

Dancing on a razor's edge: systemic group work with batterers¹

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This paper describes a systemic approach to working with domestic violence which does not focus upon couple therapy but rather adapts the Duluth 'co-ordinated community response' model. It proposes that this model may be understood from a systemic perspective by drawing upon the 'levels of context' ideas prevalent within systemic therapy. The paper then demonstrates the practice of group work with men who are violent to their partners from this systemic perspective. The group work undertaken with these men may be understood as 'systemic' from a number of viewpoints. These include constructing the work within a systemic *context*, retaining a systemic *perspective* in the work, and adapting various systemic *methods* in the group work itself. In describing this approach to work with men who have abused their women partners, the authors hope to contribute to the domestic violence literature, to the understanding of group work methods within systemic work, and to the knowledge of practitioners who need to engage and work with abusive men.

Case study

(Week four of a thirteen-week programme)

Client 1: My bitch is pregnant and her hormones are all over the place: you know she's always nagging and never stops whinging.

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¹ The authors are aware that the use of the term 'batterers' is not common in the UK. Nor does it fit the predominant 'social constructionist' ideology of British family therapy. Here we use it for a purpose. First, it does not fudge the reality of the actions of many of the men with whom we work: it 'tells it like it is'. Second, it is the term used most commonly in North America where much research and literature has been produced. Third, it is a shorthand and thus perhaps more easily used than more cumbersome terms such as 'men who are abusive to women', or 'known perpetrators of woman abuse'. Fourth, in our use of the word there is no intention to establish an 'us and them' division. The term is not used to dehumanize the men with whom we work. Indeed the use of the word challenges us to relate to our clients and to respect their wish to change.

Client 2: My wife's the same, she really loses it when she's pregnant.

Client 3: Why do you call her 'bitch'? That's not right.

Client 1: 'Cos that's what my generation call 'em. She likes it, you know she feels I want her when I call her 'my bitch'.

Client 3: Why don't you go home and ask her how much she really likes it?²

Introduction

The above case study demonstrates the challenge and difficulties of working with batterers. At times, very insulting language may be used by men who reveal the misogyny rife in contemporary society (Smith, 1996). This can be personally unsettling for women and men working with them. Added to this is the reality that many of these men have brutalized their partners over many years; yet the willingness of these men to expose themselves to professional and peer criticism can be humbling. Few therapists would be willing to discuss their own abusive behaviour in a group setting. Hence working with batterers often feels like dancing on the edge of a razor.

In this paper, we wish to describe an approach to working with batterers in an agency which is imbued with a pro-feminist systemic perspective.

Here, this systemic perspective does not promote *couple therapy* but a form of group work which seeks to change the man. We will deconstruct the systemic elements of this approach after exploring the family therapy literature and models of batterer intervention.

Domestic violence and systemic therapy

The literature describing the value of systemic therapy in domestic violence prevention continues to grow every year (Anderson, 2001; Anderson and Schlossberg, 1999; Goldner, 2001; Haddock, 2002; Hunter, 2001; Rivett, 2001; Rivett and Street, 2003; Vetere and Cooper, 2001, 2003). Historically, this literature has predominantly concentrated upon the role of couples work to end domestic violence (Goldner *et al.*, 1990; Goldner, 1998, 1999; Jory and Anderson, 1999, 2000; Jory *et al.*, 1997). However, this has been the subject of intense criticism (Bograd, 1984; Jacobson and Gottman, 1998; Kaufman, 1992;

² All dialogues are composites of conversations that may occur in batterer groups. What men say may be disturbing for facilitators and readers.

Mederos, 1999; Rivett, 2001). For instance, many states in America have introduced standards for treatment services in the field of domestic violence that ban couples therapy (Geffner and Rosenbaum, 2001) because couple therapy is seen as increasing the risk to the woman. There is, on the other hand, a substantial literature outlining an alternative systemic response to domestic violence in which couples work is not central (Gardiner and McGrath, 1995; Shaw *et al.*, 1996). In New Jersey, for instance, Almeida and her colleagues (Almeida, 1998; Almeida and Bograd, 1990; Almeida *et al.*, 1998; Wylie, 1996) have created a service that responds to domestic violence from the perspective of a 'community' response. In particular, this model engages the community in treatment services using non-violent 'sponsors' (volunteers and past clients) to help men change and women to stay safe.

In addition to providing community interventions for domestic violence, family and systemic therapists have also made contributions to the literature on the treatment of batterers. The most influential of these has been the work of Jenkins (1990) which adapts a narrative and solution-focused approach to invite abusive men to take responsibility for their behaviour. This is undertaken primarily on an individual basis (though not exclusively: see Wirtz and Schweitzer, 2000). Because this approach has its roots in a therapeutic tradition, it has had influence within systemic circles but not within the domestic violence field generally. Indeed, systemic therapists rarely appreciate that the controversies surrounding couple therapy have led to domestic violence workers lobbying actively against therapeutic interventions in their field especially in work with batterers (Babcock and La Taillade, 2000; Mankowski *et al.*, 2002; Mederos, 1999). As a consequence of this, most batterer programmes are centred around a pro-feminist cognitive behavioural model which originated in the American city of Duluth (Pence and Paymar, 1993).

The Duluth model as a systemic intervention

Although the Duluth method has become synonymous with interventions with abusive men, it constitutes a *systemic* form of community intervention. At its core the Duluth model encapsulates the notion that in our society men are socialized into assuming that they have an entitlement to power over women. Pence and Paymar state that 'batterers, like those who intervene to help them, have been immersed in a culture that supports relationships of dominance' (1993, p. 3).

In terms of the relations between the genders:

Men are culturally prepared for their role of master of the home even though they must often physically enforce the 'right' to exercise this role. They are socialised to be dominant and women to be subordinate. (1993, p. 5)

This analysis informs the Power and Control Wheel (Figure 1) which becomes a teaching tool for work with men, women and children. It also presages the Equality Wheel (Figure 2) in which relationships are built on difference and collaboration rather than on dominance.



Figure 1. The Power and Control Wheel

Source: Domestic Abuse Intervention Project, 206 West Fourth Street, Duluth, Minnesota 55806

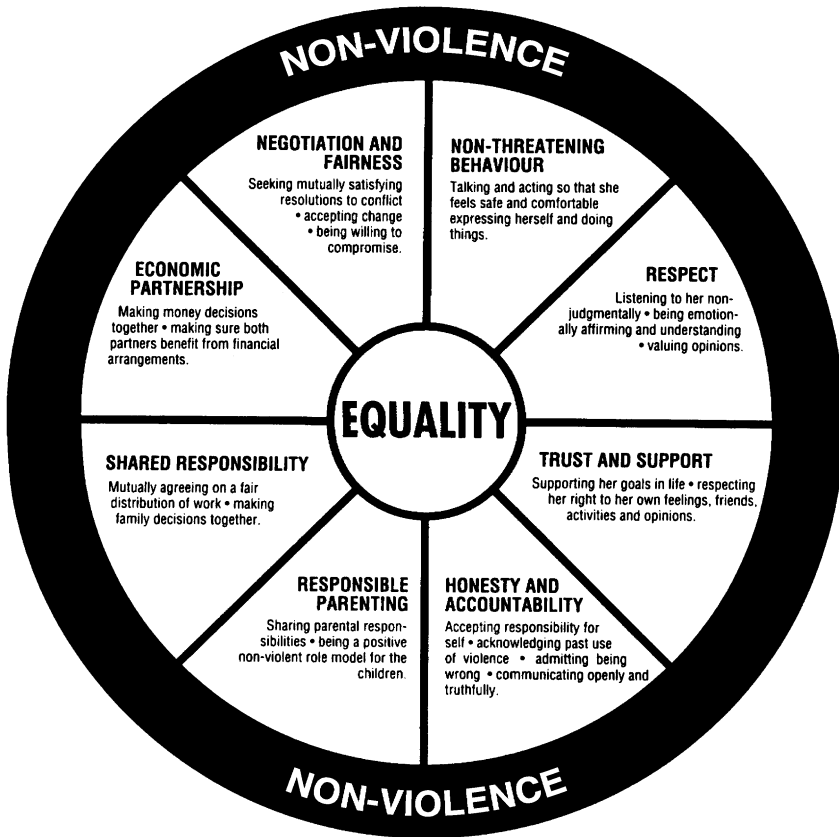


Figure 2. The Equality Wheel

Source: Domestic Abuse Intervention Project, 206 West Fourth Street, Duluth, Minnesota 55806

Because the Duluth model begins at the level of cultural awareness, it seeks to intervene within the *community*. Pence and Paymar comment that their batterer programmes are ‘designed to be used within a community using its institutions to diminish the power of batterers over their victims’ (1993, p. 1).

This in turn has been translated into a *co-ordinated community response* (Shepard and Pence, 1999) to domestic violence. Such a response includes changing the legal (and police) system to protect women and children from violence; changing the practice of all professionals to prioritize the safety of women and children; and

mandating batterers into treatment. This response is both revolutionary (envisaging equal gender relationships) and practical (creating a means to end men's violence towards women and children). It has become the standard for all policy initiatives within the field (Greater London Authority, 2001; Home Office, 1999a, 1999b, 2000) and has been revised outside the USA (Hanmer *et al.*, 2000; Harwin *et al.*, 1999; Humphreys *et al.*, 2000). What is interesting for systemic therapists is that Pence and her colleagues envisaged their interventions as ones designed to change *systems* (e.g. criminal justice systems, refuge support systems and child protection systems).

Integrating Duluth and systemic approaches: the Cardiff Domestic Violence Prevention Service

In Cardiff, the NSPCC has created a service which bridges the worlds of the systemic ideas of family therapists and the systemic ideas of Duluth practitioners. The service supports the view of Harway and O'Neil (1999) that although domestic violence has many causes in individual cases, it exists within a matrix of gender expectations that at the very least *allow it to happen*.

Harway and O'Neil represent this 'multivariate model' (1999, p. 205) diagrammatically (Figure 3) in a way which demonstrates the role of macro-societal influences that allow the biological, psychological and relational factors to affect individual people. The Cardiff service (DVPS) has translated this model into one used more commonly by family therapists (Figure 4). Here the act of a man hitting (or abusing) a woman is affected by a contextual force (e.g. the pattern in the relationship, gender role expectations and social responses) but also which itself has an implicative force for 'higher' levels of context (e.g. a man changing his abusive pattern may change the relationship, while men and woman agitating for legal change may alter social expectations about gender roles). This model is thus not only an explanatory one, it is an interventive one. If domestic violence can be explained by gender role stereotypes, or by the absence of legal sanctions, then it can be changed by intervening in either one domain or both.

We would like to give an example of some typical communications by abusive men to demonstrate this model.

Client 1: I don't like it when my partner goes out.

Facilitator (male): Does anyone else find that they 'check up' on their partner when she goes out?

Men's Violence Against Women

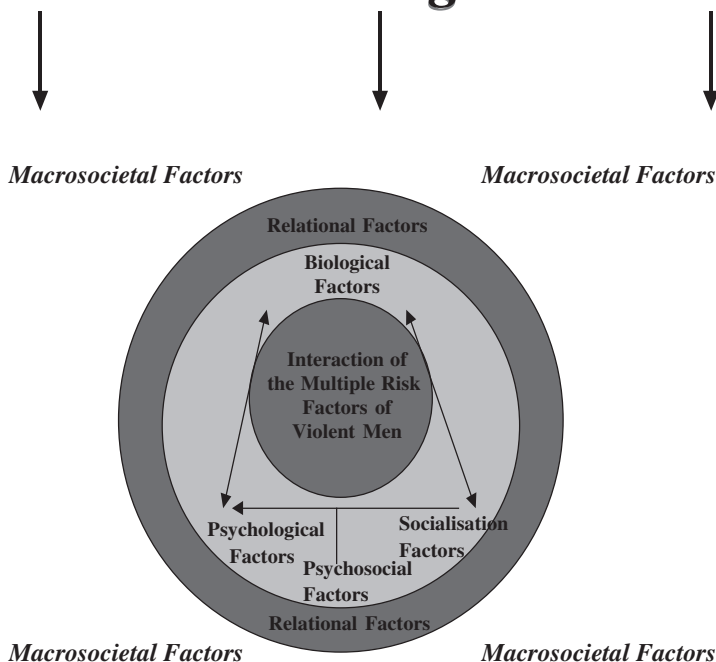


Figure 3. The 'multivariate' model of domestic violence

Source: Harway and O'Neil (1999)

Client 2: [A doorman of a club] Yes, I phone my mates on the doors to see if they have seen her around.

Facilitator (male): What do your partners think about this kind of behaviour?

Client 1: She says I am stupid, but I am only being protective.

Client 2: No you're not, you're like me – you want to make sure she doesn't meet someone else.

Facilitator (female) [To the group]: What is he scared of?

Client 3: Losing her.

Facilitator (male): How come he thinks he can do this to her?

Client 3: He thinks he owns her.

Facilitator (female): Do you think many men think they have rights to own their partners?

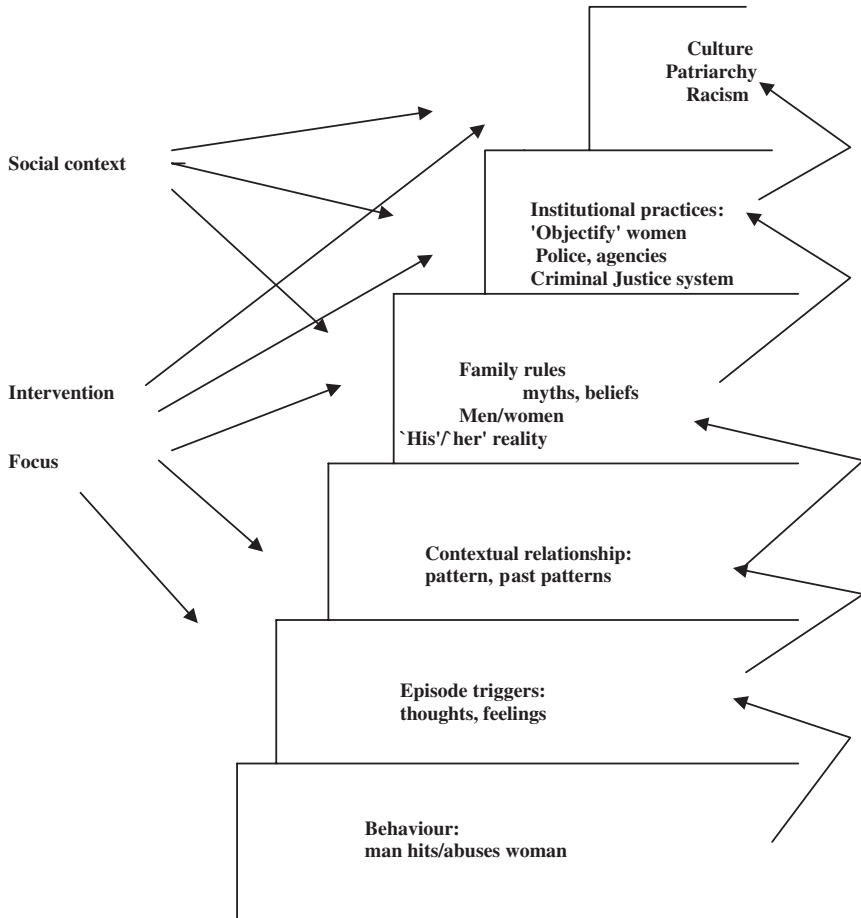


Figure 4. A systemic approach to domestic violence

Source: Adapted from Cronen and Pearce (1985)

In this example, behaviours between men and women are connected to men's attitudes to women, to men's ability to use the network of men to control women and to men's belief that women are their (sexual) possession. From a therapeutic perspective (e.g. changing abusive patterns), this understanding allows the conversation to move to different levels of context in order to help the man challenge and change his behaviour. Thus the feeling of 'unease' (that his partner may no longer want him) is connected to the act of

'checking up' (a behavioural context) and the men are encouraged to think how their partners would view this behaviour (a relational context). Just as in some forms of family therapy, encouraging the men to see the connections between these different 'levels of context' allows their behaviour to be critiqued and challenged.

The pro-feminist perspective on domestic violence services has generated a degree of controversy (Harway and O'Neil, 1999). Some commentators believe that this perspective both undervalues the incidence of the abuse of men by women and effectively treats men as inherently 'bad' while ignoring the trauma experienced by many batterers (Dutton, 1995). Mankowski *et al.* (2002) also note that both 'treatment' models (the pro-feminist and the therapeutic) run the risk of missing significant complexities involved in domestic violence. They call this 'collateral damage'. This is why we believe that creating an integration between the two systemic models of intervention for domestic violence (the Duluth and the family systemic) allows the limitations of one (being critical and possibly 'essentialist' about men) to be tempered with the intervention skills (including respectful interaction) of the other.

The application of the model: systemic group work with batterers

We will now move on from the systemic conceptualization of domestic violence and its prevention to the systemic methods used in the batterer programme run by the Cardiff team. These methods include working within a system of agencies, retaining a systemic perspective in the programme and using techniques from the systemic tradition in the group work programme itself. These aspects can be represented by a series of interconnecting and mutually influencing circles (Figure 5).

1 Working within a system of agencies (a systemic context)

In order to maintain a focus upon victim safety, it is essential that a systemically orientated batterer programme intervenes at a multi-agency level. The 'luxury' of the privately negotiated therapeutic space in which the therapist retains a neutrality is unacceptable for a number of reasons. First, it fails to use widely held knowledge that may be available to other agencies in order to challenge the man's behaviour. Second, a therapeutic intervention that does not have strong links to other agencies cannot act quickly if required to

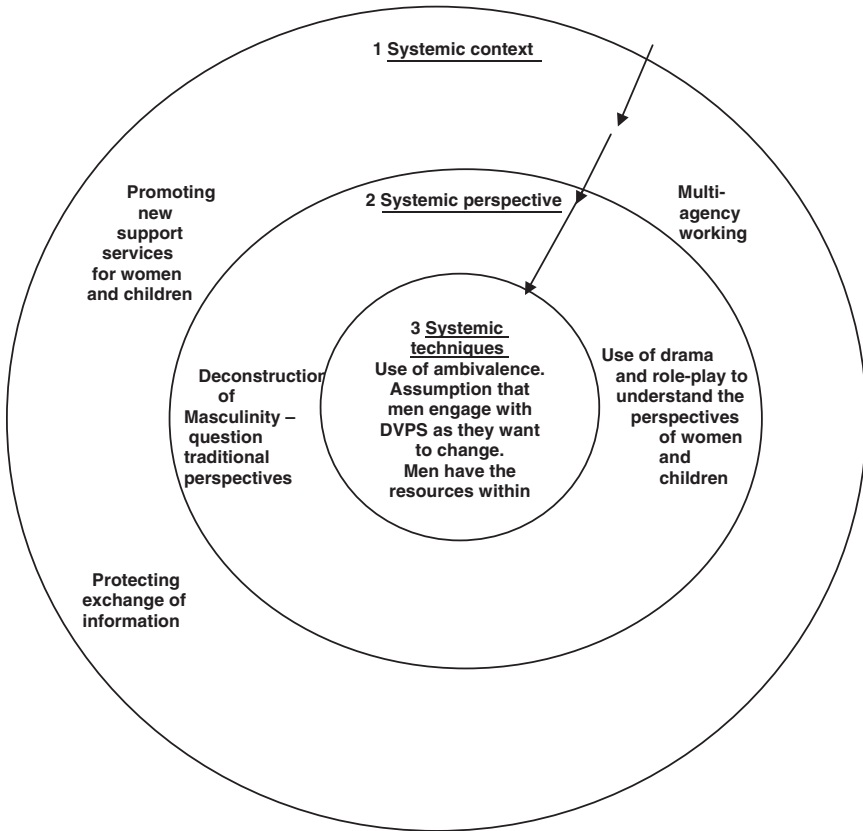


Figure 5. Systemic group work

protect the woman and children. Third, the systemic perspective can help us respect each other's different perspectives so that differences can be negotiated. Finally, in fields such as domestic violence it is important that workers working with one group are exposed to the feedback from other groups. We will explore these aspects one by one.

Using information to help a man change. It is common for men asking for help with abusive behaviour to minimize the seriousness of their actions. Therefore, in order to help the man change, the Cardiff service sometimes needs to have access to information available to

other agencies so that the man can be encouraged to take responsibility for his behaviour and to accurately assess the level of risk.³

Systemic action to protect the victim. If the aim of therapeutic intervention is to protect women and children, then intervention without the ability to provide safety is ineffectual. In the case of domestic violence the minimum expectation would be for an agency to be able to arrange for police protection in moments of crisis, or for safe refuge in times of danger. This is achieved most successfully when the agency is closely connected to these resources. In turn such connections require full involvement with local forums and action plans. Being an integrated part of these services ensures that even if the man does not change his behaviour, the woman's and children's safety is not compromised.

An example is a situation in which the DVPS worked with a man for three months who re-assaulted his partner subsequently. The DVPS was able to ensure that the woman was rehoused, her new home alarmed and local police alerted so that although we had technically 'failed', she told us that we had transformed her life. Another example of multi-agency systemic action to protect victims is the role of the DVPS in establishing the Cardiff Women's Safety Unit which provides 'one-stop shop' services to all women who suffer abuse. The CWSU model is one currently being promoted by the Home Office.

Respecting different agency perspectives. It has, rather cynically, been said that: 'partnership is simply a collection of agencies whose mutual hatred is subsumed by a collective desire for funding' (James-Hanman, 2000, p. 269). Certainly, studies about the variety, efficacy and breadth of domestic violence services show that there are differences between agencies in this field (Hague *et al.*, 1996; Hague and Malos, 1996). Indeed, Hague and Malos (1996) noted that the rise of multi-agency forums had the paradoxical (and perhaps gender-determined) effect of making voluntary women's services peripheral. A systemic perspective allows us to accept these different perspectives and the different contexts which contribute to their

³ The Cardiff team has been involved in piloting a multi-agency risk assessment tool in respect of domestic violence which has also been piloted in London and will be rolled out over the country shortly. This tool is designed to be helpful to a range of professionals including police officers, social workers and healthcare workers.

construction. Equally this perspective enables services to acknowledge differences on forums and in case review meetings which can stimulate us all to review our roles and prejudices. This respectful acceptance is not always a 'solution' to agency competition, but it may often contribute to a mutual collaboration.

Accountability to different 'voices'. The systemic perspective encourages professionals to recognize the context of their own voice and to listen to the voices of difference. Hence the DVPS not only discusses its work with survivor services⁴ but also strives to replicate something of the 'Just Therapy' (Waldegrave and Tamasese, 1993) 'caucus' concept into its work with men, women and children.⁵ Thus those mostly connected to men's work listen to the experience of those mostly connected to women and children's work. Indeed, workers alternate roles so that different perspectives can constantly be made conscious. The team also receives monthly systemic consultation which is designed to enable these perspectives to be balanced. This consultation also centres around the personal effects of this work: the 'voice of the self' also needs to be heard.

2 Retaining a systemic perspective in batterer treatment

The essence of a systemic perspective in any treatment setting is an awareness of relationship and context. How this perspective has been translated into group work has rarely been described. The DVPS introduces a systemic perspective in its various group work programmes by bringing context into the group work process itself. In this section of the paper, we outline a number of key ways in which this is achieved.

Who is the client? The men with whom we work are all aware that they are not our primary 'clients': we constantly state that we do this work for the protection of women and children. Working with men is a means whereby we can achieve this end. Such a view contrasts sharply

⁴ It is good practice for batterer programmes to not only ensure that women partners are constantly supported but also that they make them themselves available to survivor review so that victim safety is centralized in all treatment.

⁵ The DVPS is helped in retaining different voices because it is the only British service that works with children who have witnessed domestic violence, their mothers, and with men who have perpetuated violence and their partners. Hence it is able structurally to contain the variety and complexity of these different voices.

with most counselling and therapeutic contracts (Rivett and Heyman, 1998). A clinical case study demonstrates this perspective:

Facilitator (male): We know that we all have secret ways of abusing our partners, sometimes they don't know about these, sometimes they half know and that adds to the confusion, what are your secret ways of being abusive?

Client 1: I get angry that she can lock me out. I don't know how many nights I have had to sleep in the car. So I have sawn down all the screws in the outside doors and put them back in so nothing looks different. So even though she thinks she is safe, I can get in at any time by pushing the door. It took ages.

Facilitator (female): That sounds dangerous to me. What do the rest of you think?

Client 2: He isn't safe if he plans that. He should leave.

Client 3: He should tell her that he can do that. He isn't safe and she ain't safe. What would happen if he got in when he was wild?

Facilitator(male): If she were here what would she want us to do?

Client 2: Tell her about it. If she locks him out it isn't for no reason. He should stay locked out!

This group intervention demonstrates that the men are aware that their partners' and children's safety is paramount and they will be encouraged to think about this. It does not imply that they are treated disrespectfully, or that they are unimportant to us. Indeed, all the men themselves appreciate the openness with which they are treated: rarely have other professionals been willing to listen to the men's perspective and to hear what they have done. Indeed, men are often 'invisible' to professionals in all walks of life (Stanley, 1997). This contextual element to the group work also demonstrates the use of the 'levels of context' tool as an intervention: the men are encouraged to see the relationship aspects to their behaviour. In this example, the facilitators would then negotiate a systemic intervention with the man, in this case making contact with the woman herself and following that with police and social services.

The paradox of leaving the partner outside the room. Within the overall group work process, the DVPS staff reinforce a paradoxical intervention which is designed to both ensure that the men hold an awareness of their partners, but also recognize their responsibility for their own actions, thoughts and feelings. This is played out by the

motto 'Leave your partner outside the room'. This is a particularly important motto in the early stages of group work. For instance:

Client 1: The thing is, she's mouthy.

Facilitator(female): Why is that important to you?

Client 1: Well, like she knows what gets me going. She shouldn't have said that in front of my Dad.

Client 2: We could all say that, but blaming her doesn't get you anywhere.

Client 1: I know that but why does she do it?

Facilitator(male): Why do you let yourself respond in the way you do? Leave your questions about her outside the room and ask questions of yourself.

Role-playing partner and children. Another way in which DVPS practitioners bring the context into the room is by frequently getting the men to engage in role plays in which they imagine what their partners or children would say about them. It is often quite difficult for men to enter into this process, but when they do, they also describe it as a most shocking experience. In this example they are asked to respond *as if* they were their partners to a series of questions in a 'women's' group:

Facilitator(female): What are you most frightened about in living with your partner?

Client 1: [*As if* his partner] It's that he is unpredictable. Me and the kids walk on eggshells all the time.

Facilitator(female): What do you mean? Do you think he might hit you or the children sometimes?

Client 1: [*As if* his partner] No but I think he might break things. Once he smashed the telly – he threw it out of the window and it swung round on the cable and smashed the window of the flat downstairs. Then I got them lot downstairs having a go at me.

This example shows how the Cardiff team uses the 'levels of context' (Figure 4) tool to encourage men to see the context of their behaviour.

Relational contexts. Many of the interventions with abusive men within the DVPS are designed to open up the man to an awareness of his relational context. The following exchange demonstrates this during a conversation about sex.

Facilitator 1 (male): What do you all think men want from sex?

Client 1: Pleasure, excitement.

Facilitator(female): Is that all?

Client 2: No I think guys want more than that, they want to be loved and cared for and they feel that from being with a woman sexually.

Facilitator (male): So do you think that men and women really want very different things from sex?

Here the men are encouraged to put aside stereotypical male responses and think about the relational meaning of sex for them individually.

3 Techniques imported from family/systemic therapy

In this section of the paper we wish to delineate some of the techniques used by us within the group work for men which come from the family/systemic tradition. Clearly readers will already have recognized some of the methods used which are embedded in the previous case studies. Moreover, many of these techniques are 'reinterpretations' of techniques used in couple therapy by Goldner *et al.* (1990; and see Goldner, 1998) and Jory *et al.* (1997, 1999, 2000), and by Jenkins (1990) in individual work. In the group work setting these methods of encouraging responsibility and increasing motivation are adapted to a British (indeed Welsh) context.

Respect centred around change. Systemic therapists have frequently described their awareness of the *ambivalence* with which families present to them (Anderson and Stewart, 1983; Carpenter and Treacher, 1989). These therapists have described a number of approaches with which to deal with this ambivalence in ways that may be said to have been precursors to the development of motivational interviewing (Miller and Rollnick, 2002). These ways of dealing with ambivalence are also contained within the systemic axiom that *no person changes under a negative connotation* (Jones, 1993; Jones and Asen, 2000). Like Jenkins (1990) and Sharry (2001) we have applied this idea by basing our respect for perpetrators on the assumption that they are *presenting for change*. For example, we might begin an early group work session with the use of a scaling question around 'Who *has* to be here and who *wants* to be here?' This intervention then allows us to positively connote the fact that even the man who *has* to be here has come to the group and the other men

would normally comment that 'only if you want to change would you come here'.

Using the resources in the room. It is an assumed aspect of family therapy practice that therapists use the different perspectives of family members to help construct alternative patterns of interaction and understandings. We adapt this idea to the group process. Thus the other group participants are seen as an essential resource to unlock changes in each other. The facilitators know that it is what other men say that *makes a difference*, not what they say. This attitude to the resources in the group is seen in the way other men are asked to give advice to each other, in the way perspectives are drawn out within certain exercises, and in the way that all contributions are accepted and open to discussion. A typical example of this is where a man described postponing getting on with decorating the front room and then being 'wound up' by the children. Another man in the group commented:

Client 1: You didn't really want to do that decorating did you?

Client 2: Now you mention it, no not really.

Client 1: Was that because your partner had chosen the colour and wanted you to do it?

Client 3: I had that. I had to decorate a house that I wasn't even living in! I can see how you would be resentful.

Client 2: I was. You are right. I didn't see the point of decorating the front room. We never use it. I just use the telly room and the bedroom! I'm knackered most of the time.

During this exchange, the other men's insights into their experiences helped this man (Client 2) review his behaviour and question his pattern of blaming his partner.

Enactment and active techniques. Minuchin (in Minuchin and Fishman, 1981) has creatively demonstrated the use of enactment and active techniques within family therapy sessions. We have carried this approach into work with men by encouraging role play, creative exercises and imaginary scenarios. We have a rule not to act out any abusive incident. However, we might create a scenario which approximates tense interactions. The purpose of such a construction would be to enable men to find alternative behaviours. One example is that of the man who returns home late from work to find that his partner has gone on ahead of him to a family party. When he finally

arrives at the venue, he finds that his partner is talking to a man whom he has never seen before. This evokes jealousy, insecurity and aggressive behaviour. Men are encouraged to play the woman's role so that they can explore the experience of being strait-jacketed by jealousy. The man 'plays' it in a jealous mode then listens to the feedback from the man playing his partner and the man playing the 'other' man. Subsequently he is asked to replay the scene in different ways to see how much he can alter his behaviour (this scenario has its origins in the Duluth programme).

Use of questions. It has been suggested that family and systemic therapists have evolved the use of questions in a way that other psychotherapists have not (Tomm, 1987). A large part of the process in the DVPS group work is centred around the *asking of questions*. Sometimes these are strategic questions (e.g. a certain answer is intended) such as 'If you were your partner how would you answer the question "is he safe"?' At other times these questions are genuinely *reflexive* as in the question 'What do you want a relationship with a woman for?' Sometimes the same question is asked at different points in the group work process. Thus a question such as 'What did you want to achieve when you hit her?' might get an uncertain response in an early group. But when the man is asked later, he might say 'I wanted her to listen to me'. In this case the same question helps reinforce the learning that the man has achieved by closely evaluating his actions and thoughts.

Conclusion

This article has shown that it is possible for domestic violence services to draw on a systemic perspective both in their understanding of domestic violence and their methods of intervention. Specifically we have described how one service integrates the Duluth approach with a family systemic approach. In the DVPS we practise within a systemic context, trying to deconstruct the wider systems which both support misogyny and promote male privilege while working in a multi-agency arena to increase the safety of children and women. We use the systemic perspective in our direct work with men through the use of a number of techniques drawn from family therapy.⁶

⁶ Before closing we must also note that outcomes in perpetrator work are also subject to controversy. Some commentators state that the outcomes in such groups are uncertain (Stith

In *The Four Quartets* Eliot (1944, p. 30) writes about the struggle to use words:

and every attempt
Is a wholly new start, and a different kind of failure
Because one has only learnt to get the better of words
For the thing one no longer has to say, or the way in which
One is no longer disposed to say it.

This sentiment echoes some of how we feel about describing our systemic approach to batterer work that we have outlined in this paper. We are aware that our work could be understood from many other perspectives and this systemic description is, at best, incomplete. However, we hope to have shown that the systemic perspective is crucial to domestic violence services and that in an area which hovers between risk and creativity, on the razor's edge, a systemic framework can contribute to safe and effective practice.

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et al., 2002). Others such as Gondolf (2002) who have conducted quasi-experimental studies over four treatment sites argue that 'our examination of re-assault rates and women's perceptions...presents...an implicit endorsement of conventional batterer counselling' (2002, p. 199).

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