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Sociological Strategies for Developing Community Resources: Services for Abused Wives as an Example

Mary C. Sengstock
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ABSTRACT

There has been increased concern for the problem of family violence in recent years, and an accompanying interest in providing services to meet the needs of victims. This has led to research efforts, as well as to the development of new community services. Clinical sociologists can do much to assure that the development of community resources and empirical research in this area procede hand in hand. This article reports on the work of a committee, chaired by the author, which used social research and knowledge of sociological principles in the development of services for battered wives in a major metropolitan area. Three major intervention strategies were employed in the committee setting: provision of information about social structure and its consequences to enable members to develop more effective plans; use of sociological principles and data to make people aware of aspects of the situation of which they had not been aware; and involvement of group members and other individuals in the planning process to maximize the likelihood of an investment in the outcome. Committee activities are discussed as a means of indicating both successes and difficulties with these strategies.

During the past decade, there has been a growing recognition of the problem of family violence on the part of social scientists and the general public alike. In

The author wishes to express appreciation to the members of the planning staff of United Community Services of Metropolitan Detroit, for their untiring service to the committee. Margaret Ball was the staff worker who worked most closely with the committee at the beginning. Eben Martin has proven extremely helpful over the entire length of the group's operation. Basilio White and Margaret Mitzel also served with the committee for shorter periods of time.
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the field of research, a number of studies have focused on this topic (Gelles, 1972; Straus et al, 1980; Dobash and Dobash, 1979; Giles-Simms, 1983). In the social service fields and in the general public, there has been a growing awareness of the need for the development of services for victims of domestic abuse (Roy, 1977; Campbell, 1984).

Unfortunately, in many instances, these two lines of activity may develop independently of each other. Consequently, social research may proceed with little recognition of community needs, and community resources may be developed with little knowledge of the research data available or the contribution which social research may make to the understanding and solution of community problems. Clinical sociologists can do much to integrate these two fields, with beneficial consequences for both social science and community resource development. Community needs can be served more effectively when solutions are founded on a firm basis of social scientific knowledge. And social science becomes more refined through contact with the data found in community social settings.

A Community Planning Example

This article describes an example of a community planning activity in which social science principles and data were brought to bear in the design and implementation of a social service plan for abused wives in a major metropolitan area. The group, to be known as the Implementation Committee, was charged with implementing a service plan which had been developed by a prior research and planning committee. Both committees were chaired by the present author, and operated under the auspices of a United Fund supported community planning agency. The chairship of these committees occurred as a result of the author's prior service on a variety of volunteer committees, as well as several years of experience as a sociologist, including research on family violence.

The Implementation Committee was faced with a task which many believed was far too advanced for its time. They began their work in 1980, at a time when few services for such victims existed, when there was little public sympathy for their plight, and when neither professionals nor the general public possessed much knowledge about the problem. The odds against their success were high, but their eventual accomplishments were also considerable.

The committee chair was responsible for working with staff members of the planning agency in the selection of committee members, as well as for insuring that the charge to the group would be accomplished. Analysis of the activities of this committee provide an opportunity for illustrating the manner in which sociological strategies can be brought to bear in the solution of community needs.

INTERVENTION STRATEGIES IN A COMMITTEE SETTING

Throughout the process of selection of committee members, establishment of committee goals and objectives, and determination of methods for accomplishing these tasks, three major clinical strategies were employed:

1. Provision of information about social structure and its consequences, enabling individuals and groups to use knowledge of social structure to develop more effective plans for group action;
2. Use of sociological principles and data to make people aware of aspects of the social situation of which they had previously been unaware;
3. Involvement of the individuals/group members in the planning process, to maximize the likelihood that they will have an investment in the outcomes.

In reality, all three processes occur at once. Principles and data relating to the social structure are provided to key individuals in a manner designed to integrate them into the planning process. This results in the development of a sense of involvement on the part of those actors most able to effectuate change in the social structure. In the interest of clarity, however, each of these strategies will be explored separately.

1. Social Structural Analysis to Develop Effective Action Plans

The consideration of key social structural components in the development of an approach to the problem can be observed in the selection of committee members, in the establishment of task forces, and in the hearings which were sponsored. Each process involved the identification of those segments of the social structure which were central to the solution of the problem and of individuals who held critical positions in those social structures. Pressure could then be exerted on these individuals to enlist their assistance in accomplishing the task. In some instances the pressure was political; in other instances it was more subtle—a topic which will be discussed in the third section of this paper focusing on personal involvement.

Use of Social Structural Factors in Member Selection. Prior to the establishment of the committee, the committee chair and two staff members from the planning agency, both of whom were trained social workers, spent considerable time in the selection of committee members. Since the committee's charge was to implement a program of services for abused wives, it was necessary that the committee include not only persons with sufficient interest to work on the problem of spouse abuse, but also persons whose professional or other social structural contacts would place them in a position to influence the establishment

of those services. Consequently, we attempted to select individuals who were part of or had influence with agencies whose services were needed by abused wives.

Research has shown that spouse abuse victims require a wide variety of services, including financial support, housing, legal assistance, counseling, and job placement (Dobash and Dobash. 1979; Spouse Abuse Project Committee, 1980). Members were chosen to insure that key agencies providing these types of services would be represented. These included personnel from the police department and prosecutor's office, an attorney active in women's rights, and individuals who worked in mental health and family service agencies. Wherever possible, an effort was made to locate individuals from these agencies who had already developed some sensitivity to the problems of battered women; where persons friendly to the cause were not available, other representatives were sought. In some instances, it was clear that the individuals invited were not anxious to participate, but felt that it was politically impossible to refuse to attend, or at least to send a representative.

In addition, there were representatives of educational institutions, and of various women's social groups and church organizations. All of the shelters for battered wives in the local area were also invited to send representatives. The resulting committee consisted of two major categories of members: individuals who had an intense empathy for the needs of abused wives and a strong commitment to assisting them, and others who may not have shared these feelings about the problem of spouse abuse but whose position in the social structure was such that they held the key to some type of assistance or service which would be helpful to spouse abuse victims. It was the organizers' hope that participation in the group discussion at committee meetings would influence these critical role players to use their positions in the service of abused wives.

Establishment of Task Forces. The same approach was taken in the establishment of the task forces which developed out of the committee and, later, in the hearings which some of the task forces undertook. Here again, the clinical sociologist can direct the group's attention toward key aspects of the social structure of the community, indicating those segments of the social structure that can help the group to accomplish its goals. The committee spent considerable time discussing research related to the problem of spouse abuse, a topic that will be discussed in the next section on the provision of sociological principles and data. From this discussion emerged the view that three major types of services were needed by the women. The committee decided to form three task forces, focused around each of these needs: services from the criminal justice system (Justice System Task Force); services focused on the special counseling and shelter needs of battered women (Specialized Services Task Force); and improved information about spouse abuse, both for professionals and the general public

(Education Task Force).

Members of these task forces were selected by a process similar to that used for the committee as a whole. The process was based on the assumption that key actors in the community social structure could be co-opted if they could be induced to become members of the task forces. Consequently, the Justice Task Force included key figures in the police force and the prosecutor's office, and the Specialized Services Task Force included directors and representatives from family services and counseling agencies, as well as central figures from the county offices of the state department of social services. Although some of these persons attended reluctantly at first, their public image required that they give at least lip service to the goals of the committee. Many eventually became committed to the group and came to use their positions to assist in attaining the group's goals. Some examples of the manner in which these changes in attitude and behavior came about will be provided in the third section on the development of personal commitment through individual involvement.

The Use of Hearings. There are some key individuals, however, whose time commitments are such that it is unlikely that they can be brought into a committee or task force on an ongoing basis. Directors of large agencies are an example of such individuals. Yet their involvement was critical if the process of restructuring the service network was to be successful. The Specialized Services Task Force dealt with this problem by holding hearings on key topics, with agency personnel being invited to attend and present their views. Since it was only a single meeting, there was a greater chance that an agency director would participate. The hearings covered critical service needs for battered wives, and the individuals invited to appear were persons whose position in the community structure was key to the attainment of such services. Agencies invited to participate included the local office of the state department of social services, family service agencies, mental health agencies, and substance abuse counseling agencies.

The earliest success of this task force is an example of the value of the hearings approach. The members were concerned about the problem of obtaining financial support for abused wives, whose fear for their safety often forces them to take their children and flee their homes, but with neither financial resources nor means of making a living. They find they are ineligible for welfare since their husbands' incomes are usually used as the test of eligibility. The latent function of this process is to force women to remain in a violent marriage. A change in state law had obviated this rule; however, most state caseworkers were unaware of the change, and bureaucratic red tape prevented the women from getting attention to their special problems.

The county director of social services was invited to attend a hearing and report on his department's efforts to assist battered wives. Members of the task

force were prepared for an intense, perhaps even a bitter battle to make social services procedures more responsive to the needs of abused women. At the outset of the hearing, the director surprised everyone by announcing the appointment of a special caseworker to whom all cases of battering would be referred. This would insure prompt and sympathetic treatment, in accordance with the new state guidelines.

Committee members were convinced that the long-sought change in department procedures had come about largely because the director had to make a public statement before a concerned community group, a technique which is often effective in achieving long-term attitude and behavior change (Mayer et al, 1980; Kerr and MacCoun, 1985). Since the task force represented a planning agency with some standing in the community, he could hardly refuse to appear. Neither did he wish to appear callous toward the needs of abused women. His appearance allowed him to play the hero role, solving a major problem of battered wives by a simple change in bureaucratic procedure.

Avoiding the Pitfalls. The technique of placing key role players on the committee and its task forces generally worked to great advantage, but it was not without its dangers. For example, one task force member took considerable issue, not with the goals of the group, but with the program plans it developed. The director of a major women's rights oriented group, she attended committee meetings on an irregular basis, usually sending an alternate in her place. When she did attend, she frequently questioned the actions enacted in her absence, pointing out that her organization was empowered to conduct many of these activities.

In retrospect, it is apparent that this member's behavior should have been handled more forcefully by the committee chair. She should have been informed that the actions taken in her absence were valid, that her alternate had been present, and that no one had the right to call these issues into question at a later date. She should further have been given the option, either to arrange her schedule so as to attend more regularly, or to appoint an alternate who could serve as the regular committee member, with full rights to represent the group in the committee. Lacking firm action on the part of the committee chair, the committee as a whole was frequently stymied in its action by a single member's behavior.

The failure to deal more effectively with this member probably stemmed from two factors. First, her leadership role in a key women's group led us to be too concerned with gaining her support. Second, we had anticipated opposition from traditionally oriented groups, but not from the leader of a women's rights group. Consequently, we were unprepared for the difficulties this individual caused. Had we been more alert, we would have recognized that groups such as hers might see our committee as a major competitor for community resources and recognition. Our lack of foresight allowed her to delay the actions of this

task force for nearly an entire year, until she finally resigned from her position with the organization, and consequently, from the committee as well.

2. Providing Knowledge of Sociological Principles and Data

From the outset, it was important to focus the group's attention on the task at hand by means of written and/or oral materials relating to their task. In sociological terms, this essentially constitutes a "definition of the situation," as originally defined by Thomas (1931). As the group defines its task, the clinical sociologist encounters a critical point for inclusion of sociological principles and data. Sociological insights and data can guide the group as it defines the problem and selects specific goals to pursue. (See Straus, 1984:57–58, for a discussion of different levels of definition of the situation.)

The Implementation Committee was comprised of professionals whose training had occurred at a time when the existence of domestic violence was not even recognized, and of eager but unskilled volunteers. Many members lacked information about various aspects of the problem of wife abuse: they knew little about the men who perpetrate it or the women who are its victims. They did not understand the dynamics of family violence or the problems which victims have in obtaining services from medical and social agencies. They needed assistance in redefining their conceptions of appropriate role structures for the family, as well as the manner in which families should be served by the health and social service organizations.

It was important for committee members to increase their knowledge of the nature and dynamics of spouse abuse. They should know, for example, that spouse abuse is rather widely accepted in the population, that many people consider hitting one's spouse to be necessary and normal (Gelles, 1972:58–61; Stark and McEvoy, 1970:52; Straus et al., 1980:47–48). They should also be made aware of the consequences this situation frequently has for victims, most of whom know their friends and relatives ignore their plight and excuse their husbands' abusive behavior (Gelles, 1972:59–60; Giles-Sims, 1983:59). Committee members also needed an introduction to the suspected causes of spouse abuse, including the role of stress (Giles-Sims, 1983:55–56), and the patriarchal nature of Western society (Davidson, 1977; Dobash and Dobash, 1977, 1979). They also considered the common view that wife abuse is victim precipitated, and learned that most authorities now question that assumption (Straus, 1976; Gelles, 1972:159).

Since the committee's charge focused on a service plan, it was critical that members understand the service needs of abused wives and the problems they encounter in getting these services. Studies indicate that battered women receive little help, whether from doctors, the police, ministers, social workers, or counselors, all of whom tend to ignore or excuse the problem, or worse, to suggest

that it is the woman's fault (Michigan Women's Commission, 1977; Dobash and Dobash, 1977, 1979). With this knowledge, the committee would realize that, without alteration, the existing system of social and health services could not alleviate the problems of abused wives.

Techniques for Providing Information. In providing this information to committee members, four major techniques were used. First, and most obvious, they were provided with references to appropriate books and articles, such as those cited above, and the most committed members probably made an effort to obtain them. However, it should also be recognized that most members of a volunteer committee are unlikely to make the effort necessary to track down such materials. Consequently, the second approach was to provide copies of important materials at committee meetings whenever the cost was not prohibitive. The report of the predecessor committee, which summarized important research and service needs of abuse victims in the local area, was an important source in this regard (Spouse Abuse Project Committee, 1980). Professional journal articles were also distributed, if they were not too methodologically or theoretically complicated. Articles from the mass media could also be used, provided that the information they contained was factually correct and sociologically valid.

Both of these approaches, however, assume that the members are sufficiently committed to do the outside reading. Those who lack this level of commitment require group discussion of important information to help alter their views (Asch, 1948; Janis and Mann, 1977). Hence, the third approach used with the committee was to hold group discussions on a number of issues, particularly with relation to the types of services available in the local community.

Similar discussions also formed the major part of the hearings, to which agency representatives were invited. Guests were asked to discuss the degree to which they saw wife abuse among their agency clientele, and how they handled these cases when they saw them. The hearings were an eye-opening experience, both for the agency representatives and for the members of the committee. It became obvious that few agencies had any method for determining the presence of violence among their clients. Unless the client pointedly informed the worker that violence was a problem, most workers simply assumed that it was not present.

One committee member, a long-time director of a family service agency, expressed concern as to the situation in his own agency. He announced his intention to ask his workers how they determined the presence of abuse among their own clients. He later reported to the committee that the caseworkers' estimates of the number of clients in violent marriages was far lower than the number of cases they found when clients were asked this question directly. Such incidents helped committee members to become aware of the need for constant questioning of their assumptions about violent families.

The fourth and final technique is especially effective for providing accurate information. It requires that the clinical sociologist remain alert during group discussion for evidence of inaccurate information or invalid assumptions on the part of committee members or guests. For example, a common assumption is that alcohol operates as a causal factor in spouse abuse. Many people assume further that the violent behavior will be cured automatically if the alcoholism can be brought under control. These views were expressed by several of the substance abuse counselors who attended our hearings, as well as by some committee members themselves. Authorities question this assumption, however, suggesting that alcohol may be a method by which violent individuals excuse their behavior, rather than an actual cause of the violence (Gelles, 1972:113–117) Furthermore, an alcoholic often experiences greater levels of stress at the outset of a period of abstinence, leading to an even greater tendency toward violent outbursts. Thus the assumption that treatment need not be specifically directed toward the violence is invalid. Substance abuse counselors and committee members alike had to be dispelled of this myth.

It is important that the clinical sociologist be alert to the expression of such inaccuracies, for these incidents offer an opportune occasion for providing new information to correct the inaccuracies. This must be done with sensitivity, lest members and guests be insulted or offended. One effective technique for providing new information is to invite members of the group to check the literature and report back to the group. This increases the members' level of participation and makes them more likely to be persuaded by the arguments (Fazio and Zanna, 1981; Sherman et al, 1983; Taylor et al, 1978; Watts, 1967). Other techniques for involving members in group process may also be effective in generating commitment to group goals, a topic which will be discussed in the next section.

3. Developing Personal Commitment through Individual Involvement

The role of group relationships in attitude stability and change has formed an important part of social psychological theory for some time (Asch, 1948; Newcomb, 1943; Lewin, 1951). Since the goal of the planning activities was to alter the manner in which community agencies operated, it was critical to include key members of these agencies in the planning process, and to obtain their commitment to the group and its goals. In employing this strategy, we combined the use of social structural knowledge, which helps to identify key roles and role players in the social system, with social psychological principles, which remind us that attitude and behavior change is more effectively produced when the individual becomes personally involved in the change process (Sherif, 1966; Janis and Mann, 1977). This approach, which has been termed "cooperative intervention," seeks to involve the individual who will be affected by the change in the change process itself (Straus, 1984).

By encouraging group discussion and allowing members and guests to express their concerns or objections, the group should be able to resolve major objections as they arise. By their involvement in the decision-making process, it was hoped that participants could be induced to accept the group's views on the needs of battered wives. Examples of the effectiveness of this process can be seen in the behavior of several individuals who were assigned to the Justice System Task Force, many of whom were originally reluctant to become involved. It was strongly suspected that only the orders of their superiors or the fear of bad publicity for their departments brought about their participation.

One individual, a staff member at a local prosecutor's office, had once been criticized publicly by women's rights' groups for his insensitive treatment of abused wives who sought his help. After serving for several months as a member of the task force, he initiated a review of his own department's procedures to insure that abused wives would be handled properly. Other members were police officials with a reputation for ignoring the concerns of battered women. After serving for a time on this task force, they often astounded their listeners by supporting changes which they once had vigorously resisted.

This strategy can be used not only with group members, but also with outsiders whose support the group must generate. The success of the group in understanding the philosophies of others and accommodating their goals to these philosophies can be illustrated by one of the more difficult projects which the Education Task Force assumed. This group had placed a high priority on the training of professionals whose services were needed by abused wives. As noted earlier, most had been trained when there was little recognition of the problem of family violence, and their professional training reflected this lack. This is true of law enforcement officials, but since these officials operate under the direction of the courts, task force members became convinced that changes in the police and prosecuting attorneys' offices would be of little value if a concurrent change could not also be produced in the judiciary. Hence the group placed a high priority on training judges in the proper procedures of handling spouse abuse cases. They also recognized that generating judicial support for such a training program would be no small task.

Analysis of the issues occurred in the context of data on the most effective settings for accomplishing attitude and behavior change. Social psychology has long indicated that influence is more effective when exercised by individuals of high status or prestige, or to whom an individual feels attracted (Asch, 1948; Mullen, 1985; Walker et al, 1980). Members of the group realized that judges considered themselves the authorities on legal issues and were not likely to accept training which came from a source outside of the legal profession, or even outside of the judiciary. They would be more likely to accept training regarding spouse abuse if it came from another member of their own peer group, particularly some of the more influential judges. Members of the task force then analyzed the local

judicial system and held interviews with judges who were known to be sympathetic to the problems of battered women. They learned that there was an annual, statewide judicial institute, which included seminars on a variety of subjects.

Further analysis of the judicial training institute indicated that the judges with major responsibility for this program tended to be highly conservative men who prided themselves on their support of the traditional family institution. They were likely to oppose programs which appeared to threaten the traditional family in any way, and some had opposed assistance for abused wives because they believed that this assistance necessarily involved divorce. The committee considered this fact and concluded that these judicial leaders might support training with reference to spouse abuse if they could be convinced that such training would support rather than distract from the strength of the family.

Consequently, they developed an argument which emphasized an important characteristic of most abused wives, namely, the fact that they usually do not want to get a divorce, but only to have the beatings stop (Campbell, 1984:257, 264, 266; Giles-Simms, 1983:62, 137–139; Pagelow, 1984:306, 318). Committee members met with a representative of the judges and tried to convince him that the judicial system would support the stability of the family rather than detract from it if it could help prevent wife abuse. Their arguments were effective; the judges were persuaded, and the judicial training was established. Some of the judicial leaders became staunch supporters of the program. This was accomplished largely because the committee took care to identify key role players in the social structure, to consider their personal values and commitments, and to adapt the group's arguments to fit these philosophical positions.

This strategy of developing personal commitment through individual involvement in group action can be an effective clinical tool in other applied or evaluation research settings as well. Professionals whose careers are primarily action oriented are frequently resistant to the use of social research and often distrust its findings. They are convinced that their own professional judgment as social workers, nurses, and others, is a more valuable guide to effective social action. Consequently, they resist using either the methodology or the results of social research projects. This resistance can be overcome somewhat by involving such professionals as key participants in the research project itself.

CONCLUSION

This article has provided an example of the manner in which a volunteer community planning committee, made up of concerned members of the general public and professionals in key fields, can alter community social processes toward the solution of a community problem. That they were able to accomplish what they did may be attributed, in part, to the employment of sociological

strategies, including analysis of the social situation, written and oral presentations of social scientific data, observation of key segments of community social structure and its role players, and involvement of influential individuals in the planning process. A major drawback of the committee approach, however, is the possibility that some members may subvert the group's activities for their own ends, and clinical sociologists who use this approach should be alert to this concern.

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