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Experiences of Counselors who Provide Services to African American Men with Repeated Domestic Violence Abuse Reports

Miselene Kruer
Walden University

Walden University

College of Social and Behavioral Health

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Miselene Kruer

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Review Committee
Dr. Theodore Remley, Committee Chairperson, Counselor Education and Supervision
Faculty
Dr. Jason Patton, Committee Member, Counselor Education and Supervision Faculty
Dr. Geneva Gray, University Reviewer, Counselor Education and Supervision Faculty

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Walden University
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Abstract

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Repeated Domestic Violence Abuse Reports

by

Miselene Kruer

MS, Walden University, 2011

BS, University of South Florida, 2004

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Counselor Education and Supervision

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Abstract

Domestic violence has been a major concern in the United States. To effectively work with domestic violence offenders, counselors must have the skills and knowledge needed. The purpose of this qualitative phenomenological study was to understand lived experiences of counselors who provide in-home counseling services to African American men who are repeat domestic violence offenders and received a subsequent abuse report within 6 months after in-home services were discontinued. The goal was to try to develop an understanding of experiences of counselors who provide services to these men. Interviews were used to collect data. I used Otter to transcribe all the interviews. I analyzed the data utilizing note taking and reviewing of the interviews. Seven themes emerged from interviews with the eight participants: victims are reluctant to leave their perpetrators, counselors do not have adequate in-services training to work with this population, there are not enough alternatives for victims so victims are afraid of the unknown and of starting over, counselors believe that perpetrators are not being held accountable for their actions and that the victims are the ones being punished, there are not enough resources available to better serve this population, counselors are not prepared in their master's degree programs to work with this population, and counselors feel that victims sometimes are also responsible for domestic violence. The results of this study could be used to help counselor educators to have a better understanding of the use of intensive in-home services in order to be able to provide services that are individualized to meet the needs of clients.

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Dedication

I dedicate this dissertation to my husband, Lawrence William Kruer II. Your endless and unconditional love and support are everything to me. You believed in me and supported me throughout this process. When I wanted to give up, I can always depend on you to say, "You've got this honey." This would not have been possible without you.

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Finally, thank you to the eight participants who had the courage and trust enough to share their experiences. Thank you.

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Chapter 1: Introduction to the Study

Introduction

The purpose of intensive in-home services with the goals of prevention and child safety has not changed. Intensive in-home services have been in existence for many years that have focused on working with clients who have been involved in domestic violence. There has been research focusing on African Americans and domestic violence; however, questions remain about how African Americans perceive domestic violence. According to Moreland et al. (2019), intensive in-home counseling is one of the most recently developed models of treatment which allows families to recover from their trauma in terms of being able to learn new coping skills that are needed. Counselors working with domestic violence clients have difficulties finding appropriate services in communities that are needed to properly assist these clients. Counselors working with domestic violence perpetrators do not pick sides and use resources available to them while working with this population (Iliffe & Steed, 2000). In this study, I explored lived experiences of counselors working with African American males who have been involved in repeated domestic violence abuse reports after termination of in-home counseling services.

Domestic violence is not just a disagreement between partners. It is disrespectful abusive behavior that an intimate partner chooses to use against the other partner for no apparent reason. According to the Florida Coalition Against Domestic Violence (2014), individuals might experience domestic violence if their partner is doing any of the following: physically hurting the other partner, using their children against them, calling

the other partner names, threatening to commit suicide or kill the other partner,

controlling money, withholding medical help, stalking, or demanding unwanted sex.

In this chapter, I describe the topic of this study and the reason the study needs to

be conducted, including social implications of the study. This chapter begins with

background information about intensive in-home services, how counselors who may or

may not be licensed are identifying domestic violence perpetrators and victims, the types

of appropriate services domestic violence victims and perpetrators are receiving. First, I

introduce the problem statement and purpose of this study. I then present the background

of the study and theoretical foundation that was used. I also review the overall framework

for the current study, possible types and sources of data, analysis strategies, and nature

and significance of the study. I also discuss assumptions, scope, delimitations, and

limitations of the study.

Background

In this section, I include a brief summary of literature related to the scope of

study. I also discuss the gap in literature and reasons why this study was needed.

It is estimated that 4.0% of children in the United States are at risk of being

maltreated (Berger & Font, 2015). It is a requirement for all professionals to report all

knowledge of child abuse or neglect in all states, including Florida where the study was

conducted. Hillsborough County, Florida reported that the number of children sheltered

between the months of August 2014 and August 2015 was 438. The number of children

served by two intensive in-home services in Hillsborough County from July 2014 to July

2015 was 1,500. With intensive in-home services, there are several different evidence-

based models used, and all services are related to family needs and severity of cases.

Using evidence-based practices is extremely important with intensive in-home services

that are designed to strengthen families (D'Aunno et al., 2014). Types of services offered

play a significant role in the success of families.

According to Ogbonnaya and Kohl (2016), domestic violence experienced among

caregivers has been found to decrease drastically if the family is involved with child

protection services. A problem that exists is how counselors identify the domestic

violence. Ogbonnaya and Kohl (2016) recommended that workers have special

assessment tools to use in order to properly identify domestic violence within families.

Problem Statement

In this section, I include evidence that the problem is current. I also include

information related to a gap in literature. Intensive in-home services are crucial in terms

of preventing domestic violence (Reuter et al., 2016). Families with a history of low

economic status, mental health problems, and substance misuse are at an elevated risk for

domestic violence (Dore & Zuffante, 2015). What happens to domestic violence

perpetrators after in-home services are terminated who go on to become repeat offenders

has not been examined.

Family NET through Gracepoint Wellness and Safe at Home through Gulf Coast

Jewish Family and Community Services are the two intensive in-home programs in

Hillsborough County, Florida that provide services to individuals reported for domestic

violence. There are one million children who are victims of abuse or neglect each year in

the US (Gelles & Perlman, 2012). Family NET and Safe at Home have been able to keep

95% of the children in families served from entering the foster care system (Eckerd Connects, 2016). Family characteristics and willingness to participate in family treatment were found to be important for successful treatment (Kim et al., 2016).

Many individuals in Hillsborough County, Florida who are involved in intensive in-home services as the result of child abuse domestic violence allegations are African American men (Eckerd Connects, 2016). At this point, the experiences of counselors who provide services to African American men after termination of services are not known. It is possible more information regarding reasons for subsequent abuse reports due to domestic violence among African American men can be obtained as a result of this study.

A gap in literature exists involving counselors who provide services to African American men who are repeatedly charged with domestic violence violations. The purpose of this study was to develop a better understanding of lived experiences of counselors who may or may not be licensed and provide services to African American men who have been charged with repeated domestic violence in the home after termination of intensive in-home services. This information will help to better prepare counselor educators to train counselors to meet the needs of counselors who provide services to these families. Without information this study will provide, counselor educators may not be knowledgeable enough to prepare counselors to meet the needs of African American men with repeated domestic violence incidents.

Purpose

The purpose of this qualitative phenomenological study is to understand lived experiences of counselors who provide in-home counseling services to African American

men who are repeat domestic violence offenders and received a subsequent abuse report within 6 months after in-home services were discontinued. The goal is to try to develop an understanding of the experiences of counselors who provide services to these men, and in turn, develop an understanding of the lives of men who are repeat offenders, and find out what counselor educators need to know in order to better prepare themselves.

Research Question

One central research question guided this study:

What are the lived experiences of counselors who provide services to African American men with repeated domestic violence abuse reports after termination of in-home counseling services?

Theoretical Framework

In this section, I address the theoretical framework for this study and explain how the theory relates to the study approach and research questions. In this study, I used a transcendental phenomenological qualitative approach. The study involved interviewing counselors who may or may not be licensed who provide in-home counseling services to African American men who are repeat domestic violence offenders and received a subsequent abuse report within 6 months after in-home services were discontinued. My goal was to try to develop an understanding of the experiences of counselors who provide services to this population. In addition, I hoped to gain a better understanding of the lives of African American men who are repeat offenders. Obtaining this information about counselors and repeat offenders will assist counselor educators to better prepare counselors who provide services to these men.

The theoretical foundation for this study was the family systems approach to family counseling. I related findings of my study to what is known about the family systems theory, particularly how behaviors of repeat offenders fit into this theory. In Chapter 2, I provide a more thorough explanation of the theoretical framework.

Nature of the Study

In this section, I provide a rationale for selecting this problem to study, describe key concepts, and provide a summary of the methodology. This was a phenomenological study of the experiences of counselors who provide services to African American men with repeat domestic violence abuse reports. By studying the experiences of counselors who provide services, I hope a better understanding can be developed regarding men who are repeat domestic violence offenders.

African American men who complete an intensive in-home program for 3 to 4 months and later have another abuse report filed because of the same issue need to be better understood. Family characteristics and their willingness to participate in family treatment were found to be important (Kim et al., 2016).

I conducted face to face interviews via Zoom with counselors to collect data for this study. I collected data from counselors who had provided counseling services to African American men with repeat domestic violence abuse reports after termination of in-home counseling services. I asked counselors I knew who were eligible to participate in the study and they agree to be interviewed. When I interviewed the first participants, I asked that they identify other eligible counselors who I could ask to participate, which is a form of snowball sampling.

Definitions

For the purpose of this specific study, I defined words and phrases as follows:

Counselor: In this study, the term counselor is used to identify individuals in agencies who provide counseling or mental health services to clients. In these agencies, counselors have various education levels and a variety of degrees, including social work. Some counselors were licensed, and others were not.

Domestic Violence: A threat or exercise of physical, psychological, or emotional violence against another person with the intent of inflicting harm or demonstrating power in order to gain control over them (Flury & Nyberg, 2010).

Intensive In-home services: Services that are delivered in the homes of families that are designed to build skills and provide resources to help clients better manage their children who have behavioral difficulties (Hurley, 2008).

Intimate Partner Violence: Domestic violence perpetrated by a current or former spouse or partner in an intimate relationship against the other spouse or partner (Campbell, 2002).

Perpetrator: Any person who is guilty of acting in a harmful way toward his or her victim (Eyerman, 2019).

Victim: Any person who has been involved in a criminal act, accident, or act of terror and was injured or killed because of a crime (Ben-David, 2020).

Assumptions

In this section, I discuss assumptions that are critical and meaningful to this study and why they were necessary. There is not a way to verify whether the information I

collected in this study was true. I assumed participants took the time to reflect on questions I asked them and provided truthful answers regarding their experiences working with African American domestic violence perpetrators. It was assumed that a phenomenon can be understood through intense examinations of individuals who have experienced the phenomenon. Those who conduct phenomenological studies assume that fundamental qualities of the phenomenon being studied and its relationship with the environment in which it occurs can be understood (Heidegger, 2005).

. I also assumed participants shared enough information about their experience that saturation would be achieved. Given that I had worked in this field for over 10 years, I assumed that participants were comfortable sharing their experiences with me.

Scope and Delimitations

Participants in this study included counselors who may or may not be licensed who were working with African American men who had been involved in multiple domestic violence abuse reports or had worked with them before. I included in this study counselors who may or may not be licensed who provide services to African American men who have been involved in repeated domestic violence. Due to this study being qualitative, transparency was not an issue. This study involved counselors who provide services to the African American male population, so this excluded counselors who work with other clients with other ethnic identities and did not include women clients. Results of this study will provide a better understanding of the experiences of counselors who provide services to domestic violence perpetrators.

Limitations

In this section, I describe limitations of the study and measures I took to address limitations and biases that could have influenced the study. In this study, I explored the experiences of counselors who provided services to African American men who had repeated domestic violence abuse reports after termination of in-home counseling services. Participants had their own biases which may have affected the way they think about experiences they have had working with domestic violence perpetrators. Working with this population can create biases which could also lead to limitations for this study. For this study, being transparent is very important. I disclosed firsthand experiences providing services to this population and working with counselors who also provide services to this population. Being transparent increased credibility of the study. I made every effort to avoid allowing my biases to influence data collection for this study from participants.

Significance

In this section, I describe the significance of this study, elaborate on the problem being addressed, and suggest potential implications for social change. This study is significant in that it has the potential to help counselor educators have a better understanding of the use of intensive in-home services to provide services that are individualized to meet the needs of clients. This study could be a starting point for how to develop or identify potential ways to measure risk for reentry for men who are repeat domestic violence offenders. Since counselors of individuals who have received a subsequent abuse report within 6 months after in-home services were discontinued were

interviewed, this study provided information about experiences of these counselors and insights regarding the problem of repeat domestic violence offenders.

Summary

In this chapter, I started with the background of the research problem. I discussed the problem statement, purpose of the study, and research question that guided this study. In this chapter, I provided a comprehensive review of the theoretical framework. I concluded this chapter with the significance of the study. In Chapter 2, I provide a comprehensive discussion of my review of literature.

Chapter 2: Literature Review

Introduction

There are many counselors who provide in-home counseling services to African American men who are repeat domestic violence offenders. Intensive in-home services are crucial in domestic violence prevention. Child abuse is one category of domestic violence; however, domestic violence can also be acts of violence against an adult or adults in a home (National Coalition Against Domestic Violence [NCADV], 2021). Because many men are repeat domestic violence offenders, the importance of providing intensive in-home services remains.

The success of in-home services is the result of programs that are family centered. According to the NCADV (2021), more than 10 million men and women in the US are subjected to domestic violence, and that is an average of 20 individuals per minute. Experiences of counselors who provide in-home counseling services to men who are repeat domestic violence offenders are not known. There are gaps in the professional counseling literature regarding experiences of these counselors. Whether interventions for perpetrators lower the risk of intimate partner violence also is not yet known (Eckhardt et al., 2013). There have been numerous studies investigating the effectiveness of batterer intervention programs intended to help perpetrators of intimate partner violence, but no studies have explored the experiences of those who are providing interventions. By studying counselors who provide in-home counseling services to men who are repeat domestic violence offenders, I hope to provide some insights regarding whether

counselors are being properly trained for their roles and stresses experienced by these counselors.

I conducted this research project using the family systems theory. During the study, I focused on family characteristics and how families function. Family characteristics and willingness to participate in family treatment was found to be very important to successful outcomes (Kim et al., 2016). It is very important to take this into consideration when exploring the experiences of counselors. For this qualitative study, I conducted individual interviews with counselors who may or may not be licensed who work with this population.

In this literature review, I begin by detailing my research strategy. In this chapter, I explore literature related to lived experiences of counselors who provide in-home counseling services to men who are repeat domestic violence offenders and received a subsequent abuse report within 6 months after in-home counseling services were discontinued. I conclude this chapter with a detailed discussion of major themes in literature and explain how this research project will fill gaps that currently exist in professional counseling literature.

Literature Search Strategy

My search strategies and choices involved mainly African American men with repeated domestic violence abuse reports after termination of in-home counseling services. Databases I accessed to gather information were: ABI/INFORM Complete, Academic Search Complete, PsycArticles, and PsycInfo. Key words were as follows: *family preservation*, *intervention*, *family centered and support services*, *child protective*

services, *counseling*, *in-home services*, *child maltreatment*, *emotional support*, *child abuse reporting education*, *knowledge of child abuse*, *child maltreatment*, *domestic violence*, *child exposed to domestic violence*, *intervention and treatment*, *foster children*, *trauma*, *adverse childhood experiences*, *mental health services*, *children*, and *caregivers*. Key terms led to a large amount of literature involving the focus of this study.

Search Strategies and Choices

This section includes detailed information about strategies I used to review literature for this research project. Topics covered in this chapter include definitions of domestic violence, African American families from a systems perspective, statistics regarding the problem of domestic violence in the US, court interventions, and rates of recidivism. Other topics include mental health professionals and those who provided treatment to domestic violence offenders. My search strategies and choices involved mainly domestic violence and counselors and other mental health professionals providing services to domestic violence clients. I retrieved literature from the Walden University Library.

Conceptual Framework

Family Systems Approach to Counseling

I used the family systems theory as the conceptual framework for this research project. The family systems theory involves family characteristics and how families function in general. There is a long history of African Americans who are unwilling to participate in counseling-related services (Kim et al., 2016). The family systems theory is also sometimes referred to as the Bowen family systems theory. Dr. Murray Bowen is

considered the father of family systems theory. Bowen viewed the family as an emotional

unit and asserted that individuals cannot be considered in isolation from one another

(Gregory, 2018). According to Bowen, in order to understand an individual, one must

understand the entire family (Titelman, 2014). Becvar and Becvar (2017) said it makes

no sense to study each person in a family individually because it is most important to

understand how the family functions, not how each person functions as an individual.

When changes take place in one person, it is highly likely that changes will occur within

the entire family. In family systems, all individuals affect each other.

There are many challenges that come with counselors working with clients who

present with family violence issues. Even though working with domestic violence clients

is challenging, the goal has always been keeping victims of family violence safe (Weiss,

2015). Some of these challenges may include concerns for client safety, mandated

reporting, court-referred clients, and countertransference when working with the clients

(Murray, 2006). Counselors have played an integral part in helping clients break cycles of

domestic violence by being aware of different forms of violence and gender-specific

behaviours (Streker, 2013). Counselors working with families of violence find

themselves serving in many roles, such as advocating, educating, networking, identifying

resources, helping with changes in the laws, and providing counseling services for

victims and perpetrators of domestic violence (Dansby-Giles et al., 2010).

Many African Americans are not comfortable with working with counseling

services because of the 400-year history of being perceived as inferior and treated

differently from other Americans (Davey & Watson, 2008; Kim et al., 2016). Kim et al.

(2016) said family characteristics and willingness of individuals to participate in family treatment to have played a particularly important part in family engagement. Prior to accepting services, African Americans tend to seek affirmation of a clinician's humility, cultural sensitivity, and lack of prejudice (Davey & Watson, 2008). Since African Americans are often reluctant to participate in counseling, it is very important to take this into consideration when offering counseling services to this population.

<div align="center">**Domestic Violence**</div>

Definitions of Domestic Violence

Domestic violence, also known as intimate partner violence, is any violent behavior within the home (NCADV, 2021). It usually involves violent behavior and abuse of a spouse or partner. According to the Nevada Attorney General, domestic violence has been described as a violent crime committed between those in an intimate relationship. Domestic violence also is considered an act of violence and power intended to exert control over another person. Types of domestic violence can be characterized as physical, sexual, emotional, economical, or psychological (NCADV, 2021).

According to the NCADV (2021), physical abuse is the most obvious form of domestic violence. During physical abuse, there are obvious signs showing that there is a form of domestic violence issues going on within the family. Sexual abuse on the other hand is not being acknowledged as much; however, it is one of the ways used to take coercive control over a victim. Emotional abuse can include intimidation, name calling, insults, and put downs. Economic abuse can be characterized as financial restriction so that victims are unable to be self-sufficient. When psychological abuse occurs in

domestic violence relationships, the perpetrator takes control of everything that victim

does, such as controlling where the victim goes and which friends the victim is around.

Psychological abuse also might include degrading, humiliating, manipulating, and

stalking victims. Perpetrators sometimes claim that they are victims and their needs come

first, even before the children's needs. In a study conducted looking at the gender

differences in predicting intimate partner violence, 46.2% of the violence reported was

psychological, 9.2% of the violence was psychological and sexual, and 17.5% of the

violence was psychological and physical (Jung et al., 2019).

According to the Center for Child Welfare (2018), intimate partner violence

occurs when power, control, or coercion is perpetrated by one intimate partner over

another causing the physical, mental, or emotional health of a person to be significantly

impaired. In any domestic violence or intimate partner violence situation, some of the

things mental health professionals should be aware of are as follows: isolation of a parent

of caregiver, one parent or caregiver having sole access to finances and transportation,

threats against children, one parent interfering with medical access for the other parent or

children, and, most importantly, threats with any weapons (Center for Child Welfare,

2018).

Statistics Regarding Domestic Violence in the United States

In the United States, one in three women and more than one in four men reported

having been involved in a domestic violence in their lifetime (Black et al., 2011). A total

of one in seven women and 1 in 25 men have been injured by an intimate partner (Black

et al., 2011). When it comes to sexual assault, one in five women and one in 59 men in

the US is raped during his or her lifetime. Also, one in three women and one in 20

victims murdered by men are killed by their intimate partners and 72% of all murder-

suicides are executed by an intimate partner's partner (Black et al., 2011). Peraica et al.

(2020) said domestic violence is underreported by male victims.

The economic effect of domestic violence can also be a huge issue within the

home. As stated above, economic effect is financially depriving victims from what they

need to take care of themselves and their children. According to Black et al. (2011),

victims of intimate partner violence lose a total of 8 million days of paid work days each

year. It is also estimated that 21 to 61% of victims of intimate partner violence lose their

employment because of some reason that has to do with the abuse (Black et al., 2011).

Types of Domestic Violence

Domestic violence can include physical abuse, sexual abuse, emotional or

psychological abuse, financial abuse, or identity abuse (National Coalition of Anti-

Violence Programs, 2021). Physical abuse can include any threats of harm or physical

behavior causing bodily harm to individuals or their property (National Coalition of Anti-

Violence Programs, 2021). Sexual abuse is any forced or coerced sexual act or behavior

against a person. Sexual abuse includes contact that degrades or humiliates a person

especially related to the body, sexual performance, or sexuality (National Coalition of

Anti-Violence Programs, 2021). Emotional or psychological abuse typically includes

ridicule, intimidation, or coercion (National Coalition of Anti-Violence Programs, 2021).

Financial abuse occurs when financial resources are withheld from individuals causing

them to not have the ability to financially care for themselves or their children (National

Coalition of Anti-Violence Programs, 2021). Identity abuse is using personal characteristics such as a person's age and race to demean, manipulate, or control the partner (National Coalition of Anti-Violence Programs, 2021).

Intimate partner violence causes many negative health consequences. Approximately half of women in abusive relationships in the United States are physically injured by their partners and most of them sustain multiple types of injuries such as injuries to the neck, head, and face to include musculoskeletal injuries and genital injuries (World Health Organization, 2009). Lesbian, gay, bisexual, and transgender intimate partner violence is generally unreported, unacknowledged, and most of the time is reported as something other than domestic violence (National Coalition of Anti-Violence Programs, 2021). According to the National Coalition of Anti-Violence Programs (2006), 2 in 5 gay and bisexual men have experienced abuse in intimate partner relationships. It is estimated that 44% of lesbian, gay, bisexual, and transgender domestic violence cases identified as men whereas 36% identified as women (National Coalition of Anti-Violence Programs, 2021).

Domestic Violence Perpetrators

Cycle of Domestic Violence

The concept of the cycle of domestic violence was developed in 1979 by Dr. Lenore Walker in which she described the stages an abusive relationship moves through leading up to the violent event (Gaviria et al., 2017). The cycle of violence points out the perpetrator's repetitive actions that hold victims back when they decide to leave the relationship.

Marvin (1997) described the three phases of domestic violence. The first stage is the tension build-up phase in which tension between the couple starts to increase. The tension build-up can include verbal, emotional, or financial abuse. In this stage, victims are afraid to do anything wrong because the behavior of the abuser becomes very intense. There usually is verbal, emotional, and financial abuse during this phase.

The second stage is the acute explosion phase which includes the peak of the violence. During this phase, the perpetrator experiences some kind of pleasure as a result of the violence and the behavior may become a habit.

The third phase is the honeymoon phase. Marvin (1997) described the honeymoon phase as having three different periods. The first is the remorse period in which the perpetrator begins to feel bad about his or her behavior and begins to justify the behavior to self or others. The second is the pursuit period in which the perpetrator might make promises to victims to never be violent again. "It could seem as though the perpetrator has changed and this point, the person experiencing the violence can feel confused and hurt but also relieved that the violence is over" (Marvin, 1997, p. 6). The third is the denial period in which everything seems to be normal in the eyes of the perpetrator and victims. According to Marvin (1997), during this period the individuals are happy and want to continue their relationship.

Despite the honeymoon phase, the cycle of domestic violence does not end (Gaviria et al., 2017). Knowing the phases of domestic violence assists victims and their helpers in understanding the behaviors of perpetrators. Marvin (1997) has helped

counsels by demonstrating that the honeymoon period does not mean that domestic violence is over within a family.

Cultural Components of Domestic Violence

According to the World Health Organization (2009), cultural and social norms are rules or expectations within a cultural group and individuals are strongly discouraged from violating these norms. Cultural and social norms influence the shaping of individual behavior which includes the use of violence (World Health Organization, 2009). According to the World Health Organization (2009), even though tough laws and policies exist that tell members of society that violent behaviors are not acceptable, cultural and social norms sometimes tolerate or even encourage violence. In some countries, a man has the right to discipline a woman and restrict her freedom.

Culture plays a significant part in accepting domestic violence in the United States. Gillum (2019) concluded that intimate partner violence is a serious public health concern that has a huge impact around the world. Unfortunately, individuals who have low socioeconomic status, are elderly, live in urban areas, have a minority sexual orientation, or are living in poverty experience domestic violence at a much higher rate than their counterparts (Gillum, 2019). Those living in poverty in both developed and developing countries are more vulnerable than those with wealth and the impact is more significant (Gillum, 2019). According to Kasturirangan et al. (2004), low socioeconomic status can also make the connection between culture and domestic violence more complicated. In many cases, women who have been abused who are from cultural and ethnic minorities may be members of the second, third, or fourth generations of their

family in the United States (Kasturirangan et al., 2004). These women may suffer abuse

not only from their partners but from the larger society. Women from cultural minority

groups may have been encouraged to remain silent and even deny that the abuse ever

happened by their communities in order to preserve cultural values (Kasturirangan et al.,

2004).

Drug and Alcohol Abuse Associated with Domestic Violence

Perpetrators are violent with family members for many reasons, and drugs and

alcohol play a significant role in intimate partner violence. Yalch and Levendosky (2018)

agreed that the use of alcohol is a widespread problem among survivors of intimate

partner violence, however not all women who experience intimate partner violence are

alcohol users. Spousal abuse has been identified as a predictor of developing a substance

abuse and or addiction problem (Soper, 2014). Women in abusive relationships have

reported being forced into using drugs and alcohol by their partners (Soper, 2014). More

than 20% of male perpetrators have reported using drugs or alcohol before they became

involved in a domestic violence incident, and many victims also reported having

consumed alcohol or drugs (Soper, 2014).

Individuals involved in domestic violence and substance abuse share behavior

features that are related including loss of control and obsession (Irons & Schneider,

1997). Sexual abuse is also a feature of domestic violence and substance addiction (Irons

& Schneider, 1997). In domestic violence relationships in which there is also substance

abuse, abusers usually lose control of their emotions and are angry (Bent-Goodley, 2004).

When a person is struggling with substances the number of domestic violence incidents

increases; however, domestic violence and addiction do not have a causal relationship (Bent-Goodley, 2004). Many experts have established that substance abuse and domestic violence are related; however, they are still unable to prove that domestic violence is a direct result of substance abuse (Bent-Goodley, 2004). Research has confirmed that substance abuse is not the cause of domestic violence; however, domestic violence might increase in relationships where there is substance abuse.

Domestic Violence in African American Families

Domestic violence is an issue across the globe in every race and culture; however, African Americans experience an unequal amount of domestic violence compared to White Americans (Hampton & Gelles, 1994). Even though domestic violence has been identified as a major health issue for African American women, African America women do not appear to view domestic violence as an issue that they should be concerned about (Avery & Avery, 2019).

According to Jones (2014), Black women are almost three times more likely to experience death as a result of domestic violence than White women. Even though Black women make up only 8% of the population, in 22% of homicides Black Women are victims, making this one of the leading causes of death for Black women ages 15 to 35 (Jones, 2014). African American women are less likely to report any type of domestic violence and often do not seek help when there is an issue with domestic violence (Jones, 2014). According to Bent-Goodley (2004), this is due to a lack of cultural competence among service providers, racial loyalty, and gender entrapment. Bent-Goodley (2004) concluded that the lack of cultural competence among service providers has resulted in

differential treatment and oppressive practice measures making this a huge barrier when shelter workers attempt to help African American domestic violence victims.

Another barrier to victims seeking treatment is their loyalty to their abuser. African American women sometimes make decisions to protect their community and their partners instead of taking care of their own physical, psychological, or spiritual health (Bent-Goodley, 2004). Many African American women are afraid to report domestic violence due to fear of being discriminated against and because they know that African American men are not treated fairly within the criminal justice system (White, 1994). Because of fear of the criminal justice system and what happens to African American men, African American woman sacrifice their own needs to protect their families, keep their relationship together, and avoid community embarrassment (Bent-Goodley, 2004). Another issue is the idea of gender entrapment, which occurs when Black women are battered by their male partners and later commit crimes as a result of being battered (Weaver, 2011).

African American women were raised to remain loyal to their partners and they feel sorry for their partners and tolerate the negative behaviors of their partners (Weaver, 2011). According to Bent-Goodley (2004), despite knowing all these connections between domestic violence and African American women, there is still a limited understanding of how African American women see domestic violence.

Single Parent Families

Zill (2015) found that children of divorced parents and of parents who have never been married are more likely to have been exposed to domestic violence than children in

married two-parent households. Exposure to domestic violence is fairly low among children residing in the home where both parents are married to each other (Zill, 2015). When looking at the rates of children living with a divorced or separated parent, the rate of witnessing domestic violence was seven times higher (Zill, 2015). It is estimated that about 144 children per 1,000 have had one or more experiences witnessing domestic violence (Zill, 2015).

Children Raised by Other Family Members

In the African American culture, grandparents play a very important part in the caregiving role of children (Weaver, 2011). If a man becomes incarcerated, his children usually remain with their mother; however, if the mother becomes incarcerated, the father usually does not become the primary caretaker (Weaver, 2011). Instead, the maternal grandmother usually takes the responsibility of being the primary caretaker and raises her daughter's children (Weaver, 2011). In the African American culture, a grandmother taking the parental responsibility is nothing new. "The extended family network in the African American community dates back to slavery, and the grandmothers were relied upon to take in both biological as well as non-biological children who were abandoned by their parents or guardians and other wayward members of the family" (Weaver, 2011, p. 157). Historically, African American mothers were not always the primary caregivers of their own children and sometimes spent more time raising White children than their own (Weaver, 2011).

Education and Poverty Levels of African American Families

According to Olszewski-Kubilius and Corwith (2018), poverty is operationalized in several ways. In the United States, it is quite common for low-income students to be identified by what they qualify for such as federal student aid and free reduced lunch programs at school (Olszewski-Kubilius & Corwith, 2018). Poverty varies by race and is higher for Blacks. According to Simms et al. (2009), more than half of low-income Black families (53%) are considered poor compared to 39% of Whites, 44% of Hispanics, and 42% of other-race families.

Incarceration Rates of African American Men

According to Wilson (2014), the United States has 25% of the world's prisoners and most of those prisoners are African American. According to Wilson (2014), African Americans are being imprisoned at rates six times higher than Whites. The parents are not the only ones affected by high incarceration rates. According to Murray and Farrington (2005), with this rate of incarceration, more than two million children have at least one parent incarcerated, and these children are at a higher risk of being incarcerated themselves. Wilson (2014) also stated that schools play a significant role in the prison crisis. More than half of the individuals in prison do not have a high school diploma.

Unique Features of Domestic Violence in African American Families

There are many unique features of domestic violence in African American families. According to Thompson and Bazile (2000), current data indicate that African American women continue to experience a much higher rate of intimate partner homicide compared to women of other races. According to Thompson and Bazile (2000), African

Americans tend to not only take care of themselves but others around then. According to Thompson and Bazile (2000), African American women were responsible for keeping the family together; therefore, they avoid disclosure and deny that there are any problems needing to be addressed in their family dynamics.

Studies of Domestic Violence in African American Families

According to Ridings et al. (2018), there are many negative outcomes that are associated with domestic violence with depression being one of the predominant mental health problems. In a study conducted with 548 female caregivers, Ridings et al. (2018) concluded that those with higher social support reported lower symptoms of depression than those with less social support. The findings showed that it is very important to connect families experiencing domestic violence to supports such as social support and family resources to help alleviate some of their depressive symptoms.

Animal abuse sometimes occurs in homes of domestic violence. According to McDonald et al. (2019), research has shown that children living in households where there is domestic violence have a higher risk of being exposed to animal abuse. These children are also at a higher risk of abusing animals themselves (McDonald et al., 2019).

Treatment Programs for Domestic Violence Perpetrators and Family Members

There are many treatment programs for domestic violence perpetrators and family members. According to Meichenbaum (2007), some of these programs include batterers' intervention programs, integrated multifaceted community-based interventions, conjoint couple's treatment, support groups, and prevention and relationship education programs.

Batterer's intervention programs are gender specific groups focusing on anger management where accompanying patriarchal beliefs are addressed with the perpetrator (Meichenbaum, 2007). Batterer intervention programs are created to help offenders understand their feelings when they are becoming violent. The idea behind the batterer intervention programs is to help batterers understand the causes of their violent behavior and learn how to cope in a non-violent way. According to Aaron and Beaulaurier (2017), although batterer intervention programs remain very important in maintaining the safety of victims, research shows that these programs have not been effective in making a difference in the rate of recidivism.

With integrated multifaceted community-based programs, the focus is on crisis management to reduce imminent risk of violence and to increase family members' safety by providing victims with shelter locations, counseling services, legal system resources, and safety planning (Meichenbaum, 2007). When women decide to leave an abusive relationship, for many women their children are their primary concern. According to Sullivan (2006), many women may or may not seek services for this very reason and many times they remain in the abusive relationship. These programs are very important because many domestic violence victims do not have a plan as to where they will go and what they will do with their children when they decide to leave the perpetrator.

Conjoint couple's treatment provides individual and treatment for couples who have experienced low to moderate domestic violence (Meichenbaum, 2007). According to Armenti and Babcock (2016), conjoint treatment works better when the intimate partner violence is not motivated by power and control.

Support groups are available to all battered women. Support groups specifically for battered women provide advocacy services when needed (Meichenbaum, 2007). Advocacy services include access to information and other needed services. Victims get the opportunity to learn about their rights and responsibilities. Support groups empower victims and assist them in completing safety planning and provide needed case management services (Meichenbaum, 2007).

Prevention and relationship education programs provide services for both adults and children (Meichenbaum, 2007). The idea behind prevention and relationship education programs is to help the couple develop and sustain a healthy romantic relationship (Stanley et al., 2020). A healthy romantic relationship is very important to the well-being of adults, families, and children (Stanley et al., 2020).

Court Interventions

It is estimated that at least 300 judicial systems nationwide use special domestic violence courts to hold perpetrators accountable for their actions and require perpetrators to attend domestic violence programs to monitor and protect victims (Mills et al., 2006). Domestic violence programs normally dismiss the batterers' cultural, racial, or religious backgrounds or childhood histories of abuse because service providers believe these factors have a minimal impact on the rehabilitation of batterers (Mills et al., 2006). According to Mills et al. (2006), when the Duluth Model was implemented, courts started sending offenders to batterer intervention programs and perpetrators were treated in a group setting away from their victims. The strategy used in the Duluth Model is to

address each individual's legal status and treatment needs individually (Mills et al.,

2006).

Family and Criminal Court Domestic Violence and Mandatory Counseling

Programs

Labriola et al. (2012) stated that domestic violence courts mandate batterer

programs and order offenders to attend these programs. According to Labriola et al.

(2012), most domestic violence courts order perpetrators to complete substance abuse

treatment, mental health services, or parenting classes when necessary. According to

Labriola et al. (2012), more than half of domestic violence courts require judicial

monitoring of perpetrators after they have heard the case and more than 75% of domestic

violence courts-imposed penalties when perpetrators failed to comply with court orders.

Spousal abuse usually is handled in family court and judges play a very important

role in the criminal justice system; however, police departments have created policies for

both misdemeanors and felony domestic violence and have developed arrest policies for

both misdemeanor and felony domestic assaults (Goolkasian, 1986). As a result, more

family violence cases are being heard before criminal court judges (Goolkasian,

1986). Educational programs have also been developed as a result of the overwhelming

number and complexity of domestic violence cases in criminal and family courts (Jaffe et

al., 2018).

Diversion Programs for Domestic Violence Offenders

According to Sadusky (2003), diversion in domestic violence cases often includes

formal and informal arrangements. Some courts require that the perpetrator enter an

admission of guilt and be in compliance with specific sanctions, protections, and batters'

treatment programs (Sadusky, 2003). In some states charges are dismissed once the

perpetrator completes the diversion program ordered by the courts (Sadusky, 2003).

According to the National Institute of Justice (2011), a diversion program that is being

often used with domestic violence clients is the domestic violence misdemeanor

diversion program. The goal of this program is to reverse the cycle of domestic violence

and keep the family together (National Institute of Justice, 2011). According to Davis and

Smith (1995), over the past few decades, the criminal justice system has changed the way

it responds to domestic violence incidents. Davis and Smith (1995) stated that one of the

ways the criminal justice system responds to domestic violence incidents has been with

arrests, restraining orders, and court-mandated treatment for batterers. According to

Bennett and Williams (2001), batterer intervention programs are intended for men who

have been arrested for domestic violence and those who would have been arrested if their

actions were public. With the domestic violence misdemeanor diversion program, the

batterer is required to complete 26 weeks of classes that include a substance abuse

evaluation and any other treatment the assessor deemed appropriate (National Institute of

Justice, 2011).

According to Ferraro (2017), there is not an exact number of batterer intervention

programs operating in the United States; however, the three major types of batterer

intervention programs are psychoeducational, cognitive behavioral therapy (CBT), and

psychodynamic approaches. Psychoeducational treatment implies that men have the

capability to stop being violent regardless of their past traumas (Ferraro, 2017). This is a

group treatment that involves 10-12 men for 26 to 53 weeks with a curriculum that includes didactic presentations, dialogic exchange of ideas, videos, role playing, and homework assignments (Ferraro, 2017). The goal of using Cognitive Behavioral Therapy (CBT) is to focuses on changing the negative thought patterns of participants and includes negative childhood exposure to violence (Ferraro, 2017). Psychodynamic programs usually involve psychological treatment with discussions of negative thought patterns, gender, and power (Ferraro, 2017).

Probation and Parole of Offenders

Probation and parole were established in the United States in the middle of the 19th century (Burrell, 2005). Probation and parole were founded with the idea that offenders could change using the correctional system (Burrell, 2005). Probation and parole allow criminals to avoid going to prison or to be released from prison while still under supervision for the remainder of their prison term. According to Binnall (2019), most of the criminal offenders who serve a portion of their prison time are likely to serve a period of post-incarceration supervision, also known as parole, which requires the offender to comply with conditions based on their parole sentence and condition. Burrell (2005) agreed that probation and parole play a particularly key role in the administration of both the criminal and juvenile justice systems. According to Burrell (2005), probation and parole officers supervise most offenders and make sure the offenders are meeting their mandates and are improving their effectiveness as citizens.

Programs for Incarcerated Offenders

While incarcerated, offenders are provided with the opportunity to complete

programs available to them. Some of these programs that are being offered to

incarcerated offenders may include domestic violence, substance abuse, and mental

health treatment. Some institutions might also offer classes such as literacy classes,

English as a Second Language (ESOL), parenting classes, wellness education, and adult

continuing education. According to Marquis et al. (1996), these programs are based on a

two-week assessment that investigates the batterers' criminal history, behavior,

personality characteristics, treatment motivation, criminal sentiments, and loyalty to

follow the inmate code.

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Rate of Recidivism

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Recidivism is the likelihood to relapse and a person's tendency to relapse into an

old behavior. According to Johnson (2008), there are several studies that talk about

offenders' rates of recidivism while on probation. Johnson (2008) found that male and

younger offenders are more likely to be re-arrested. Unmarried offenders are re-arrested

more frequently than married offenders (Johnson, 2008). Education level also plays a big

part with re-offending with those with less education re-offending more often (Johnson,

2008). According to Johnson (2008), there are only a few studies that have evaluated

offenders convicted of domestic violence offenses.

Olson and Stalans (2001) examined the probability of re-offending among 411

offenders on probation and compared batterers with other violent offenders. They found

that the re-arrest rate was remarkably similar. According to Johnson (2008), the length of

the sentence played a significant role in offenders committing new crimes, in that those with shorter sentences re-offended less often. According to Olson and Stalans (2001), the offenders' race and criminal history were not a significant factor of re-arrest for domestic violence batterers.

Mental Health Professionals

According to Lee et al. (2003), treatment programs for domestic violence offenders started as voluntary programs for men who had battered women as a result of male-controlled beliefs. Currently, treatment programs are in place to coordinate a systemic response to domestic violence where the court system sends domestic violence offenders to receive group treatment while they are on probation as an option to serving sentences in jail (Lee et al., 2003).

Lee et al. (2003) stated that most treatment programs are influenced by three major perspectives: the feminist perspective, the individual perspective, and the family system perspective. The feminist perspective focuses on sociocultural factors and a gender analysis of power (Lee et al., 2003). The goal of this treatment program is to raise offenders' awareness about sex role and for offenders to take responsibility for their own abusive behavior (Lee et al., 2003). The idea with individual perspective is to identify the causes of violence and the offenders' history on an individual basis (Lee et al., 2003). With the individual perspective, the offender's mental health, substance abuse, and personality issues are addressed (Lee et al., 2003). The family perspective sees domestic violence from a relationship perspective (Lee et al., 2003). The goal of treatment is to

improve communication and conflict resolution between the couple and create a healthier

relationship (Lee et al., 2003).

Specialized Training Needed

Working with domestic violence clients requires specialized training. According

to Logan and Walker (2018), advocacy and safety planning could be the center of

providing services to partner violence. Logan and Walker (2018) stated that although

there is substantial literature on community behavioral health or case management, there

is little literature on safety planning and ways to measure the effectiveness of various

approaches to safety planning. It is especially important for the counselor to be aware and

familiar with safety planning and to be able to determine when a safety plan is needed.

Mental health professionals working with domestic violence clients are trained in many

theoretical models each of which are based on different values and assumptions (Hunter,

2001). Specific treatment models are based on respect for clients' autonomy, beneficence,

non-maleficence, and justice (Hunter, 2001). Ethical considerations are particularly

important when working with domestic violence clients; therefore, counselors should be

trained to ensure the privacy and confidentiality of their clients.

Macy et al. (2009) reviewed 43 training manuals from all domestic violence and

sexual assault coalitions in the United States. The authors concluded that the manuals

demonstrated a strong consensus regarding core services for survivors that included crisis

services, legal and medical advocacy, support groups, individual counseling, and shelter.

They also found that there was disagreement in approaches to assist victims related to

whether to continuously staff domestic violence shelters and whether it is possible for combined agencies to offer both effective domestic violence and sexual assault services.

Stress and Burnout

Counseling professionals working with individuals who have experienced intimate partner violence (IPV) have reported that the violence has an impact on the psychological, emotional, and physical well-being of their clients (Brend et al., 2019). Counselors reported feeling disturbed, powerless, emotionally drained, and angry by the degree of violence they have heard from their clients (Brend et al., 2019; Iliffe & Steed, 2000). Many professionals reported feeling isolated while working with domestic violence clients (Brend et al., 2019). Many have reported that some of the stress they feel is related to hearing the descriptions of the violence against children. Mental health professionals have reported being disturbed when their clients go back to the violent relationship (Iliffe & Steed, 2000). Many times, counselors who have been exposed to these traumatic events have a very hard time addressing their own secondary trauma they have experienced. According to Brend et al. (2019), counselors who are not comfortable exposing their own suffering might not be able to get the support and treatment needed to address their trauma. Often, they continue working with the clients and suffering from the experience (Brend et al., 2019).

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Summary

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Literature on domestic violence, also known as intimate partner violence, is immensely popular in the counseling field. Literature reviews have described several types of domestic violence and the roles each individual plays. Intimate partner violence

is a concern not only in the United States but all over the world. Gillum (2019) agreed that intimate partner violence is a serious public health concern and has a significant impact all over the world. For many counselors, working with this population can be exceedingly difficult and special training is required to properly provide the services needed. Some of the most needed training is in the areas of advocacy and safety planning (Logan & Walker, 2018). In this chapter, I have discussed the overview of African American families in the United States and domestic violence. I also have reviewed statistics, rates of incarceration, and unique features of domestic violence as well as treatment approaches for domestic violence victims and perpetrators. In addition, I discussed the various phases of domestic violence. In Chapter 3, I discussed the method I used in conducting this study.

Chapter 3: Research Method

Introduction

In this study, I explored lived experiences of counselors who may or may not be licensed and provide in-home counseling services to African American men who are repeat domestic violence offenders and received a subsequent abuse report within 6 months after in-home counseling services were discontinued. In this study, I explored experiences of counselors who provide counseling services to African American repeat offenders. By studying experiences of counselors who have been providing services to this population, I was able to identify information about these counselors, their approaches, and their work so that an understanding can be developed regarding their experiences.

According to Sheehan (2014), transcendental phenomenology (TPh) research brings extra dimensions to the study of human experiences through qualitative research. TPh was developed by Husserl and is a philosophical approach to qualitative research involving understanding the experiences of human beings (Sheehan, 2014). Results of this study provide a better understanding of experiences of counselors who provide services to African American men who are repeat domestic violence offenders. In addition, results will inform counselor educators regarding how to better prepare counselors who provide counseling services to this population.

In this chapter, I describe the methodology that I used to study lived experiences of counselors who provide services to African American men with repeated domestic violence abuse reports after termination of in-home counseling services. In this chapter, I

also describe the research design I used in this study, as well as the research question. I also addressed issues of trustworthiness and describe the participant selection process I used and location of data collection. I also reviewed procedures I used for data collection and analysis.

Finally in this chapter, I concluded with an overview of ethical considerations related to the study. I addressed how data were stored and ethical challenges and informed consent was obtained from participants.

Research Design and Rationale

The purpose of this transcendental phenomenological study was to understand lived experiences of counselors who provide in-home counseling services to African American men who are repeat domestic violence offenders and received a subsequent abuse report within 6 months after in-home services were discontinued. My goal was to try to develop an understanding of experiences of counselors who provide services to these men, and in turn, develop a better understanding of the lives of men who are repeat offenders, and find out what counselor educators need to know in order to better prepare counselors who provide counseling services to this population. TPh was developed by Husserl and is a philosophical approach to qualitative research methodology involving understands the experiences of human beings (Sheehan, 2014). The rationale for TPh research brings extra dimensions to the study of human experiences through qualitative research (Sheehan, 2014).

For this research study, transparency was very important because being transparent increases the credibility of a study. In order to ensure ethical safety of

participants, detailed disclosure statements were provided to participants regarding any

potential harm they might experience as a result of being interviewed. I provided

participants with written information via email stating the purpose of the study. This

allowed them to have a good understanding of what to expect. Once participants chose to

continue with the research process, I sent an additional email message to them that

included a detailed disclosure statement and consent form.

Research Question

I used one central research question to guide this study:

What are the lived experiences of counselors who provide services to African

American men with repeated domestic violence abuse reports after termination of in-

home counseling services?

My interview protocol is included in Appendix A. During my initial interactions

with participants, I explained how results of this study might help counselors work more

effectively with this population and then asked interview questions listed in the protocol.

A qualitative research design was most appropriate for this study because

qualitative designs are the best way to gather information to obtain research results that

cannot be measured (Berg, 2007). Qualitative designs include naturalistic observations

and interviews (Padgett, 2016). In this research study, I analyzed whether counselors who

were working one-on-one with African American men with repeated domestic violence

abuse reports needed to properly work with these men, as well as what they needed to

know to better prepare themselves to work with these men. The qualitative approach

allowed me to understand counselors' lived experiences as they worked with this

population. Since the lived experiences of counselors who provide in-home counseling services to African America men who are repeat domestic violence offenders has not been a focus in counseling literature, this transcendental phenomenology study allowed me to explore firsthand experiences of counselors who work with this population.

For this study, I used a phenomenological methodology because it allowed me to provide rich descriptions and personal meanings of lived experiences related to experiences of counselors who provide services to African American men with repeated domestic violence abuse reports. While ethnography can be used to identify shared patterns of a cultural group, it was not appropriate for my study since culture was not the focus of this research project. I considered a case study approach, which allows development of detailed portrayals and case analysis of a single case or numerous cases, but this approach did not fully meet requirements of focusing only on experiences as lived.

Phenomenology is an approach to research that involves understanding the human experience (Neubauer et al., 2019). Lived experiences involving a phenomenon that have distinctive attributes and that are seen by individuals who experienced that specific phenomenon (Neubauer et al., 2019). I focused on only lived experiences.

Role of the Researcher

In this section, I define and explain my role and reveal professional relationships I may have with participants. I also discuss how I planned to manage any biases.

I am the program manager for one of the agencies providing services in my geographical location to the population studied in this project. I have participated in

numerous trainings relating to this population. As the researcher, my role was to gather

the most accurate information. I conducted one-on-one interviews with each participant

using open-ended questions included in the interview protocol. If follow up questions

with participants were required, I did this through confidential email messages. As a

professional working with this population in the system of care, being aware of my biases

was very important. For this reason, I consulted with my dissertation committee members

during the entire dissertation process to increase my objectivity. I also used a peer

reviewer.

I took into consideration any potential issues I had that could influence my

objectivity. My goal was to present myself and results in an objective manner.

My relationship with participants was professional. I have had the opportunity to

work with counselors from both programs in my agency and maintained professional

relationships with those I have worked with. Power over participants was not an issue

since I did not have any supervisory relationship with any counselors who participated in

this research project.

Member-Checking

Member checking was very important in this process. Member checking, also

known as participant or respondent validation is a way to increase the credibility of the

results (Birt et al., 2016). I look for common themes among participants, I cross-analyzed

each transcript.

I verified with the participants what they said in the interviews. I sent a summary

of each participant's interview to participants to check for accuracy and they were asked

to respond. I will destroy the tapes and study materials within 4-5 years of this study. I will take extra time to destroy the tapes and study materials as a precautionary measure.

Peer Reviewer

A peer reviewer plays a key role in a research project and helps with validating the research. A peer reviewer can also help with improving the quality of a research proposal (Smith, 2006). For this research project, I asked a peer mentor and clinical supervisor from my employment setting to review what I was doing throughout the research process. This person reviewed all interview transcripts and asked questions regarding what I wrote during the study. This allowed me to maintain an objective standpoint. This person signed a confidentiality agreement and agreed to keep all information from the study confidential.

Self-Disclosure

Trying to understand what goes on in the lives of counselors who may or may not be licensed who provide in-home counseling services to men who are repeat domestic violence offenders has been one of my passions for as long as I can remember. It has always been my belief that all people deserve a second chance to do the right thing and we are obligated to give them that second chance. I have been working with this population for the past five years. In my experience, I have seen positive changes in those who have been able to get the services they need.

I anticipated that counselors who participated in this study would communicate their knowledge of this population but would not have a clear understanding of the men they counsel who are repeat domestic violence offences who have received a subsequent

abuse report after in-home counseling services were discontinued. I also believe that counselors who provide services to this population might be prejudiced against the men. My perception was that counselors who work with this population do not have the training they need to be effective in working with these men. Counselors often provide services that are not suitable to meet the needs of these men. Providing details of my views of counselors who provide services to this population allowed me to state my biases before I interviewed the participants. Hopefully by acknowledging my biases, I was able to be objective as I recorded and interpret what participants in this research project later told me.

Discrepant Information

For this research project, I presented evidence for themes I identified. I also presented any information that contradicted the themes I identified. By processing information that was different from the themes I identified provided trustworthiness for the study and helped me remain objective and truthful about the results.

Rich and Thick Descriptions

Rich and thick description is a way for a researcher to establish credibility for a study. For this research project, I provided detailed descriptions of settings and provided lengthy direct quotes from participants. Identifying the various themes was extremely important so I provided quotes from each participant to support each theme I identified.

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Criteria for Selecting Participants

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The sampling method I selected for this qualitative research study was convenience sampling. Convenience sampling is the process of selecting those

individuals who are easy to reach**.** It is the process of identifying individuals who fit the specific criteria of a study the researcher is looking for in any way possible (Emerson, 2015). For this study, the individuals were relatively easy to reach. For this study, I put up flyers at the different agencies with permission from the agencies and I asked potential participants contact me if they were interested in participating. I also sent out email messages or posted announcements asking individuals to consider participating in the study. To ensure participants in this study had the features I was looking for, I selected participants using telephone interviews. I screened potential participants first over the telephone to assure that they met the criteria. I also used a snowball approach to recruiting in that I asked those who volunteered to participate to identify others who were eligible for the study who I could ask if they would be willing to participate as well.

My plan was to recruit volunteers from two in-home programs providing this type of service to African American men with repeated domestic violence abuse reports after termination of in-home counseling services. Both programs have a total of 20 counselors who may or may not be licensed who were potential study participants. According to Guest et al. (2020), data saturation is commonly used for estimating sample sizes in qualitative research. I anticipated that individuals would readily volunteer to participate in this study because they know me as a colleague, and I have positive relationships with them. For this study, the expected number of participants was between 8-10 participants, and I assessed when saturation had been reached. Permission to interview the counselors for this study was obtained from the agencies and the counselors themselves.

Data Collection Methods

I collected qualitative data for this study verbally. I collected the data by means of one-to-one interviews with counselors selected. I held the interviews face-to-face via Zoom. I transformed the verbal data into written text for analytic use. I transcribed all participants' verbal face-to-face interviews into written text. I used Otter (https://otter.ai/) to do my transcriptions. Transcribing face-to-face interactions with participants can be somewhat challenging (Kreuz & Riordan, 2018); but it was important that I was able to examine the transcripts to identify the deferent themes I found in the data.

I met with the participants wherever they were so that they would not have to travel to meet with me and to help them to be comfortable in their own environments. They were interviewed by Zoom. Data was collected from eight participants.

According to Turley et al. (2016), when talking about lived experience, it can be difficult for participants to communicate their experiences because they are being asked to reflect upon certain things that normally are taken for granted. For this reason, I scheduled interviews and expected them to last between 45 and 60 minutes. Due to the COVID-19 pandemic, I conducted interviews with participants using Zoom. I recorded each interview via Zoom. Participants and I met in a private setting to protect the privacy of each individual. I transcribed each interview verbatim. I used a secure computer using Word documents to take notes and process each interview. Taking notes helped me keep track of my interviews and thought processes. I stored recordings and transcripts in a locked cabinet in my home office or on my password secured laptop. I was the only one who had access to the transcripts. I removed identifying information from transcripts

prior to data validation. After a period of time, all material will be shredded by me. See

Appendix B for copies of the Informed Consent Form and Appendix B for the Consent to

Audio Record Form.

Due to the nature of this study, data collection for this study was very important.

Prior to interviewing each participant, I collected personal and professional information

from participants. I asked participants to give me information about the clients they

served and the number of years they had been working in the field of intensive in-home

services. I asked participants questions about their age and about licenses and

certifications they held. I asked what type of master's degree they held and the number of

years since earning their master's degree. It was also important to know how long they

had been working in the field, so I asked participants specifically about the number of

years of experience they had working with this population. Appendix C includes a short-

written survey I asked participants to complete prior to being interviewed. I asked

participants first to review summaries of their interviews with me that I sent to them and

also asked them for their reactions and feedback. Later, I sent a copy of the themes I

developed and asked them again to provide me with their reactions and feedback. I took

their input into consideration as I developed the results for this study.

Data Analysis

For this study, the approach I used was transcendental phenomenology created by

Husserl to bring an added dimension of human experience to the study (Sheehan, 2014).

The idea is to set aside the beliefs and judgments of researchers which are based on

experiences which result in the making of a person's noesis, noema, noetic, and noematic

(Sheehan, 2014). Noesis, noema, and noetic together are very important in understanding transcendental phenomenology (Moustakas, 1994). Noesis and noema work together. It is our perception of the mind and how we see things (Moustakas, 1994). Noetic is related to our intellectual abilities whereas noematic correlates with the specific object (Moustakas, 1994).

For this study, qualitative data was collected, recorded on tape, and stored for later use and analysis. Qualitative data collection consisted of individual interviews. While reviewing each transcript, I evaluated whether a follow up interview was needed.

To start the analysis, I used provisional coding that I had developed from previously specific labeled codes. According to Lindlof and Taylor (2017), one of the most important ways to engage oneself in, organize, and analyze the data is through coding. Lindlof and Taylor (2017) described coding as the process of reading a copious amount of raw data, assigned descriptive labels, codes to most lines of text, grouping the data based on relevant characteristics, and eliminate the chaff until the remaining portion are organized in such way as to be useful for generating analytic insights. Coding helped me when it was time choose the concepts and themes I discovered from the interviews I conducted.

The final step was to organize the data into information that that could be easily understood. The key was to start analyzing the data in a way that was meaningful. The idea was to be able to read and process the information so differentiating qualitative differences became the ultimate focus of my analysis (Chenail, 2012). For example, information obtained from the participants might be vastly different qualitatively, which

means I would need to process the information differently. Once I had completed the organization step, I drew conclusions from the data and submitted a draft of the themes I had developed to all participants and asked them to provide feedback.

Trustworthiness

I maintained trustworthiness using several methods. I listened to the interviews and then reviewed the word-by-word transcriptions. I had the data available electronically for additional review if needed. I used member checking, utilized a peer reviewer, provided self-disclosure, disclosed discrepant information, and provided rich and thick descriptions of what participants said in their interviews. In addition, I kept a reflective journal to ensure trustworthiness was maintained throughout the study.

Ethical Considerations

In order to ensure ethical safety of participants, I provided them with a detailed disclosure statement regarding any potential harm they might experience as a result of being interviewed. I provided participants with written information via-email stating the purpose of the study. This information allowed them to have a good understanding as to what they are getting involved in. Once participants chose to continue with the research process, then I sent them an additional email message that included a detailed disclosure statement and consent form. The disclosure and consent documents included the purpose of the study, the data collection process, procedures, a statement that this study posed no potential risk to participants, a statement that participants could withdraw from the study at any time, and a signature line. A copy of the disclosure and consent document that I provided to potential participants is found in Appendix B.

According to the ACA Code of Ethics (2014), standard G.1.e, counselors conducting research are to ensure the emotional, physical, or social welfare of participants throughout each research phase. In order to protect the privacy of participants, I asked participants to select a pseudonym and used that name selected by participants to refer to them throughout the document. This way the participants cannot be identified by what they said during the interviews.

In this study, I asked participants to discuss their experiences working with African American men with a repeated domestic violence history. I did not anticipate that there would be any harm to participants; however, in the event a participant experienced any distress as a result of being interviewed, I provided appropriate referrals where they could access counseling services.

I locked the laptop that contained data from this research project and written documents generated in a file cabinet kept within my home office. I stored recorded interviews and the data transcriptions on a password-protected computer. I encrypted all email contacts.

Summary

The methodology I chose for this study was intended to explore the lived experiences of counselors who provide in-home counseling services to men who are repeat domestic violence offenders who received a subsequent abuse report within six months after in-home counseling services were discontinued. In this study I sought to identify the struggles counselors face working with this population. I used a qualitative inquiry to uncover specific themes shared by the counselors working with this

population. The qualitative approach allowed me to gather the information when trying to obtain results that cannot be measured (Berg, 2007). I demonstrated in the literature review that domestic violence experienced between caregivers has decreased drastically if services are involved and that workers need special assessment tools to utilize to properly identify the domestic violence among family members (Ogbonnaya & Kohl, 2016.)

In this methodology section, I began with an introduction to the research problem and rationale that led to this phenomenological qualitative study. I included information on the selection and ethical treatment of the participants, followed by the role of the researcher. Finally, I reviewed procedures on how the data was to be collected and analyzed, and I discussed how I achieved trustworthiness. I chose this phenomenological design because it allowed me to gain an understanding of the lived experiences of counselors who provide in-home counseling services to men who are repeat domestic violence offenders.

Finally, to develop the ideal participation from each participant, I developed a relationship with program managers and directors. I spent time with the leadership teams getting to know exactly what their work involved and some of the barriers they face on a day to day basis. My committee members and I determined that I would include a minimum of 8-10 participants in this study and that I would interview more participants if necessary in order to reach saturation.

Chapter 4: Results

Introduction

The purpose of this qualitative phenomenological study was to understand lived experiences of counselors who provide in-home counseling services to African American men who are repeat domestic violence offenders and received a subsequent abuse report within 6 months after in-home services were discontinued. In order to understand these experiences, I used one central research question. The central research question for this study was:

What are the lived experiences of counselors who provide services to African American men with repeated domestic violence abuse reports after termination of in-home counseling services?

I used an interview protocol for the interviews (see Appendix A). During the interviews, I gave participants prompts or asked them interview questions.

In this chapter, I describe methods used to collect data, demographic information about participants, and settings for each interview. I provide a detailed explanation of data analysis procedures, which includes themes that emerged from data. In this chapter, I also include issues related to trustworthiness as well as discrepancies in data. Finally, I provide a summary of the study and introduction to Chapter 5.

Setting

Due to the COVID-19 pandemic, I conducted all interviews for this study using the Zoom platform. The capability to securely record Zoom interviews was one of the key advantages in terms of data management and security. All eight participants were

able and willing to use Zoom to conduct interviews and had no problems. There were no costs for any participants to access Zoom. I gave each participant a link via email to use for each interview.

During each interview, I sat in a room that was private with no interruptions. All eight participants were also in private settings, and I conducted all interviews without any interruptions. During one of the interviews, a participant explained to me that she put her son to bed and there was a good possibility that her son might wake up. Another participant stated that she wanted to complete the interview within an hour so that she could have a chance to eat dinner with her family. Neither one of these interviews was affected by these participant comments.

Demographics

Because the purpose of the study was to understand lived experiences of counselors who provide in-home counseling services to African American men who are repeat domestic violence offenders, every participant was a counselor. A demographic overview of participants is in Table 1. All participants chose their own pseudonyms in order to protect their identity. I used these pseudonyms throughout this study.

Table 1: Demographic Overview of Participants

Participant	Birth Year	Type of Masters Degree	Year Earned Master's Degree	Licensures and Certifications	Population of Clients Served	Years working with this population	Number of Years working with African American man with Repeat Domestic Violence	Racial and Cultural Identity	Gender Identity
Elizabeth	1979	Rehabilitation and Mental Health	2012	Licensed Mental Health Counselor	Varies- I work with adults and children	11 years	6 years	Asian-Caucasian	Woman

								American	
		Counseling							
Shannon	1995	Master of Social Work	2018	Registered Clinical Social Worker Intern	Families and children involved in the child welfare system	3 years	3 years	White	Woman
Ms. K	1963	Professional Counseling	2013	Licensed Mental Health Counselor	Child welfare	15 years	7 years	White	Woman
Lilly	1998	Master of Social Work	2019	None	All ages, genders, races, and ethnicity groups	2 years	2 years	Caucasian	Woman
Annie	1985	Rehabilitation and Mental Health Counseling	2011	Certified Rehabilitation Counselor	The client population is diverse	9 years	9 years	Hispanic	Woman
Alcon	1968	Human Services	2004	Developmental Specialist	Multi-cultural, Diverse, Bi-lingual	23 years	23 years	Hispanic	Man
Charlotte	1975	Masters in Mental Health Counseling	2015	Licensed Mental Health Counselor, Licensed Practical Nurse	Children, Adolescents, and Adults	5 years	5 years	African American	Woman
Teresa	1973	MA and MS, School Counseling and Education Leadership	2013	School Counselor Certification, Registered Mental Health Counselor Intern	Families of Low-socioeconomic status, Domestic violence, Substance use, Mental Health disorders of all ages	6 years	3 years	African American	Woman

Data Collection

I recruited participants for the study using purposive sampling. I identified

individuals who fit the specific criteria of the study. Invitations for this study included a

participant survey and my contact information for participants to contact me directly if

they had any questions. I also sent participants informed consent forms indicating their

willingness to participate in this study. Once the participants completed surveys, I was

able to make contact with each one of them, and scheduled Zoom interviews with each

participant individually. Participants were willing to meet with me as soon as they were

available. I stopped collecting data after interviewing eight participants because I

believed that saturation was reached, and no new information was available from

additional participants.

     All eight participants participated in one-on-one semistructured interviews. I

conducted interviews via Zoom. I recorded each interview to ensure that I was able to

provide accurate descriptions of participants' experiences working with this population.

Interviews ranged from 45 minutes to an hour in length. Interviews were recorded using

Zoom and I stored all interviewed recordings for later use. I made sure that my computer

was charged and Internet access was appropriate; therefore, there were no disruptions

during interviews due to technical difficulties. I used the interview protocol (see

Appendix A) with each participant.

     During interviews, I took notes related to my observations and noted trends and

participant reactions. I asked followup questions when needed to obtain aditional

information. Due to the fact that interviews were being recorded, I was able to give my

undivided attention to participants while they were sharing their experiences related to

working with this population. All recording were stored in Zoom. I am the only person

with login information and password who could access the data.

Data Analysis

     My analysis of data started soon after I interviewed the first participant. Once the

interview was completed, I started the transcription process a few days later. I decided to

use Otter to transcribe data. Otter is a transcription tool that turns voice conversations

into real time notes. After transcribing all data using Otter, I listened to entire recordings

and made sure data were transcribed verbatim. This process allowed me to reflect on interviews and analyze data. It also allowed me to look for phrases and trends. I was able to reflect on facial expressions of participants as well.

I then read each transcription a second time to make sure I did not miss anything. This process helped me to create a summary of each interview which I sent to each participant for their review. This form of member-checking ensured that I did not include my own biases in my summaries of the participants' interview responses. I completed member-checking for all of the eight participants.

According to LeCompte and Preissle (1993), discrepant case sampling aims to elaborate, modify, or refine a theory. In this study, I also took into consideration the qualities of discrepant cases when I reviewed the data. There was one participant who reported the possible linkage between age and the success rate with domestic violence perpetrators. That participant believed that older counselors with more experience might have better success working with this population. Lilly reported that sometimes perpetrators have asked her how long she has been working with this population, insinuating that she does not have very much experience because she is a younger counselor. One other participant said something similar; however, none of the other six participants mentioned the idea. Ms. K is a much older woman than the rest of the participants and had been working with domestic violence perpetrators for 7 years. Ms. K said that because she is older, some of the perpetrators look at her as a mother figure and then follow her directives, and as a result she said she believed that she has a better success rate than younger counselors. She was very open when speaking with me about

her experiences. She was very passionate about her work and looked forward to possible changes in order to better serve this population; however, she was aware that positive changes might be very difficult to achieve.

Another unusual perception was expressed by one participant but was not supported by the perceptions of the other participants. When talking about African American male repeat offender incarceration, there was one participant who expressed the belief that African Americans are targeted as perpetrators of domestic violence because of their race and the way African American males carry themselves. For example, the participant said that if a police officer was called to a home due to domestic violence in an interracial relationship that it would be more likely for the African American male to go to jail even if he was not at fault. None of the other participants expressed this idea.

In this field, there are very few men who work as mental health professionals. I had the opportunity to interview one male counselor, Alcon. Alcon was the second oldest participant and had been working with domestic violence perpetrators for 23 years. Alcon's focus was on the mistrust of case workers of African American men. Alcon stated that African American men do not trust easily; therefore, it takes much longer to gain their trust and provide the level of services that they need. He was very passionate when talking about his clients and the need to fully understand each individual client. Alcon was the only participant who talked about the mistrust of case workers by African American men accused of domestic violence.

Participants in this study were a variety of ages, ethnicities, and backgrounds. Two participants were in their 50s and one participant was as young as 26 years old. The levels of experience and comfort working with the population of the study were clear between the two older participants compared to the 26 year old counselor. I interviewed two participants who had a Master of Social Work degree. In speaking with them, there did not appear to be much difference between their understandings about working with domestic violence perpetrators and the other six who were interviewed who were not social workers. Whether they were social workers or mental health counselors, participants appeared to have the same perceptions and concerns. Diversity of the participants made the study stronger.

Evidence of Trustworthiness

I maintained trustworthiness using several methods. I listened to the interviews and then reviewed the word by word transcriptions. I had the data available electronically for additional review if needed. I used member checking, a peer reviewer, provided self-disclosure, disclosed any discrepant information, and provided rich and thick descriptions of what participants said in their interviews. I also kept a reflective journal to assist with trustworthiness.

Credibility

Rich and thick description was a way for me as the researcher to establish credibility in the study. Being transparent was very important and increased the credibility of the study. I was very transparent with all the participants which also increased the credibility of the study. I made every effort possible to avoid allowing my

biases to influence collecting the data for this study and analyzing the data I collected from participants.

Researcher Bias

As a counselor myself, I have had experiences working with this population. As a result, it was very important for me to be transparent with the participants. I disclosed firsthand experiences providing services to this population and working with counselors who also provide services to this population. I made every effort to avoid allowing my own biases to influence the data collection process for this study and the analyzing of the data I collected from participants.

After each interview, I was able to take the time to reflect on each interview and also reflected while analyzing the data. I also utilized member checking in order to limit any biases from negatively impacting the process and the outcome of this study.

Transferability

The overall purpose of this qualitative, phenomenological study was to understand the lived experiences of counselors who provide in-home counseling services to African American men who are repeat domestic violence offenders and who have received a subsequent abuse report within six months after in-home services were discontinued. For this study, transferability was easily achieved through the use of rich thick descriptive data which will allow readers to decide if there are resemblances to their own experiences.

Dependability

Dependability is the process of being logical and transparent (Baumgart, Craig & Tong, 2021). By being dependable throughout this research project, other researchers should be able to duplicate this study. To ensure dependability, I provided every step I took in order to complete this study. For example, detailed information regarding the interview protocol (see Appendix A) outlines each step of the data collection process.

Confirmability

Trustworthiness through confirmability was maintained throughout the study. I listened to the interviews and then reviewed the word-by-word transcriptions. I had the data available electronically for additional review. I utilized member checking, utilized a peer reviewer, provided self-disclosure, disclosed discrepant information, and provided rich and thick descriptions of what participants said in their interviews. In addition, I kept a reflective journal to ensure trustworthiness was maintained throughout the study.

Member Checking

Member checking occurred throughout the study. I verified with the participants what they had said in their interviews. I sent a summary of each individual participant's interview to that person to check for accuracy and the participants were asked to respond. Two participants responded. Both participants stated that the summaries were accurate; however, one of the participants took the time to correct some of the grammar and sentence structure before sending the summary back to me.

Reflective Journaling

During this study, I utilized a reflective journal to help me in processing the information received, and to capture my thoughts and struggles. This action helped me to process the data and to recognize and reflect on my own biases.

Rich and Thick Description

In this study, I provided detailed descriptions of settings and provided extensive direct quotes from participants. Identifying the various themes was extremely important in this study, so I provided quotes from each participant to support each theme I identified.

Participants

The participants in the study were all counselors who had experience working with African American domestic violence perpetrators. The participants' real names were not disclosed. This was done specifically to abide by to the expectation of confidentiality as explained in the informed consent document. Each participant chose his or her own pseudonym.

Participant Descriptions

Elizabeth is a licensed mental health counselor. She is an Asian-Caucasian American woman. She graduated in 2013 with a master's degree in rehabilitation and mental health counseling. She has been working with domestic violence perpetrators for 11 years and has been working with African American men with repeat domestic violence for 6 years.

Shannon is a registered clinical social worker intern. She is a Caucasian woman. She graduated in 2018 with a master of social work degree. She has been working with domestic violence perpetrators for 3 years and has been working with African American men with repeat domestic violence for 3 years.

Ms. K is a licensed mental health counselor. She is a Caucasian woman. She graduated with her master's degree in 2013. She has been working with domestic violence perpetrators for 15 years and has been working with African American men with repeat domestic violence for 7 years.

Lilly is a Caucasian woman. She graduated in 2019 with a master of social work degree. She has been working with domestic violence perpetrators for 2 years and has been working with African American men with repeat domestic violence for 2 years.

Annie is a Hispanic woman. She graduated in 2019 with a master's degree in rehabilitation and mental health counseling. She has been working with domestic violence perpetrators for 9 years and has been working with African American men with repeat domestic violence for 9 years.

Alcon is a Hispanic male. He graduated with a master's degree in human services in 2004. He has been working with domestic violence perpetrators for 23 years and has been working with African American men with repeat domestic violence also for 23 years.

Charlotte is an African American woman. She graduated in 2015 with a master's degree in mental health counseling. She has been working with domestic violence

perpetrators for 5 years and has been working with African American men with repeat domestic violence also for 5 years.

Teresa is an African American woman. She graduated in 2013 with a master's degree in school counseling and a master's degree in educational leadership. She has been working with domestic violence perpetrators for 6 years and she has been working with African American men with repeat domestic violence for 3 years.

Results

The main research question I asked in this study was the following: What are the lived experiences of counselors who provide services to African American men with repeated domestic violence abuse reports after termination of in-home counseling services? I collected data from eight participants. The participants were all counselors and have had some experience working with this population. Some of the participants were licensed and others were not. The counselors had various degrees including mental health counseling, school counseling, social work, and human services.

I answered the main research question using quotes from the transcripts. There were a total of 11 questions in my interview protocol that I used to elicit from participants the rich thick descriptions of their experiences. After reading through the transcripts and analyzing the responses from the prompts and questions in my protocol, I was able to identify seven themes. The themes are as follows: victims are reluctant to leave their perpetrators, counselors do not have adequate in-services training to work with this population, there are not enough alternatives for the victims, so victims are afraid of the unknown and of starting over, counselors believe that perpetrators are not being held

accountable for their actions and that victims are the ones being punished, there are not

enough resources available to better serve this population, counselors are not prepared in

their master's degree programs to work with this population and counselors feel that

victims sometimes are also responsible domestic violence. Each theme has been

addressed below using direct quotes and summaries from each participant's experiences.

Theme 1: Victims are Reluctant to Leave Their Perpetrators

Domestic violence has a pattern of behaviors that is used by one partner to

maintain power and control over another partner while in an intimate relationship

(Understand Relationship Abuse, 2020).

Alcon said:

You know, they have to do it to show that they have power…that they are in

control of their house that doesn't wait that things are going to be done here, you

know, and they don't see any any, any danger any anything wrong, lead again,

awareness, you know, so to open those minds. They don't have any problem

telling you, okay, I want a Black counselor.

Charlotte said:

Their goal is to have power and control over the victim. So, as it relates to their

career, there's not a big difference. Now, we may say that, the person that is a

middle class…they may have…I don't think that they would have any…what's the

word I'm gonna use, any leverage in a more leveraged…in a lower class aggressor

because at the bottom line is that the aggressors just wants power and control over

the victim.

Teresa stated:

I just think that it's really sad and domestic violence is really just meant to control

another person and it can, it can, you know, use money to control them.

Everything else I looked at as control. It doesn't necessarily have to be physical. It

can be mental, emotional. So it looks different for people. Some people just don't

feel that they would actually physically harm someone, but you can do a lot of

harm to someone mentally, you can take things away from them.

Elizabeth had a similar response and stated:

What I find sometimes is that it does seem like it is just a level of control, you

know. Leaving the relationship would mean relinquishing control over that person

and they could go off and other relationships, you know, do whatever they want to

do. And sometimes the desire to keep continuing that relationship is because they

do not want to lose a sense of control over that person.

Shannon stated:

A lot of times, even I think that there's a lot of power control dynamics that can

lead to these situations. I see a lot of that just being a cultural thing, and a lot

more of maybe the parents, and that's the mother in that situation, or the why I'm

so used to talking about interest, children.

Theme 2: Counselors Do Not Have Adequate In-Service Training to Work with This Population

Annie, Ms. K, Shannon, Elizabeth, Teresa, Charlotte, and Alcon's responses

regarding counselors not properly trained to work with this population:

Annie stated:

I do recall having one many years ago who talked more so about the power and

control in the cycle of violence, but he did frame it in the sense of both the

perpetrator and the victim. But besides that, I can't really think of anything off the

top of my head.

I'm not too well versed on what is available, but I do think more knowledge about

the perpetrator and the kind of counseling of perpetrators that helps them would

be really beneficial. Whether it is just relearning the conflict resolution, different

types of anger management tools, going more in depth into what let's say, like, I

know, we refer out to batterers' intervention, what exactly is the difference

between that and maybe anger management

Ms. K, who has been working with this population for 15 years, stated:

I really haven't found one specific training that would be like, 'Oh, this is it, and

this is the one you need." So Gosh, I would be very interested in finding that one

and learning enough that I could actually teach that one, one day. But no, I can't

say a specific training.

Shannon stated:

Yeah, I think in three years, I've done I've done plenty of trainings about like

working with the victims, but I think why I've done one training about working

with the perpetrator. And it's been a while, so that was probably like two years

ago. So, I've done like one, Yeah, definitely more training is needed to kind of

like, I don't know, to help, I guess break through that defensive barrier I was

talking about or like, just more strategies of engagement.

Elizabeth stated:

Um, I would say, yeah, if it's a very general training, like say, it's cultural

diversity, I mean, like something very general, I just don't think it's that helpful. I

think it needs to be really specific. So we can learn and a lot of our trainings are

just kind of again, going over the, the general idea, but they're also not giving you,

you know, as a clinician, techniques, approaches, theories, way to think different

ways to think about things. It's just, you know, very generic type information.

Yes, I think a lot of our training doesn't provide that kind of support.

Teresa stated:

I don't think I really necessarily have had any training on how to deal with these

cases other than tips on what to do when you go into a situation but never not

necessarily any training. So that was the biggest learning thing that I've taken

away from this, but training and like I said, you know, I would rather have the

training of what to do, you know, how do I protect myself in a situation just in

case something happens.

Charlotte said:

I think it's important for us to take a training that will help us understand the

psychological mindset of a perpetrator…to dive in further, and look at a

childhood up until here today to help them to help us understand why these

behaviors are occurring, and to help them understand why they're occurring.

Alcon stated:

I would like to have training, honestly, deep training in African American culture.
All over, I mean, everything related to the African American culture. I mean,
learning is what makes the difference, your education, your formation, you know,
that is what makes the difference when you are going to provide services. So,
knowledge, it is extremely important. Yes. And if you can definitely…it's very
important to learn about African American males…how they think, how they
process information, why they might be defensive, you know, when they talk to
you…even defensive, aggressive, where that is coming from, okay. And also, how
can I deal effectively with them? I mean, you know, without getting frustrated.
You cannot let their emotions overwhelm you. You cannot let their emotions
drain or drag you, because then it's going to be a real mess. Yes.

**Theme 3: There are Not Enough Alternatives for Victims who are Afraid of the
Unknown and Starting Over**

Participants were asked about what are some of the reasons why the victims stay
with the perpetrators.

Charlotte stated:

"Fear, fear." Well, definitely the aggressor. Because it's a mind game. It's a
psychological game that they play to and to ensure that their victims feel like
there's no way out. I have to say, in cases where they enable, I think that definitely
could cause problems when they decide not to press charges over and over again.

Ms. K responded:

They can't afford to do this by themselves. I think the other one really is kind of that fear of the unknown. They're afraid to walk out with one to six kids and to do this by themselves. That is they don't want to be alone. They want someone who can go the toilet maybe for five seconds…at least have them sitting there to you know, do a headcount once in a while and stuff like that. The thought of being alone and having to start over is not a good thing. So they'd rather just kind of power through that.

Elizabeth had a similar response and stated:

There really is a fear or a great risk of losing their children. , Sometimes children can play a big factor in helping them there I think if they didn't have the children, sometimes, you know, they would kind of take the brunt of everything. But once it starts impacting their children, and they're going to lose their children, I think that helps.

Teresa stated:

I think usually, when the courts are involved, and especially when it may be a situation where they are not the perpetrator…when they have the fear that I may never get my children back. Because I have to put me and their wellbeing first. So yeah, I think that approach is usually when like I said, like when the courts are involved, and they have to follow a strict case plan. And usually their participation depends on how quickly or not that they're reunified with their children.

Theme 4: Counselors Believe Perpetrators are Not Being Held Accountable for

Their Actions and Victims are Being Punished

Participants made several statements regarding accountability. Annie stated:

I do feel that perpetrators make their own choices and need to understand that and

be held accountable, regardless of what led up to the incident, or whatever it is

that led up to it.

Annie was very open when talking about differences between African American

males and non-Blacks. Differences between African American males and males who are

not African American did not come up with any other participants. However, Annie was

very concerned about how African American males are at a higher risk of getting arrested

in domestic violence incidents even though they were not at fault.

Teresa stated:

I think that it should probably be just as serious as some of your other crimes that

are, you know, a little bit more…what's the word I'm looking for? But by holding

them accountable, it can be a more serious offense. I just think that the

punishment could be a little bit more severe other than an injunction. You know,

because sometimes we all know that those don't work. I just think the punishment

should be more severe.

Shannon said:

I think that a lot of times we do end up treating the victim as the one who is

responsible. Or we have to hold them accountable typically, where they're the first

person we're working with because the father is in jail. And so it's like, I've heard

lots from the victim of like, why am I being punished? Why am I having to do these services when I was victimized? Um, but in general, no, I don't believe that the victims are responsible.

Theme 5: Not Enough Resources to Better Serve This Population

Annie said:

There's frustration in a lot of different levels, whether it be in just the tools…whether it be the person working with their actual motivation or engagement. I think also just kind of community engagement and outreach is very difficult in that sense, because like I said before, there are not as many resources as maybe a person might need.

Lilly stated:

Sometimes I do, I think geographically, it's a little bit of a barrier. Because I know certain areas especially don't have as many libraries. All the homes don't have Wi Fi or have laptops, and even the high schools where the kids go to, they don't have as many resources as maybe a higher income area would. Sometimes I definitely think the resources are a barrier for some families

Teresa stated:

I absolutely do not think we have enough resources. To my knowledge, I do know of two to be exact. Because if you don't really have a lot of family support, or friends, or anybody that you can really rely on to help you. So I think that we do here in Hillsborough County, we definitely need more resources, because some people just don't have the means. I do think that's why a lot of people feel stuck

because they don't have the means and they don't have a place to turn to. But I

think it's always worthwhile to try to save your life and to protect yourself and

protect your children, if children are involved.

Shannon stated:

I feel like there's not services to help. But I feel like they're limited, and they're

expensive and they're hard to access. But bridging that gap between what's out

there and are you wanting and willing to do it? And then if you are, then here's the

evaluation for it. It's $250 and then every week, it's gonna be $25.

Ms. K said:

I think resources play a huge part because it takes money to utilize resources

typically and especially if it's a resource for a repeat offender, in a better

situation, can go 29 weeks at possibly 25 or 50 bucks a week. I wouldn't have that

resource and I work full time. So I'm thinking if I'm a young person, and I'm

struggling socio economically struggling, maybe you don't have a job or are

underemployed. How are you going to pay that? But then, on the other hand, how

can you not pay it? It's really important. So I think that really puts people in a

really, really tough place.

**Theme 6: Counselors Not Prepared in Their Master's Degree Program to Work
with This Population**

Ms. K said:

So my experience has been, I guess, can be positive in the respect that I have not

had any trouble meeting with my clients. However, I wonder about my ability to

help them change. It has been my excuse me one minute, get my water, or one of

those tickles in my throat. It has been my experience that sometimes I feel as if

I'm not getting the whole truth, when I'm speaking to a male perpetrator, that may

be I'm hearing more so what they think I should hear or what they feel they want

me to know, which may or may not be the truth.

Annie stated:

I think it would be really good to have probably more education based resources,

probably something along the lines of anger management or certain type of

intervention programs. But I think more needs to be put in place for more long

term possibly care. I also think more accountability, it would be really important

when it comes to that. Outside of the court system, I don't know if there's a lot of,

I guess, motivation for change, unless you're basically being told to change in that

moment through the court system.

Alcon stated:

Okay, because there is a wall, a barrier that is not easy to remove It's very difficult

to remove and they place it because they are they trying to protect themselves.

They think that I am there to hurt them and to convince them otherwise is very,

very difficult. Very challenging.

Teresa responded:

So, I don't think you can ever be completely prepared for working with domestic

violence perpetrators, I just think that you have to have a sound mind. And you

have to be a really strong person, you know that every situation that you walk into

is going to be different.

Theme 7: Counselors Feel Victims Sometimes are Also Responsible for Domestic

Violence

I asked participants to what degree they think that victims are responsible for the

domestic violence. This question was a very sensitive question. However, some

counselors do think that victims are sometime responsible for domestic violence.

Alcon said:

. I mean many of the domestic violence incidents that I have been involved with as

counselor, are more related to couples fighting and we also need to be aware that

couples…they do fight. Sometimes they punch each other is not sometimes when

I visit when i when i going to provide services, what am I observing is that female

okay? She's a beating When I talk to her when I talk her through about all the

incident looks that I have an aggressor and the victim so same thing happens with

with the alleged perpetrator and this is what we call the alleged you know because

in reality we don't have all the facts to me you know a perfect judgment

Shannon said:

I think it's tough with my particular population because the people we are

focusing on are the children. And so if there weren't children involved, I think it

would be an easier answer. But I think with repeat offenders, there is a

responsibility on the victim, typically the mother, to make a choice that maybe

she wouldn't make for herself, but to do for the child.

Teresa stated:

I think the victims are responsible. They need to learn to protect themselves, as

well as their children. And it's really hard to say if you've never been in that

situation. But maybe if there was a situation where they allow the perpetrator back

in. You can't have your children taken away for six months, no contact, no

supervised visits, no anything…because the children need to be more protected.

Lilly stated:

So, I guess I would say, depending on past incidents with a victim and an

aggressor, say there's been four prior domestic violence instances in the last five

years. That may not sound like a high percentage to the family, or to maybe some

close friends. But if it's a recurring behavior, and there's no change, there's no,

you know, growth in the relationship. Um as far as anger management, and like I

said, safety planning, knowing where you can go if the argument gets heated. I

definitely think that is a bit of a warning sign when when the victim can't

recognize the same behavior occurring and no changes, no positive changes.

Charlotte stated:

I have to say, in cases where they enable, I think that definitely could cause

problems when they decide not to press charges over and over again. When they

take them back over and over again I think continue to educate them. And we also

need to generate more classes for our aggressors. There's not enough classes,

there's so many classes for the victims

Ms. K stated:

I think everybody has a role they play whether it's by choice or trying to keep

children well, safe, and alive. I would never blame somebody for getting hurt,

right, because that's not okay. It sounds like I'm blaming the victim. I think

everybody has a part to play. I don't know that I would blame her, especially from

a counseling standpoint to know that there's, there's reasons that she's staying for

whatever those are due to trauma due to just outright finances because you can't

afford to leave and there's nowhere to go, and if you're homeless

Summary

In this chapter, I provided a detailed summary of the analysis process. I concluded

the findings of this study from an analysis of the data that I collected from eight

participants. All of the participants had experiences working with the population of

studied. The seven themes were as follows: victims are reluctant to leave their

perpetrators, counselors do not have adequate in-services training to work with this

population, there are not enough alternatives for the victims, so victims are afraid of the

unknown and of starting over, counselors believe that perpetrators are not being held

accountable for their actions and that victims are the ones being punished, there are not

enough resources available to better serve this population, counselors are not prepared in

their master's degree programs to work with this population and counselors feel that

victims sometimes are also responsible for domestic violence.

In this study, I found that counselors believe that they do not have the resources

and training they need to serve this population the way they are supposed to serve them.

The counselors said that there is not enough accountability for the domestic violence

perpetrators. Counselors working with this population are not specifically trained to serve domestic violence perpetrators and struggle to meet the needs of this population. During the interviews, participants openly discussed their concerns and frustration at having to work with a population that they do not have enough training to serve and that there are not enough resources for the perpetrators or the victims.

In Chapter 5, I present my interpretation of results of this study, implications from findings of the study, and recommendations. I also discuss the implications for counselors working with this population and for counselor educators. I also provide suggestions for future research on the topic.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

My purpose for this study was to understand experiences of counselors who provide services to African American men with repeated domestic violence abuse reports. I used a qualitative phenomenological approach to analyze lived experiences of participants who provide services to African American men with repeated domestic violence abuse reports. In this chapter, I discuss findings of this study in relation to counselor experiences. I also include a discussion of results, including my interpretations of findings, limitations of the study, recommendations for future research, potential implications of the study, and a conclusion.

Participants in this study discussed their experiences working with African American men with repeated domestic violence abuse reports. Counselors reflected on their experiences involving providing services to this population. After analyzing data, I developed seven major themes based on information provided by counselors about their experiences. In this chapter, I discuss findings based on literature I reviewed in Chapter 2.

Interpretation of the Findings

For this study, I used a phenomenological approach which allowed me to understand lived experiences of counselors working with African American men with repeated domestic violence abuse reports. Seven themes emerged from my interviews with eight participants. All eight participants had experience working with domestic violence perpetrators. All participants were open to talking about their experiences

working with domestic violence perpetrators. They talked about their struggles, likes and dislikes, and need for change.

Annie's experiences were somewhat different from other participants. She stated that African American males are at a higher risk of getting arrested in domestic violence incidents even when they are not at fault. Alcon discussed mistrust of counselors by African American men accused of domestic violence. There is cultural mistrust held by some African Americans, and that mistrust has influence on their participation in counseling services (Alston & Bell, 1996). All participants agreed that more training is needed by counselors in order to better serve this population. Ms. K and Shannon discussed issues relating to how cost of services prevents perpetrators from accessing these much-needed services.

Theme 1

As participants shared their experiences regarding victims being reluctant to leave perpetrators, they talked about reasons why they think victims are reluctant. During the data collection process, participants continually spoke about perpetrators having power and control over victims. Use of money and children to keep victims in relationships was mentioned by participants. Concerns about money and children were described by participants as the biggest barriers when providing services to victims. Having children involved and no income to support those children, victims often have to make decisions they would normally not make. Along with other barriers victims face when they are attempting to leave perpetrators, finances play a huge part when victims are attempting to leave a violent situation (Murray, 2008). According to Payne and Wermeling (2009),

since it is a challenge for victims to find financial resources on a day-to-day basis, it is

therefore easier for victims to stay in abusive relationships. Eriksson and Ulmestig (2021)

said financial abuse makes it difficult for women to leave their abusers and become self-

sufficient. According to Johnson (2021), economic abuse and abuse tactics are means

used by perpetrators to control victims' ability to acquire economic resources needed to

survive, so victims in turn become isolated.

Theme 2

According to VanAusdale and Swank (2021), having knowledge of the frequency

and effects of trauma has led to the need for counselors to be better trained and more

competent when working with clients' trauma. During the data collection process, all

participants reported that one of the barriers in terms of providing quality services to

perpetrators is lack of in-service training. Participants could not recall any training they

had to prepare them to work with this population, and admitted they were not were not

aware of any available training. All eight participants also agreed they could benefit from

having more knowledge related to working with perpetrators. Elizabeth reported having a

few trainings; however, those trainings did not provide the support she needed to work

with perpetrators. Charlotte said it would be beneficial for her and other counselors to be

trained to understand psychological mindsets of perpetrators. She also stated that training

should include childhood trauma. Alcon said it would be beneficial to have more training

regarding functionality of African American culture.

Theme 3

   This theme is supported by the current literature related to lack of services and

support available to victims of domestic violence. According to Zweig et al. (2002), some

of the problems regarding lack of services involve uneducated service providers and

batterers using women to gain more control over them. Peckover (2003) said women do

not always receive the support needed, and one area of needed support that was lacking

was information about accessing more specialized services. Participants in this study

were clear there were not enough alternatives for victims if they chose to leave

perpetrators. According to Zweig et al., (2002), issues faced by victims include lack of

available services and uneducated services providers. Batterers use lack of available

services to control and victimize women who are battered. Charlotte, Ms. K, Elizabeth,

and Teresa agreed that fear of the unknown is a big problem for victims. Participants

expressed that when children are involved and victims cannot afford to take care of

children themselves, it is more likely that victims will not leave perpetrators.

Theme 4

   Annie talked about how perpetrators make their own choices, and they should be

held accountable for their actions. Even though Annie agreed that perpetrators should be

held accountable, she also felt that there were differences between African American

males and perpetrators of other races in that African Americans are at a higher risk of

getting arrested in domestic violence incidents, even when they were not at fault. Teresa

said accountability of perpetrators should be as serious as any other crime, and the

punishment should be more severe. Shannon said though victims are treated like they are responsible for what happened.

Theme 5

Participants reported that not only are counselors not properly trained to work with this population, lack of available resources also hinders counselors' ability to properly work with this population. This was evident in each participant interview. Annie said community engagement and outreach is very difficult because there are not many resources available to assist this population. Lilly stated that those in lower income areas are at a disadvantage because they do not have the resources they need. Teresa said more resources are needed and that is one of the main reasons why victims feel stuck with no way out. Shannon and Ms. K had focused on how expensive services are at times, making it difficult for perpetrators to access much-needed services. If a person is already struggling financially or may be unemployed, most likely they will not be able to pay for such services.

Theme 6

I asked the counselors in this study about their master's level preparation and their comfort level related to working with this population. It was evident that the counselors are not being prepared in their master's degree program to work with this population. The lack of preparation led to Ms. K questioning her ability to help the perpetrator in making the positive changes needed. Annie spoke about how great it would be to have more educational based training such as different types of effective intervention when working with the perpetrators. Alcon was extremely open and spoke about how

challenging it can be if a counselor is not prepared to work with this population. Teresa on the other hand does not think that counselors can ever be completely prepared for working with domestic violence perpetrators and thinks that counselors must have a sound mind and be very strong because every client and situation is different.

Theme 7

Participants talked about to what degree they think victims are responsible for the battering they were subjected to. This issue was a very sensitive one for participants in that some participants said that victims are never responsible. However, some counselors do think that victims are sometime responsible when they are battered. Those who think that victims are sometimes responsible think that the victims have the choice to leave the abusive relationship yet they chose not to leave. Many victims use having children involved as a reason to not leave the perpetrator and some just do not have the support needed to leave. Shannon reported that with the repeat offenders, there is a responsibility on the victim because this was not the first time a domestic violence incident occurred. Teresa also shared that victims should learn to be protective of themselves and their children. Lilly, Charlotte, and Ms. K were very straight forward with the information provided and stated that the victims are responsible and play a role in the violence between them and the perpetrators.

<center>**Family Systems**</center>

For this study, I utilized the family systems approach to counseling as a theoretical foundation which focuses on family characteristics and family functioning. The literature is clear as to how the family systems approach should be utilized in

counseling. There is a long history with African American families being unwilling to participate in counseling services. The participants expressed some the same challenges with the African American domestic violence perpetrators' unwillingness to participate in services or not see the need to work with services. According to Weiss (2015), working with domestic violence clients is a challenge in itself and the goal has always been to keep the victims safe. It was very clear that the participants shared the same views and shared the same goals. One of the main challenges of the participants was the lack of inclusion of families when working with the clients. Speaking with the participants, it does not appear that inclusion of families was utilized in their practices in order to better serve this population.

Limitations of the Study

Many counselors work with domestic violence perpetrators; however, only eight were represented in this study. For this study, in order to reach saturation, eight participants were all that were needed. After interviewing eight participants, I determined that no new information would be provided if I were to interview additional participants. The counselors' experiences who work with domestic violence perpetrators who were included in this study cannot be generalized to the larger population. However, the results of qualitative studies are not intended to be generalized. Instead, the eight participants provided a deep understanding of what counselors experience when they provide services to domestic violence perpetrators.

Since I provide services to domestic violence perpetrators myself, my biases could be viewed as a limitation. I was very transparent with the participants. I made every

effort to avoid any personal biases that could have influenced the collection and analyzing of the data. This study focused on only counselors who provide services to African American men with repeated domestic violence abuse reports. The experiences of other mental health professionals who provide services to domestic violence perpetrators were not included in this study. Also in this study, only counselors who work with African American repeat domestic offenders were interviewed. So I did not investigate the experiences of counselors who provide services to clients with other ethnic identities. Also, I did not ask counselors about their experiences of providing services to women perpetrators. I hope that the limitations of this study will inspire future research on similar topics.

Recommendations

My recommendations for future research include interviewing African American male repeat perpetrators to get their perspectives and to gain a better understanding of why they reoffend. I would also recommend interviewing the actual victims. Not only would this give a better understanding as to why the victims stay, learning about both the perpetrators and the victims would help to better understand the phenomenon of domestic violence. Additionally, I recommend a quantitative study that would analyze the recidivism of perpetrators to determine whether it is possible to distinguish the differences between those who repeat offenses and those who do not. This would not only add to the literature regarding African American men with repeated domestic violence abuse reports, but the results could also be used to inspire future qualitative, quantitative, and mixed method inquires.

Other recommendations are for administrators to provide more training for the counselors of domestic violence perpetrators. Administrators need to hire more counselors to do the work and most importantly have more resources available to the victims. I also recommend that those who currently counsel domestic violence perpetrators be given more in-service training.

Implications

The results of this study have several implications for positive social change. Participants in this study spoke about their struggles providing services to this population. None of the participants had previously reflected on their experiences working with African American men with repeated domestic violence abuse reports. The eight individuals who participated in this study were able to share their experience and thoughts about working with this population. Several participants in this study commented on how they hope their participation in this study will create positive changes and have a positive effect on their future work with this population. They appreciated having the opportunity to participate in this study.

The participants reported their own struggles in providing services to this population. The results of this study could be used to help counselor educators to have a better understanding of the use of intensive in-home services in order to be able to provide services that are individualized to meet the needs of clients. This study could be used as a catalyst to develop or identify ways to measure risk for re-entry for men who are repeat domestic violence offenders. The results from this study and the results from

any future inquiries could increase the dialogue and potentially increase the success rates of counselors working with this population.

Reflections

When I started this process, I was not sure what to expect. I utilized a journal to reflect on the feelings I had while I conducted this study. I was not surprised by the participants' experiences; however, I was very surprised by their reactions. For example, all eight participants acknowledged the lack of services and help for this population and accepted the lack of services as the norm.

I shared my experiences with the participants. I shared my thoughts on the topic and acknowledged their struggles and frustrations because I have experienced some of their struggles as well. I did not share my experiences before the interview because I did not want to influence the participants. I used member checking and feedback from my dissertation committee which helped me recognized any occurrences where my experiences might influence the data, analysis, and interpretation of the participants' experiences.

Conclusion

For this study, I used a family system perspective to analyze this phenomenological investigation. There is a lot of research focusing on domestic violence; however, I could not find any research focusing on the counselors' experiences working with African American men who are repeat offenders.

This process and the results of this study were very informative. The participants were knowledgeable of services that are and are not available to this population and they

were hopeful for more and better resources and help for this population. The counselor's job is a very hard job to do. More counselors are needed to work with domestic violence perpetrators. The counselors' reflections of their experiences working with this population revealed a lot of frustrations and uncertainties related to providing services to African American men who are repeat offenders. Even with the struggles they have had and are still having, they too believe that more counselors are needed to do the work. It is my hope that the results of this research can be used to assist counselor educators to better prepare counselors who provide counseling services to these men.

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Appendix A: Interview Protocol

My interview with participants consisted of a brief introduction followed by a review of the reasons for my study. First, I explained the purpose of this study and afterwards I will ask each participant the central question.

I. Initial procedures

(a) Purpose of Study –Thank you for choosing to participate in this interview. I would like to explore the experiences of counselors who provide in-home counseling services to men who are repeat domestic violence offenders who received a subsequent abuse report within six months after in-home counseling services were discontinued. The purpose of this study is to gain an understanding of the experiences of counselors.

(b) Obtain Completed Forms

- Informed Consent

- Consent to Record Interview

- Demographic Information– I gave participants an opportunity to discuss the information sheet and I answered any questions the participants had.

II. Introduction

(a) Domestic violence is a growing problem in our society and recidivism rates are very high. Counselors working in intensive in-home services programs continue to play an important part in the lives of African American men with repeated domestic violence abuse reports after termination of services. These counselors are constantly working hard every day providing services to these men. The counselors

who provide services to these men might be able to help the counseling profession

understand better the types of services that are effective for these men.

Initial Question

(a) What meaning do you ascribe to your experience of working with African

American men with repeated domestic violence abuse reports within six months

after termination of in-home counseling services?

(b) I will ask these questions if they have not been addressed already after

participants have responded to the initial question:

1. Tell me about your experience working with repeat domestic violence perpetrators.

2. To what degree do you feel frustrated about the process of working with repeat domestic violence perpetrators?

3. What approach do you feel is successful?

4. What is different about the men who are successful and those who are not?

5. Is there anything different about the men who are successful and those who are not?

6. Tell me about your preparation working with this population.

7. What kind of training that you have not had do you think would be helpful for

you?

8. What training that you have had was not helpful to you?

9. Is there anything in the system that can be done to decrease domestic violence?

10. To what degree do you think the victims are responsible?

11. Is there anything else you want to tell me about your experience working with

domestic violence perpetrators?

III.   Closing

(a) Is there anything else you would like to add or discuss?

(b) Thank you for your time and for participating in this interview. You will

be provided by email message with a summary of this interview to review to ensure

what you reported during this interview was documented correctly. I will make

corrections if needed. Later, I also will be asking you to look over a summary of what

all the counselors I have interviewed have told me so that I can review your reactions

to the themes I will identify in this study.

Appendix C: Participant Survey

Experiences of Counselors Who Provide Services

To African American Men with Repeated Domestic Violence Abuse Reports

Walden University

You are invited to participate in a research study that will explore the lived experiences of counselors who provide services to African American men with repeated domestic violence abuse reports. You were selected as a possible participant because of your involvement in working with this population. Please complete this brief survey below and feel free to ask any questions you might have.

This study in being conducted by a researcher named Miselene Kruer, who is a counseling doctoral student at Walden University.

Background Information:

The purpose of this study will be to **explore the experiences of counselors who provide counseling services to African American men with repeated domestic violence abuse reports.**

Survey Questions:

1. In which year were you born?

2. What type of master's degree do you hold?

3. In what year did you earn your master's degree?

4. What type of licensures and certifications do you currently hold?

5. Describe the population of client you serve.

6. How long you have been working with this population?

7. How long have you worked with African American men with repeated domestic violence abuse reports?

8. How do you identify racially and culturally?

9. What is your gender identity?

Participant's contact number:

_____

Participant's email address:

_____

Preferred Method of contact:

_____