

Female violence: can we therapists face up to it?

[By Werner Kierski](#)

[Published in *Counselling and Psychotherapy Journal CPJ*, 12/2002](#)

Back in the days of my counselling training, one of our tutors, when asked about her views on working with child abusers said, *'of course I would work with an abuser, as long as HE stops the abuse whilst working with me.'* I thought this position to be reasonable; I would probably do the same would I work with a child abuser. At the time I did not notice the assumption an abuser is male.

I have to date not worked with a male child abuser. Instead I have worked with a female client who attacked her husband with a knife while he held their child in his arms. Another long-term client I have worked with engaged in regular fights with those around her. This same client frequently tried to bully me. Sadly, this bullying became so severe that, following an intense period of consideration and consultations with my supervisor, I terminated the work with her after three years. Acknowledging that we had exhausted the possibilities of our work together was tough. She left angrily and I was left doubting my skill and integrity.

I thought it was situational stress combined with the trauma of painful childhood experiences that were the reasons for the aggressive and violent behaviour of both my clients. In retrospect I believe that this view was probably a contributing factor in the failure of the work with these women.

Had these clients been men, I guess my assessment would have been quite different: I would have followed the working theory that a) violence is an issue and b) that a therapist should engage the anger and rage underneath any violence, in order to assist the client to channel it positively. My counter transference also would have been different in the case of a male. Sadly, my two female clients did not receive the benefit of such an approach.

Upon further reflection I can't recall that during my training and the years since, I have experienced much discussion amongst colleagues and peers, concerning female aggression and violence, both in its physical and non-physical form. Indeed it looks as if little attempt has been made, in the international psychotherapeutic community at large, to conceptualise an understanding of this phenomenon. It is consequently difficult to provide adequate therapeutic support for violent and abusive women. There is nowhere where violent women can go to seek help.

When female violence is mentioned, it is quickly passed over within the context of a discussion on something else. Often the tenor is that the nature of female violence is merely circumstantial and that female violence is rooted in external reasons beyond the control of the perpetrator¹. These too were my thoughts about my clients.

In some cases views like these totally dismiss those of the perpetrator. For example, Guinevere Garcia: she smothered her 11-year-old daughter and some years later, in 1991, killed her ex-husband. She was sentenced to death in Illinois, a sentence commuted to life in 1996 by the state's governor, on the grounds that Garcia had

experienced a life of hardship. Garcia used to refute all attempts to regard her crimes as those of a victim. She said, *'Do not generically label, package and attempt to justify my actions as that of an abused woman. There is a lot of rage built up inside me and if I am released into the general population that rage will present itself again.'*²

Female perpetrators of violence and their victims seldom receive proper help. Therefore cycles of violence and pain tend to remain unbroken: suffering and pain perpetuate themselves and trauma begets trauma.³ Organisers of the US based campaign to break the silence around sexual abuse of daughters by their mothers (Making Daughters Safe Again MDSA) say that mothers are capable of the same range of violence, hate and autonomous behaviour⁴ as other human beings. MDSA points at the continuous failure of social workers and psychotherapists to detect, understand and treat the victims and their perpetrators.

What is even more consternating is that although 81% of these victims are in therapy, only 3% have sufficient confidence in their psychotherapists to tell them about the abuse.⁵ Female sex offenders have lower rates in seeking help than male sex offenders. This again is a reflection of where the profession stands in relation to the problem. As for the UK, it was estimated that women have sexually abused more than 250,000 children.⁶

Few therapists have verbalized the lack of a conceptual approach to female violence. One exception was Seattle based therapist Michael Thomas who worked for a child abuse agency. His work presented him with a stark gap between the content of his therapeutic training and experience with clients. He thought that *'When you start listening to the children's stories, you start to realize that there's an awful lot more violence by women than any of us had been trained to expect.'*⁷ Erin Pizzey, who has a worldwide reputation as the pioneer of safe houses for battered women, underlines Thomas' view. Pizzey experienced, whilst working on sexual abuse cases, that there are as many women paedophiles as there are men.⁸

Female on female violence, be it in same sex relationships, in female prisons or other situations reflect high levels of violence too. According to Patricia Pearson, incidences of violence in English women's prisons are two and a half times higher than in men's prisons. Breaches of prison rules in US prisons amounted to an annual average of two per female inmate compared to 1.4 per male inmate. Amongst the most common violations are striking an officer, fighting without a weapon and damaging or destroying property.⁹

A lack of discussion and exploration of female violence has in practice kept it a non-topic. This is a somewhat surprising because colleagues tell me stories about clients, who suffered abuse by mothers, sisters, aunts, grandmothers, nannies, teachers, nuns and others. Also, there is mention of women who intimidate or threaten their therapist.

Worldwide there are close to 200 completed studies about female violence. Martin Fiebert of California State University Department of Psychology listed systematic and empirical studies comprising over 60,000 people; the results let him conclude, *'that women are as physically aggressive, or more aggressive, than men in their relationships with their spouses or male partners.'*¹⁰ John Archer, professor of

psychology at the University of Central Lancashire conducted a meta-analytic review of over 80 studies about aggression in heterosexual relationships.¹¹ The results showed that “*women were slightly more likely than men to use one or more acts of physical aggression and to use such acts more frequently.*” A further study by DeMaris on male versus female initiation of aggression, carried out amongst 865 students, reports ‘*when one partner could be said to be the usual initiator of violence, that partner was most often the woman.*’ According to DeMaris the findings apply to both black and white participants.¹²

The results of a survey by University of Bremen¹³ into aggression at the stage when the partners are separating, conducted under the guidance of Professor Gerhard Amendt, provides evidence that men initiate 18% of physical aggression whilst women initiate 60% of attacks. The growing awareness regarding female violence has, in 2001, prompted the German federal ministry of family affairs to fund a national study into the problem.¹⁴

Detailed facts and data about violence and abuse by women are now easy to come by. Publications about the problem are growing in number. Several well-researched publications focus on female violence, such as Pearson,¹⁵ Heyne¹⁶ and Kirsta.¹⁷ When I run a web search on Google.com, using the key word ‘female violence,’ I was presented with nearly 1.2 million listings. The growing concern regarding the serious consequences, which men suffer by violent wives and girlfriends will soon see the opening of safe houses for battered men in two European capitals, Berlin¹⁸ and Zürich.¹⁹

In the case of male victims there is a masculine view that blocks the ability to successfully deal with trauma.²⁰ Apart from the pain, shame, guilt, the loss of health or even their lives, men have been and still are suppressed by a rigid code of social control. Society in post Renaissance France forced battered husbands to sit backwards on donkeys holding their tails while the donkey were made to trot around town. The English equivalent was strapping men to a cart and parading them around.²¹ The situation of victims of female violence and abuse is difficult. Society participates in upholding this taboo.

Children on the other hand are often confused about the extent of the sexual abuse, because the abuser is frequently the primary care giver or otherwise in a caring role. They are likely to be younger than victims of male paedophiles. In order to cope and to please the abusing carer, they will disassociate from any possible pain or blame themselves. In addition, they don’t have the capacity to conceptualise and verbalise their own feelings, either to themselves or to others.

Female violence inflicted against women, men or expressed through sexual abuse of children tends to take place in a different context than that in which men commit violence. The difference is that female violence more often takes place within a family and personnel relation situation. In comparison to men, women convicted of murder are twice as likely to have killed an intimate partner, a relative or a person well known.²² However, throughout history women have also, in many societies, proactively played a part in public violence. Women from the Cherokee, Iroquois,

Omaha or Dakota tribes, to quote just a few examples, regularly tortured prisoners of war to death.²³

The psychotherapeutic profession seems to underestimate the occurrence of female violence. As research shows, women are on equal footage to men, when it comes to violence. It is important to understand what the role of the psychotherapist in relation to this problem is. What structures and approaches can we offer to violent women and their victims within the context of counselling and psychotherapy?

It is early days in the psychotherapeutic exploration of female anger and abuse. There is an absence of working models to accommodate this phenomenon in therapeutic work. For the sake of clarity I shall therefore break down my conclusions into three separate facets:

Female violence and counter-transference

The discrepancy between the considerable levels of occurrence of female violence and the lack of systematic discussion in the therapeutic profession may indicate to us something about the counter transference of counsellors/psychotherapists. It appears, judging by my own counter-transference and that of colleagues, that the issue is unconsciously avoided by a paralysing dynamic between two extreme approaches towards the issue.

On the one hand society belittles female violence, for example by ridiculing male victims. Society makes it difficult for women to indeed feel anger and rage, in the way men are allowed to experience it. On the other there is attachment to the archetype of unconditional care, an archetype prescribed to women, but even more so to mothers. Society's attachment to such an archetype helps to develop faith and trust in life, for if no such archetype exists we would find it difficult to trust life. However, our attachment to and dependency on this archetype has created a split between the ability to care and the phenomena of aggression and violence. Like society, therapists may also find it difficult to look at what is split off.

Female violence and its victims in counselling/psychotherapy

The social interdiction around female violence encourages silence about its prevalence and debilitates victims from talking about it. Reports by MDSA and others indicate that victims find it very difficult to come forward and entrust their stories to counsellors and therapists. As therapists our foremost task is to offer the client adequate space to talk about their experience. Empathy with the client's feelings must be offered throughout the sessions.

That fact that a high frequency of female violence occurs within the context of personal relationships and not in public creates additional hurdles for victims. Victims may doubt the integrity of their own judgement and thus fear isolation. Therapists need to remain aware of how difficult it is for clients to deal with this.

In order to facilitate the creation of an open therapeutic space we need to be vigilant in detecting signs of trauma caused by female abuse and violence within a client's narrative. We need to signal the client our commitment to believe their story without

falling into the trappings of our own counter-transference. When working with severely traumatised clients who suffer posttraumatic stress an integrative approach and application of different therapeutic methods, as recommended by Gurriss²⁴ is suggested.

Female violence and its perpetrators in counselling/psychotherapy

Women do not benefit from the quasi normality attributed to male violence. It is in many cases easier, with a male client, to explore feelings and fantasies and possible experience around violent acts. A man is not breaking a taboo in doing so. Women, on the other hand, like their victims, are under rigid social control in the area of violence.

A female client is more likely to disassociate from violent notions because violence does not fit with sanctioned identities and expectations. As already indicated, the role of mother and primary caregiver, for instance, is for most people irreconcilable with violence. If we as therapists are led by this stereotype we will restrict the field in which we can work with our client. Primarily it is our task, rather than the client's, to allow violence to be explored. Basically, a phenomenological standpoint that is free of restrictive value judgements is key.

A creative exploration of her own violent images and feelings will help a client, in time, to become aware of unconscious disassociations. Working with sub-personalities with the aim to facilitate integration can be used in this context. Following from there an exploration of the practical consequences of acting out of anger ought to be included. The aim is empowerment: The client should be able to hold an awareness of her feelings without needing to disassociate from them or acting them out.

References:

¹ Kirsta A, *Deadlier than the Male*, HarperCollins; 1994. page 5

² Pearson P, *When She Was Bad*, Virago; 1998. page 59

³ Levine PA, *Waking the Tiger, Healing Trauma*, North Atlantic Books; 1997. page 9

⁴ MDSA: *Breaking the Silence*, 2001. See also <http://mdsasupport.homestead.com/amdsa.html>. Accessed 19/9/02

⁵ See MDSA reference to B. Rosencrans, *The last secret: Daughters sexually abused by mothers*. VT: Safer Society Press; 1997

⁶ BBC 1, *Panorama*, broadcast on 6 October 1997, summary and full transcript available at: <http://www.vix.com/menmag/panosumm.htm>. Accessed 10/9/02

⁷ Pearson P, *op cit*, page 123.

⁸ Pizzey E, Shackleton JR, Urwin P, *Women or Men – Who are the Victims?* Civitas; 2000. page 31

⁹ Pearson P, *op cit*, page 210

¹⁰ Available at <http://www.csulb.edu/~mfiebert/assault.htm>. Accessed 9/9/02

¹¹ Archer J, *Sex differences in aggression between heterosexual partners: A meta analytic review*; *Psychological Bulletin* 2000, S. 651ff

¹² DeMaris A, *Male versus female initiation of aggression*. In E. C. Viano (Ed.), *Intimate violence: interdisciplinary perspectives*. Bristol, PA: Taylor & Francis (1992) pages 111-120

¹³ Available at <http://www.igg.uni-bremen.de/unterseiten/newsletter1.html>. Accessed 16/11/02

¹⁴ Wenn Frauen Männer schlagen, Adelheid Müller-Lissner. In 'Der Tagesspiegel', 19 February 2002, available at <http://www2.tagesspiegel.de/archiv/2002/02/18/ak-we-559445.html#start>. Accessed 1/9/02

¹⁵ Pearson P, *op cit*.

¹⁶ Heyne C, *Täterinnen* Kreuz Verlag; 1993

¹⁷ Kirsta A, *Deadlier Than the Male*, HarperCollins; 1994

¹⁸ Available at www.maennerberatung.de/maennerhaus.htm. Accessed 29/8/02

¹⁹ Wenn Frauen zuschlagen by Carl Bieler, in *Brückenbauer* 23, 4 June 2002, available at www.brueckenbauer.ch/INHALT/0223/23akt.htm#TOP. Accessed 29/8/02

²⁰ Masculine narrative and trauma resolution, A. Hossack and E. Johnson, in *CPS* April 2002, p.20-23

²¹ Malcolm J. George, *Riding the Donkey Backwards: Men as the Unacceptable Victims of Marital Violence*, in *The Journal of Men's Studies*, Vol. 3, No.2, Nov 1994

²² *Violent Women - From US Department of Justice. Bureau of Justice Statistics Bulletin Women in Prison NCJ-145321*. Available at www.vix.com/pub/men/battery/studies/by-gender.html. Accessed 20/8/02

²³ Van Creveld M, *Frauen und Krieg*, Gerling Akademie Verlag GmbH; 2001. page 20.

²⁴ Gurriss N, *Psychic Trauma through Torture – Healing through Psychotherapy*; 1996. page 41. In 'At the Side of Torture Survivors', The John Hopkins University Press.