MARRIAGE OR COUPLES COUNSELING

Doug Miles, JD provided the compilation of information below regarding couples counseling and domestic violence treatment.

This National Institute of Justice (NIJ) study points out the lack of research on couples counseling for batterers, and has some good language advising against it.


From research on domestic violence, we have learned that couples therapy with battering couples actually makes things worse for the woman—not better. Instead it is suggested that partners find individual help.

See, http://www.gottman.com/research/

Marriage or couples counseling

Most domestic violence experts agree that traditional marriage counseling or couples counseling is not appropriate when there has been domestic violence. In fact, it may actually be harmful for you to participate in such counseling. You and your spouse will need many months of individual counseling before you are ready to be counseled as a couple. Your spouse needs to separate himself from you, to confront his own behavior and accept responsibility for it. You need to build your self-esteem and independence. One or both of you may have problems with alcohol or drug abuse that must be faced and dealt with before you can work together as a couple. Any counselor you see must understand the dynamics of abuse.

See, Legal Services of New Jersey (LSNJ) website http://www.lsnj.org/

5.11 Couple’s Meetings: Periodic couple's meetings (as opposed to ongoing couple's therapy) may be used to elicit information, set behavioral goals, arrange for a separation, or to teach anger management skills such as time-outs. This modality may be used only after making plans to ensure the safety of the victim. All couple’s meetings must be structured and co-facilitated by the approved provider and victim's advocate or therapist, to ensure support and protection for the victim. NOTE: Couple’s meetings
may be used only if the contra-indicators identified in Standard 5.12(a) are not in existence.

5.12 Couple’s Therapy: Treatment shall not be initiated utilizing traditional couple’s or family therapy techniques nor shall couple’s or family therapy be the primary mode of treatment in court ordered domestic violence cases. These modalities may be used ONLY if the contra-indicators identified below are not present and the pro-indicators in Standard 5.12(b) are met.

a) Contra-indicators: (Presence of any one of the following factors rules out couple's therapy):

1. Victim participates under coercion, duress, intimidation, or threat, and is censored, or otherwise participates against the victim’s will.
2. Offender has a severe pattern and/or history of violence and abuse.
3. Offender is resistant to treatment.
4. Offender lacks credible commitment or ability to maintain safety (e.g. refusal to surrender weapons).
5. Offender continues to externalize or blame others to justify past and/or current physical violence.
6. Offender has acute or chronic substance use or abuse.
7. Offender has presence of psychotic features.
8. Offender is an imminent danger to self and/or others specifically has homicidal and/or suicidal ideation.
10. Offender persists in using violence and being abusive, or commits any new offense.
11. Legal orders exist prohibiting contact.
12. Unresolved issues of incest or child abuse exist.

b) Pro-indicators: (All of the following criteria shall be met as a basis for couple's therapy):

1. Couple’s therapy may be considered after the offender has participated in a minimum of 20 sessions during a minimum of 5 months. The offender shall continue in group through the full 24-36 sessions if couple’s therapy is utilized.
2. Offender accepts responsibility for the violence and demonstrates a willing-ness to change his/her behavior.
3. Offender is aware of the detrimental impact that violence or witnessing violence has on children.
4. Offender is able to negotiate conflict.
5. Offender has a willingness to access a support network.

6. Each partner agrees to couple’s therapy without coercion from the other partner.

7. The approved provider and victim’s advocate/therapist have assessed the appropriateness of couple’s therapy. Prior to commencing therapy, there shall be at least one session with each partner and at least one couple’s meeting to evaluate issues of individual responsibility and denial.

8. The victim advocate or victim’s therapist shall co-facilitate in all couple’s therapy, thereby ensuring support and protection for the victim.

9. Each partner shall agree to follow safety guidelines recommended by the therapists.

The North Dakota Treatment Standards also prohibit couple’s or marriage counseling also advises against couples counseling. See, http://www.ndcaws.org/includes/downloads/attenderstreatmentstandards.pdf

**Anger Management and Couples Counseling Prove Ineffective**

Anger management classes designed for men who abuse women, as well as Couples Counseling for abusers have not been found to be very helpful long-term. In many cases these classes have increased the level of abuse on victims of violence due to the abuser’s warped perception of manhood and feeling embarrassed when required by the legal system to attend therapy group sessions for batterers.

See, Suite101: Married To An Abuser: Identifying Early Warning Signs of Abusive and Controlling Men  
http://marriage.suite101.com/article.cfm/married_to_an_abuser#ixzz0kU9SOZQx

**Couple’s Counseling Not Recommended**

Due to the extreme danger to the woman, domestic violence counselors advise against couple's counseling. The imbalance of power in the relationship makes it impossible for you to safely express your thoughts or emotions. The abuser will later use against you what you disclose in the sessions. He is likely to be furious that you talked about such personal things, or that you made him sound like a monster while you presented yourself like an angel. Remember that the therapist will not be there to defend or to
protect you after the counseling session is over.

See, [http://www.abuseofpower.info/Book_Counseling.htm](http://www.abuseofpower.info/Book_Counseling.htm)

Article raises concerns about couples counseling guidelines in DV cases and cites research which shows that a minority of couples counselors actually follow the guidelines.

See, [http://findarticles.com/p/articles/mi_qa3658/is_200901/ai_n31425853/](http://findarticles.com/p/articles/mi_qa3658/is_200901/ai_n31425853/)

“Attempts to implement family therapy in the presence of ongoing violence may increase the risk of serious harm. The first concern must be for the safety of the woman and her children.”

See, AMA Diagnosis and Treatment Guidelines of Domestic Violence (*Chicago, IL. AMA 1992*)

In a survey of mental health providers, 40% failed to identify IPV and none predicted lethality. In a recent study to replicate that study, they found that although there was some improvement, it found that therapists still failed to adopt a non-victim blaming stance and showed a tendency to intervene in ways that are likely to increase the victim’s risk of danger and injury.

*See, Journal of Aggression Maltreatment and Trauma, 17, 1, 2008. pg 81*

Here is a great chart on the differences between couples counseling and batterers’ treatment. See,