you can open it out and get a feeling, a feeling of others and how they feel about it. (Weaver, Samantaraya & Todd, 2005, p. 27)

It should also be noted that "safety" in counselling makes sense only in relation to risk; that is, the only reason for seeking to establish safety in the counselling relationship is so that clients will be more willing to take the risk of personal disclosure. Safety as an end in itself is pointless, since absolute safety could be guaranteed by having nobody say or do anything during counselling, but this of course would be therapeutically useless. The bipolar nature of counselling safety also differentiates it from the physical/emotional safety sought by victims of violence. We see victims' safety as a unipolar right defined by the absence of violence rather than through its relation to the advisability of risk. We regard victim safety as a higher priority than counselling safety; therefore, clients at the Men's Counselling Service must agree to ongoing partner contact. At the same time, we feel that ultimately the greatest guarantee of victim safety is when the men who have placed others in danger decide to change. We believe that doing what we can to create counselling safety is a step toward this goal.

2) Engagement

When clients feel a sense of safety and feel they are treated respectfully by the therapist, we have found that engagement and rapport tend to follow. The counsellor and the client form a working alliance that centres on the client's desire not to be abusive towards others. Engagement and rapport are enhanced by allowing perpetrators to tell their stories their own way, and by taking an informal and relaxed approach as therapists.

We tend also to use humour as appropriate. The following reflection from a client about his counselling experience illustrates this informal, non-hierarchical approach:

They're not voicing their opinion, they're not telling you what to do or what you shouldn't do, and it's nice to hear somebody say, what do you think? ... How do you think you should have done this? Do you think you did what you should have done ... by pointing it back at you, making you look at who you are ... I think it's great that you don't have to come here and always have to be ... it's nice to just be able to come and smile and say a joke, or say, or be loose, instead of always coming and feeling stressed out and feeling bad, and feeling that you have to come to let out feelings that you're down or this or this happened to you. It's nice to be able to come in and say 'Hi, how the hell are you today?,' and tell a joke. They have that, that bond where you can come in and feel free to be who you are as well, and that means the happy you, the good part of you, and let them see who you really are. (Weaver, Samantaraya, & Todd, 2005, p. 50)

We also seek to increase engagement by offering the client a clear focus for the counselling – to create safety in his relationships with others, particularly his partner. A useful tool for this purpose has been a “change map” developed by former colleague Frank McGrath. Frank arranged five elements of effective communication in an intimate relationship into a schematic that progresses from safety to openness to trust to communication/problem solving, and finally to closeness. Similar to the framework for the counselling relationship, we have found it effective to arrange these elements as a

pyramid (Figure 2):

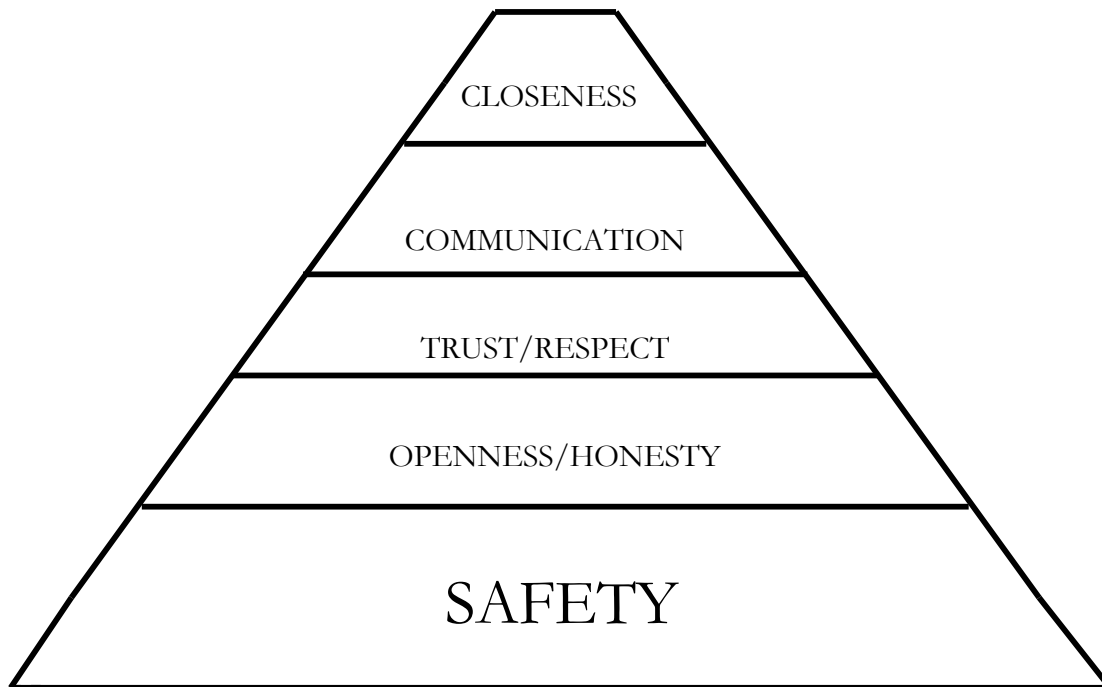


Figure 2: A Framework for Rebuilding Relationships

The relationship pyramid helps us to more effectively create a therapeutic alliance around the issue of the woman's safety. Usually men state a desire for a close and intimate relationship, and talk about problems they have communicating with their partners, or problems with a lack of trust and honesty in the relationship. The relationship pyramid helps the men appreciate the importance of re-establishing safety with their partners as a prerequisite for the openness and trust needed to communicate better and solve problems. Whether a man's partner feels safer around him is something the client has complete control over. It is his abusive and aggressive behaviours that have shattered his partner's sense of safety; he can begin rebuilding her sense of safety by consistently

handling situations respectfully, thus showing her he can be a safe person for her to share her concerns and issues.

If there is potential for the man's relationship to survive, creating safety is an essential first step to any further progress in rebuilding their relationship. As already mentioned, the perpetrator has control over whether or not he rebuilds her sense of safety. However, the next steps are relationship issues, and she may or may not choose to attempt re-building openness, trust, communication, and intimacy. As outlined in the counselling agreement signed by the men during the first session, we also emphasize that when his partner's safety is compromised to the extent that requires our services, there is often too much damage done and there are no guarantees that the relationship will survive. We further explain that what we can provide is a place where the man will be supported in exploring his choices so that he can feel he has done what he can to make himself a safer person to talk to. We find that clarifying that the purpose of the counselling is to increase safety, not save relationships, helps increase engagement by giving the men a clearer sense of what they are committing themselves to.

3) Disclosure

As men begin to feel the counselling has personal relevance, and as they feel a sense of engagement and rapport with the therapist, they naturally begin to disclose accounts of the events that have brought them to their present circumstances. We regard each man as having the right to tell his story his way. Following the advice of Maruna and Mann (2006), far from not wanting to hear the man's excuses, we want to hear every one of them, since, as outlined earlier, his excuses will inevitably contain embedded pro-social premises that can form the basis of future goals and commitments. For example, a

fifteen year old boy in a residential program for aggressive youth went on a rampage and smashed several pieces of furniture in the residence. One of the chairs he threw bounced around erratically before breaking a large window. When discussing the incident with his counsellor later, the young man was willing to take responsibility for most of what happened, but insisted that the window breaking was an accident. Rather than focus on the outside, adult perspective that since he threw the chair he is ultimately responsible for the window breaking, the counsellor focused instead on the embedded value that breaking things on purpose is a more serious breach of social conduct than is breaking things by accident. This enabled the youth to get past the polarized position he had reached with other residential staff and proceed with developing a plan to fix the damage he had caused (Stewart, Todd, & Kopeck, 2009).

Focusing on the pro-social values embedded in excuses and making room for the subtleties and richness of the client's own story sets the stage for the client to find the beginnings of their own solutions:

Well the main thing is that they let you say it your way ... and how you feel about it and by the way you say it, you know, inflections and everything. And they will pick up on ... little details that if you do concentrate on the details they kind of guide you. And they're very knowledgeable and very receptive to whatever we put out there to deal with. But they also sit back and not just simply give you the answers. They make you work for the answers within. (Weaver, Samantaraya, & Todd, 2005, p. 31)

4) Ambivalence

Once men begin disclosing details of their abusive behaviour, they often begin expressing ambivalence about their actions. By ambivalence, we mean the mixed feelings that the men have about their abusive conduct, which, as outlined in the research of O'Connor (2000), is revealed in the variations of agentive positioning that accompany

virtually every account of anti-social behaviour. It is these often subtle differences in how the man positions himself with respect to his own actions that allows the counsellor to highlight and amplify small acts of self correction the client himself is engaging in, rather than take the hierarchical position of external correction typical of responsabilizing approaches. This allows the client to feel a sense of freedom and respect for his pre-existing ability to evaluate and modify his own choices rather than the pressure of being corrected by an outside authority. This difference is reflected in the following client remark:

The counsellors here are ... open and honest about things. They take the time to listen. And with the [other service] ... they do all the talking, you do all the listening. And I didn't really find that all that beneficial. ... I don't want to feel like having things dictated. (Weaver, Samantaraya, & Todd, 2005, p. 32)

We have found that abandoning our own attempts to steer the men to talk in idealized ways creates room for them to utilize their own self correction skills. The following remark highlights how subtle and even surprising the emergence of these innate abilities can seem, and how this development is related to the foundation of safety and rapport established earlier in the counselling:

I guess because [the counsellor] and I were able to establish a good rapport and I was able to ... express a lot of what I felt were deep, dark, intimate secrets that were going on which I didn't have the confidence to start talking openly about ... I was able to gain some confidence with him to be able to start uh, acknowledging ... something I wasn't comfortable with and wanted to change. That was sort of subconscious; I didn't realize that's what I wanted. (Weaver, Samantaraya, & Todd, 2005, p. 27)

Focusing on the client's ability to use his own ambivalence as a means of self correction has the further benefit of de-centering the therapy and the therapist and leaves both the credit and responsibility for changing behaviour where it belongs – with the client:

[Counselling helped by getting me to] face the issues, some of the issues, and talk about them with people so I would actually, you know, say them out loud and then realize where I was coming from on it. Um, I tend to, I can be brutally honest with myself and with other people, so you know, when I'm spewing something that once I actually hear it out loud, it's like, oh that's just a load of crap. And I can see it in myself as well and go from there. And that was something maybe I wasn't doing before was saying it out loud where I could actually recognize it as a load of crap. (Weaver, Samantaraya, & Todd, 2005, p. 18)

5) Choices and Commitments

While it does not happen in a simple linear progression, an indication for us that the counselling is succeeding is that the client arrives naturally at a place of openly discussing his past choices and how he wants to change these as he moves forward in his life. Ironically, we have found that avoiding responsabilizing practices often results in surprising leaps of responsibility taking that would have been hard to predict at the beginning of the counselling process. For example, a man in a jail-based anger management group initially took the position that he had been unjustly convicted on firearms charges since his guns were legally registered and securely stored. Without ever being directly challenged on his position, at the end of the group he offered the spontaneous re-evaluation that, since "I'm in the drug world", his guns could have been stolen by a "customer" that had spotted them earlier and then used to harm someone. He said that he would not want to be responsible for someone using one of his guns to frighten or harm another. In our experience, such a quantum leap to a surprising level of vicarious responsibility-taking – certainly beyond that required by the law, and probably beyond what even a responsabilizing counsellor would expect – is only possible when the choice to change stems from the client's innate ability to evaluate and moderate his own behaviour.

Conclusion

This chapter examined our use of the response-based approach with perpetrators of violence. We have found that a key to success in working with this population is to pay close attention to language: to focus therapeutic attention on how the client talks about his abusive behaviour. A client's process of therapy can be conceived of as time spent negotiating a subject versus an object position in relation to his own actions. We have found it effective to focus on transitions in talk rather than on abstract essences such as "beliefs" or "cognitions" presumed to drive abusive behaviour; to pay attention to details of how the client adjusts his representations of his own actions as he evaluates and brings his own behaviour more into line with his stated values and positions.

We explored six assumptions that underpin our work with perpetrators. Our starting point, that abusive behaviour is a deliberate and conscious choice, is based on the response-based assertion that victims invariably resist violence. It is the many strategies perpetrators use to anticipate and suppress this resistance that best highlights the volitional nature of violent behaviour. Secondly, we posit that perpetrators already know they are being abusive, and that they also know how to treat others respectfully. We are therefore more interested in eliciting a client's pre-existing abilities rather than imparting curriculum. Thirdly, perpetrators of abuse often talk as if they had no choice but to behave abusively. Particularly with respect to socially undesirable actions such as hurting their wives or children, clients can be expected to claim an object position with respect to factors that might be seen as mitigating their culpability. They generally require both time and a safe therapeutic environment to begin to position themselves as the subject of abusive behaviours. Fourthly, perpetrators also spontaneously talk in ways that break

from the object position. In these reflexive frame breaks, they raise the issue of their own agency and often make statements in which they portray themselves as competent social agents who could have made better choices. These are key therapeutic moments that provide opportunities to amplify response-based talk. Finally, in our work with perpetrators we regard excuse-making as an opportunity to retrieve pro-social values embedded in their excuses. Taken together, these therapeutic principles provide a means for facilitating the men's capacity to correct their own behaviour rather than having it corrected by an external authority.

The final section of this paper presented a five step schematic which serves as a blueprint for our work with abusive men. We suggest that a foundation of safety and respect in the therapeutic relationship is critical for perpetrators of abuse to be able to do the work necessary for change. We seek to enhance engagement and rapport by offering a clear focus for the counselling: for men to create safety in their intimate relationships so they can work toward the closeness they typically desire. When therapeutic safety and good engagement are established, we have found that men begin to disclose details of their behavioural choices, explore their ambivalence about what they have done, and decide if they want to make a commitment to treat others with respect on a consistent basis.

We want to stress that we do not see this or any other treatment model as a panacea for the problem of men's violence. We have encountered men who seemed to have little or no ambivalence about their use of violence, and partner feedback has revealed situations where little or no change is apparent (Austin & Dankwort, 1999; Dankwort & Austin, 1995; Weaver, Samantaraya, & Todd, 2005). Therefore, clinical

interventions must be part of a continuum of social responses that includes protection for victims of violence, the intervention of police and criminal justice systems, and the development of appropriate legislation and social policy.

We conclude this chapter with a quote from a client who talks about how much he changed as a result of the work he did in counselling:

[Counselling] made a very big difference for me ... I have situations arising in my life right now that the old days, I would have kicked, screamed, fought, done all stupid things. Now I'm able to sit back and lay it out logically and look at it and then deal with it in a very appropriate and a very professional manner that I like to do things ... I mean I'm not angry, you know, fine, do what you want. I used to get so worried and obsessed with the problems that I would drive myself nuts. (Weaver, Samantaraya, & Todd, 2005, p. 24)

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