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Becoming Better Helpers

rethinking language to move
beyond simplistic responses to
women experiencing intimate
partner violence

Abstract

The prevalence of family violence is a persistent challenge facing New Zealand. Its effects are pervasive, spanning multiple levels: individuals, family/whānau, communities, and society in general. A major challenge in effectively addressing family violence is the apparent disconnect that exists between the various agencies and services that interact with families/whānau where abuse has become a defining feature of their lives. Despite efforts by agencies to become more collaborative, they tend to function in silos. In conducting a series of death reviews the Family Violence Death Review Committee has found agency records to reveal a lack of shared understanding of intimate partner violence as a gendered problem. The records misconstrue victims' and perpetrators' roles and convey distorted notions about the realities of victims' lives and the context of the violence they suffer. This leads to practices that put victims and their children at further risk. In this article we discuss findings related to the use of language and the concept of empowerment that need to be critically considered by those working with victims and perpetrators and those planning and designing family violence responses and services.

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Introduction

In the decade 2000–2010, New Zealand women experienced the highest rate of intimate partner violence, including sexual violence from intimate partners, of any women in the OECD countries reporting (Turquet et al., 2011). The Family Violence Death Review Committee (FVDRC) is an independent committee which reviews family violence deaths in New Zealand.¹ The FVDRC uses a systems approach to reviewing deaths. Reviews involve analysing how the multi-agency family violence system is functioning. The committee reports its findings to the Health Quality and Safety Commission,

are generally signified by complex needs (Nuruus et al., 2011), and their abuse is usually chronic.

The conceptualisation of family violence by those with decision-making responsibilities (politicians, policy advisors, government officials, service providers, front-line workers, community groups and the general public) is evident in the language used to record and describe the key players' – victims' and perpetrators' – actions and responses. Invariably in records consulted during FVDRC death reviews the way language is used fails to reflect what we know about family violence, and almost

of addressing the unique circumstances of the people affected. Yet, while policy makers appreciate that family violence is a problem requiring complex solutions, our everyday practice responses in New Zealand continue to be overly simplistic and unsafe. For example, the safety planning that typically occurs in response to intimate partner violence involves generating a standard list of actions that women can take to protect themselves and their children (including contacting the police, obtaining a protection order and finding temporary accommodation in a refuge). Though policy makers acknowledge that an integrated, person-centred response system is required (Boon et al., 2004; Herbert and Mackenzie, 2014), the FVDRC death reviews reveal that, despite the best efforts of some organisations and people to work collaboratively, they fail to provide the seamless wrap-around support that women and children experiencing abuse need.

Death reviews provide evidence that victims repeatedly articulated concerns to a range of people about their own and their children's lives being threatened. We have found that when women seek help for intimate partner violence, the violence has generally escalated to a high level of risk and must be taken seriously. Frequently, however, agencies or service providers place the onus for changing dangerous situations on victims, instead of sharing responsibility with other agencies to curtail a perpetrator's ability to be abusive. In other words, acknowledging family violence as a 'wicked problem', with all the implications that entails, has not yet been effectively translated into front-line practice with women and children experiencing abuse – the everyday praxis that shapes the way agencies and services work together.

The FVDRC death reviews have identified that the way in which family violence is conceptualised in agency and service records continues to support a fragmented, siloed and simplistic response to family violence (FVDRC, 2014). Importantly, such conceptualisations distort the violence experienced by victims and the context in which it takes place. This, in turn, leads to communications

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and makes recommendations about strategies to reduce family violence and family violence deaths. Its most recent report (FVDRC, 2014) confirms that family violence, and in particular intimate partner violence, is a gendered problem: women and children are most likely to suffer serious harm or death. Moreover, those who survive family violence will suffer lifelong social and health consequences.

Family violence, and in particular intimate partner violence, is insidious, complex, and involves deliberate unilateral actions (abusive and violent attitudes and behaviours) by one person against another. It is a cumulative and frequently escalating pattern of harm by an abuser who uses coercive control and manipulation to maintain a woman's silence and reinforce her entrapment (Coates and Wade, 2007; Stark, 2007). Intimate partner violence is disempowering. Women usually seek help when the violence they live with has escalated, along with the danger they face. These women are highly likely to be at risk of serious or lethal harm, their lives

always advantages perpetrators and disadvantages victims.

Family violence as a 'wicked' problem and the continued disjuncture with simplistic practice

Family violence is often described in policy as a 'wicked' problem, meaning a problem that is both complex and resists resolution (Devaney and Spratt, 2009). Family violence is ongoing, frequently spanning multiple relationships, and inherent in the complexities of people's lives: their histories of interpersonal violence, colonisation, deprivation, and the structural discrimination and barriers they endure. While condemned, it is also socially tolerated and normalised.

There is widespread appreciation that an effective response to family violence in New Zealand is undermined by the complexity of the current system, by the raft of social issues that typically accompany family violence, and by the range of family members potentially affected or involved. An effective response is necessarily an integrated, systemic multi-agency response, which is capable

and actions that are ineffective and put victims at further risk.

In this article we discuss findings related to the use of language and the concept of 'empowerment' that need to be considered by those working with victims and perpetrators, as well as those planning and designing family violence responses and services. Importantly, the way in which language is used to report family violence becomes a precursor to the ways that practitioners respond and their subsequent actions, which the FVDRC has found is invariably gender-biased (see boxes 1 and 2). The way language is used, therefore, needs to be refocused to ensure that victims' realities and experiences are accurately recorded and made visible. Indiscriminate use of language is unhelpful and dangerous, primarily because it reinforces prevailing misconceptions about victims and their role in resolving family violence, particularly intimate partner violence.

We suggest that a shared change in mindset, evident in language and practitioners' responses, must occur before new configurations of safety and practice can occur. For policy makers and those planning and delivering family violence and related services, having a different mindset is antecedent to creating a different 'space' in order to develop an integrated system that responds more effectively to victims of family violence. To comprehend a mindset, one needs to first look at the concepts that inform people's current understanding of an issue and the accompanying language used to shape these concepts. In the context of intimate partner violence, this involves critically examining: (a) the language used to describe victims, (b) misuse of the notion of victim empowerment, and (c) the role of individual safety planning.

Role of language and empowerment theory

The findings of FVDRC reviews show that the language policy makers and practitioners use redefines women's experiences of abuse, often minimising, disregarding or refuting the victim's version of events. This reframing of victims' experiences will influence practitioners' actions and the strategies they use to respond to a victim's safety

and protection needs. Such framing can shape collective interpretations of, and responses to, what occurred. For instance, effective information-sharing between practitioners and agencies is reliant on:

- the integrity of the information sought;
- the quality of information shared;
- what is understood by the practitioners in response to the information shared; and
- what action is taken in response to the information shared.

What happens at each of these levels is greatly influenced by the conceptual

of repeated victimisation or perpetration, either within one relationship or across multiple relationships. It is about 'joining the dots' in order to better understand victims' vulnerabilities and the risks perpetrators pose so that an effective integrated response is possible.

Distortion of who did what to whom

Language used by practitioners can distort comprehension of who did what to whom. This occurs through processes such as mutualisation, use of euphemisms, and normalisation (Coates and Wade, 2007). Using distorting language serves to

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frameworks used to understand and describe the issue that is being responded to, the language used to request and communicate information, and what actions are judged to be appropriate in response.

Incidents versus episodes

Family violence is frequently defined and responded to as discrete 'incidents'. This deters practitioners from uncovering patterns of harm, and neglects the cumulative impacts and consequent risks and dangers associated with ongoing abuse and violence. An 'incident' refers to a distinct or definite event, implying a beginning and end. Containing family violence histories within an incident framework has unintentionally given rise to incident-focused response systems, such as the Family Violence Interagency Response System.

Family violence experiences are better captured within the language of 'episodes'. An episode is part of a series of events. Conceiving of a family violence disclosure as an 'episode' implies that it has a history and a future. Thinking in this manner supports practitioners to better identify and respond to patterns

conceal a number of important factors:

- the context within which the violence occurs;
- the victim's resistance to the violence she faces;
- the perpetrator's responsibility for their deliberate and repeated acts of violence and manipulation;
- the perpetrators' anticipatory actions to stop the victim's resistance;
- the impact on the victim of the abuse; and
- the nature of the violence and its severity. (Coates and Wade, 2007)

Victims generally resist violence and abuse, dependent upon their level of perceived risk and fear. Victims are acutely aware that any defiant acts will be matched by an increase in the perpetrator's violence (Caldwell et al., 2009). Therefore, their actions are usually covert and unsuccessful in stopping the violence inflicted upon them. Perpetrators invariably anticipate their victims' attempts at resistance, taking steps to control them by using a variety of mechanisms, including isolating them from friends and family, lying to others about the victim, threatening victims and their children (sometimes with

Table 1: How Language is used to misrepresent violent acts

Use of Language	Examples from Family Violence Death Reviews
1 Conceal violence	She had a domestic with Steve* before we arrived. It was just ongoing domestics.
2 Confuse and diminish offender’s responsibility	Kevin presented as someone who wanted more for himself and his family. He was extremely open about the incident where he hit Mary. He thinks she is a lazy mum and is not motivated enough to look after their three children. This is what annoys him and makes him so angry. Kevin and Mary came into the office so that they could be spoken to together. She appeared to have no motivation or insight into her needs; he admitted that he had anger issues. Kevin and Mary were referred to an organisation that could assist them with parenting.
3 Conceal victim’s resistance	She did not appear to be able to take protective action for herself or her daughter.
4 Blame and pathologise victims	Hera did not have any understanding of the level of risk she has placed herself and her baby in by returning to her house. She was making her partner breach the protection order; therefore, she was more accountable for any risk potential.

* Names have been changed, and identifying features removed

death), interrogating them about their movements and intentions, humiliating them, blaming the victim for the violence, and/or inflicting more violence. Yet agency and service records serve as a testament that victims’ acts of resistance are generally overlooked and unrecognised. Instead, accounts are framed in ways that hold victims solely responsible for the violent behaviour happening in their family/whānau, and for securing the safety of their children. Language can be used to record and describe events in a manner that minimises and disguises violent acts. The true nature of one person’s deliberate acts of violence against another is instead reconstructed to portray these acts as mutual. Coates and Wade state: ‘Language that mutualizes violent behaviour implies that the victim is at least partly to blame and inevitably conceals the fact that violent behaviour is unilateral and solely the responsibility of the offender’ (Coates and Wade, 2007, p.514). In these ways constructions of perpetrators and victims invariably advantage perpetrators and disadvantage victims.

Language also makes invisible the social and structural inequities that frequently privilege perpetrators over their victims. Coates and Wade propose that language is used in four ways: (a) to conceal violence, (b) to confuse and

diminish offenders’ responsibility, (c) to hide victims’ resistance, and (d) to blame and pathologise victims. (See Table 1.)

Victim empowerment

Empowerment theory has been used widely to inform work with women affected by intimate partner violence (Morgan and Coombes, 2013). In discussing the ‘perils’ of empowerment, Aiken and Goldwasser (2010) confirm the notion of empowerment, within the context of family violence, as dangerous and founded on misconceptions and false assumptions. Family violence sector practices informed by the idea that it is necessary to empower victims by allowing them to decide what actions to take in response to their victimisation are often a barrier to victims receiving the appropriate support, especially those who are at high risk of serious or lethal harm. FVDRC death reviews between 2012 and 2014 have revealed that intimate partner violence responses based on empowerment theory have led to unintended harm, which has contributed to the women’s deaths. Even though empowerment is an ultimate goal for women, the overriding principle must be to keep them and their children safe. Death reviews have shown that empowerment can only occur when women are in long-term

safe environments, and are able to make informed choices. Exposure to violence is a predictor of a victim’s need for support. However, help-seeking by abused women varies and is mediated by their level of vulnerability to their abusive partners (Nurius et al., 2011). This includes the degree of psychological impact, the quality of their social relationships, their ability to seek legal and health services and their exposure to, and the severity of, violence. It is also mediated by their access to social, health and economic resources. Family violence victimisation (particularly as vulnerability increases) compromises women’s ability to be ‘empowered’ and to independently protect themselves (and their children). The very nature of coercive control makes it close to impossible for many women to successfully remove themselves from a violent partner safely, particularly when it intensifies (Stark, 2007). Victims resist abuse but their resistance does not and most often cannot stop the violence, yet is no less important for that fact. Only agencies’ and communities’ interventions and/or the perpetrator’s change in behaviour can stop the violence.

Current safety plans tend to focus on generating lists of actions that victims need to take to keep themselves and their children safe. It is widely believed that generating safety plans is empowering of victims experiencing abuse and enables them to secure the necessary assistance to stay alive (Aiken and Goldwasser, 2010). Such safety plans effectively shift the onus of responsibility away from agencies and the abuser for stopping the abuser’s use of violence and onto the victim herself. Furthermore, believing that one can empower victims to make safe choices assumes autonomy and choice, and therefore conceals the structural inequities many victims are faced with. Such plans do not assist women in high-risk situations to be safe. The result is that, instead of being helpful, unreasonable expectations are placed on victims. When they ‘fail’ to keep themselves and their children safe they are blamed for their inadequate decisions and choices. This dynamic is worse for women of colour who are likely to face more serious structural inequities and impediments

(Fredericks, 2008; Ritchie, 2000). Without doubt, Māori women and children are more likely to die than Pākehā as a result of family violence.

The death reviews enable us to learn from the deaths of those women who, tragically, have been killed. Frequently they have revealed a context of entrapment and dangerous abuse that has meant that victims were not able to action their safety plans. Instead, when these women sought help for the violence they were living with, it had elevated past the point that they were able to manage on their own. They asked for help because they needed help (Nurius et al., 2011). Victims need agencies to enact integrated safety strategies aimed at curtailing the abusers' violence; reliance on individualised safety plans that attempt to empower women is a dangerous praxis mismatch.

The FVDRC repeatedly finds that for services, and those working within them, individualised safety plans unintentionally absolve agencies from taking further responsibility for the victim's safety. Whether agencies enact their responsibilities regarding victims' safety or not is invariably mirrored in practitioners' practices, which often reflect a lack of education, training and monitoring. Policy makers can lead by providing the necessary expectations and directions, particularly with regard to changing practice mindsets and the importance of an integrated response to family violence.

Shifting mindsets

As we have noted, language frames the way in which we understand and respond to issues. Therefore, the language we use can limit or enhance interventions and interactions with victims. FVDRC reviews of practice responses show that the current ways we think and talk about family violence in New Zealand often support victim blaming, perpetrator enablement and absolving agencies of responsibility. Different language could support agencies to be better helpers, and to more accurately assess and attend to prevention opportunities.

If we are to shift mindsets in order to support a more complex and nuanced everyday practice response – one more

Box 1: Case example 1 language using an empowerment and individualist approach

Rachel and Tim have a *volatile relationship*, which is characterised by lots of arguing, drinking and fighting. *They both get physical*. Last night there was a domestic incident and Rachel got hurt. While agencies are aware that *Rachel can give as good as she can get*, she is failing to protect her children from witnessing violence in their home. Rachel *needs to leave Tim and stop drinking*, so her kids can have a stable home environment that is violence free. Lots of agencies have been involved but *Rachel keeps choosing to stay* with Tim and continue drinking, rather than make the changes needed for her kids. *Rachel needs to put her children needs over hers and her partner's*.

Note: This case example is based on FVDRC death reviews of a person's agency record, with all identifying features changed.

appropriately matched to the 'wicked problem' of family violence – then we need to ask several questions. What does a safety and dignity mindset look like? What language should be used to shape these responses? Respect is a fundamental principle which underpins an integrated response system (Boon et al., 2004). Respectful practice requires actions aimed at maintaining women's safety and dignity and includes acting on identified risks. It also relies on language used by decision-makers and service providers that is consistently accurate in its portrayal of a woman's situation.

Case examples

The following two case examples show the same episode portrayed in two different ways: they demonstrate the way in which the language that is used makes a difference, particularly in how people then choose to respond. Moreover, documented accounts of events influence others' interpretations of what is happening for a victim and how they also then respond. Case example 1 (Box 1) uses language to describe the violent situation that Rachel has endured which frames her as mutually responsible for the violence that has occurred ('both get physical'; 'Rachel can give as good as she can get'). It also engages in victim blaming by accusing Rachel of 'failing to

protect her children', 'choosing to stay' and 'continuing to drink'. The person writing this account then uses an empowerment and individualist approach by indicating that Rachel needs to act in order to put her children's needs before her own. Notably, case example 1 is devoid of any mention of Tim and his role in the violence.

By contrast, case example 2 (Box 2) provides an accurate account of what occurred. It provides a context for Rachel's relationship with Tim: Tim is 15 years older, she was 16 and a young mother (consequent to rape) when they met, Tim has been known to use coercive controlling behaviours in prior relationships, and she uses alcohol to numb and block out the abuse (rather than recklessly choosing to drink alcohol). This version also clearly positions Tim and his actions in this situation: we are told that in addition to threatening to kill Rachel if she leaves, Tim is using strangulation and has smashed a bottle of wine on her head and repeatedly kicked her in her back and head. All of these forms of violence are highly dangerous and potentially lethal. This account also highlights Rachel's resistance to the abuse and violence: she uses alcohol to numb and block out the abuse, she armed herself with a knife to try and stop Tim assaulting her, she grabbed a broom and

Box 2: Case example 2

language accurately portraying what happened

Tim has a *history known to multiple agencies of using coercive controlling behaviours towards Rachel*, as well as his previous partners. Rachel and Tim have been in a relationship for ten years. Tim is 15 years older than Rachel; they *met when Rachel was 16 and a young mother of her first child, Jason, who was conceived as the result of rape*. Rachel has had two children, both daughters, with Tim. Tim has *strangled Rachel before to the point that she has lost consciousness, and he has threatened to kill her if she leaves him*. Rachel's *use of alcohol has increased over the years as a way of numbing and blocking out the abuse*. Both her *parents were alcohol-dependent*. Rachel *violently resists Tim's abuse*. She has *armed herself with a knife to try and stop him assaulting her*. Last night Tim was *verbally abusing and threatening to beat Jason for truanting from school*. Rachel *grabbed a broom and stood in front of Jason; she threatened to hit Tim with the broom if he approached them*. Tim *grabbed a bottle of wine and smashed it onto Rachel's head, causing her to fall to the ground*. Tim then *kicked Rachel repeatedly in her back and head*. Jason was screaming and ran to his mother's aid. A *neighbour heard Jason's screaming and called the police*. This is an *opportunity for the police to intervene and put in place a plan to curtail Tim's ability to continue abusing his partner and three children*.

Note: This case example is based on the information the FVDRG gathered about this person's situation (all identifying features changed), and rewritten to show the victim's reality.

stood in front of her son to protect him, and she threatened Tim if he approached her and her son. This version of events also indicates a focus on curtailing the violence and making Tim accountable, highlighting the agencies' responsibilities in achieving this.

Integrated services

Part of joining the dots is the capturing and integration of multi-agency perspectives, as invariably victims and perpetrators have multiple agencies in their lives. Addressing the 'wicked problem' of family violence requires policies and leadership focused on an integrated approach. The challenge in resolving family violence is the diversity of stakeholders, their relatively siloed ways of working, and the differing language and approaches they take (Devaney and Spratt, 2009). It

also requires changing the attitudes and behaviours of those working with victims and perpetrators of this socially complex problem. Integration at a macro (system) and micro (person's safety strategy) level cannot occur without a reconfiguration and realignment of the concepts which underpin our ways of working. This means that policy makers and practitioners alike need to reframe help-seeking as a sign of heightened risk, but also as a form of resistance (Richardson and Wade, 2010). When intimate partner violence is a possibility, there is a need for shared responsibility to take action to minimise the impact of perpetrators' abuse and violence, and secure victims' safety.

Conclusion

Family violence is a cumulative pattern of harm that, without effective intervention,

is likely to occur over lengthy periods of time. Victims of family violence need the best helpers they can get to secure their and their children's safety and protection. This requires policy makers and practitioners working with those affected by intimate partner violence to ensure the accurate recording of events, identifying the context of the violence, the perpetrator's acts of violence and the victim's acts of resistance. It is important to resist the temptation to assess and respond to the situation using a purely empowerment and individualist approach. Robust action requires a critical approach which foregrounds victims' disempowerment and draws on an integrated service response. What experiences of violence are recorded and how influences not only the perception of victims and their role in the violence they are subjected to, but also the actions taken or not taken to assist them to be safe.

Obviously there are many pieces of work required to ensure that we have an effective integrated system response to family violence that addresses the circumstances of those affected. In this article we are not suggesting that a shift in language alone will be sufficient to achieve this. What we *are* suggesting is that workforce development strategies, as well as multi-agency practice frameworks, and monitoring processes that are required to develop an effective integrated response, will be undermined and unsafe if we continue at a practice level to understand, describe and think about family violence in the manner that we currently do. On the other hand, different and more accurate ways of understanding, describing and recording family violence have the potential to provide impetus and support for these other system changes, and most importantly to increase victims' safety and dignity.

1 The committee's members are Julia Tolmie (chair); Dawn Elder (deputy chair), Professor of Paediatrics and Child Health University of Otago, Wellington; Ngaroma Grant (deputy chair), project manager of Te Arawa Whānau Ora Collective; Denise Wilson, Professor of Māori Health, Auckland University of Technology; Miranda Ritchie, national violence intervention programme manager; Health Networks Ltd; Fia Turner, clinical supervisor, Genesis Youth Trust; and Paul von Dadselzen, retired Family Court judge. For further information on the Family Death Violence Review Committee's report see www.hqsc.govt.nz/our-programmes/mrc/fvdr/.

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Upcoming Events

Date	Title	Speaker	Venue
Tuesday 24 February 2015 12.30pm – 1.30pm	Lima: Insights from the Inside How did December 2014's Climate Change Conference affect the prospects for a new agreement in Paris and what does it mean for New Zealand?	Jo Tyndall <i>New Zealand Climate Change Ambassador</i>	Victoria University of Wellington, Pipitea Campus, Old Government Buildings (Law School) GBLT2 All Welcome – No RSVP's required
Tuesday 3 March 2015 12.30pm – 1.30pm	Involving Patients and the Public: Decision-making in health and social care in the UK	Dr Gary Hickey <i>PPI Lead (Research and Education) for the Centre for Public Engagement, Faculty of Health, Social Care and Education, Kingston University and St George's University of London</i>	Victoria University of Wellington, Pipitea Campus, Old Government Buildings (Law School) GBLT4 All Welcome – No RSVP's required
Monday 30 March 2015 6.00pm – 8.00pm	Nuclear Weapons: The State of Play 2015	Ramesh Thakur <i>Former United Nations Assistant Secretary-General, ICISS Commissioner, co-author of The Responsibility to Protect doctrine (2001) and Director of the Centre for Nuclear Non-Proliferation and Disarmament, Australian National University</i>	Victoria University of Wellington, Kelburn Campus, Hunter Building, HULT323 All Welcome – No RSVP's required
Tuesday 12 May 2015 5.30pm – 6.30pm	Public Policy in the Sea: Spatial planning in the Hauraki Gulf	Raewyn Peart <i>Policy Director, Environmental Defence Society</i>	Victoria University of Wellington, Pipitea Campus, Rutherford House, RHLT3 All Welcome – No RSVP's required

*RSVP's can be sent to igps@vuw.ac.nz

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