
THE CASE AGAINST ANGER CONTROL FOR BATTERERS

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THE CASE AGAINST ANGER CONTROL FOR BATTERERS

Treatment programs for men who batter have only developed within the last seven years or so, largely in response to the shelter movement for battered women (Schechter, 1982). In the process, there has been a gradual refinement of treatment approaches and some emerging consensus among the 90 programs now operating for batterers (Pirog-Good and Stets-Kealey, 1985). Batterer programs for the most part include a group discussion format which incorporates anger control, communication skills, and sex role resocialization (Edleson, 1984; Saunders, 1984, Purdy and Nickle, 1981).

However, these aspects receive varying degrees of emphasis from program to program. In fact there are an increasing number of programs in which anger control is central to the treatment (Deschner, 1984; Sonkin et al., 1985; Neidig et al., 1985). This trend toward anger control does not account for the fundamental theoretical differences in the field (Gondolf, 1985b). Furthermore, there is no conclusive evidence that anger control, or any other treatment, is effective in ending physical and emotional abuse (Gondolf, 1987).

Our clinical observations and assessments, moreover, suggest that anger control as a treatment tool must be used with great caution. In fact, batterer programs may do well not to use anger control given its possible misuse by many batterers. To illustrate our position, we discuss the assumptions of anger control, its limitations and shortcomings, and some alternatives to its use.

THE ASSUMPTIONS OF ANGER CONTROL

The anger control techniques now being widely used in batterer programs are based largely on the cognitive psychological model of anger and aggression developed

primarily by Navaco (1975). The model, in contrast to biochemical or psychoanalytic models, implies that an individual can consciously redirect or reduce his or her dysfunctional anger. In other words, we can control our hostilities rather than succumb to them.

Essentially, the model presents a complex arrangement of feedback loops that include the following principal components. A provocation instigates a physiological arousal that is labelled anger. This "anger" is then translated into one of several behaviors, usually aggression for men. The consequences of this behavior often serve to provoke more arousal and the anger intensifies.

Anger control is designed to make the individual more aware of this process and enable him or her to intervene in it. Very simply, the anger control techniques attempt to enhance specific cognitive and behavioral skills. Cognitively, they include attentional, restructuring and self-instructional skills. The attentional skills include the ability to recognize provocation cues and physiological signs of arousal. Anger logs are often used to promote this awareness. The restructuring skills include adjusting expectations and reappraising the circumstances that provoke arousal. Role plays often are used in this regard. Self-instruction skills refer to the self-talk that is commonly used to relabel the arousal and/or behavioral choice.

The behavioral skills promoted by anger control include arousal reduction, communication enhancement and problem-solving. Arousal reduction uses stress management techniques such as progressive relaxation exercises and calming visualizations. Communication enhancement includes "time outs" to inform the annoyer of the arousal and more assertive expression of feelings. Problem-solving takes the form of developing alternatives to aggression and identifying the constraints in one's environment that may provoke arousal.

When anger control is employed in batterer programs, these techniques are usually preceded by exercises and discussion that alert the batterer to the severity and nature of his abuse. This procedure is intended to reduce the denial and minimization of abuse. Also, integrated into the treatment is exposure to the sex role assumptions that contribute to the unrealistic expectations and appraisals that the batterers hold of their wives or lovers.

ANGER CONTROL AND BATTERERS

Anger control no doubt contributes to the redirection or reduction of anger and of aggression in many individuals. The question is how well suited is it for batterers. Does it help end wife abuse, as opposed to only reduce dysfunctional anger? Two, does it lend itself to misuse by counselors and batterers? In other words, is anger control effective if properly employed, and is it likely to be properly implemented by this particular population?

Our clinical experience and preliminary evaluations lead us to answer "no" to these important questions. For one, wife abuse is not necessarily anger-driven, but more the consequence of a socially imposed "need" to control women. Two, batterers readily reduce anger control to a set of gimmicks that enables them to get their way less violently while continuing their abuse.

In a follow-up study of batterers who had participated in the Second Step program in Pittsburgh (Gondolf, 1984), the less successful men more frequently cited anger control techniques as their means for reducing abuse, even though anger control comprised a very small part of the program. The more successful men, however, were more likely to cite empathy, a redefinition of their manhood, and more cooperative decision-making as the means of ending their abuse. Furthermore, our in-depth interviews with reformed batterers (those who had been non-violent for at least ten months) revealed a change process that

went well beyond the scope of anger control (Gondolf and Hanneken, 1987.)

These findings led us to conclude that the less successful program participants were often avoiding the change process by reverting expediently to anger control techniques. Most of their wives and partners in fact reported that while in some cases the physical abuse was lessening, the psychological abuse intensified. As one worker in the shelter movement observed, many programs are simply producing "nonviolent terrorists."

THE SHORTCOMINGS OF ANGER CONTROL

Therefore, we have seriously reconsidered the assumptions of anger control and its implementation with batterers. In the process, we have derived the following shortcomings of anger control. In our view, these shortcomings offer a case against anger control for batterers.

1. Anger control assumes a family systems interpretation of abuse in which the wife acts to **provoke** the anger. One of the first steps to conventional anger control is to identify a hierarchy of provocations, which in the case of wife abuse includes annoying behaviors of the wife or lover. As Schechter (1982) argues, such an assumption wrongly implies that the wife is an accomplice in the abuse, and should in some way change her behavior in order to reduce the abuse. The alternative feminist view suggests an oppressor/oppressed interpretation of wife abuse. That is, wife abuse is the result of a more powerful and dominating man relentlessly using abuse to control and subject a woman.

2. Anger control fails to account for the **premeditated** controlling behaviors associated with abuse. From most accounts, wife abuse is a syndrome of terror inflicted on the women through direct and indirect controlling and degrading behaviors (Edleson et al., 1985). It is not merely a series of impulsive, angry

incidents, but often a premeditated system of debilitating control. If a batterer stops hitting a woman or verbally degrading her, abuse does not necessarily end. In fact the psychological abuse of manipulative and isolating behaviors may continue and be as emotionally devastating as physical abuse.

3. Anger control tends to **diffuse the responsibility** of the abuse and prolong the batterer's denial. The batterers' denial of abuse, as a number of clinical reports suggest, is particularly acute (Bernard and Bernard, 1984). Many batterers, therefore, use anger as another excuse for their abuse, much as they blame alcohol, stress, or other individuals. Regardless of whether these factors contribute to abuse, the men therapeutically need to accept full responsibility for their behavior in order to begin the process of personal change.

The anger control may, furthermore, feed the batterers' tendency toward self-pity and self-deception. The focus on their anger causes some men to dwell on their own emotional discomfort rather than the more severe pain that they have caused others. While this can be therapeutic, it can also lead to self justification and victim blaming.

Moreover, anger control reinforces the willfulness of many batterers and promotes their tendency to ignore deeper more relevant feelings. The "official recognition" of control in anger control leads many batterers to believe that the way to stop abuse is to simply to extend their control to one more aspect of their lives -- their emotions. Instead, the batterer needs to be encouraged to "let go" of much of his control.

4. Anger control is often misrepresented as a **quick-fix** that may endanger battered women. The vast majority of men who join batterer programs do so in response to their wives' leaving them, threatening to leave, or taking legal action. The men therefore tend to use the program the same way they use their violence -- to manipulate and control their wives. After

learning a few anger control techniques, many batterers will claim that they have the problem "under control" and lure their wives in to returning. The men in anger control treatment usually enter a self-congratulatory phase in which they feel that they are really getting better and deserve praise. Their wives or lovers, however, are hardly ready to reward them for the humane treatment which they inherently deserve, or to be trustful of a man who has unpredictably abused them long-term. A woman's failure to be congratulatory as the man expects may lead to further abuse.

5. Anger control too frequently **lets the community off the hook**. It would have the community think that the problem of wife abuse is being "treated." Abuse becomes, then, a problem of psychologically deficient men who lose their temper and impulsively abuse rather than of inadequate protection services, reduced opportunities, and second class citizenry for women. In sum, anger control is less threatening to the community and therefore an easier way for counselors to gain acceptance for their programs. The more explicitly antisexist programs imply that men in general have to do some changing in order to undo the social conditions that give rise to wife abuse. This of course is a challenging notion for some community leaders to accept, because it suggests that they too have a responsibility in working to end abuse, not just the program counselors.

6. Anger control does not sufficiently address the normative reinforcements for wife abuse and violence toward women in general. Most of the literature indicates that wife abuse is a social problem embedded in a sexist **patriarchal** social structure (Dobash and Dobash, 1979; Martin, 1976; Pagelow, 1981; Walker, 1979). Anger control, however, tends to psychologize the abuse rather than accept the more uncomfortable task of confronting the economic, social and political injustices that perpetuate the problem. Prompting men to confront patriarchy in

themselves and others therefore should be the central thrust of program for batterers.

ALTERNATIVES TO ANGER CONTROL

We would like to offer two alternatives to anger control treatment that minimize the shortcomings of anger control with batterers, while still helping batterers to end their abuse. One alternative is a resocialization program, like RAVEN of St. Louis, in which anger control is subordinate to changing sex-role stereotypes that contribute to men's tendency to control women (Gondolf, 1985a). The second alternative is a theme-centered discussion program on battering that deletes anger control techniques, like Second Step in Pittsburgh (Russell, 1984). (We recognize that a third alternative may be found in the accountability workshops of the Duluth, Minnesota, [Pence, 1983] and New City, New York, (Frank and Houghton, 1980), which operate much like the "drunk driving" classes required by some states.) Our clinical observations and informal follow-ups lead us to believe that the effectiveness of such alternatives equals that of other anger control programs, if it does not surpasses them (Gondolf, 1985c, 1984). At least, the demonstrated viability of such alternatives warrants further consideration.

In the first alternative of a resocialization program, anger is identified as another means men use to get their way. The so-called provocations of anger are seen as the batterers own distortions derived from his sex role expectations and objectification of women. For instance, the batterer's tendency to label arousal as anger is related to the male sex role stereotype that would have men suppress feelings. The inclination to act out anger in aggressive and violent behavior is reinforced by a patriarchal social structure that rewards coercive power and brute force. The anger in this approach becomes secondary rather than primary. It is just one more kind of control based on a false sense of manhood.

The thrust of this more integrated approach is to prompt men to undo sex roles and take social action. This can be accomplished through such activities as speakers from local women shelters, films on male sex roles, sexist language exercises, macro-analysis diagrams, charting household duties and decision making, and logs of controlling behaviors. Social action can be promoted through a variety of activities: requiring service to the program, supporting community action organizations, public speaking on wife abuse, organizing a follow-up men's group, and staffing a men's center.

The second alternative of the theme-centered approach explores unresolved masculine issues and projects positive images of personal growth, nurturance, intimacy and nonviolence through discussion of the commonalities of abusive men. Each meeting begins with the group leader stating a prescribed theme. These themes are worded as positive projections of some unresolved issue around violence or abuse. Some of the themes are "Shouldering My Responsibility," "Shifting the Focus of My Control," "Forming Friendships," "Balancing the Need for Closeness and Distance," and "The Challenge of Change." The batterers reflect in silence on how the theme pertains to them, what they would like to contribute to the group with regard to the theme, and what they would like to receive from the group in this regard.

A discussion of the theme then develops following the two group leaders' example and the group guidelines, which include speaking for oneself, addressing conflicts among group members, and limiting generalizations. The group leaders also promote a balanced discussion of the personal experiences, the group process, and the task of stopping abuse. These group dynamics appear to move the men more directly toward the long-term change process. In a sense, they remove the crutch of anger control and more

squarely face the issues underlying wife abuse.

Second Step, also, requires a responsibility plan to be used in lieu of the anger control "time-outs," common to most batterer programs. In the responsibility plan, each batterer outlines steps to build a safer environment for his family and acquaintances. The men develop their plans drawing on other group members advice and their wives' assessment (if she is willing to offer it).

This sort of planning process moves beyond the mechanistic nature of a "time out" technique in which the batter signals his mate that he is approaching the point of becoming violent and leaves the premises for a designated period of time. While the time outs may provide some measure of safety for the abused woman, the initiative remains at the batterer's discretion. A responsibility plan might assure a woman access to shelter services in such a situation or specify that a friend or relative spend the night in the house. Furthermore, some battered women see time outs as one more ploy to "shut them up." The man leaves as soon as she begins to speak out or challenge him, and often with no assurance when and in what condition he will return.

CONCLUSION

We contend that the popularity of anger control needs to be carefully reconsidered. In the rush toward expedient treatment, a disservice may be done to battered women and batterers. For one, the cessation of wife abuse is accomplished through a change process that anger control may cut short. Furthermore, anger control tends to be misused by batterers who are characterized by their extensive denial, objectification of women, predilection for rigid control, and an overinflated sense of privilege. Moreover, anger control does not appear to address the central issues of the abuse -- the control of women rooted in a sexist society.

While anger control may assist some men, we are concerned that it does not really aid many other batterers and may in fact make matters worse for them and their victims. Anger and wife abuse are not necessarily directly related. Therefore men who control their anger are not necessarily less likely to be abusers. They and their wives may think so, become less vigilant, and continue in the cycle of violence. In fact, men and women should be wary of any approach that poses a quick fix or gimmick for solving any deeply embedded social problem like wife abuse. This wariness will not only keep them alert to tendencies toward abuse, but also prompt a commitment to the the long-haul of recovery.

Batterers, like recovering alcoholics, need long-term reeducation and monitoring. That is, "getting better" for the batterer means a lifelong commitment to abstinence from abuse with many external supports. Program, community, and societal efforts to curb problems like alcohol abuse appear to be having a positive effect. This same sort of movement needs to occur against wife abuse. Anger control may divert us from such an undertaking.

REFERENCES

- Bernard, J.L., and M.L. Bernard. 1984. "The Abusive Male Seeking Treatment: Jekyll and Hyde." *Family Relations*. 33:543-547.
- Deschner, Jeanne. 1984. *The Hitting Habit: Anger Control for Battering Couples*. New York: Free Press.
- Dobash, Emerson, and Russell Dobash. 1979. *Violence Against Wives: A Case Against the Patriarchy*. New York: The Free Press.
- Edleson, Jeffrey, Zvi Eisikovits, and Edna Guttmann. 1985. "Men Who Batter Women: A Critical Review of the Evidence." *Journal of Family Issues*. 6:2:229-247.

- Edleson, Jeffrey. 1984. "Working with Men Who Batter." *Social Work*. 29:237-242.
- Frank, Phyllis, and Beverly Houghton. 1980. *Confronting the Batterer: A Guidebook to Creating the Spouse Abuse Educational Workshop*. Unpublished monograph from Volunteer Service, New City, New York.
- Gondolf, Edward. 1985a. *Men Who Batter: An Integrated Approach for Stopping Wife Abuse*. Holmes Beach, FL: Learning Publications.
- Gondolf, Edward. 1985b. "Anger and Oppression in Men Who Batter: Empiricist and Feminist Perspectives and Their Implications for Research." *Victimology*. 10:1-4:311-324.
- Gondolf, Edward. 1985c. "Fighting for Control: A Clinical Assessment of Men Who Batter." *Social Casework*. 65:48-54.
- Gondolf, Edward. 1984. "How Some Men Stop Battering: An Evaluation of a Group Counseling Program." Paper presented at the Second National Conference for Family Violence Researchers, Durham, NH.
- Gondolf, Edward. (1987). "Evaluating Programs for Men Who Batter: Problems and Prospects." *Journal of Family Violence*. 2: 95-108.
- Gondolf, Edward, and James Hanneken. (1987). "The Gender Warrior: Reformed Batterers on Abuse, Treatment, and Change." *Journal of Family Violence*. 2:177-191.
- Martin, Del. 1976. *Battered Wives*. New York: Pocket Books.
- Navaco, Raymond. 1976. *Anger Control: The Development and Evaluation of an Experimental Treatment*. Lexington, MA: Lexington Books.
- Neidig, Peter, Dale Friedman, and Barbara Collins. 1985. "Domestic Conflict Containment: A Spouse Abuse Treatment Program." *Social Casework*. 66:195-204.
- Pence, Ellen. 1983. "The Duluth Domestic Abuse Intervention Project." *Hamline Law Review*. 6:247-275.
- Pirog-Good, Maureen, and Jan Stets-Kealey. 1985. "Male Batterers and Battering Prevention Programs: A National Survey." *Response*. 8:3:8-12.
- Purdy, Frances, and Norm Nickle. 1981. "Practice Principles for Working with Groups of Men Who Batter." *Social Work with Groups*. 4:111-122.
- Russell, David. 1984. "Facing Up to Spouse Abuse: A Theme-Centered Program for Batterers." Unpublished paper from the Second Step Program, Pittsburgh, PA.
- Saunders, Daniel. 1984. "Helping Husbands Who Batter." *Social Casework*. 65:347-353.
- Sonkin, Daniel, Del Martin, and Lenore Walker. 1985. *The Male Batterer: A Treatment Approach*. New York: Springer.
- Walker, Lenore. 1979. *The Battered Woman*. New York: Harper and Row.