Therapists must have a profoundly accurate analysis of the etiology of battering, or the batterer will continue to have the advantage and he will use therapist’s lack of clarity towards his own end. In order to effectively intervene with batterers, on any level, one must fully comprehend WHY he has chosen to utilize this behavior. Simply knowing the “correct” answer to this question is no longer sufficient. Today you must have utter clarity regarding the full etiology of this matter.

The myriad responses to this why question only serve to further the batterer’s agenda of “I want what I want, when I want it” and a willingness to get it at the expense of another. Batterers are opportunists and the lack of clarity regarding the why question creates vast opportunity. For example, one may believe the answer is an anger control problem. Batterers use their anger instrumentally and strategically. If a situation calls for the effective use of anger, the batter will summon his anger to do the job. The batterer may, just as effectively, use his sorrow, sadness or shame to also be an effective and coercive means to establish, maintain or regain control. Simply stated battering is purposeful, instrumental and strategic behavior designed to bring about a result.

Anger is a potential reaction to various stimuli or circumstances. It can also be used to create a mood, scenario or to affect change. Anger can be described as the archetype mood of the batter. Anger is simply a means to an end, one way to get the job done. In fact, anger is a popularly held excuse for battering. Running neck and neck in the obfuscation race with anger is the excuse of intoxication. According to ACCESS-York, Inc., “Alcohol is involved in about half of battering situations, but is not the cause. According to one study, one third of abusive men are violent only when they are drunk, one third are abusive whether drunk or sober, and one third do not drink at all. Many batterers use drinking as an excuse for the violence and deny that abuse is a problem.”

Premeditation
There are two “types” of premeditation. One would meet the legal definition of premeditation and the other, a logical and cognitive and behavioral understanding. In the case of the former one could posit to gain a better understanding into the dynamics of the batterer, and the second understanding of premeditation entails an understanding of “patterned behavior.” Patterned behavior is that which we have done with enough frequency, that we have now become proficient at it and no longer need that focus and concentration that was once a necessity.

Batterers who say, “I acted without thinking” are in actuality giving us an important insight into their history. Consider that when a firefighter or law enforcement officer rushes into a burning building and later states, “It was like I acted without thinking”, or “I was on auto pilot”;

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the community response is to give him/her a medal or an award. Yet, when a batterer says these same words therapists immediately begin to “psychologize” this behavior and wonder what must have gone on (what did she do) that caused him to “snap”? Therapists must understand the subtext of the batterer who is making these statements as stating, “I have some experience at doing this sort of thing, so I didn’t have to give it much thought.”

While it is true the batterers’ victim may do or say things, which evoke an emotion and/or belief on the batterer’s part. This is far from saying she caused this to happen. Assigning the power to the victim, to cause him to batter, not only fails to understand and recognize the dynamics of battering, but also portrays the batterer as a simple dupe. It is erroneous to think that the batterer was caught off guard, was not thinking and got caught up in his reaction. Not only is it erroneous, but also it is a “batterer friendly” belief. Anger is a normal human emotion and has no ascribed behavioral manifestations associated with it whatsoever. Society has ascribed behavioral manifestations to the emotion of anger. Just as with intoxication and behavior, certain behavior is not only tolerated when angry (or drunk for that matter), but it is expected, in particular, from men.

There is an erroneous belief that you can tell the really “bad batterer” by looking at him. For example he is an angry minority or an angry man with missing teeth, a dozen tattoos, wallet on a chain, chewing tobacco, scar on his face, riding a Harley and has a broken pool cue in his back pocket. While some batterers may look like this, however, the other majority of batterers look like the rest of the men in the workplace, school or church.

Some resort to blaming intimate violence on mental illness. Mental illness afflicts approximately 10 percent of the general population and one of the things known about people who suffer from mental illness is that they tend to be less violent than the rest of the population. Batterers, who have a mental illness, batter in a similar way to those men who have no mental illness. Their witnesses are their victims, and they are only as violent as they are willing to be. Thus, if faced with a batterer with mental illness, both of these issues must be addressed. This is no different than the batterer who is an alcoholic/drug addict. So if a mentally ill batterer is treated for his mental illness, then he becomes a better mentally and psychologically adjusted batterer. One issue did not cause the other, so it only stands to reason, that one issue cannot cure the other.

**Family History**

When considering family history and the erroneous belief that this somehow causes intimate violence, therapists may ask, “Did his parent cause this to happen” or “Did it simply give him a particular affinity or appreciation for the vocation”? Witnessing intimate violence puts one at a greater level for perpetrating it later in life. But it is still not cause and effect. The decision to enter something is one made by the individual. Influenced? Yes! Caused? No! Therefore, therapists must consider that intimate violence is purposeful, instrumental and strategic behavior designed to bring about an outcome.

**Self-Esteem**

While it may be true that an individual perpetrator of domestic violence may have issues with self-esteem, this in no way was what caused the violence. The reality is more along the lines of having an inflated sense of self. Grandiosity, self-centeredness, “King of the Castle”, and “Lord and Master” are more along the lines of the requisite mentality. The reality that the perpetrator of domestic violence sees himself as “King of the Castle”, thereby delivers the final unpacking of the myth that batterer’s batter as a result of low self-esteem.

**Conditions**

Battering can be broken down into the categories below. Noticing these signs below does not mean that battering is eminent; it simply means that conditions are good that battering may be perpetrated by this individual. It is important to note here that battering can take place when these conditions are not present as well. The following are things to look for.

- **Self-Interest**: The distinction between those who are batterers and those who are not is that the batterer is willing to get what he wants at the expense of another, those who do not batter, are not.

- **Objectification/Vilification**: This is the mindset toPrepare to harm another person, to objectify and ultimately vilify them as a means to justify and minimize the reality of their actions.

- **Opportunity**: This is an ever changing target. The batterer will use whatever is at their disposal to batterer her: family, job, self-doubt, family heirlooms, past history, children, etc.

- **Choice**: Batterers clearly make a choice before they do what they do. They may arrogantly or ignorantly ignore this cognitive process, but that does not mean that it has not taken place. In order for any action whether verbal or physical to be committed, there must first be the brain activity, or the cognitive process, then and only then can the action be committed.

- **Consequence**: Batterers are motivated by consequences in two ways: first in terms of the effectiveness of their behavior, and secondly the risk to oneself.

- **Obfuscation**: Later they cover up their tracks of intentional premeditated, purposeful, instrumental and strategic behavior.

**Moral v. Strategic Behavior**

Therapists must analyze battering and abuse in the realm in which it was created. Battering is about strategy, not about morals. A man who commits intimate abuse may quickly say, “What I did was wrong” in an attempt to seek/demand forgiveness or in an attempt to obfuscate the listener. His explanation of wrong is speaking to the moral nature of his behavior. In order to effectively intervene with this individual, therapists must get to his core belief. The assessment of right/wrong is not based on the moral answer, but on the strategy implemented. Here the “right” answer is one that assists in attaining the “goal”. This individual had a goal, period, and then set into motion a series of actions, which were intended, strategically so, to bring about the conclusion of his goal. This is the core, this is the irredeemable bull’s eye that therapists must use as a yardstick to understand intimate abuse.

To truly understand domestic violence therapists must first begin with dismantling what it is not. Then they will be ready to understand the utter simplicity of domestic violence.