

More Than Words: Emotional Abuse in Intimate Relationships
Young Women's Support Group Proposal

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“Sticks and stones will break my bones but words will never break me” is a common saying that is repeated without much thought to its origins (Literary Devices, 2020). However, words can be used to cause harm and emotionally abuse an intimate partner. Emotional abuse (EA) can be challenging to define, track, and measure because the term is often used interchangeably with other terms such as psychological abuse, emotional maltreatment or psychological maltreatment (Goldsmith & Freyd, 2005; Karakurt & Silver, 2013). However, EA can be identified by certain harmful patterns of behaviors such as intimidation, control, isolation, ridiculing, devaluing, withdrawal of affection, insults, threats to a person's well being or someone they care about, destruction of property, gaslighting, jealousy and monitoring, just to name a few (Karakurt & Silver, 2013; Wolford-Clevenger et al., 2017).

EA, especially within intimate partner relationships, has been associated with the development of numerous psychological issues such as depression, Post Traumatic Stress Disorder (PTSD), anxiety, loneliness, eating disorders, low self esteem, in addition to significant physical health issues such as impaired immune functioning, decreased health habits, increased substance abuse, sleeping deficiencies, fibromyalgia and chronic fatigue syndrome (Karakurt & Silver, 2013; Watkins et al., 2014). EA can be insidious yet was found to be a more powerful motivator than physical abuse for women to seek divorce or separation (Karakurt & Silver, 2013).

The group's goal is to provide a safe and supportive environment with the purpose of reducing isolation, assisting members in identifying EA behaviors in intimate relationships, promoting self-care, raising awareness in labeling emotions, and empowering members to take the steps towards desired changes in their lives and relationships. Studies done on time-limited

support groups for women who experienced IPV reported that storytelling was found to be effective in connecting women with one another, which in turn led to significantly less feelings of isolation and depression, increasing self esteem, self efficacy and confidence to make life changes (Sullivan, 2012). Researchers have noted that both individual and group Narrative Therapy have helped women that suffered domestic violence feel less isolated, reduced symptoms of depression as well as PTSD and assisted in finding new meaning in their lives, reconstructing their life stories, and increasing feelings of empowerment that encouraged them to make new decisions (Brosi & Rolling, 2010; Menard et al., 2018). For these reasons, this group proposal proposes the use of a psychoeducation and counseling approach that incorporates Narrative Group Therapy techniques (NGT).

EA was reported to be the most prevalent form of IPV from adolescence to adulthood, especially for female college students (approximately 40-89%), therefore highlighting a need among this population (Karakurt & Silver, 2013; Watkins et al., 2014). Goldsmith & Freyd (2005) also noted that young women who suffered from Childhood Emotional Abuse (CEA) experienced symptoms of depression, anxiety, and dissociation yet showed difficulty identifying their emotions, so much that they did not perceive themselves as having been abused. Therefore, the group will be composed of a homogeneous group of young women between the ages of 18-25 years of age, who are attending college and currently in an intimate relationship that exhibits signs of EA or IPV. The Counseling Agency's Director will be contacted and presented with the group proposal. If accepted and approved, the agency will provide a liaison between colleges and the agency. Participants will be recruited through flyers (see Appendix A) placed on school bulletin boards, the agency website, or referred by other agency colleagues.

Group candidates will be screened and complete the Gottman Emotional Abuse Questionnaire (EAQ) to ensure group requirements are met (Karakurt & Silver, 2013) . The potential member must also be willing to embrace the results of the EAQ and open to talking about EA with the other members. The counselor will ask questions regarding the extent of IPV the participant is experiencing to ensure that they are not in danger or pose a danger to other members of the group. Members still in denial may benefit from the group but would not be a good candidate since the group is to support women who acknowledge they need help. During the interview the counselor will document at what stage of change a member is in regard to addressing issues in their IPV relationship. The counselor will thoroughly review the informed consent with the candidate and inquire about their expectations of the group.

The proposed group will be a time limited, but ongoing closed group, composed of 8 female participants. The group will meet once a week, for 12 weeks (except on holidays and school academic breaks), for one hour, in consideration of students' busy schedules. The length of 12 weeks allows for learning and bonding among members at an unhurried pace, yet motivates members to make the most out of the meetings (Corey, 2018). The group will be ongoing due to the continuously growing overall issue of EA in this country, particularly during the COVID-19 pandemic. According to the National Domestic Violence Hotline (NDVH) (2021a), in 2020, 96% of calls, texts and chats received involved EA and verbal abuse. Due to the sensitive topic of the group, it will be closed and limited to 8 members to promote cohesion, as well as, provide stability that will allow trust to be built among members. To improve probability of member attendance and save students traveling time, the group will be located on the school campus in a private and discreet location.

The group will begin with an orientation session to review guidelines within the informed consent, group expectations and group process. During the following sessions members will be provided with psychoeducation such as, signs of EA in intimate relationships and the possible psychological long term effects EA can have on a woman's mental and physical health. CEA will be briefly discussed to bring awareness of any recurring patterns. The women will be directed to the loveisrespect.org website to take quizzes that will assist in evaluating their knowledge of self-care and healthy relationships and record their scores (NDVH, 2021a). Members will be guided to an online assessment to measure their emotional intelligence (EI) and help them understand the value of being in touch with their emotions (Cabras et al., 2020). The counselor will provide opportunities in between or during psychoeducational activities for members to share their stories and experiences. As the therapist listens carefully, asking questions appropriately and inviting members to ponder on how they are dealing with their problem, the group feedback can help the member by providing alternative ways to reconstruct their story (Corey et al., 2018). The group leader will engage group members in "externalizing conversations" to assist with separating the problem from the person's identity and help them see that they possess what is needed to remove themselves out of an oppressive situation (Corey et al., 2018, pg. 140).

The therapist will remind members periodically of how many weeks are left before the group ends and the last session of the group will be exclusively to allow members to share their takeaways and how they would like to put into practice what they have learned (Corey et al., 2018). Evaluation of the group will be made through two means. First, the members will retake the quizzes from the loveisrespect.org website and the emotional intelligence assessment to compare and make note if there was any noted improvement in their scores (NDVH, 2021a).

Secondly, the counselor will meet with each member for a closing interview and have the member retake the EAQ and evaluate if the client has advanced in the stages of change. The group leader will obtain feedback by asking what the participant liked the most and least about the group, in addition to what the member found to be most beneficial and what was lacking. Lastly, the counselor will provide resources or referral if the member requires further support or counseling.

In regard to the ethical and legal considerations for this group the agency and group counselors will keep confidentiality and make members aware of confidentiality limitations. The informed consent will be obtained from every member and thoroughly reviewed at the initial interview, briefly again at the first group meeting, then as needed throughout the group. The informed consent will contain details of the group purpose, process, requirements, benefits and the risks of how group participation may impact them personally and socially (Corey et al., 2018). The agency and assigned counselors will take responsibility for being informed of state laws and regulations regarding group therapy and keep detailed records of group sessions (Corey et al, 2018). Due to the nature of EA and IPV members will be screened and questioned to ensure they are not endangering themselves or others. Referrals will be made for candidates that are not a good fit for the group but are in need of assistance (Corey, et al., 2018). To ensure competency, group leaders will have training in group dynamics and IPV, with previous experience in using NGT. The counselor will take into consideration the multicultural aspects and discuss how this will be handled respectfully by the group leader and its members.

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Appendix A

Group Flyer

