6-2017

MALE PERPETRATORS PERSPECTIVES ON REASONS FOR DOMESTIC VIOLENCE IN HETEROSEXUAL RELATIONSHIPS

Lisa Soriano

Follow this and additional works at: https://scholarworks.lib.csusb.edu/etd

Part of the Social Work Commons

Recommended Citation
Soriano, Lisa, "MALE PERPETRATORS PERSPECTIVES ON REASONS FOR DOMESTIC VIOLENCE IN HETEROSEXUAL RELATIONSHIPS" (2017). Electronic Theses, Projects, and Dissertations. 466.
https://scholarworks.lib.csusb.edu/etd/466

This Project is brought to you for free and open access by the Office of Graduate Studies at CSUSB ScholarWorks. It has been accepted for inclusion in Electronic Theses, Projects, and Dissertations by an authorized administrator of CSUSB ScholarWorks. For more information, please contact scholarworks@csusb.edu.
MALE PERPETRATORS’ PERSPECTIVES ON REASONS FOR DOMESTIC VIOLENCE IN HETEROSEXUAL RELATIONSHIPS, AND THE SUPPORT SERVICES AND COPING MECHANISMS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Lisa Michelle Soriano
June 2017
MALE PERPETRATORS’ PERSPECTIVES ON REASONS FOR DOMESTIC VIOLENCE IN HETEROSEXUAL RELATIONSHIPS, AND THE SUPPORT SERVICES AND COPING MECHANISMS

A Project
Presented to the Faculty of California State University, San Bernardino

by Lisa Michelle Soriano
June 2017
Approved by:

Dr. Herbert Shon, Faculty Supervisor

Dr. Janet Chang, M.S.W. Research Coordinator
ABSTRACT

Domestic violence continues to destroy individuals and families, leaving generations to follow repeating the same patterns. There are several services offered to help aid in the healing and recovery process.

This was a qualitative, explorative study which examined the reasons that male perpetrators commit domestic violence in heterosexual relationships. Additionally, this study evaluated the support services and coping mechanisms that the men found to be helpful and not so helpful. Five men participated in face-to-face interviews to share their personal experience with domestic violence. Most of the men believed that their domestic violence was linked to learned behavior they witnessed in their family of origin. All the men interviewed stated that most of their recovery came from their faith, and they added that counseling, praying, the support of other men, mentors, pastors, and encouragement received, all contributed to their healing. Implications for future social work research, practice, policy, and programming are discussed.
ACKNOWLEDGEMENTS

I would like to acknowledge all the people who have been of great support throughout the process of my academic schooling and research. First and foremost, I would like to thank God for directing my path in life and giving me this amazing calling into social work. Without God, I could not have endured the process. To my husband, Mark Soriano, for his servant heart, exemplifying what serving others selflessly looks like, which is necessary in social work. Furthermore, for all his support, love, and care in working as a team, while I was often busy with my studies. To both of my sons, Severyn and Alec, for showing me how to give and receive love, and for pushing me to become a better person. To my parents who taught me important life lessons, which are my constant guiding posts in life. I sincerely thank my dear friends who have been my pillars of encouragement and support. Additionally, I wish to express my sincere gratitude for the education, mentoring, time, and dedication of all my professors, supervisors, my big buddy, and advisors. In closing, I am thankful for the men who willingly participated in my research to make this project a success.
# TABLE OF CONTENTS

ABSTRACT .................................................................................................................................................................................. iii

ACKNOWLEDGEMENTS .................................................................................................................................................................. iv

CHAPTER ONE: INTRODUCTION
- Problem Statement ........................................................................................................................................................................ 1
- Policy Context .............................................................................................................................................................................. 3
- Practice Context ............................................................................................................................................................................ 3
- Purpose of the Study ..................................................................................................................................................................... 4
- Significance of the Project for Social Work .................................................................................................................................. 6

CHAPTER TWO: LITERATURE REVIEW
- Introduction ....................................................................................................................................................................................... 8
- Definitions of Domestic Violence ................................................................................................................................................ 8
- Verbal/Emotional Abuse ............................................................................................................................................................ 9
- Physical Abuse ............................................................................................................................................................................. 11
- Male Perpetrators’ Perspectives ............................................................................................................................................... 12
- Theories Guiding Conceptualization ....................................................................................................................................... 14
- Summary ...................................................................................................................................................................................... 16

CHAPTER THREE: METHODS
- Introduction ....................................................................................................................................................................................... 18
- Study Design .................................................................................................................................................................................. 18
- Sampling ..................................................................................................................................................................................... 19
- Data Collection and Instruments ............................................................................................................................................. 20
<table>
<thead>
<tr>
<th>Chapter Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procedures</td>
<td>21</td>
</tr>
<tr>
<td>Protection of Human Subjects</td>
<td>21</td>
</tr>
<tr>
<td>Data Analysis</td>
<td>22</td>
</tr>
<tr>
<td>Summary</td>
<td>22</td>
</tr>
<tr>
<td>CHAPTER FOUR: RESULTS</td>
<td></td>
</tr>
<tr>
<td>Introduction</td>
<td>23</td>
</tr>
<tr>
<td>Presentation of the Findings</td>
<td>23</td>
</tr>
<tr>
<td>Demographics</td>
<td>23</td>
</tr>
<tr>
<td>Reasons for Domestic Violence</td>
<td>24</td>
</tr>
<tr>
<td>Services that Helped</td>
<td>25</td>
</tr>
<tr>
<td>Services that Did Not Help</td>
<td>26</td>
</tr>
<tr>
<td>Faith</td>
<td>27</td>
</tr>
<tr>
<td>Coping Strategies</td>
<td>28</td>
</tr>
<tr>
<td>Backslid Moments</td>
<td>28</td>
</tr>
<tr>
<td>Future Ideas of Help</td>
<td>29</td>
</tr>
<tr>
<td>Summary</td>
<td>30</td>
</tr>
<tr>
<td>CHAPTER FIVE: DISCUSSION</td>
<td></td>
</tr>
<tr>
<td>Introduction</td>
<td>31</td>
</tr>
<tr>
<td>Discussion</td>
<td>31</td>
</tr>
<tr>
<td>Limitations</td>
<td>33</td>
</tr>
<tr>
<td>Service Recommendations</td>
<td>34</td>
</tr>
<tr>
<td>Conclusions</td>
<td>34</td>
</tr>
</tbody>
</table>
APPENDIX A: QUESTIONNAIRE................................................................. 36
APPENDIX B: INFORMED CONSENT FORM ........................................ 38
APPENDIX C: INTERVIEW QUESTIONS .................................................. 40
REFERENCES ............................................................................................ 42
CHAPTER ONE

Introduction

This introduction will launch with a problem statement that presents the focus of this research, the policy and practice contexts that impact how the needs of this population are being addressed, and the description of the planned study. Furthermore, the second part of the introduction will describe the purpose of the study and its importance for the social work profession.

Problem Statement

For decades, domestic violence has been a social issue. In fact, although domestic violence was occurring for several years, it became a social problem during the 1970s, through several women's and victim's rights groups. It took these women and victims extreme courage and bravery to be able to come out and openly discuss issues that had been tormenting their lives (Blackman, 1989). These heroes brought about the social change that our nation needed. According to the United States Department of Justice (2016), “domestic violence is defined as a pattern of abusive behaviors used to gain or maintain power and control over another person. Domestic violence can be physical, sexual, emotional, economic, psychological actions or threats of actions that influence another person. Furthermore, domestic violence includes any behaviors that intimidate,
manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone.”

Research presents that women who are in relationships where children exist, the children end up living with greater depression, anxiety, and trauma symptoms after being exposed to the abuse (Sturge-Apple, Skibo, & Oavies, 2012). Children also have a difficult time in social relationships, have lower self-esteem and self-confidence. Furthermore, victims in these relationships often present with either an anxiety disorder, a mood disorder, posttraumatic stress disorder, or possibly an eating disorder (Mouton, Rodabough, Rovi, Brzyski, & Katerndahl, 2010).

Domestic violence occurs in many families, victimizing the lives of innocent children, oftentimes resulting in children having to be removed by the Department of Child and Family Services (DCFS). Therefore, by focusing on the root causes and patterns of domestic violence, perpetrated by males onto their female victims, we may be able to gain better treatment modalities for this growing population. Furthermore, the more understanding, the more help and support can be provided to both the perpetrators and victims, avoiding future interactions with DCFS. More importantly, families will maintain safety, well-being, and be able to reunify with their loved ones.

In the United States alone, almost one in four women have been the victims of domestic violence. That means that 22.3 % of women have been victimized (Breiding et al., 2014). According to The National Intimate Partner
and Sexual Violence Survey (2014), 32.9% of women living in California have been the victim of violence at some point in their lifetime. With that, there are currently more than 4.5 million women living in California who have experienced domestic violence at some point.

The problem needing to be addressed by this present study is to seek more understanding and knowledge about why men perpetrate domestic violence in their relationships with the women that they claim to love. Therefore, more families are being negatively impacted, resulting in innocent children growing up in unhealthy homes. As a result, child welfare service agencies are mandated to assist these families.

Policy Context

The state of California has its own issues and laws protecting victims of domestic violence. In fact, in the state of California, domestic violence is considered a crime. Criminal code section 273.5 requires criminal penalties which involves the perpetrator, either going to jail or prison, along with a 52 weeks’ batterers’ treatment program. However, there are certain criteria that must be met for an arrest to take place. In order for an arrest to happen, the partners must be married, living together, or have a child in common. In addition, the victim must have visible injuries (Superior Court of California, 2016).

Practice Context

Over the years there have been more resources, such as educational materials to inform and keep informed the victims and perpetrators of domestic
violence. There are many shelters, websites, hotlines, agencies, and several other organizations available to help assist women and families who are or have been in abusive relationships (Dienemann, Campbell, Landenburger, & Curry, 2002).

There are several approaches in which therapists and social service providers have utilized, in treating both victims and perpetrators. One of the models that has been known to be very effective is called the “Duluth Model” (Herman, Rotunda, Williamson, & Vodanovich, 2014). This model is used through communities and is an extensive intervention program aimed at using psychoeducation coupled with court-mandated behavioral therapies for the male perpetrators. Amazingly, practitioners utilizing this model are able to identify and treat the root causes of domestic violence. In addition, they provide nonviolence courses that are centered on helping the male perpetrators look closely at how their actions are effecting their lives and requires them to investigate their actions, intentions, and abuse (Herman, Rotunda, Williamson, & Vodanovich, 2014).

Purpose of the Study

The purpose of this study was to examine the contributing factors and reasons of ongoing domestic violence in heterosexual relationships, the challenges, and service needs, by focusing on the male perpetrators perspective. Furthermore, by gaining perspective from the male perpetrators this researcher
hopes to gain a better understanding to be able to properly treat this population. It is important to understand this issue because too many people’s lives are being negatively affected. In fact, Child Protective Services are constantly handling domestic violence cases. As a result, children are being removed from their families-of-origin. Although violence is not gender specific, we know that the majority of the cases that get reported claim that women are the victims more often than men. With that, it would be beneficial to do more research on why this is occurring. Is it because men do not want to look weak by calling the police on the women? Do the men want to protect the women they love? If so, why are the men committing the violent acts to begin with? These questions are just the beginning to the more specific questions that I plan on asking. By finding out why the men commit domestic violence, we can gain more insight and knowledge, and hopefully bring more awareness and decrease the amount of domestic violence occurring in homes.

This study should increase knowledge, so that social workers will be more equipped to make more solid assessments of their clients, while establishing better rapport. Too many homes are being destroyed by acts of violence, and by having more tools as social workers, I believe we can better service families. Furthermore, families will have higher reunification rates and there will be a decrease in the number of detainments and domestic violence. The key is to find out what is the root cause in the acts of domestic violence. Once the root issue is discovered there is more hope for healing.
Although this study was not one of the needed studies to be performed by the county of San Bernardino’s Department of Child and Family Services (DCFS), this researcher desires to seek more understanding into this population. With the findings, the researcher desires to learn more ways to expand help into the lives of both the perpetrators and victims. The researcher utilized a qualitative design, gaining participants through convenience and snowball sampling. Participants were given an informed consent to sign and had face-to-face protected interviews given by the researcher.

Significance of the Project for Social Work

As social workers, there is a level of expertise that needs to be put into practice and with that comes a certain level of care and expectations. It is important to have more understanding, empathy, and insight of this population, to be able to have more successful interventions and treatments. As a result, families and social workers will be more informed. This project is relevant to the betterment of child welfare. The qualitative research gathered contributed to more knowledge, into the reasons why men perpetrate domestic violence on the women they love. In addition, by asking open-ended and purposeful interview questions, the researcher gained further insight on how to help educate and help this population decrease intimate partner violence. Therefore, this information will help social workers increase their knowledge, resulting in better future treatment modalities. Furthermore, county social workers will be provided with useful
information that can be utilized in future interactions with male perpetrators and those families who are dealing with domestic violence allegations. This study did elicit more information by adding to current research, and validated previous findings, and possibly brought more wisdom to questions that other researchers or social workers may have needed. Hopefully, this study contributes to more future social work policies.
CHAPTER TWO
LITERATURE REVIEW

Introduction

Chapter two involves a discussion of the important collected works to this study. This chapter will define and focus on two major types of abuse that commonly occurs with domestic violence in heterosexual relationships and explain how these relationships affect the individuals involved. Furthermore, there will be a section on a couple of theories and models that have been useful in guiding the conceptualization of the population.

Definitions of Domestic Violence

According to Women’s Health (2011), more than five million women in the United States have been the recipients of domestic violence (abuse) by their significant other on an annual basis. In fact, one study performed in California claimed that 187 children (42.3%) were removed by CPS from families with at least one domestic violence incident (Jones, Gross & Becker, 2002). With that, domestic violence is a major issue that needs to be further explored. According to the United States Department of Justice (2016), abuse occurs in a cycle-like pattern. There is usually a buildup of tension that begins the cycle, where the abuser starts to get angry, and then the incident of abuse takes place, then the abuser acts calmly as if the abuse never occurred. This third stage is called the
calm stage, where the abuser is known to do nice things to/for his victim such as buy her a gift to try to appease her and diffuse the situation. In the last stage, the abuser may be apologetic for his actions, and say that the abuse will never happen again. This last and final stage is called the making-up stage. These four stages in an abusive cycle can occur repeatedly, and each stage can take varying amounts of time.

Verbal/Emotional Abuse

Verbal and emotional abuse are similar in nature. As defined by professionals with the United States Department of Justice (2015), verbal/emotional abuse is when a person puts down another person’s sense of self-worth or self-esteem by either calling them demeaning names, using constant criticism to tear them down by diminishing the victim’s abilities, or damaging the relationship that they may have with his or her children. For example, the University of Michigan (2017) found that the abuser often says things such as: “You’re so stupid! Nobody else would ever want you!” “Why don’t you just go and kill yourself! You look disgusting!” “You’re crazy!” These sorts of undesirable remarks leave the victim feeling afraid, vulnerable, powerless, emotionally stressed, and isolated. Often the victims end up with physical and mental problems due to the ongoing exposure of abuse they experience in their relationships. As a result, they are left with depression, anxiety, constant headaches, and possibly even back, leg, arm and stomach issues.
The United States Department of Justice (2015) goes on to say that if the husband is constantly monitoring what his wife is doing, unfairly accuses her of being unfaithful, tries to stop her from going to work or having contact with her loved ones, gets angry in a way that is frightening to the wife, humiliates her in front of others, or threatens to hurt her or himself when he is upset, then these are all forms of verbal/emotional abuse. Unfortunately, a lot of people think that verbal and emotional abuse is not serious, when in reality the abuse can leave more long-term damage than physical abuse. For example, research presents that women who are in relationships where children exist, the children end up living with greater depression, anxiety, and trauma symptoms after being exposed to the verbal abuse. The children also had verbal aggression towards their peers and others which existing in their classrooms. Most of the aggression that children displayed was found to be connected with their exposure to abuse that they witnessed their fathers doing to their mothers (Sturge-Apple, Skibo & Oavies, 2012). Children also have a difficult time in social relationships, have lower self-esteem and self-confidence. Furthermore, the women receiving the direct verbal abuse are found to be two times more likely to develop some sort of mental diagnoses, and 1.7 to 4.6 times more likely to end up with a multiple of different disorders (Mouton, Rodabough, Rovi, Brzyski & Katerndahl, 2010). In fact, as mentioned earlier, some of the disorders that the victims present with are either an anxiety disorder, a mood disorder, posttraumatic stress disorder, or possibly an eating disorder (Mouton, Rodabough, Rovi, Brzyski & Katerndahl,
Additionally, there has been many cases where verbal/emotional abuse leads into physical abuse.

**Physical Abuse**

Battering is perpetrated on 1.62 million wives on an annual basis (Herbert, Silver, & Ellard, 1991). Many people have felt as though verbal/emotional abuse is less harmful than physical abuse, because with physical abuse you can actually see the marks and scars, and depending on the severity of the attack, the abuser could possibly even kill his victim. However, per the United States Department of Justice (2015), the damaging effect that the verbal/emotional abuse plays on a person’s psyche is just as severe as the pain that the victim feels from physical abuse. Although the scars received from verbal/emotional abuse are often unseen, they leave a traumatic long-lasting imprint on the victim’s mind and soul, whereas, in physical abuse the victim undergoes bodily harm from their abuser that leaves a more temporary mark. The beatings are still harmful and painful to the victim’s body and emotions, but the abuse happens and hurts for the moment it occurs and then heals up.

The United States Department of Justice (2015) defines physical abuse is defined as hitting, slapping, shoving, grabbing, pinching, biting, and hair pulling. Denying a partner medical care or forcing alcohol and/or drug use upon the victim are also forms of physical abuse. Evidence has shown that when the abuser is under the influence of drugs and/or alcohol that the abuser is unaware of his limits, because the alcohol can mask the force that abusers use on their
victims. Therefore, the beatings that the women receive are more severe than the abuser had anticipated. All of this shows that domestic violence is a major social problem that many households are facing every day. Deaths occur as a result of physical abuse. In fact, there are approximately 2,000 abuse cases reported annually that turn into murder cases. The victim never knows how bad the beating they are getting will be, and often the abuse escalates and worsens with time. The abuser uses the abuse as a mechanism of control, because the abuser himself often feels out-of-control. To gain back the control, he feels he should have he uses abuse on his victim. Furthermore, it is when the abuser feels that he needs to gain back the power and control that he needs that he then inflicts harm to his victim by beating on her. Like verbal and emotional abuse, physical abuse also has negative psychological effects. Like verbal and emotional abuse, the victims of physical abuse are often left with post-traumatic stress disorders, anxiety, and depression.

Male Perpetrators’ Perspectives

Rothenberg (2002) found that married men who act violently towards their wives do so out of their own inabilities, insecurities, or anxieties about the man that they feel they that they are or are not. Some researchers have found evidence that husbands who have a pattern of drinking alcohol are committing marital violence (Leonard & Quigley, 1996). There have been studies performed that show that 60% of men who performed violent acts in their marriages to their wives were brought up in families that were violent. The majority of research on
this issue shows that the root cause of abuse stems from the way that abusers and victims are brought up (Delsol & Margolin, 2004). Whether they were exposed to abuse played a big part on the outlook of their futures in regard to the relationships they have with their significant others.

Many studies have been performed to gather empirical research by on domestic violence patterns and occurrences. There have been findings that men who were brought up in homes where violence and abuse took place, were 60% more likely to commit abuse in their marriage (Delsol & Margolin, 2004). These men were given 2–4 questions to answer, asking them whether they witnessed physical and/or psychological abuse in their family-of-origin either directed at them personally or done by their father to their mother.

Delsol and Margolin (2004), endorsed a longitudinal study was done between 1980 and 1988, including reports from various reporters of parents and their abusive patterns. Later in 1992, the young adults from the families ranging from 19-31 years of age were then evaluated and accessed for their marital conflict and abuse that they were experiencing in their own marriage. The findings of violence between parents were found to be a strong correlation to offspring marital violence. As a result of these continued abusive patterns in families committed by the parents, the marital violence increased the odds of offspring relationship violence by 189%, which most would find extremely relative and disturbing.
According to Women’s Health (2011), some men are capable of changing their abusive nature, but it usually takes a lot of work on their part, coupled with counseling, and many men are not too prone to seek counseling. If the abuser is continuing to blame his significant other for his inappropriate domestic violence acts, then he is more than likely not going to change or desire to seek counseling to work towards changing. It is only when he can take an honest look at himself and own up to his abusive actions, taking full responsibility for his role in the relationship that he is apt to change and break free from his abusive patterns of violence.

Theories Guiding Conceptualization

In Growing up with Violence (2002), children who grow up in abusive environments, by seeing their caregivers abuse one another or abuse them, are more likely to continue the patterns that they were exposed to. They are also more apt to harbor feelings of anger inside, have trust issues with their significant others, and become bullies which can be played out in abusive acts of violence in or outside of marital relationships. According to Delsol and Margolin (2004), Bandura’s social learning theory is one way to explain the observations found in adults who were raised by caregivers that were violent. The children exposed to the abuse repeated similar patterns through learning the abusive patterns from their parents. Hence, as adults the patterns of abuse continued. Observational learning and reinforced performance are the two contributing factors that explain
why children who are raised in hostile abusive homes end up becoming abusive or victims of abuse in their future marriages. Therefore, how parents choose to behave in their homes in their relationships with their spouses and children has major influence on the children that they are responsible for molding into functioning healthy adults. Other researchers have found that women who endured harsh treatment by their caregivers during childhood were more at risk of being in abusive relationships as an adult. The study was conducted on 204 recently divorced women through structured interviews (Simons, Johnson, Beaman, & Conger, 1993). Bancroft and Silverman (2002) write that girls raised by fathers who were batterers are being trained-up to accept that men are violent, and that women are the cause for this violence. Therefore, girls that were raised in violent homes are more likely to become involved with an abusive male and less likely to ask for help when they are abused. Unfortunately, they believe that being with a violent man is the way life is supposed to be.

Cognitive Behavioral Therapy (CBT) is another theory that can be utilized with both the victims and perpetrators. Research has shown that CBT can help address and treat anger, substance use, anxiety, and Post-Traumatic Stress Disorder (PTSD), which can occur in both the victims and perpetrators. CBT helps by addressing the behavior that the client is struggling with through different techniques, to minimize the troubling behaviors. In fact, CBT is known to be more effective when coupled with Motivational Interviewing (MI). MI is a technique that encompasses a nontargeting, nonconfrontational and
empathetic approach in therapy (Turner, 2011). One study showed that by using MI in the beginning treatment phase, that the perpetrator had a significant difference on their outlook and participation in getting treatment. According to Murphy, Linehan, Reyner, and et al. (2012), by offering hope and motivation, by using empathy and nonconfrontational communication when engaging with this population, in order to build rapport and cooperation. In addition, this study claimed that MI was more effective with high-anger clients and that after MI those clients were more apt to participate in the group CBT sessions. MI appears to have been more effective in ending physical abuse among those with low levels of anger. Remarkably, only 12% of the MI participants had a victim-reported re-assault in the 6 months following their CBT treatment (Murphy, Linehan, Reyner, Musser, & Taft, 2012).

With that, this research project sought to learn more about the perspective of male perpetrators, regarding what they believe contributed to their domestic violence, as well as what was most helpful in their recovery. Hopefully, by gaining more insight into the lives of the male perpetrators, research will grow, so that there will be better programs created to help the perpetrators, and therefore, stop the violence.

Summary

As explained, this study sought to learn more about the contributing factors that have led to male perpetrators acts of domestic violence. Although
there are numerous studies that have been conducted, this researcher sought to expand further insight, to be better able to serve this population, within child and family services. With that, by investigating, through conducting further qualitative interviewing, the researcher was able to find more useful tools, to help address and treat male perpetrators and their loved ones.
CHAPTER THREE

METHODS

Introduction

This chapter explains the methods that were used for this study. Explicit importance will be placed on the design of the study, sampling, data collection and interview instrument, procedures, protection of human subjects, and qualitative data analysis.

Study Design

The purpose of this study was to investigate into the reasons why men continue to perpetrate domestic violence on the women they love, while finding out their challenges and supportive service needs. This study consisted of open-ended questions seeking to gain more insight and understanding into the lives of perpetrators of domestic violence, and gained more knowledge into how to better service this population.

This study used a qualitative design to collect the necessary data. With that, face-to-face interviews with five male perpetrators were conducted in the county of San Bernardino. By doing this study, the researcher gained a subjective view into the lives of male perpetrators. This qualitative approach allowed male perpetrators a confidential place, where they were able to share their experiences and views on what they believe contributed to their acts of
violence, and what supports have assisted in helping them put a stop to their acts of violence. In addition, the researcher evaluated what coping mechanisms or treatments have been beneficial in the process. Since a quantitative design would give the researcher limited information, this researcher chose to perform a qualitative study, allowing the individuals to tell their stories, thereby, getting a more detailed explanation of their experiences. However, by doing a qualitative study with such a limited number of individuals, this study was not an adequate representation into the lives of all male perpetrators in the county of San Bernardino. However, the information collected is still beneficial in gaining more helpful feedback into what has worked and what could be improved with the lives of this population.

Sampling

The sampling of this study started with convenience sampling, and then led into snowball sampling. The researcher made contact with five male perpetrators (18 years or older), who had previously committed domestic violence on their female partners. The researcher sought out male perpetrators in their community, within the County of San Bernardino. For the purpose of this study, the sampling criteria was male perpetrators who are no longer perpetrating domestic violence.
Data Collection and Instruments

This study was conducted with face-to-face interviews comprised of 10 questions (Appendix A). However, prior to conducting the interview, a demographics questionnaire was given, asking the participants’ their age, ethnicity, marital status, if they have any children, their income level, employment status, level of education, and whether they have a faith. Again, the interview questions were open-ended, thereby, leaving room and time for the participants to share more on their personal experiences. To gain the most detailed information, participants were encouraged to openly share and elaborate on their situations. Furthermore, the questions were constructed and ordered in such a way as to develop a safe space, where they were encouraged to share on such private and difficult information. The questions the researcher asked were designed to gain as much information as possible about their experience. Therefore, the researcher asked questions about their family-of-origin, services that they have found to be helpful, what do they believe has contributed to their acts of violence, and what coping skills and mechanisms have been useful. In addition, the researcher asked whether mental illness or substance use has been a contributing factor. Furthermore, this study utilized descriptive statistics, frequency distribution, and measures of variability to describe the characteristics of the sample.
Procedures

The investigator of the research interviewed the participants in public places, such as, Starbucks and a room at a church. To start the process, participants were given an informed consent form to sign, which the researcher designed and received approval beforehand. After the participants signed the consent form, the interview process began with the demographics questionnaire. Next, the interview took approximately 45-60 minutes. After completing the interview, the participants were given a debriefing statement. However, they did not need to have any sort of debriefing period, because all five of the men were emotionally grounded throughout the entire process.

Protection of Human Subjects

The researcher took appropriate measures to ensure the protection of all the participants involved in the study. All the participants were informed that their participation is completely voluntary, confidential, and that at any time during the interview they wish to stop, that they have the right to do so. To accomplish this, the researcher presented the participants with a consent form, explaining their rights as a participant. If the participants agreed to participate they will be asked to place an X as their endorsement of consent. In addition, the researcher explained the purpose of the study, who is researching and supervising the study, and the IRB approval. To keep the study confidential, all of the participants will be identified by a number between one and five. All the collected data will only be
accessible to the researcher and will be collected and saved onto a USB flash drive. Upon completion of research all the data will be destroyed.

Data Analysis

This study is composed of qualitative data analysis techniques. The data was collected by the researcher, by transcribing into a journal, what the interviewee is sharing. The researcher took the information gathered and transfigured the findings into a journal. In addition, a coding system was developed to organize the received data. The researcher reviewed the retrieved data and identified any patterns, while analyzing the findings from the interviews. The researcher left out any personal opinions or biases from the analyzed data. Furthermore, this study included descriptive statistics, frequency distribution, and any measured of variability to explain the findings of the collected sample.

Summary

In summary, this chapter presents the methodology that was used in carrying out this study. As mentioned, the researcher utilized a qualitative design and gained participants through convenience and snowball sampling. Participants were given an informed consent to sign and had face-to-face protected interviews given by the researcher. Lastly, the data analysis collected will be discussed.
CHAPTER FOUR
RESULTS

Introduction

This chapter will be discussing the characteristics and demographics, representing male perpetrators of domestic violence, in heterosexual relationships. Furthermore, the five interviews that took place will be covering the similarities, differences, causes, needs, and methods of healing that the men shared.

Presentation of the Findings

Demographics

The sample population included 5 male perpetrators who have overcome domestic violence in their heterosexual relationships. From this sample, 2 (40%) of the men identified as Hispanic, and the remaining 3 (60%) of the men were Caucasian. The median age of those interviewed was 50 years of age. The youngest participant was 35 and the oldest was 64. The other 3 individuals were 48, 49, and 52 years old.

Participants were asked what their highest level of education was. Out of the 5 participants, only one had not finished his high school education. One of the men had received his General Education Diploma (GED), and 2 had some college education. Finally, only 1 of the men had obtained his Doctorate Degree. Four of the men held positions of authority in their careers. In fact, 2 of the men
were CEO’s, one a pastor of a mega Christian Church, and the other a Senior Systems Engineer. The other gentleman is a Peer and Family Assistant.

When the men were asked what their annual income was, most of the men marked the box for making an annual income of over $70,000, and one of the men makes somewhere between $15,000 to $30,000 a year.

When asked if the men had any children with the women that they had experienced domestic violence with, 3 out of the 5 men admitted to having mutual children. The other 2 men have children; however, the children were from other relationships.

The last question on the demographics sheet asked the participants what, if any, religious faith that they believe in. All the men claim to follow and believe in the Christian faith.

Reasons for Domestic Violence

Participants were asked what they believed the reasons and contributing factors were for domestic violence. More specifically, they were asked whether they thought substance abuse or mental illness contributed to acts of domestic violence. All the participants claimed that domestic violence was something that they learned in their family-of-origins. In fact, participant #1 said, “if you are constantly told to be quiet as a child and were not heard, when you get older you are going to shout to make sure you are being heard (participant 1, January 2017).” Participant #2 stated, “When you have been abused it gives you permission to do it to others, and you give yourself permission (Participant 2,
January 2017).” Additionally, he shared, “When you feel insecure, you want to be in control. In fact, some men just don’t know what to do with their manhood when they are with a strong woman (Participant 2, 2017).” Participant #3 mentioned that he had allowed, like his stepfather, alcohol to take over his life, and as a result, he had no self-control. Participant #4 was a professional baseball player, and said that playing ball his entire life gave him a lot of pride, arrogance, and selfishness, which eventually transpired into a power trip in his relationship with his wife. Lastly, like some of the other men mentioned, participant #5 said that he tried his best to be different by avoiding any sort of violence, but before long he was repeating the same patterns in his home of upbringing.

None of the participants mentioned anything about mental illness being a contributing factor. However, when asked whether substance abuse was a contributing factor, all 5 of the participants said that they believed drugs and alcohol did play a part in acts of violence.

Services that Helped

The men had similar responses when they were asked what services they had utilized that they found to be helpful in diminishing their acts of violence. All the men claimed that they could not have been healed from their issues without the divine intervention of God. They said that their faith played the biggest part in their healing. Additionally, the men said that having support systems in place were a huge part in their recovery. Participant #1 said, “it wasn't until my wife and
I began to bring God home with us, prayed and fellowshipped with other Christians, that we began to change (Participant 1, January 2017).” Participant #2 shared, “Men’s groups where that were transparent and open, anger management, prayer, and counseling, were all very helpful in my healing (Participant 2, January 2017).” Additionally, he shared, “It took real honest men who were not afraid to confront me and keep me accountable, and who were nonjudgmental and supportive, that I was able to deal with myself. A guy’s inner pain level needs to get high enough, and they must be teachable, and ready to be done with it (Participant 2, January 2017)!” Participant #3 said, “you must recognize you have a problem and hate it enough to change. It took counseling, prayer, mediating in the spirit, reading self-help books, strong support systems, healthy friends, mentors, accountability and pastors to encourage the process (Participant 3, January 2017).” Participant #4 stated, “Celebrate Recovery helped me with my pride and anger, praying, exercising, men’s ministry Bible study, and having someone to keep you accountable, but your heart must be ready to change (Participant 4, January 2017).” Lastly, participant #5 shared, “God, self-discipline, accountability, men’s groups, and deciding I was not going to go there anymore (Participant 5, January 2017).”

Services that Did Not Help

When asked what services the men had received that they found not helpful in diminishing their acts of violence, most responded with similar responses. Participant #1 did not have anything to share. Participant #2 said, “it
was not helpful when people would tell me to stop and that what I was doing was wrong, but they did not tell me what was right (Participant 2, January 2017).” Participant #3 stated, “what was not helpful for me was not getting loved by my father, and so when I was going through my healing it took me a while to be able to understand God’s love for me, and desire to heal me (Participant 3, January 2017).” Participant #4 shared, “hanging around with old friends who were not Christians, or being alone was not helpful (Participant 4, January 2017).” Participant #5 stated, “Celebrate Recovery, this spiritual 12-step program that was offered at this church I was attending, was not so helpful because the people were not being real (Participant 5, January 2017).”

**Faith**

All the participants were asked if they had a faith, and if so, if their faith had helped them. All the men contributed their healing to being rooted and grounded in their faith. In fact, Participant #1 said, “I believe that God put all the right people in the right places, because I thought I knew it all and did not need anyone’s help, so I thought (Participant 1, January 2017).” Participant #2 shared, “Yes, I have faith.” “I am a Christian and it was 100% my faith.” “I know I would not be healed today if it was not for my faith (Participant 2, January 2017).” Participant #3 stated, “I could not have done this without my faith in Jesus Christ. There is just no way (Participant 3, January 2017).” Participant #4 said, “Yes, I have faith. It was my daily time spent with God and other godly men that helped me recover (Participant 4, January 2017).” Lastly, participant #5 shared, “yes, I
have faith and I believe that there is nothing else that could have or would have helped (Participant 5, January 2017).

Coping Strategies

Although some of the questioned asked seemed to overlap one another, the men still had more to share on their specific coping strategies. When the men were asked what their coping strategies were they all shared similar answers. Participant #1 shared, “dwelling with God and being vulnerable and exposing my stuff to the leaders at my church, and having my wife use words of affirmation to build me up (Participant 1, January 2017).” Participant #2 stated, “I used to go on long walks up a mountain and throw rocks and scream (Participant 2, January 2017).” “I also prayed a lot and vented in my counseling sessions, and had a supportive and loving wife that was patient with me and didn’t give up on me (Participant 2, 2017).” Participant #3 said, “through fasting and prayer, it was the Holy Spirit that plucked out my issues and helped me through (Participant 3, January 2017).” Participant #4 stated, “I began walking 5 to 6 miles a day with my worship music playing on my headset (Participant 4, January 2017).” Participant #5 shared, “being involved in a Men’s Small Group Bible Study where I was able to understand the battles that men face, and connect with other men was a good coping mechanism (Participant 5, January 2017).”

Backslid Moments

The men were all asked if they could recall a time where they had a moment where they backslid and fell off course during the time of their healing
process, and what the contributing factors where and how they were able to get back on track again. Participant #1 said that he remembers getting angry and had more self-awareness. However, through prayer and looking at things from others perspective he was able to get back on track quickly. Participant #2 shared, “I would have moments where I would lose my mind and get angry but I own it right away now, even if I happen to raise my voice now, I have learned to stop myself from it escalating (Participant 2, January 2017).” Participant #3 stated, “If I allowed myself to think that 1 or 2 alcoholic beverages were okay, then before too long I would quickly be in quicksand, but that I believe is being in denial (Participant 3, January 2017).” Participant #4 shared, “while I would be traveling on a job and feel alone, or if I had a bad day, I would be tempted to grab a drink, but getting back into my Bible and putting pride aside and knowing what was right would get me back on track again (Participant 4, January 2017).” Lastly, participant #5 stated, “I would have times of slipping up, but usually it happened little by little and got less and less (Participant 5, January 2017).”

Future Ideas of Help

The men were asked if there was anything else they would like to share that they felt would be beneficial in helping other men who were struggling with domestic violence. Three of the men had some suggestions to share. Participant #1 shared that more peer support is needed and more men need to be congratulated when they are healed, so they can help others with their testimonials. He also shared that more men need to come out and talk to get
healed. Participant #3 stated, “It takes them wanting to stop and to not give up on their healing (Participant 3, January 2017).” “Basically, they need to keep trying until something works, and to never say that there is no hope, because there is always hope (Participant 3, January 2017).” Participant #4 said, “It would be helpful to have an individual go back to the root of an issue and see what triggers their anger to examine how the people in their pasts hurt them or caused them pain (Participant 4, January 2017).”

Summary

In summary, this chapter presented the demographics, characteristics, and major findings, covering the similarities, differences, causes, needs, and methods of healing of 5 men who have had a history of perpetrating domestic violence in their relationships. Furthermore, the opinions, experiences and beliefs were derived from 5 face-to-face interviews.
CHAPTER FIVE
DISCUSSION

Introduction

This chapter will discuss the major findings that were presented in chapter 4. Additionally, this chapter will present the limitations of the study, and recommendations for future services to help assist male perpetrators who are committing abuse. Finally, this chapter will conclude with an overview of what services would help further social work research and practice.

Discussion

The participants of this study had a lot of similarities. The results of this study identified the reasons for domestic violence, how alcohol or drugs contributed, coping mechanisms, and supports. The findings were consistent with previous literature regarding the reasons that the men attribute their previous domestic violence. According to previous studies, 60% of men who performed violent acts in their marriages to their wives were brought up in families that were violent. In addition, the root cause of abuse is rooted in how abusers and victims are brought up (Delsol & Margolin, 2004). According to Delsol and Margolin (2004), Bandura’s social learning theory is one way to explain the observations found in adults who were raised by caregivers that were violent. Children who have been exposed to abuse repeat similar patterns through learning the abusive
patterns from their parents. Similarly, to the men interviewed, the participants said that they witnessed domestic violence in their homes where they grew up. Most of the men interviewed mentioned that they had grew up in homes witnessing abuse. Participant #2 also stated, “When you have been abused it gives you permission to do it to others, and you give yourself permission (Participant 2, January 2017).” In addition, participant #5 shared that he tried his best to be different than his parents, by avoiding any sort of violence, but before long he was repeating the same patterns which he swore he would never repeat.

According to the United States Department of Justice (2016), domestic violence is defined as a pattern of abusive behaviors used to gain or maintain power and control over another person. Participant #4 admitted that pride, arrogance, and selfishness, eventually transpired into a power trip in his relationship with his wife.

Rothenberg (2002) found that married men who act violently towards their wives do so out of their own disabilities, insecurities, or anxieties about the man that they feel they that they are or are not. Participant #2 mentioned “When you feel insecure, you want to be in control. In fact, some men just don’t know what to do with their manhood when they are with a strong woman (Participant 2, January 2017).” Some researchers have found evidence that husbands who have a pattern of drinking alcohol are committing marital violence (Leonard & Quigley, 1996). Participant #3 mentioned that alcohol got a grip on him and
before long he was committing the same violence he witnessed from his stepfather.

According to Women’s Health (2011), some men can change their abusive nature, but it usually takes a lot of work on their part, coupled with counseling, and many men are not too prone to seek counseling. If the abuser is continuing to blame his significant other for his inappropriate domestic violence acts, then he is more than likely not going to change or desire to seek counseling to work towards changing. Furthermore, participant #3 said, “you must recognize you have a problem and hate it enough to change (Participant 3, January 2017).”

Limitations

Limitations of this study include the small sample size of 5 male perpetrators of domestic violence who professed to have a strong faith in Christianity. In addition, all the men reside within specific areas of the county of San Bernardino, California. With that, the participants may not be representative of all male perpetrators within the county or other geographical areas. Additionally, this study is not ethnically diverse, and may not be representative of all members of ethnic groups. Lastly, the sample size that was interviewed is quite insignificant, and all the men interviewed have a strong faith they claim to have helped them to stop their acts of domestic violence. Thus, opinions regarding services and practices may not be representative of all male perpetrators.
Service Recommendations

As evidenced by the findings in this study, male perpetrators of domestic violence desire to maintain their non-violent ways in their relationships. With that, social workers need to keep in mind that domestic violence is oftentimes a learned behavior and that people can change. Therefore, it is critical to be aware of the importance of maintaining a nonjudgmental and hopeful attitude when delivering services to this population to allow individuals to remain hopeful and encouraged.

It is important for social workers to have a thorough understanding of the causes of male perpetrated domestic violence in heterosexual relationships. By social workers learning more about this population, they will be able to provide appropriate treatment, services, and resources that may decrease domestic violence in relationships. Furthermore, by taking the perspective of the male perpetrator into consideration, social workers can provide interventions and services, which could be perceived as helpful, and a further building of trust rather than refusal and mistrust in services. As a social worker one of the most important parts is engaging and meeting the clients where they are at. Trust is established and built when the social worker builds rapport with their clients.

Conclusions

This study identified the reasons for male perpetrated domestic violence in heterosexual relationships. It is hoped that this study will help social workers to
increase their knowledge of the population, so they will be better able to work towards improving services and interventions with the goal of ending domestic violence.
APPENDIX A

QUESTIONNAIRE
I would like to begin this interview with a few background questions.

1. What age did you turn on your last birthday? ______
2. What is your marital status?
   [ ] 1. Single
   [ ] 2. Married
   [ ] 3. Separated
   [ ] 4. Divorced
   [ ] 5. Widowed

3. How many children do you have? ______

4. What is your ethnicity?
   [ ] 1. African American
   [ ] 2. Asian Pacific Islander
   [ ] 3. Hispanic/Latino/Chicano
   [ ] 4. Caucasian
   [ ] 5. Other, please specify: __________________

5. What is your highest level of education?
   [ ] 1. Did not complete High School
   [ ] 2. Obtained a GED
   [ ] 3. High School Graduate
   [ ] 4. Some College
   [ ] 5. Technical College Diploma/Certificate
   [ ] 6. Associated Degree
   [ ] 7. Bachelor’s Degree
   [ ] 8. Master’s Degree
   [ ] 9. Doctorate Degree

6. Are you currently employed? [ ] Yes [ ] No
   If so, what is your title? __________________

7. What is your annual gross income?
   [ ] $0-$15,000
   [ ] $15,001-$30,000
   [ ] $30,001-$50,000
   [ ] $50,001-$70,000
   [ ] $70,000+

8. How many children do you have with the woman you have domestic violence history with? __________

9. Do you have a religious faith? [ ] Yes [ ] No
   If so, what is your religious faith? __________________
APPENDIX B

INFORMED CONSENT FORM
INFORMED CONSENT

This study is a qualitative study which examines domestic violence from a male perpetrator’s perspective in heterosexual relationships. The study is being conducted by Lisa Soriano, a MSW student under the supervision of Dr. Herbert Shon, Assistant Professor in the School of Social Work, California State University, San Bernardino. The study has been approved by the Institutional Review Board Social Work Sub-committee, California State University, San Bernardino.

PURPOSE: The purpose of the study is to examine domestic violence from a male perpetrator’s perspective in heterosexual relationships in order to gain more insight to be better able to serve this population.

DESCRIPTION: Participants will be asked questions regarding their perspective of the domestic violence and to tell their story. In addition, they will be asked a series of questions relating to what coping mechanisms and support systems have been utilized, and if they have helped, whether their religion or faith has had an effect, whether mental illness or substance use has been a contributing factor, whether their family-of-origin had domestic violence, and some demographics.

PARTICIPATION: Your participation in the study is totally voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALITY OR ANONYMITY: Your responses will remain anonymous and data will be reported in group form only.

DURATION: It will take approximately 30 to 45 minutes to complete the interview.

RISKS: There are no foreseeable risks to the participants.

BENEFITS: There will not be any direct benefits to the participants.

CONTACT: If you have any questions about this study, please feel free to contact Dr. Herbert Shon at 909-537-5552.

RESULTS: Results of the study can be obtained from the Pleau Library ScholarWorks (http://scholarworks.lib.csusb.edu) at California State University, San Bernardino after December 2017.

This is to certify that I read the above and I am 18 years or older.

Place an X mark here                        Date
APPENDIX C

INTERVIEW QUESTIONS
INTERVIEW QUESTIONS

1) Have you witnessed any domestic violence in your community?

2) Did you witness any sort of abuse growing up in your household?

3) What do you believe are the reasons in your opinion for domestic violence?

4) Do you believe any factors such as substance use, drugs, and/or mental illness are contributing to the acts of violence?

5) What sort of support services have you utilized?

6) What have you found that has been helpful at lessening the domestic violence?

7) What services or programs do you believe would be helpful in the future for domestic violence perpetrators?

8) What were your coping strategies?

9) What services were most helpful or not helpful?

10) Do you have a particular faith that you believe in? If so, do you believe that your faith has helped you with domestic violence?

Created by: Lisa Michelle Soria
REFERENCES


