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Book Review: "Couples therapy for domestic violence: Finding safe solutions"

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Stith, S. M., McCollum, E. E., & Rosen, K. H. (2011). *Couples Therapy for Domestic Violence: Finding Safe Solutions.* Washington, DC: American Psychological Association, 204 pp., \$69.95 (hardcover).

Stith, McCollum, and Rosen present a thorough and engaging account of their treatment model for working with couples experiencing domestic violence. The systemic view and treatment of domestic violence is still a controversial topic but the authors handle it in a thoughtful manner and with evidence from more than 15 years of research. This clear yet detailed volume provides all the tools a clinician needs to treat couples using the authors' model of Domestic Violence-Focused Couples Therapy (DVFCT).

In the first three chapters, the authors outline the rationale for their method of treating violent couples and present a convincing argument for basing their treatment in solution-focused therapy. They are also able to address major points of contention raised against the use of systemic treatment of violent couples, primarily through the premise that violence can result from relationship dynamics and poor coping skills and that these couples often want to end the violence and stay together. Chapters four through nine outline the first six sessions of treatment, which is conducted either with individual members of the couple or in separate-gender groups. The purpose of these sessions is to encourage better coping skills, an understanding of violent patterns, and hope for change. This foundation increases safety and the likelihood of success during conjoint therapy with each couple or in a multi-couple group; the structure of these sessions is outlined in Chapter 10. The last three chapters address special circumstances, provide case summaries of couples that participated in DVCFT, and present both quantitative and qualitative research findings. Overall, the book is well-organized and written in plain language so that any couples therapist, regardless of his or her familiarity with domestic

violence, solution-focused therapy, or overall clinical experience, can apply DVCFT in his or her own practice, in whole or in part.

In addition to uncomplicated language and thorough descriptions, the book has many other notable strengths. Primarily, the authors address the main ethical issue surrounding conjoint treatment of domestic violence- that it may lead to more violence. Throughout the book, the safety of the couple is emphasized and maximized through the use of separate gender pre- and post-session check-ins, violence measures administered weekly, and contingency plans should a safety risk be detected. Second, and perhaps because of the need to monitor safety, the authors frequently encourage the reader to use his or her best clinical judgment at all times, as opposed to rigidly following the outline of DVFCT. This feature of the book overcomes one of the primary limitations of manualized treatment, in that they are often inflexible and can only be applied to a very small population. Finally, the book is firmly situated in solution-focused therapy while also leaving room for a secondary model, acknowledging that solution-focused methods may not always be suitable. However, given the shame and hopelessness that often accompanies domestic violence, an approach that emphasizes strength and progress seems like an innovative and highly appropriate approach to working with these couples. Overall, Couples Therapy for Domestic Violence is a clear and comprehensive guide to a systemic model of treatment for domestic violence that could greatly enhance the training and practice of any clinician working with couples.