

Problematizing the Uniform Application of the Formula Story:  
Advocacy for Survivors in a Domestic Violence Support Group

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Conceptualizations and definitions of domestic violence (DV) wield tremendous effects on how it is understood, investigated, experienced, legislated, and deterred. DV agencies typically conceptualize DV as a “formula story” that includes severe physical violence, controlling behaviors, and the “evil villain” terrorizing a “pure victim” (Loseke, 2001, p. 107; see also Loseke, 2009). The formula story can be tremendously influential for those whose experiences align with it, but it can also create confusion or distress for those whose experiences do not. In this article, fueled by our observation and interviewing of, advocacy for, and group facilitation with, female survivors of DV, we answer Loseke’s (2001, 2009) call for expanding the formula story at the microlevel. Ultimately, the aim of this article is to illuminate how DV workers and support group facilitators can attempt to better meet the needs of survivors by communicating in ways that affirm their experiences—whether those experiences relate to the formula story or not.

Keywords: Domestic violence, advocacy, applied research, support group

It is obvious from experiential observation in shelters and emergency rooms, on television news reports, and from hotline calls to domestic violence (DV) shelters around the nation, that DV is a major societal problem. In the United States alone

Two to six million women experience violence from their male partners each year, 25–30 percent of women who come to emergency rooms for injuries are there for domestic violence-related problems . . . [and] over 1,000 women were murdered in the year 2004 by their husbands or boyfriends. (Johnson, 2008, p. 1)

Also, studies have found that between 22% and 46% of lesbian women have experienced repeated acts of DV in intimate relationships (see Elliott, 2014 for review). Although these statistics are startling, the actual incidence and prevalence of DV are hotly

debated issues (see Crocker, 2010), so the extent that DV occurs may be even more problematic (Barnett, Miller-Perrin, & Perrin, 2005).

With the help of the feminist movement and grassroots activists, the horrors of DV are moving from isolation in private lives to prevalence in the public sphere, thus increasing awareness, prevention, and intervention services for those who experience it. Though great progress has resulted from these endeavors, much work remains to be done, including expanding awareness of DV further, assisting survivors, effectively

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prosecuting and/or rehabilitating perpetrators, and creating just or fair policies for survivors.

This article illuminates how conceptualizations of DV influence sensemaking of what “counts” as DV, who experiences DV, and even what actions should be taken to counter it (see Loseke, 2009). We first briefly review literature about

conceptualizing DV. Then, we review how public stories of DV (such as those told by feminists) can influence how DV workers make sense of their clients’ experiences and thus communicate in ways that can influence how survivors view (and make sense of) their own experiences (Loseke, 2001, 2009). We then recount and analyze our own experiences working as DV shelter volunteer advocates at Harbor Safe House<sup>1</sup>, Jennifer’s experience facilitating a DV support group at an addiction treatment center (New Day), and 20 interviews with women who attended the DV support group at New Day. Broadly, this article represents an approximately 5-year-long complex sensemaking process regarding conceptualizations of DV and how they influence recognition, understanding, communication, and behaviors related to DV.

## Conceptualizing Domestic Violence

The justice and legal system, advocates, feminists, and scholars are often divided regarding exactly how to conceptualize domestic violence (DV) (see Johnson, 2008). Generally speaking, the criminal justice and legal perspective of DV is only as *physical* violence (Dutton, 2006), whereas feminist scholars and advocates tend to view DV as *any controlling tactic* used against a partner, including physical, verbal, economic, emotional, and spiritual abuse (see, e.g., Johnson, 2008; Loseke, 2009; Yllö, 2005). The criminal justice and legal perspective of DV includes actions that are considered grounds for arrest, including “kicking, biting, hitting with a fist or object, beating up, or using a weapon against a victim” (Dutton, 2006, p. 3), as well as “minor assault” behaviors such as “slapping, pushing, shoving, grabbing, [and] throwing objects at the victim” (Dutton, 2006, p. 3). Legal action and social aid are often limited to circumstances featuring such physical violations.

## The Formula Story of Domestic Violence: Public Narratives

Other conceptualizations of domestic violence (DV) entail much more than the physical abuse “needed” to qualify under contemporary United States law. According to Johnson (2008), “thirty years of feminist research on men’s use of violence to control their partners” have led to more nuanced understandings of how abusive partners display a “general exercise of coercive control” (p. 25). During the 1970s, a prominent way that feminists brought attention to the issue of DV—and how abusive partners use a system of behaviors to control their partners—was to share narratives of women’s experiences of DV. These narratives were told to create awareness and sympathy, and to potentially help other women seek assistance if they related to the stories and thus could recognize themselves as a “battered woman” (Loseke, 2001, 2009). Loseke (2001, 2009) analyzed these narratives and detected a “formula story” comprised of major patterns in the characters, cast, plot, and ending.

*Beyond articulating what DV “is” and the characters involved, the formula story includes the notions that severe violence and control are experienced by the victim, that the brutish abuser will never stop the abuse, and that a happy ending is possible if the woman is able to gain independence and leave her abusive partner (Loseke, 2001, 2009).*

Formula stories about DV have “flourished in recent decades,” both in the public and in the media, and they are “told in terms of clearly immoral behavior, with pure victims and evil villains” (Loseke, 2001, p. 107). Beyond articulating what DV “is” and the characters involved, the formula story includes the notions that *severe violence and control* are experienced by the victim, that the brutish abuser will never stop the abuse, and that a happy ending is possible if the woman is able to gain independence and leave her abusive partner (Loseke, 2001, 2009). This formula story of abuse aligns with Johnson’s (2008) description of one type of DV, *intimate terrorism* (IT). IT is defined as “partner violence deployed in the service of general control” such as mental, emotional, physical, sexual, economic, and/or spiritual abuse (Johnson, 2008, p. 7). As also reported in formula stories, IT tends to escalate in severity and intensity (Johnson).

The telling and hearing of the formula story (or stories of IT) are extremely beneficial for numerous reasons (Loseke, 2001, 2009). Generally, the formula story of DV creates awareness of the problem in society, illuminates the seriousness of the issue, and may inspire women who identify with the story to seek aid and to escape a potentially dangerous situation (Loseke, 2001, 2009). As Loseke (2001) articulated, “Countless women *do* see themselves in this narrative and for those women the wife abuse formula can be nothing less than lifesaving” (p. 124). If a woman relates to these narratives, she may begin to view and *label* her experiences as DV, herself as a victim/survivor of DV, and her partner as an abusive partner who is unlikely to change. Accordingly, reframing her experiences as the formula story of DV may influence her to seek help and leave a

potentially dangerous situation. The formula story thus provides one template for how to understand the experience and for what action(s) to take (Loseke, 2009).

Though formula stories can be *lifesaving* for those who relate to them, they do not always perfectly correspond with people's lived experiences of physical or emotional abuse. Women who hear and learn about formula stories may ultimately reject them as not matching their own experiences. They also may not conceptualize their experiences as DV for three overarching reasons (Loseke, 2009). First, the formula story presents emotional/physical abuse and controlling tactics as *extreme*. Some women may not believe the abuse they experience is "bad enough" to "count" as DV. Second, the formula story presents those involved as:

one-dimensional figures. She is known only as a morally exemplar virtuous victim, while he is known only as a vicious villain. Yet we all know there are few saints in real life and that even the most despicable person usually has redeeming qualities. (Loseke, 2009, p. 23)

Thus, a woman may reject the formula story as her own if she and her partner do not align with the one-dimensional characters in the formula story. Third, the formula story frames violence and control as the *central* problem in the relationship, but some women may experience forms of DV amidst many other relational issues (e.g., alcoholism, drug abuse, infidelity, severe conflict, etc.). Thus, for some women, DV may be the *consequence* of other issues rather than the sole problem (Loseke, 2009, p. 22). For these three reasons, the formula story competes with other popular narratives, specifically the "marital troubles" or "mutual combat" narratives (Loseke, 2009, p. 23).

These competing narratives can align with Johnson's (2008) description of a second type of DV, *situational couple violence* (SCV). Generally, SCV is mutual, symmetrical, and mostly occurs during conflict (Johnson, 2008). Couples that experience SCV usually do not engage in controlling behaviors during their everyday lives, but they become aggressive and violent during conflict situations (Johnson, 2008). Whereas the formula story and IT involve a system of controlling behaviors, SCV does not generally involve control and is essentially about the escalation of conflict. Of course, SCV is also potentially dangerous. We also want to be clear that even though these narratives may indeed accurately describe a couple's experiences, they can also be used to minimize the seriousness of the violence or to place blame on the victim.

### The Formula Story of Domestic Violence: Domestic Violence Workers

Johnson (2008) and Loseke (2009) strongly suggest that domestic violence (DV) workers tend to view the formula story of DV (or intimate terrorism; IT) as *the* way to conceptualize DV. Thus, DV advocates generally inform their interventions with assumptions of IT occurrence, including that the violence will repeat, escalate, and involve a system of controlling tactics along with physical abuse (Johnson, 2008, p. 73). Indeed, many women who seek DV services or safe shelter are experiencing IT;

Johnson's (2008) suggestion that DV advocates assume experiences are IT until shown otherwise, in order to foreground safety, is thus well-founded. However, as previously argued, not all women's experiences perfectly align with the formula story, but this does not mean that they do not need assistance or are not experiencing detrimental consequences from the violence in their lives. Unfortunately, some service providers "use the public story of wife abuse as a yardstick by which to evaluate stories told . . . and many women are judged to not meet the standard of extreme harm and absolute moral purity set in the public story" (Loseke, 2009, p. 32). Further, Loseke (2001, 2009) found in her analysis of DV support group sessions that the DV advocate facilitators often ignored the complexity, chaos, and even mutuality of women's stories that did *not fit* the "formula story" of DV. Instead, they *recast* the women's stories with plots of extreme violence and characters of the pure victim and the vicious villain. According to Loseke's (2009) analysis, "The explicit task of these support groups is to encourage their members to see their own stories as those of wife abuse," and facilitators do this by recasting stories and giving explicit advice (p. 25).

Our analysis of DV experiences and narratives evident in DV support group contexts illuminates how the formula story of DV shapes public opinion at the macrolevel, but how it also influences recognition, understanding, and perhaps even behavior at the microlevel. That is, survivors are seen to use the stories to make sense of their own lives, especially as DV workers may "push" those stories and, through their communication with survivors, attempt to have them embrace the formula story as their own (Loseke, 2001, 2009). Loseke (2009) argues the pros and cons of broadening the formula story

in the media to embrace other experiences of DV (see Loseke, 2009, for an overview), but ultimately suggests that these are questions worthy of further thought, study, and advocacy. We do not attempt here to answer the call regarding how to expand *public* narratives, but we do attempt

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to provide a preliminary guide for how the formula story can be expanded at the microlevel—when providing support to someone experiencing DV.

The following methods section describes how Jennifer was asked to become a DV support group facilitator and to intervene so as to improve the conduct and consequences of the DV support group. Though Loseke's (2009) arguments were well entrenched in Jennifer's mind during her early support group facilitation days, the DV group participants encouraged her to continue to, in essence, broaden the formula story in order to better affirm their lived experiences. Accordingly, informed by our

fieldwork and interviews, our analysis examines the complexities of communicating about DV in ways that affirm women's diverse experiences with DV.

## Methods

### Methodology

**Intervention-oriented applied communication research.** Scholars engaging in intervention-oriented applied communication research adopt a “first-person perspective” to interact with, and champion, the people, groups, and/or organizations that they are studying (Frey & Carragee, 2007). The goal for intervention-oriented researchers is to “conduct research about their interventions with relevant audiences to manage or solve communication problems and to promote needed social change” (Frey & SunWolf, 2009, p. 39).

After Jennifer and Adrienne completed training at a domestic violence (DV) center, Harbor Safe House, to become shelter advocates, Adrienne recommended that Jennifer volunteer to help facilitate one of the support groups that Harbor Safe House provided. Jennifer is not a therapist or counselor. However, many DV centers across the nation do not have access to licensed professionals and frequently have “peer advocates” provide support for survivors or facilitate groups. Harbor Safe House agreed that Jennifer was capable of facilitating a group and recommended training to facilitate a weekly DV-based group at a substance abuse treatment center, New Day. Jennifer began training, which included shadowing the current facilitators, in early 2011.

Before one shadowing session, a staff member reported that the women at New Day had been complaining about how the DV group was unhelpful because it did not “really deal with their problems” and that Jennifer should “do something about it.” Accordingly, Jennifer proposed—based on scholarly and advocate research—to change the format of the DV group so that the women would choose their own topics of discussion and the group interaction would be grounded in women's real lived experiences (see Guthrie, 2013 for a detailed intervention proposal). After both Harbor Safe House and New Day staff approved Jennifer's plans for facilitating the DV group, Jennifer sought further permission to conduct a study about the DV support group, with the hopes of helping these and other DV agencies and substance abuse treatment centers to bridge their services through support groups.<sup>2</sup>

**Critical feminist methodology.** Sprague (2005) argued that the guidelines for critical feminist methodologies are that researchers should “work from the standpoint of the disadvantaged, ground interpretations in interests and experience, maintain a strategically diverse discourse, and create knowledge that empowers the disadvantaged” (p. 80). With these sensibilities in mind, our main approach for the domestic violence (DV) group facilitation and our research was to consistently ask the women at New Day for their feedback regarding the helpful or unhelpful aspects of the DV group and how advocates can better assist them. Accordingly, data for this project was analyzed

as it was collected via observations/participation and formal/informal interviews (see Charmaz, 2006).

## Ethnography

Both Jennifer and Adrienne immersed themselves in the cultural settings (Denzin & Lincoln, 2008) of Harbor Safe House. Starting in 2009, we each completed over 40 hours of training and then worked as volunteer shelter advocates and attended relevant volunteer and staff meetings over a three and a half-year time period. Jennifer also began facilitating the DV group at New Day, as a Harbor Safe House representative, in April 2011; and in October 2012, trained another Harbor Safe House representative, Sam, to begin facilitating the DV group. Sam was observed facilitating the DV group until May 2013. Sam was trained to facilitate the DV group because: (1) we knew that Jennifer would have to leave New Day and Harbor Safe House after completing her doctoral degree, and (2) we knew that Jennifer would also conduct formal interviews, in addition to collecting ethnographic, observational data. Thus, having Sam as the main facilitator enabled us to find a replacement for Jennifer well before she had to leave. It also hopefully allowed the women in the group to more comfortably speak with Jennifer (during in-depth interviews) about the support group once Sam was the facilitator.

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**Participants and data collection.** Domestic violence (DV) group attendees were asked to provide basic demographic information on a voluntary basis; thus, the following information underrepresents the number of DV group attendees. After IRB approval to observe New Day was finalized in January 2012, 153 women attended while Jennifer facilitated the DV group; 110 attended the DV group while Sam facilitated (total  $N = 263$ ). The average group attendance per day was roughly 16–18 women.

Before IRB approval, Jennifer consistently told group attendees at New Day that the DV group was “their group” and requested that they provide feedback in order to better meet their needs. Following IRB approval, Jennifer continued to remind the women at New Day that she was conducting a study and continued to solicit their feedback. Although Harbor Safe House, New Day, and IRB approved the ethnographic component of our study (and staff/volunteers were aware that a study was being conducted), we would not feel that it would be ethical to share any information about what was said in the DV group unless Jennifer gained explicit permission from the participants who provided it. Thus, although they still informed the analysis, there were many stories

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from survivors that will remain untold because Jennifer cannot be completely positive that the women who provided them remembered that a study was being conducted. Because Jennifer was a researcher, an advocate, a DV group facilitator, and sometimes a friend, participants may have forgotten that conversations were also a part of her sensemaking processes. If explicit permission to report information was not gained from clients of New Day, it will never be reported. Jennifer also kept separate field notes to distinguish “reportable” instances (with permission) from those that were not.

Jennifer completed approximately 118 hours of participant observation while

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facilitating the DV group, consulting individually with survivors at New Day, and attending relevant meetings with Harbor Safe House and New Day staff. When Sam facilitated the DV group, another approximated 45 hours of participant observation were completed (total = 163 hours). Overall, Jennifer compiled 89 single-spaced typed pages of field notes and 180 pages of handwritten field notes.

In addition, Adrienne collected 75 single-spaced typed pages of field notes regarding observations at Harbor Safe House while working with survivors.

## Interviews

In order to check our interpretations of Jennifer’s observations and interactions, interviews were conducted with 20 domestic violence (DV) group members from New Day. All DV group members were invited to participate in interviews. We constructed a semi-structured interview protocol to foster “guided” conversations with the women (Lindlof & Taylor, 2011). The interview/conversations revolved around: (1) personal experiences with DV and substance abuse, (2) perceptions regarding the “bridging” between Harbor Safe House and New Day, and (3) the DV group at New Day. Interviews ranged from 33 minutes to 2 hours and 35 minutes, and the average length was 1 hour and 30 minutes. Transcription yielded 743 single-spaced typed pages.

The women’s average age was 31.63 years (age range = 21-48) and their ethnic composition was 15 (75%) Caucasian, 1 (5%) African American, 1 (5%) Hispanic, and 1 (5%) Multiracial; one participant identified as “spotted” (5%) and another as “human” (5%). Thirteen (65%) of the women identified as heterosexual, three (15%) as bisexual, and two as gay (10%). Two women (10%) did not provide their sexuality. Six (30%)

were in intensive short-term residential stay (28 days); six (30%) were in extended residential stay (ERS), six (30%) were transitioning into ERS, one (5%) graduated from short-term care and was receiving outpatient services, and one (5%) was a past resident. Their education levels varied (i.e., 10th-grade education to college degrees), as well as their occupations (e.g., teacher, welder, stay-at-home mom, professional medical aid, nurse, painter, dancer, and cosmetologist). Every participant reported that they had experienced some type of DV.

## Data Analysis

Findings eventually *crystallized* through sensemaking discussions with the women and staff at Harbor Safe House and New Day, through further research into relevant issues as they arose, and through coding and analyzing field notes and the interview transcripts (see Ellingson, 2009). Also, member checks were conducted with six women who had been interviewed (see Lindlof & Taylor, 2011): Jennifer presented preliminary findings to group members to gain their opinions. To analyze the data, we used open and axial coding to identify reoccurring themes (Manning & Kunkel, 2014; Miles & Huberman, 1994). To begin, Jennifer developed substantive codes, derived from participants' words, from line-by-line coding (Charmaz, 2006). Preliminary codes were compared and contrasted and a list of more general codes was formed. After further constant comparison methods, participants' words were organized into separate Word documents for each minor theme. These themes were then collapsed to find higher-level categories (Charmaz, 2006). Jennifer and Adrienne wrote many memos, had multiple conversations, and worked together throughout the entire coding process.

## Results and Interpretation

The findings, analysis, and interpretations reported in this article are a part of a larger discussion regarding what was helpful and unhelpful about the DV group at New Day (see Guthrie, 2013). However, throughout Jennifer's time with the group, participants consistently reported, and interviews confirmed, that conceptualizing domestic violence (DV) with multiple, more nuanced perspectives to affirm their experiences was one of the *most helpful* aspects of the DV support group at New Day. As previously described, Loseke (2009) argued that DV group facilitators tend to recast women's experiences to align with the formula story of DV. We were aware of Loseke's (2001, 2009) arguments during Jennifer's facilitation of the group, and Jennifer interpreted the examples Loseke (2001, 2009) provided of facilitators' conversations with survivors as a sort of "how-not-to" guide. We continued to interpret the conversations as not only pushing survivors toward the formula story whether their experiences aligned with it or not (as Loseke argued), but also in terms of poorly communicated social support. Burlinson and MacGeorge (2002) explained that highly effective supportive communication acknowledges and legitimates a person's emotions, expresses "compassion and understanding," and encourages the person to describe his or her thoughts and feelings (p. 402). Thus, supportive communication does *not* involve

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discounting how a person feels, making them talk when they do not want to do so, communicating in a way that patronizes them (e.g., implying that you are more of an “expert” about their experiences than they are), or telling them how they should feel, believe, or act.

### Limitations of the Formula Story

As previously mentioned, Loseke (2009) called for broader conceptualizations of DV—even though this is inherently complex and must be dealt with in a careful manner—because “the wife abuse story as now told ignores too much violence experienced by too many women” (p. 34). In our experiences at Harbor Safe House, we often noticed that—as Loseke (2001) found—many DV advocates pushed survivors toward the formula story of intimate terrorism (IT) and tended to talk about it as the *only* version of DV. During an interview for this project, Sam explained the importance of viewing DV in complex ways and not presenting information to survivors as “Truth.” Sam said:

I think what I hear a lot at Harbor Safe House and different places I’ve worked is, ‘This is what is going on.’ Like other advocates say ‘this is what’s happening’ . . . and I hear [survivors] regurgitate—‘well they told me this is what I need to do or this is what’s happening, and I don’t believe that.’ So [advocates] might say, ‘what’s happening in your situation is power and control and he’s trying to have power and control over you.’ And [the survivor] says, ‘Okay. This person knows this stuff, so they know what’s happening, so obviously it’s power and control.’ I’ve heard advocates talk about ‘this is what’s happening’ . . . and NOT ‘this is A theory.’ And they’re not super cautious with what they say. They’re just trying to be supportive and offer as much information as they can, and I think that it’s really well-intentioned, but sometimes it comes across as FACT rather than a THEORY.

Sam and Jennifer made multiple attempts to broaden the formula story of DV to include various women’s experiences. For example, before discussing the “Power and Control Wheel,” a handout developed using testimony from abused women in Duluth, Minnesota that illustrates the various forms of controlling tactics (e.g., emotional abuse, isolation, blaming, economic abuse, intimidation, coercion, threats; Yllö, 2005) used in IT, Sam would say:

This is what Harbor Safe House uses as a way to think about domestic violence. But, it’s a theory. The reason I bring it is because a lot of women relate to it. But, it’s okay if you don’t. If you or someone else has done this it doesn’t mean you’re an ‘abuser,’ and if you don’t see yourself in this, it doesn’t mean you haven’t experienced domestic violence. Does that make sense? It’s however you want to see it or define it, but this is just a tool.

It may seem overly cautious to frame information with so many disclaimers, but how conceptualizations of abuse, and identification of who perpetuates it, are communicated

can have tremendous effects on those experiencing DV. During an informal interview with Jennifer, a woman recalled that she had visited a women's shelter in another state years before attending New Day. A DV advocate there told her that being an abuser "runs in the family and is in the genes." Because this woman's father and siblings abused others, the advocate told the woman that she was a "ticking time bomb" and that she "better watch out for it and

be aware." This message terrified the woman so much that she refrained from engaging in romantic relationships, even though she had previously planned on starting a family. Horrified that an advocate would say such things, Jennifer provided information about what

research shows about abusers and Johnson's (2008) findings on intergenerational transmission of DV. When finally asked, "Are you an abuser? Do you in your heart feel like you are an abuser?," tears of relief streamed down her face, as she whispered, "No. I know I'm not." She disclosed a week later that the revelation was "life changing."

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Overall, Sam and Jennifer tried to answer Loseke's call to broaden conceptualizations within the DV group at New Day by attempting to communicate with group attendees in ways that maintained the seriousness of DV and foregrounded safety, yet affirmed experiences whether they aligned with the formula story or not. In the following pages, we provide accounts from women at New Day that illuminate the importance of broad conceptualizations, but also the difficulties in making sense of DV experiences.

### Communicating Beyond the Formula Story

Domestic violence (DV) group participants consistently reported that the "broad definitions" in the group were among the *most helpful* aspects of the group. For example, Kathy liked how Sam emphasized that it was the women's definitions and beliefs that counted. Kathy said:

I love the broad range of thinking . . . For me I think it's good because it's hard to speak about everybody. I think 'healthy and unhealthy' you can't—I think that's good for everybody but you have to be careful about defining non-abuse. I think Sam does such a good job with that—if two people are completely in agreement about [what is and is not acceptable] then it's okay, you know?

Additionally, Shawna explained:

You guys give the whole different ways domestic violence can be and it's not just physical and how it can affect you in life and very—you just see the big picture. You give the big picture. It's not just pieces of it . . . I like how she does the—where she says, 'You may be the abuser or you may not,' and I mean she doesn't say, 'Well, yes you are.' I don't know how to better say it, but she leaves it to where you can feel comfortable in decisions. If you're trying to decide if you're an abuser or not, she's very—I just don't have the word for it.

Shawna paused and shrugged her shoulders. Jennifer asked, "So am I getting it right that she doesn't label folks or make decisions?" Shawna replied, "*Yeah, she wants you to be your own person.*" Similarly, when Jennifer asked Nancy if she heard anything in the DV group that she disagreed with, she replied, "*I can't think of anything. I generally agree because you guys are pretty open with your definitions and just got your arms open for everybody so it's hard to disagree with anything.*"

Based on the responses from interviewees who reported the helpfulness of broad definitions of DV and providing information as "one way to think about it," we can infer that broadening conceptualizations of DV was beneficial. An experience from Jennifer's time facilitating the group further demonstrates this claim. When facilitating

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the DV group, Jennifer tried to provide any information the women requested, even when it did not align with the "formula story" or if Harbor Safe House might disagree with the approach. In a group session that had unusually low attendance (seven women), the women discussed how they felt that a lot of their DV experiences stemmed from "drama" and "bad conflict" and they needed

to know how to handle conflict better. One woman said, "*Well, hell if I know. That's why we're asking you.*" Staff often claimed that "Harbor Safe House doesn't do conflict management" as it might minimize the seriousness of abuse situations. However, making overarching judgment calls about what is, or is not, "acceptable" to talk about with survivors is *not* empowering to them at all—especially if they want that information. Any issue should be discussed, especially if it is paired with thoughtful communication. At that point, Jennifer had taught numerous classes about conflict within romantic relationships, knew the research well, and was confident of handling the situation sensitively.

The support group participants discussed the differences between using a system of controlling behaviors and "crappy conflict skills," and then began to further make sense of their experiences. Four of them decided that they had experienced intimate

terrorism (IT), but as a result, they felt that they were starting to become verbally and physically aggressive during conflict because they had “picked up those habits.” The other three women decided that their relationships included situational couple violence (SCV) features. Indeed, their relationships had always been egalitarian and without controlling tactics, but when they argued with partners, they would say very hurtful things and there was shoving, slapping, and/or throwing objects. After 15 minutes of discussing their relationships, another 15 were spent talking about ways to handle conflict more appropriately.

As described by Johnson (2008), different interventions work better for different types of DV. IT is based on a general system of control, threats, manipulation, and fear; thus, conflict management or anger management will probably not lessen IT, and it might even make matters worse (Johnson, 2008). However, situational couple violence (SCV) is based in conflict and *not* control; thus, communication patterns are the deciding factor in SCV. Accordingly, counseling, building conflict management skills, or attending substance abuse treatment may actually alleviate SCV by minimizing the verbal aggression that can escalate violence (Johnson, 2008).

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To some, discussing conflict skills with people who request that information may seem like an obvious response. However, even engaging in this discussion directly competes with the formula story by discussing DV in terms of “mutual combat.” In our 40-hour training at Harbor Safe House, we were taught in-depth information about the formula story and IT, but there was no information about other forms in which DV might occur. Moreover, we were taught that suggesting counseling, anger management, or conflict negotiation is *dangerous* because those activities could make matters worse. As mentioned above, these activities can exacerbate IT (see Johnson, 2008 for detailed description), but they can indeed help with other forms of DV. Ultimately, instead of ignoring participants’ reports of their own aggression, or framing it as control that they do not see, discussing their lived experiences as they saw fit was much more productive.

### Embracing the Formula Story

Although Sam and Jennifer attempted to broaden conceptualizations of domestic violence (DV), we also knew that there was no rationale for totally abandoning the formula story, especially because it can be lifesaving for those who relate to it (Loseke, 2009). Conversely, we believed that the formula story should not be used to recast women’s experiences when they do not align with it. As such, many women in the DV group eventually embraced the formula story as their own. Overwhelmingly, the women indicated that the Power and Control Wheel, which describes behaviors of

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intimate terrorism (IT), was helpful because it illuminates how DV includes other forms of abuse beyond “just” physical violence. Sidney said:

I mean the Power and Control Wheel is a huge thing. It is very specific and it is very true . . . I mean it's the basic consensus that everybody has usually, in some form of domestic violence relationship, has, whether you have addiction problems or not.

Numerous women had not framed their experiences as DV until attending the DV group and learning about more nuanced definitions than public stories often entail. Birdy discussed this during the interview and how she did not consider her experiences as DV until attending the group. She said:

My first husband—it was sexual. But it's really traumatizing—it's very traumatizing. Because you feel like, well, he's your husband. But it's really not that way. I mean he actually raped me twice. So. And then I entered into a relationship with [a] fellow . . . And he was just really controlling. He choked me once. He punched me in the face once and then tried to run me over with a car once . . . And you know, I never thought that—I never really looked at my abuse as anything too serious. Because I have friends that have been literally beaten to within inches of their lives. I've been choked that way . . . And in fact—and it seemed to get worse . . . I never really—like I said, I've never really considered domestic violence as one of my issues.

Because Birdy was not “*beaten to within inches of*” her life, she did not initially believe that her experiences of being raped and choked were DV. As Loseke (2009) mentioned, women might reject the formula story if they do not perceive their abuse to be “severe.” However, after Birdy discussed her experiences with the group, she ultimately described her experiences as “DV”:

The little diagram thingy [Power and Control Wheel]. That really helped . . . . And like I said, it made it—it opened it up a little bit more for me, at that point, when we had that one . . . . And I felt a little bit more comfortable, like, ‘Okay. Maybe I do belong here.’

For other women, embracing the formula story and/or its more nuanced representation in the Power and Control Wheel, helped them find the resolve to end their abusive relationships. Shawna explained:

Well, for me, it helped me come to the realization for myself so I can stand up for myself and be able to say, ‘No, you can't do that to me anymore. I'm done with it' . . . it was the Power Control Wheel where it tells you the different types of—like the manipulation and all that. I'm just like, ‘This is him. This is every little thing,’ and it just clicked to me. I'm like, ‘Oh, gosh. I should've

known this all along.’ Just explaining the different types of power and control was huge for me . . . I’ve been so scared to take him to court and get my kids back . . . I can do this. I’m strong enough and so I think you guys in a sense gave me my strength back.

Likewise, Penelope said:

It will help you realize, I mean you don’t have to deal with it. It’s just—I don’t know. I mean I know now that it’s not my fault that he was hitting me; it’s not my fault that he was an asshole . . . I still am scared but it just gets easier to realize that I don’t have to put up with that; I don’t deserve it . . . It just kind of opened my mind that domestic violence isn’t necessarily a physical thing; it can be emotional, it can be mental. And I wasn’t seeing that in a true light until probably my first or second DV group because I wasn’t recognizing those signs as domestic violence.

Conceptualizing DV as more than severe physical abuse, as including emotional abuse, and as emphasizing control—the central tactic of IT—can help women decide to leave a potentially dangerous relationship.

Muehlenhard and Kimes (1999) contend that with multiple and more nuanced conceptualizations of DV, such as offered in the Power and Control Wheel, “the line between abusive and nonabusive relationships is not as clear as it would be with narrow definitions requiring severe physical violence or injuries”; however, “[w]hen only the most blatantly violent behaviors count, subtle forms of power and control become acceptable” (p. 239). Thus, it was helpful for many women to “reappraise” or rethink (Lazarus & Lazarus, 1994) their experiences as DV, and ultimately the formula story, because it helped them to make sense of their experiences and, in turn, to accept that these behaviors are indeed “unacceptable.”

*Conceptualizing DV as more than severe physical abuse, as including emotional abuse, and as emphasizing control—the central tactic of IT—can help women decide to leave a potentially dangerous relationship.*

### Rejecting (or Expanding) the Formula Story

Women may reject the formula story as their own if they do not view the violence as extreme, if they do not view themselves and/or their partner as victim/abuser, or if their experiences are more complicated than the formula story plot (Loseke, 2009). Although there are numerous examples of women describing how they did not see their experiences as domestic violence (DV) or themselves as “survivors” after attending the DV group, an excerpt from Hannah’s interview illustrates why some women may struggle when making sense of their DV experiences. Hannah described in her interview that she was trying to make sense of her relationship with her ex-girlfriend, whom she still loved and with whom she frequently spent time. She also explained how

it was uncomfortable for her to think of “labels” for the situation and people involved. When Jennifer asked Hannah what was helpful about the DV group, she replied:

I wouldn't even classify myself in some sort of domestic abuse relationship with [my ex]. Even though I knew things were fricking crazy I would never like label it that or never like feel like I was qualified to—it would have never occurred to me to think, ‘Maybe there's a support group I could go to,’ because it just seemed like—yeah, like I just didn't—I don't know. I think I didn't—I don't know really what I'm trying to say. But you know what I'm saying? Like I felt like—I mean even myself and like—I know things. I already know all of these things, but you know when you're in this situation, then it's really hard to—well, it's really hard to label yourself, first off, and—because you know I don't want to label myself as a victim or a survivor because I wasn't always that, that role in this situation, but yeah. I think it's helpful. I think it—I mean like the second group that I was in, when I was like, ‘Oh, wow. Really, I should call this what it is,’ you know just maybe being able to put a word to the drama, I guess—I don't know, being able to sum up the situation was a little bit easier, just because I really didn't feel like I qualified in the DV group . . . I really thought domestic violence as just being you and your girlfriend have a fight, the cops get called and that's that, like all the emotional and stuff like that. I mean I knew it was crazy and I knew it was not right, but I could never really make myself call it what it really was, maybe. So I think it's helpful, yeah.

Later in the interview, Hannah further explained:

It makes it really kind of hard to—it makes it really hard for me to see her as an abuser, a lot of times, because I think the pain of me leaving and doing drugs and being dishonest about that is no different than the pain that I felt with her . . . And so it made it really hard to notice her as the—I don't know. It's really hard to say I'm a victim in that situation because I'm an addict, and I am fucking up a lot of things. I'm putting our kids at risk and my whole family at risk, and so it's kind of hard to.

For Hannah, the guilt of having a substance abuse issue made it difficult for her to assign labels to her relationship. As Loseke (2001) argued, accepting the formula story often results in the placement of blame and sympathy, and Hannah's narrative of emotional abuse, controlling behaviors, and situational couple violence (SCV) perhaps made it difficult to have clear-cut labels and a neatly packaged story.

Whereas Hannah ultimately rejected the formula story even though she mentioned how the DV in the relationship was wrong, Ruth was originally confused by the messages in the DV group. For several weeks in the group, Ruth had described her partner's actions; he was controlling, emotionally and physically abusive, and was eventually charged with “assault with a deadly weapon” after a particularly violent episode. Because Ruth became “*fed up*,” she began to “*stand up for herself*” and “*slapped him back*” when he

slapped her. Thus, throughout Ruth's interview, the location of responsibility frequently shifted. Ruth said:

I mean, there's times where we'll be in group, where you and Sam will come in and I'll look at some information. I'll think, 'That's me.' And then I'll think, 'No, that's him. Oh, no, really it's both of us.' And even now, if I NEVER threw that first argument out or threw that slap out, boy, I was there to stick up for myself . . . I'd go from kinda being a little bit scared to really being pissed off. That's where the alcohol would come in.

Ruth went on to describe how she was confused about the situation and needed time to think about it because she "*played a role in the abuse as well.*" She was then reminded about Johnson's (2008) typologies, including violent resistance, which features a person who is being abused and controlled by another using violence for protection or retaliation. She then elaborated more on her situation and said, "No, *that's great. I'm like, 'Finally. Somebody hit home.'*"

For Ruth, as with many other women in the DV group, she felt badly about her own violent or "abusive" behaviors and she

thought that she might be an "abuser." She also had difficulties understanding how she had "*never been this way before*" in other relationships, and she was scared that she would continue to enact abusive behaviors. However, after attending the DV group and hearing information from the group repeated during the interview, she realized that her violence was in fact reactionary in nature. Thus, although she is not the "pure victim" in the formula story because of her reactionary emotional and physical violence, she nonetheless embraced the *parts* of the formula story that made sense for her.

*We absolutely need further research regarding how to broaden the formula story with DV survivors and the effects of doing so. Moreover, researchers should continue to investigate the complex nuances of DV because how we communicate about DV can have tremendous effects on policy and practice.*

## Conclusion

Overall, the women at Harbor Safe House and New Day taught us that Loseke's (2001, 2009) ideas have tremendous merit: domestic violence (DV) advocates should communicate with survivors in ways that affirm their lived experiences. Although this article presents a "neat" account of this practice, making sense of DV experiences was usually a messy process for all involved with the DV group at New Day. Perhaps this was because DV was presented as complex; nonetheless, DV group members consistently reported that discussing nuanced views of DV was beneficial. We absolutely need further research regarding *how* to broaden the formula story with DV survivors and the

effects of doing so. Moreover, researchers should continue to investigate the complex nuances of DV because *how* we communicate about DV can have tremendous effects on policy and practice.

Although the issue is complex, the practical implications within organized efforts to understand and deter DV are rather simple: when discussing DV with someone who is experiencing it, it is *imperative* to: listen compassionately and attentively, provide as much information as possible without dictating how a person should view their own life or understand their own feelings, and help facilitate a sensemaking process in which the person makes sense of the situation for her- or himself (Burlison & Goldsmith, 1998). Additionally, several women whom Jennifer interviewed reported that more individual meetings with DV advocates would have been beneficial as well. Whereas it was beneficial to share their experiences and learn from others' in the group, several women also expressed how being able to discuss their own experiences at length was helpful (and almost therapeutic) in the sensemaking process (see also Manning, 2010 and Rossetto, 2014 regarding how interviews can be therapeutic for participants).

If DV continues to be communicated only in narrow ways—such as the formula story of intimate terrorism (IT)—it can greatly benefit those who see themselves in the story, but

*By expanding our conceptualizations of DV across different forms and tailoring them to the specific parties involved, rather than the other way around, we can better intervene and ultimately, fully support those experiencing DV.*

it can also alienate others, minimize their experiences, or even endanger them. Unfortunately, our results illustrate that—as Loseke (2001) described—DV advocates often push the formula story on women, even if their stories do not perfectly fit that of a “vicious villain” who terrorizes and controls a “pure victim.” By expanding our conceptualizations of DV across different forms and tailoring them to

the specific parties involved, rather than the other way around, we can better intervene and ultimately, fully support those experiencing DV.

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## Notes

<sup>1</sup> Pseudonyms are used for all participants and sites.

<sup>2</sup> DV and substance abuse are correlated (see, e.g., Testa, Livingston, & Leonard; 2003) and may “interact and exacerbate each other” (Engelmann, 1992, p. 6); thus, they should be addressed simultaneously (Fazzone, Holton, & Reed, 1997).

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