**Domestic Violence Demonstration**

**Speaker**
The next session deals with domestic violence and it is a very serious and an important part of our family culture these days. There are at least three to four million women and men who are impacted by family violence every year with 1200 to 1500 deaths per year.

So it is something that is serious and that is seen in the counselor sessions and so you want to be aware of what those clues look like and what kind of things you should ask your client directly.

Many times, the victim of domestic violence will be very reluctant to talk about it and talk about the details and actually to understand that what they are going through is domestic violence. If they grew up with domestic violence themselves, they might think that that is a pretty normal circumstance and they want to understand the stress that they themselves are under and possibly, any children that are in the home or near the perpetrator. Some clues that you want to look for are eyes that are looking down, a woman or a man who is not confident enough to meet your glance. You want to look for bruises and other injuries on the body and there are other questions that you want to be asking of a client who has these kinds of symptoms.

You always want to ask how safe the person is, is there alcohol and drugs involved, are there health issues because of domestic violence, has the person been to the doctor a lot for chronic pain, migraines, stomach ailments, even things like arthritis are brought on by the extra stress and you always want to have help systems available, either the client’s friends and family or the domestic violence facility in your neighborhood.

**Therapist**
Give me a little idea of what is going on?

**Mary**
Well, I do not really know what to say. I mean, I know I am here because I have just got a lot of stuff on my plate and my husband really wanted me to come in to kind of get some things worked out and I guess, he really just wants me to try to not be so, I guess so stressed out all the time so that is kind of like—

**Therapist**
So your husband was behind it. Did he make the phone call?

**Mary**
Yes, he made the phone call because he has been saying a lot that I needed to go talk to somebody and that he did not really think he could help me; that I had a lot of stuff I need to work through and so he called and he made the appointment for me.

**Therapist**
What do you think? What did you think you should talk about?

**Mary**
Well, I do not really know what to talk about, but I guess he said that I need to not do things like, and I guess—I mean, I think he is really right. Sometimes, I get really irritable and I kind of snap at him and he said, I do not really need to do that anymore, so I think it is probably best that I figure out how to not snap at him because when I snap at him, then he gets really angry at me and I do not want to make him angry.

**Therapist**
Well, all of us have some anger, but it sounds like you—it sounds pretty serious when he gets angry, tell me about a typical day, what does that mean?

**Mary**
Well, I mean, he gets angry, but I do things—like I will, he really likes for me to have dinner ready at six o’clock when he gets home from work, and sometimes the kids are home and we just get to playing or something and I get it and it is not quite ready at six and he really likes it to be ready at six and so, he comes in and he says, “Why is dinner not ready?” and I kind of snap at him and then he gets mad at me for snapping, which I guess, I would get mad at me if I had snapped too. And then it does not make for a good rest of the night.

He is angry and I am frustrated and then the kids, they see us fighting and I just--

**Therapist**
Forgive me, I was just kind of looking at you to see how you are and I am noticing that under that sleeve, there is a mark. What is that?

**Mary**
Actually, the other day my husband, he got a new waffle maker for me because he likes to have breakfast in the morning too and I was trying to figure out how to use it and it has a little closure thing on it and I guess, I had closed it and then I did not move the latch right and I was pulling really hard and it kind of popped open and it kind of bounced off the counter and kind of burned my arm a little bit. I am kind of clumsy that way; always bumping into stuff.

**Therapist**
Are you really safe at your house, Mary? Now you know that—what you and I talk about is totally confidential and no one will know that you have told me if things are really kind of a little more difficult at your house than you are letting me think. I just want you to understand that I am here for you and that the kind of support that we can share is more than you are probably used to at your house.

**Mary**
Well, so you are sure you cannot say anything that I am saying?

**Therapist**
Absolutely!

**Mary**
And I probably should not say anything, but my husband said you would say something like that that he said that I would somehow misrepresent our situation and then make it look like he is doing things he should not do and so we got—that is funny that he told me that you would probably do that, but sometimes he does get—sometimes things really do get pretty bad.

**Therapist**
Out of hand?

**Mary**
Pretty bad!

**Therapist**
Mary, look at me. Are you safe?

**Mary**
It depends on his mood.

**Therapist**
OK.

**Mary**
If it is a—if I do anything right…

**Therapist**
Are you physically safe?

**Mary**
If I do everything right. If I do not have dinner ready, I do not know if he is just going to yell at me and tell me how worthless I am and how I cannot even fix a dinner at the same time everyday and if he has had a hard day at work and then I have screwed up not having dinner ready then sometimes, it is not just words.

**Therapist**
So, has he hit you, Mary?

**Mary**
He is only—he has hit me only a couple of times, but that was because I really, really, really messed up. Most of the time, he just kind of pulls me around or pushes me.

**Therapist**
But still more than—

**Mary**
Well, it does not feel very good.

**Therapist**
What a respectful husband would do.

**Mary**
I do not think I have any friends whose husbands act like that, but I do not think my friends know because I think I—

**Therapist**
It is pretty hard to tell people, is it not? It really is. I am going to tell you a little bit about domestic violence, which is what you are enduring, Mary. It is not just once in a while and it weighs on you. These situations usually do not get better. I want you to think seriously; you talked about your children and you talked about how they are impacted by these as well.

**Mary**
And that is really the only thing that matters. I do not care about me but I just do not want my kids to see it sometimes and I would—I cringe at the thought either one of my girls ever marrying a man like my husband.

**Therapist**
So we need to do something about this, do we not, Mary?

**Mary**
I have no idea what to do.

**Therapist**
When you go home now, where will your husband be?

**Mary**
When I go home, he will be at work for a little longer because I had to make the appointment during the day because I still have to have dinner ready. He said, I needed to come, but I could not interfere with his schedule.

**Therapist**
So you are going to be able to get dinner on at six tonight?

**Mary**
Yes.

**Therapist**
Will you feel safe after that or do you need some—do you need more security than that?

**Mary**
I would like to feel like my kids are safe and they do not have to see this anymore.

**Therapist**
OK.

**Mary**
And I guess, the thought of not having to be pushed or being scared of being hit—I do not even know what that would be like—it has been so long.

**Therapist**
OK, well here are some thoughts. Do you have relatives here in town?

**Mary**
I do. I have a sister.

**Therapist**
Well, you have got a couple of options. If you could call your sister and just say, “Hey, we are coming over for supper.” And take along a change of clothing, take along your driver’s license and your debit card and just be out of the house for when he comes home tonight and then I am going to give you another number to call, it is 1-800-TOB-SAFE and so, if you dial that, those folks will help you understand what is happening to you and understand how to make the next steps and how to have you and your family be safe.

Mary, look at me, this is not your fault.

**Mary**
It just feels like that.

**Therapist**
You did not do this on purpose.

**Mary**
I just always think every day, well, I have to make sure I have to do everything right and when I do not, I feel like well all I had to do was iron his clothes right or have dinner right—

**Therapist**
Mary, look at me. This is not your fault. You did not do this and he has to learn how to behave as the father of your children and your husband. That part is not up to you, your duty is to be safe for yourself and for your children, and will you promise me that you will do those things and call in the morning? I have an emergency appointment spot at 8:30 and you come back—will that be after the kids go to school?

**Mary**
Yes.

**Therapist**
And you come back and we will figure out what your next steps are, OK?

**Mary**
OK.

**Therapis**t
And my energy will go with you. I am thinking about you, OK?

**Mary**
OK, thank you.