

**REDUCING THE RECURRENCE OF DOMESTIC ABUSE AMONG MALE INTIMATE  
PARTNERS: A CASE STUDY OF THE PG STOP VIOLENCE PROGRAM OF THE  
NORTHERN JOHN HOWARD SOCIETY**

By

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## Abstract

The purpose of this qualitative research was to explore the effectiveness of the Stop Violence program for men provided by the Prince George, Stop Taking it Out on Your Partner (P.G. S.T.O.P.) of the Northern John Howard Society. This research explores the outcomes of intervention for men attending the (P.G. S.T.O.P) at the Northern John Howard Society. For the purpose of this research, open-ended, semi-structured interviews were conducted, and the participants were engaged in a spirit of cooperation and joint participation.

A thematic analysis was applied to the collected data in four interviews, which yielded five main themes of importance: abuse, family history of violence, support, anger, and change. From the analysis, it was evident that the participants benefited from the program content and structure, including group and staff interaction and support. It is also important to understand that change does not happen instantaneously, but rather as a process: as these men attested to their journey through the direction of healing. The recommendations in this thesis include the need to implement an effective intimate-partner violence treatment and intervention model that incorporates the use of a person-centered approach and a trauma-informed practice. There is also the need for more research on gender analysis and accountability, combined with individualized treatment planning based on an in-depth assessment of individual biological, psychological, social, and spiritual treatment needs at intake.

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## Dedication

This thesis is dedicated to my parents Emmanuel and Lawretta Ezedebego for the biological, psychological, social, and spiritual nurturing, training, and discipline they instilled in me as a child. It is their guidance that has made me a responsible, caring, loving, and respectful husband and father.

This thesis is also dedicated to my wonderful sister Obiageli Momah and all the women who survived emotional, sexual, physical, spiritual, and/or financial violence; you are all amazing women with undeniable strength, determination, and courage. Witnessing your journey to independence Obiageli has inspired me to believe in the power of resilience. Also to all the women out there who are still fighting for their freedom from oppression and abusive relationships, and for self-reliance, and self-empowerment.

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## Chapter One: Introduction

Domestic violence (DV) and abuse are indiscriminate behaviours. Like a plague that cuts across race, colour, creed, and culture, DV occurs within all age ranges, ethnic backgrounds, and economic levels; it occurs among heterosexual couples and within same-sex partnerships.

Domestic abuse occurs between two persons where one has power over the other, causing fear and physical, sexual, and/or psychological harm. It may be a single act or a series of acts forming a pattern of abuse. DV can occur in any relationship; however, women are primarily the victims and men are primarily the perpetrators (DAIP, 2012). While women are more commonly victimized, men are also abused, most typically in the form of verbal and emotional abuse.

Abusers do not play fair: they may use fear, guilt, shame, threats, and intimidation to wear the abused down and keep them under control (Hovius, 2005). Domestic abuse is a complex phenomenon and it occurs in different patterns. Abuse may include physical, sexual, financial, and emotional abuse, as well as controlling a partner's relationships, for example restricting access to family, friends, and support networks. Domestic abuse can cause serious physical trauma, neurological injury, and death; however the psychological effects of abuse are often more debilitating than the physical injury. Most individuals who are victims of spousal abuse suffer much more than from the physical violence alone, and may experience "lowered self-esteem, depression, drug and alcohol abuse, suicidal tendencies and diminished capacity to parent" (Hovius, 2005 p. 52).

Violence in relationships is a crime in Canada that could attract the following consequences for perpetrators depending on the severity of the abuse: jail time, probation and restraining order, or referral to counseling. Abusive behaviour is never acceptable, regardless of the age or gender of the person initiating it. The law surrounding abuse encompasses married,

common-law, and dating relationships and includes violence against males, females, and transgender individuals in varying heterosexual or homosexual relationships. Violence within relationships has distinctive dynamics not found in other violent crimes in that the overwhelming majority of victims are female (Domestic Abuse Intervention Programs (DAIP, 2012). DAIP (2012) defined violence as an act or threat of physical assault by a partner or an ongoing or past intimate relationship assault by another, despite their marital status or living arrangement at the time of the assault or threat. It is important to note that the domestic violence may also include intimidation, mental or emotional abuse, sexual abuse, neglect, deprivation, harassment, and financial exploitation. DAIP explain that DV is not a result of losing control: it is an intentional effort to control another person through patterns of behaviors which may become increasingly violent. Domestic violence can include (but is not limited to): assault with a weapon, biting, pinching, burning or choking, kicking, pushing, throwing or shaking, slapping, hitting, tripping, grabbing or punching, tying down or otherwise restraining or confining, and murder (Domestic Abuse Intervention Programs, 2012). Everyone deserves to be safe, valued, respected, and treated with dignity.

Children and young people may experience harm such as emotional and psychological trauma by witnessing violence in adult relationships, or by being the direct victims of violence, or a combination of the two. In fact, the Canadian Incidence Study of Reported Abuse and Neglect (2012) characterized witnessing domestic violence as abuse, as it poses a significant challenge to children's development and well-being. People can experience a great deal of psychological abuse, even if it never occurs with physical abuse (O'Leary & Williams, 2006). Women who have been physically abused or battered have also reported psychological abuse. They reported that the psychological abuse had a more negative effect than the physical abuse

(Arias & Pape, 2001). Anything that goes to the core of one's self-esteem is more likely to be emotionally damaging to the person (Woodin, 2008). While considerable effort has been expended on interventions to lessen the impact of domestic abuses of women, on protection for women in shelters, and on treatment groups for men, there appears to be a lack of research in assessing the outcome of intervention for the perpetrators of domestic abuse (Tutty, Bidgood, & Rothery, 1993).

DV is not a private matter. All people, directly or indirectly, economically and emotionally are affected by the spillover of domestic violence and all have a role in ending it. In decades of dealing with the effects of domestic violence, many tools, programs, and services have been created to address the needs of both victims and perpetrators of domestic violence. These programs and services have been supported by governments, non-governmental groups, and communities. The purpose of this research was to assess and measure the effectiveness of an intimate partner violence intervention program to help male perpetrators transform to non-abusive partners. This research also sought to identify the pattern of change in the men that attended the P.G. S.T.O.P. For the purposes of this qualitative case study, participants were invited from the "P.G S.T.O.P - Prince George stop taking it out on your partner" intervention program at the Prince George Northern John Howard Society. The vision of the PG Stop Violence program is to help in stopping violence in relationships through the provision of effective, accessible, ethical services for individuals who have been abusive in relationships. A qualitative case study is an approach to research that facilitates exploration of a phenomenon within its context using a variety of data sources (Mayan, 2009). Based on the findings, this research will provide recommendations for the development of a domestic violence strategy that

will specifically target prevention, public education, and provision of adequate services and interventions for men that abuse their intimate partners.

### **Inspiration: My Personal Reflection**

This paper utilized a qualitative study to examine the transformational experiences of male intimate partner abusers as they undertake the “PG STOP - Prince George stop taking it out on your partner” intervention program at the Prince George Northern John Howard Society. I am passionate about this topic because I have witnessed second-hand the effects of DV through a seventeen year marriage between my elder sister and her partner. My sister was married to a fellow Nigerian in 1988 and by 1991/92 they had immigrated to the United States respectively. While they lived in the US, her husband abused her physically, emotionally, psychologically, and verbally. The situation was so deplorable that she was prevented from forming relationships or having contact with her family for the seventeen years that they lived together in the United States. She was confined to the home and her husband’s office; she was not permitted to seek employment, work outside of her husband’s office, form a career, and learn to drive, or go to school. However, my sister was more fortunate than most, as she was able to escape. Fortunately, a new female employee at her husband’s office, who had witnessed the abuse and oppression my sister was subjected to, lent her cell phone and encouraged her to call a family member or a close relative. My sister had copied down my house phone number when I called her husband’s office in 2008. During the call, she concealed her identity, for fear of punishment from her husband, as she was instructed by her husband not to talk to her family members, or to answer phone calls that did not originate locally from Atlanta, Georgia. Using this woman’s cell phone, my sister called me in mid-October 2009. It was a great relief to hear her voice and to

know that she was still alive and well. I promised her that I would come to get her, whenever she was ready. Two weeks after the initial contact on November 4, 2009, she informed me through the fellow employee that she would be ready to leave. I left Prince George with my father-in-law for Seattle, Washington on November 2, and flew into Atlanta, Georgia on November 3. As I parked in front of their office, she came out and entered my rented vehicle; I then drove her to the Rockdale County sheriff's office, where I had previously lodged an official complaint of domestic abuse. At the sheriff's office she gave her statement and we went to the Rockdale court to start a legal request for a restraining order and for custody of their daughter. I was able to rescue her and her then six-year-old daughter on November 4<sup>th</sup> 2009 and they were allowed by the court to come to Canada with me. My sister and her daughter have been living with me ever since. My sister completed an Early Childhood Education Certificate at the College of New Caledonia in September of 2011 and received her work permit in January 2012. She got a job the same year, and moved into her own apartment in January of 2013. It has been a great joy to see the journey of my sister from abuse, obscurity, and oppression, to freedom, empowerment, and self-reliance.

My sister informed us that the abuse started subtly in the early days of their marriage and worsened over the years. She said that the very first time he abused her, he came back and asked forgiveness, claiming that it was a mistake and would never happen again; he also instructed her not to tell anybody. The abuse continued as he became more controlling and possessive of her time and movements. Each time he lost his temper; he would physically abuse her and would later ask for forgiveness. My sister said that she kept thinking and hoping that he would change, but the isolation, neglect, and abuse continued unabated throughout their marriage. He blamed my sister for the abuse.

My brother-in-law, during his courtship of my sister, once told her that his father was very abusive to his mother when he was a child, but he decided to have an amicable, peaceful, and loving marriage, as he did not want to follow in the footsteps of his father. In confirming this story, during his mother's funeral, his family wrote a eulogy about why their mother was nicknamed 'patience'; she was the third wife married to their father, and was able to stay married to their abusive father until he died. The previous women married to their father abandoned their only children and ran away from the marriage due to the high level of abuse from their husband. My brother-in-law's mother remained in the marriage until her husband died. My brother-in-law, having witnessed tremendous abuse toward his mother, grew up to become an intimate-partner abuser himself, even after he said he would not do so. This scenario confirms the theory that children and youth who have witnessed domestic violence are impacted in a negative manner in their adult life and therefore need to be supported and encouraged in intervention. My sister's experience, situation, and the predicament she was in, reminds me that there are many male abusers who need help and support to stop their abusive behaviour. In addition, there are women and children who presently undergo the same or even worse abusive situations in different families and homes. Families are supposed to provide relationships where individuals are loved, mutually and collectively supported, respected, helped, sustained, nurtured, and prepared to achieve healing, restoration, and self-fulfillment; sadly there are many instances where the opposite is occurring.

As a correctional officer I have witnessed male adult spousal violence offenders (K-file offenders) enter jail repeatedly for assaulting their spouses. Incarceration appears not to deter offenders as they repeatedly re-offend with new partners. While still incarcerated, some still abuse their partners over the phone or through mail. This experience has provoked the question

in me: do humans have the capacity to change? The curiosity that motivated and inspired my research interests is first to explore humans' capacity to change, and second to determine the role and what interventions bring about this change.

My research will focus on increasing awareness of and promoting reflection on domestic violence, exploring the support available to male domestic abusers to change their perceptions, thoughts and actions, thus stopping the cycle of violence. Therefore, my main research question is: how does the P.G. S.T.O.P help men reduce the recurrence of Intimate Partner Violence (IPV)? It is important to understand that it is not only poor and uneducated men who abuse, but also wealthy, privileged, and educated members of society. Some traditional beliefs suggest that socioeconomic factors such as poverty, alcohol, and difficult living conditions, are the cause of domestic violence (Canadian Women's Foundation, 2008). It is crucial to emphasize that, while these factors may contribute to frustration and conflict, they are not the root cause of domestic violence. This thesis has a problem with the statement credited to the Canadian Women's Foundation (2008) that the root cause of domestic violence is the low value and status the community places on women. IPV as previously noted, goes both ways (women to men as well), and also occurs within homosexual relationships between men, and in countries which value women more highly (although it may be more hidden where the laws are more stringent). The nature of the violence changes, but manipulation, power, and control don't. Therefore, the root cause is the desire to have power and control over another. This type of gender-based analysis of why domestic violence happens is essential as it can lead to real and sustained change.

As a researcher, I acknowledge that this research and its findings could be influenced by my personal opinions and biases, the experiences gained from the roles society and customs have placed on gender roles, my inherent patriarchal cultural background, and the emotional

attachment to my sister's DV experience. In order to minimize the impact these experiences and emotions will have on this research, I will engage reflexively with the data and myself, and continually actively examine my subjectivity.

### **Definition of Terms**

For the purposes of the current study, I define *change processes* as inner and outer resources or influences, own ability and support services that participants would identify as facilitating movement toward non-abusive behaviors and attitudes; this may include tangible and intangible activities (Silvergleid, & Mankowski, 2006).

In conducting research and examining the literature, it is important to define specific terms of the research study. There are a number of key concepts to define, and for the purpose of this research, I use the following definition of domestic violence to understand the mindset of a perpetrator of domestic violence.

*Domestic violence* is deliberate and purposeful violence, abuse and intimidation perpetrated by one person against another in an intimate relationship. DV is defined as willful intimidation, assault, battery, sexual assault or other abusive behaviour perpetrated by one family member, household member, or intimate partner against another (Canadian Women's Foundation, 2008).

For the purpose of this research, *Oppression* is defined as a repeated, widespread experience of systemic injustice. It is the exercise of authority or power in a burdensome, cruel, dishonest, wrongful, unfair, or unjust manner. It is the exploitation of difference by a dominant group and the denial of difference (Mullally, 2010).

*Anti-oppressive practice* is a person-centered philosophy. It is an egalitarian value system, which seeks to reduce the harmful effects of structural inequalities upon people's lives.

It focuses on both process and outcome; it is an empowering way of structuring relationships between individuals to reduce the negative effects of hierarchy in their immediate interaction and the work they do together (Dominelli, 2002).

*Clinical Intervention* describes numerous professional methods designed to help individuals who are having problems they cannot manage successfully on their own. The purpose of an intervention is to help to assess, improve, and maintain the health of a person, in a clinical situation (Rudlin, 2012).

## **Chapter Two: Literature Review**

There has been a growing body of research on DV against women. Research has been conducted on the dynamics of violence, why violence occurs, the effects of violence, children who witness violence, and why men abuse (Alexander, 2008). This literature review evaluates, analyzes, and summarizes domestic abuse along with other forms of oppression and how they may have drastic effects on individuals, families, and groups. Interventions were evaluated, analyzed, and summarized, along with how they helped in reducing abusive behaviours in male abusers. IPV has conventionally shown men as the primary perpetrators of domestic violence. Usually, IPV has been seen through a feminist paradigm and understood to be the expression of men's power over women, occurring in intimate heterosexual relationships, and supported by a patriarchal culture (Alexander 2008). Violence is most often considered a male phenomenon with women either remaining solely victims or assaulting their male partners in self-defense. Stith, McCollum, Amanor-Boadu, and Smith (2012) view violence as the primary problem, with coexisting issues as distractions that help men evade responsibility for their violence. In their study, the responsibility for violence was unilaterally men's, while the costs were unilaterally women's, and the focus of intervention was to end violence specifically against women.

### **The Impact of Childhood Exposure to Abuse**

Fraley and Shaver (2000) articulated that attachment research is guided by the assumption that the same motivational system that gives rise to the close emotional bond between parents and their children is responsible for the bond that develops between adults in emotionally intimate relationships. The attachment system, a system originally adapted for the ecology of infancy, continues to influence behavior, thought, and feeling in adulthood (Fraley & Shaver, 2000). There is literature concerning how childhood abusive experiences manifest in

adulthood in intimate partner domestic abuse. The aftermath of childhood abuse can manifest itself at any age in a variety of ways.

Physical, sexual, and psychological trauma in childhood may lead to psychiatric difficulties that show up in childhood, adolescence, or adulthood. The victim's anger, shame, and despair can be directed inward to spawn symptoms such as depression, anxiety, suicidal ideation, and post-traumatic stress, or directed outward as aggression, impulsiveness, delinquency, hyperactivity, and substance abuse (Teicher, 2000, p. 3).

Brothers (2001) found that people who were abused as children can display abusive behaviour as adults. It is important to note that not all people who were abused as children, especially women, grow up to become abusers. However, childhood physical abuse (CPA) has been associated with post-traumatic stress disorder (PTSD), depression, aggressive behaviour, poor social problem-solving skills and communication skills, as well as lower levels of empathy and sensitivity toward others (Runyon, Deblinger, Ryan, & Thakkar-Kolar, 2004). Left untreated, these symptoms and behaviours have the potential to alter the brain structure in ways that makes one more vulnerable to intense, negative emotions (McKay, Wood, & Brantley, 2007). It also may lead to chronic psychiatric difficulties and be associated with violent, criminal behaviour in adolescence and adulthood (Lansford, Miller-Johnson, Berlin, Dodge, Bates, & Pettit, 2007), as well as abusive or coercive behaviors in dating relationships (Widom & Brzustowicz, 2006). Although the long-term effects of CPA on children have been well documented, there is a lack of research aimed at identifying specific, effective interventions to treat this population. There is also a need to examine the recurrence of future physical abuse, post-traumatic stress symptoms, and parent-child interactions in adult life of children that witness physical abuse.

Runyon, Deblinger, and Steer (2010) concluded that children who do not receive treatment, and continue to exhibit PTSD symptoms, may be more vulnerable to being re-victimized in childhood and adulthood and may engage in violent behaviour toward others. They suggested the need for longitudinal studies to follow children through adolescence and adulthood to examine the impact of treatment on re-victimization rates and involvement in violent behaviour. Therefore, it may not be an overstatement to deduce the possibility that intimate partners, who use physical and other forms of abuse on their partners, would likely have been abused as children or suffer from an untreated post-traumatic stress disorder.

### **The Feminist Lens of Oppression**

The radical feminist philosopher Frye (1993) said that the “root of the word oppression is in the element press, and something pressed is something caught or among forces and barriers, which are so related to each other that they jointly restrain or prevent the thing’s motion or mobility” (p.48). The experience of oppressed people is that the living of one’s life is confined and shaped by forces and barriers that are not accidental or occasional and hence; avoidable, but are systematically related to each other in such a way as to catch one between and among them and restrict or penalize motion in any direction. The feminist lens conceptualizes that the root causes of violence include the impact of the hierarchical society on gender behaviour, socialization of males, structural oppression of women, and the systemic devaluation of women (Alexander, 2008). Moreover, from this perspective, male dominance, coupled with male aggression as an acceptable societal norm, condones violence. The acceptance of male dominance and aggression permits and even encourages violence against women to occur (Alexander, 2008). Further, O’Leary, Smith, and O’Leary, (2007) ruled out alcohol misuse/abuse, childhood history of aggression, experienced anger, physiological reactivity, family

income, family size, income disparity, husband's age, attitudes approving of partner aggression, and unrealistic relationship expectations as the possible causes of aggressive behavior in men.

They concluded that the strongest direct predictors of partner aggression for men are anger expression, marital adjustment, aggression in family of origin, perceived social support, partner responsibility attributions, perceived power imbalance, and dominance/jealousy. To adequately conceptualize violence in couples, it is best to use a dynamic approach that captures influences at both the individual developmental and dyadic interaction level, that will embrace the changes in context, individual characteristics (e.g., substance use), and the partners themselves (Capaldi, Shortt, & Kim, 2005). The classic feminist argument is that domestic abuse is caused by the manifestation of patriarchal power men have over women. Evidence for this view of IPV came from studies using criminal justice and shelter-seeking populations and showed considerable gender asymmetry: many more men than women are arrested and many more women than men seek shelter in domestic violence victim shelters.

The Duluth Domestic abuse Intervention Project (2012) was informed by the feminist perspective that violence and intimidation are the outcome of normal male childhood socialization and also a tactic employed by men to assert power and control over their female partners. The project aimed at changing the violent behaviour derived from the patriarchal social system, by re-socializing and helping abusive men end their abusive behaviour. The methodologies included developing social skills, developing insight into the experiences and feelings of women, and assisting abusers in understanding the tactics of power and control (Madoc-Jones & Roscoe, 2010).

## Exploring the Dynamics of Domestic Abuse

The ideological view that domestic abuse is asymmetric (gender sided) and predominantly perpetuated by men has come under serious scrutiny in the political sphere, as recent studies have suggested that domestic abuse is sex-symmetrical behaviour (common among males and female partners) (Whitaker, Haileyesus, Swahn, & Saltzman, 2007). It has also been challenged by research using community samples (Johnson, 2006). Although research examining arrested offenders or victims seeking shelter continues to show dramatic gender asymmetry, community-based studies find that IPV perpetration and victimization may be more gender symmetrical than was previously thought, with participants reporting male-perpetrated, female-perpetrated, and reciprocally perpetrated violence (Johnson, 2006). Whitaker, Haileyesus, Swahn, and Saltzman (2007) found that 24% of all relationships have elements of violence and half of the relationships were reciprocally violent where both partners assaulted each other.

Johnson (2006) identified four types of violence among heterosexual couples: situational couple violence, intimate terrorism, violent resistance, and mutual violent control. Situational violence is more likely to be bilateral and involves conflict over a particular issue. In contrast, intimate terrorism generally involves unilateral violence and includes a high level of coercive control (Simpson, Doss, Wheeler, & Christensen, 2007). Violent resistance involves violence that is enacted to resist intimate terrorism and may have the primary motive of wanting to protect oneself, or be the result of an expression of anger or resistance to a controlling partner. Mutual violent control includes two equally coercive partners engaged in a struggle for control of the relationship. Of these four types, situational violence is hypothesized to be the most prevalent type of relationship violence, particularly within samples from the general population and in

couples seeking conjoint therapy (Simpson, et al, 2007). In fact, Johnson (2006), when describing situational violence, suggested “the core problem is one of communication skill deficiencies for which an individual compensates with verbal aggression that then escalates into violence” (p. 18).

Babcock, Canady, Graham, and Scharf (2007) identified the characteristics of abusers or rather what abusers have in common. They concluded that the characteristics of male intimate partner abusers are not the same. Their findings indicate that there is growing consensus that two major types of male perpetrators exist: those described as characterological and those described as situational. The characterological perpetrators are prone to violence. Violence for these types of abusers is a tool of control and their overall desire in relationships is to dominate and control a partner; violence is not necessarily limited to the family. Situational perpetrators, on the other hand, tend to be in relationships in which there is more likely to be reciprocal violence and where violence serves to exert control over specific interactions, rather than as part of an overarching pattern of domination. Anderson (2005) suggested that the issue of sex-symmetry in domestic abuse is not a methodology issue, but rather a theoretical one that can be viewed through the individualist, interactionist, and structuralist lenses.

**Individualist Lens of Domestic Violence:** The theory of gender has been a major dominant factor in intimate partner abuse. The concept behind individualist theory suggests that males have the propensity to use power, control, aggression, and violence in an intimate partner relationship. Anderson (2005) stated that males are perceived to be more aggressive and controlling, and ultimately are the perpetrators of domestic abuse. In distinguishing the differences in gender, masculinity and femininity are traits that men and women incorporate into

their selves or identities, either through a biologically determined predisposition to these traits or through socialization processes.

**Interactionist approaches:** This approach views gender as a characteristic and an outcome of social interaction rather than as an individual characteristic that predicts behaviour (Anderson, 2005). This means that individuals in their daily interactions with others perform activities in order to live up to social expectations of masculinity and femininity. The interactionist approach shifts our thinking about the question of how masculinity causes violence to the question of how violence causes masculinity. Interactionist gender theory suggests new ways of thinking about gender and intimate partner violence. The paradigm shift in this approach is that masculinity does not cause violence, but violence depicts masculinity. This approach argues that violence is not gender-neutral behavior, but rather that gender can be constructed through the practice of violence.

**Structuralist approach:** This perspective argues that gender exists as a social force that operates independently of individual wishes or desires (Anderson, 2005). Gender is a system of stratification that places women and men into unequal categories, roles, and occupations. This approach insists that even when men and women do not desire to live gendered lives, they are forced to do so by the pressure that has been placed on the roles of gender by the social structure. It hypothesizes gender as a pattern of resource-distribution and social organization rather than as a predictor of individual behavior (Risman, 1998). The presence of these social structures within marriage assigns gender roles and responsibilities of husbands and wives, and influences the way women and men experience intimate partner violence. This means that marriage is experienced differently by women and men. Therefore, there is a need to understand the ways in which

women and men encounter different constraints to the perpetration of violence, and different barriers to stopping the violence or leaving the relationship (Anderson, 2005).

### **Domestic Violence as a form of Oppression**

It is pertinent to understand that domestic abuse is a form of oppression. Frye (1993) commenting from a feminist perspective, pointed out that oppression does not occur because people face one specific barrier; oppression occurs because people are in a cage with no escape. She defined oppression as something trapped among forces and barriers, so related to each other to the point of jointly restraining, restricting, or preventing the mobility of a thing. From a more general perspective, Payne (2005) described oppression or discrimination as simply seeing others as different from ourselves or having a sense of judgement towards others. It also means identifying individual and group characteristics as inferior when compared to an individual or group with conventionally valued characteristics (Payne, 2005). Discrimination is predominantly based on race, gender, and ethnicity. It is significant to note that oppression exists both on a wider scale and local level. It is also based on class distinction and sexism. Women are often discriminated against based on their gender, for example in job discrimination, where there is disparity in salary with their male counterparts. Women are socially constructed as a weaker gender, and this faulty idea has encouraged abuse and control of women by their abusive intimate partners.

Oppression need not be extreme or involve the legal system, as in slavery, apartheid, or the denial of the right to vote, or violent, as in tyrannical societies. According to Mullally (2010) civilized forms of oppression are embedded in unquestioned norms, habits, and symbols, in the assumptions underlying institutions and rules, and in the collective consequences of following those rules. Oppression refers to deep and vast injustices some groups suffer as a consequence

of often unconscious assumptions and reactions of well-meaning people in ordinary interactions; it is supported by the media, cultural stereotypes, and structural and social features of bureaucratic hierarchies and market mechanisms. Oppression is the deprivation of fundamental individual and group human rights, equality rights, and a sense of belonging, thereby making the oppressed vulnerable to feelings of inferiority and worthlessness. It is surprising that oppression still exists in this civilized society where the legal provisions demand that everyone should be treated equally with respect and dignity. The Canadian Charter of Rights and Freedoms (1982) states that:

every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination and, in particular, without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability (section 15).

In the same vein, the United Nations Declaration of Human Rights (1948) states that:

All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood, and no one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment (Article 1 & 5).

Domestic abuse arises from the fact that intimate partners perceive themselves as having more power compared to their partner, and therefore they seek to control their partners through abuse and intimidations. It is also important to understand that unequal power relations between women and men, which begins through the socialization of girls and boys, results in the belief that women have less worth and lower status than men.

Bishop (2006) talked about historic greed, ambition, and selfishness enshrined in the patriarchal social system, brought about in a system of class, division, discrimination, oppression, and abuse, where unequal treatment was meted out to women and children. In the 17<sup>th</sup> century according to Bishop, women were not permitted employment in the industry, and where they were employed, they were paid less than their male counterparts. It is very sad to note that this form of oppression against women still exists in the familial, social, political, economic, structural, and cultural systems of society. Women have been dehumanized, deprived, and in some cases, killed. Women who experience domestic abuse are most times without any form of support when they leave such abusive relationships. Some women are too afraid to leave their abusive husbands in fear of financial insecurity and partner revenge against them or their families. They are sometimes not self-reliant or self-sufficient, and tend to be uninformed about any physical, financial, psychological, and support networks which they can utilize. Abused women in some cases may be subjected to disadvantaged positions by their abusers; some women, due to such a level of isolation and abuse, may lack basic skills, education, supportive relationship networks and financial support, and thus are unable to support themselves without substantial support from government, social, and non-profit groups. Power and control are mostly the bedrock of abuse. While abuse happens within all socio-economic classes, women who are disadvantaged in skills and finances are at high risk of abuse. It is important to point out that abuse also happens at “higher levels” and the social pressures to stay in relationships are intense. For example, Donna Lee Kelly was killed in 2004 by Munnecke Allan Richard, a well-respected member of society. He was music committee chairman for the Tournament of Roses in 1998-99 and Bandfest director in 1997. He was also a well-known member of the San Marino Community Church. The church newsletter, Faith in Action, once profiled Munnecke and his

wife, Gail, as "the kind of Christians that might be considered the beating heart of the Church" (Los Angeles Times, 2012).

### **Power and Control**

The balance of power and control has a major role to play in the dynamics of domestic abuse. In North American and most other societies, patriarchy determines the worth of human beings and encourages gender roles to limit and establish control and power dynamics in relationships. Traditional gender roles in our society place men in positions of power over women in most socio-political areas, for example, family, work, religion, recreation, etc.; in addition using violence as a means of gaining power and control is encouraged through media and other forms of socialization. Society tends to place the highest value on those individuals with the most power and control. Because this foundation is set in our society, our belief systems are affected. Abusive men thrive on the misconception that they have an entitlement to power and control over their partners. They misconstrue gender to mean that they are the head of the household, and women should follow their lead, and further that they have the right to use violence to fulfill their desires.

Bishop (2006) identified three forms of power and control, namely: Power-over, power-within, and power-with. Power-over is the form of power that is used to dominate others. It establishes formal class structure, inequality, segregation, and division within the human race. Power-over is the oppressive form of power. People who use power-over others think that they are better and more privileged than others; they are insensitive to the plight of others. Power-within is the inner power that one possesses and can manifest as wisdom, intelligence,

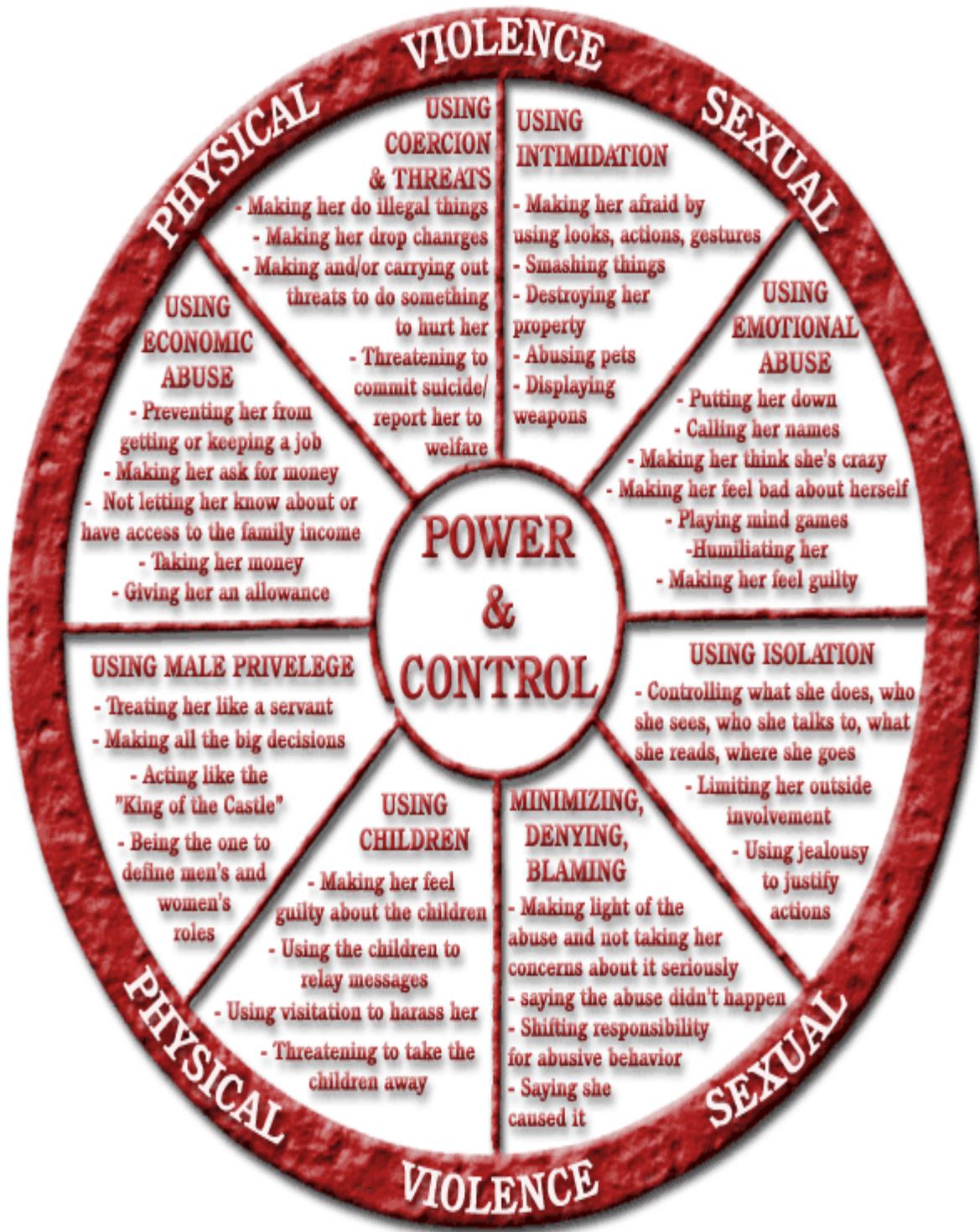
knowledge, understanding, skills, ability, and resilience. Finally, power-with ensures equal, respectful, fair treatment, and mutual cooperation and corroboration within relationships.

Cross and Madsen (1998) noted that society-driven gender roles that result in differences in power have a profound effect on a host of behaviours. Taken together, women's childhood socialization, their adult roles, and their social-economic status exemplify their relative disempowerment. In addition to the social roles imposed on women and the socioeconomic disadvantages they face, a large number of women experience violence as either children or adults. Given the differences in gender treatment, it is not surprising that the psychological make-up of women is similar to the psychological make-up of powerless people, while the psychological make-up of men is similar to the psychological make-up of powerful people (Cross & Madsen, 1998). When individuals and communities place less importance and value on women, they fail to respect women's fundamental rights as humans.

Another plausible reason DV happens in relationships is that a man feels entitled to violate a woman's right, and does not see her as an equal human being, and feels he has authority over her. Perpetrators of domestic violence do not recognize that women have a right to make their own decisions and are entitled to the same human rights and dignity as men. These root causes of domestic violence must be explored if meaningful and sustainable change is to occur in community. It is an awful experience to see how the lower value placed on women by society plays out in families. In Chinese society for example, couples abort their female child because of the one-child policy: they desire a male child. A Japanese student once said that her father bought a male dog to compensate for the fact that he had three girls with no boy.

Society needs to place the same worth on males and females and change their perception on gender equality. While abuse happens within all socio-economic classes, it is important to point out that power and control is the basis for DV.

Figure 1: Power and Control Cycle.



(Duluthmodel, 2012)

## **Understanding Different Forms of Domestic Abuse**

Oppression appears in different forms based on differences in culture, race, gender, and ethnic identity. A high degree of social reflexivity is required to help a person to appreciate the culture of others. Meaning is attached to culture. If people do not understand the meaning behind the culture of others, then that culture can appear irrelevant. Undermining people's culture is equal to showing disrespect and disregard for their rights, origin, and heritage. Geertz (1973) defined culture as "an historically transmitted pattern of meaning embodied in symbols, a system of inherited conceptions expressed in symbolic forms by means of which men communicate, perpetuate, and develop their knowledge about and attitudes toward life" (p. 89). Even though most cultures have attached some hierarchical importance to gender, most cultures do not support violence or abuse, but rather respect human body integrity (Heinonen & Spearman, 2006). The understanding of one's own culture and the awareness about the culture of others will enhance one's attitude towards life. Meaning is created by the difference, and not by the presence (Lye, 2000). Meaning comes from asking questions. The understanding of the meaning in people's culture helps to understand their value systems and ideologies. The influence culture has on people, learned behaviour from parents and family members, cultural and social factors could be a plausible reason why some partners abuse their spouses.

Another form of oppression is called institutional oppression. This form of oppression is perpetuated by the government and the social structures they put in place. Institutional sexism and racism refer to the structural or systemic factors that support the unfair treatment of people based on gender and race. This form of discrimination arises when a pattern of social relations is designed to favour the socially advantaged (Heinonen & Spearman, 2006). Every government social service has a structure of rules, regulations, methods of operation, and policies governing

the delivery and use of their services. It is important that every organization is structured in a way that facilitates the effective actualization of its goals, objectives, and aspirations, and these structures affect everyone in society. In most cases these structures are inspired and saturated with sexism, racism, patriarchy, and classism, thereby giving one group political, social, and economic privilege over others. Social structures are seen by traditional critical social theory as a major source of oppressive practice in social work.

Dominant groups do not see their actions as oppressive, and they do not see themselves as oppressors, but rather perceive their dominance as having taken advantage of opportunities that have existed for everyone (Mullaly, 2012). A popular quote says that “Privilege is like being born on 3<sup>rd</sup> base and thinking you hit a triple” (Green, 2003). The dominant group perceives the oppressed as lazy and incompetent individuals who have failed to take advantage of the equal opportunities that are at everyone’s disposal. The oppressed are blamed for their lack of motivation, hard work, and objectivity. The dominant groups blame the oppressed without considering the underpinning factors that make people who they are. Structural oppression cannot be eliminated by making a patchwork of new laws because oppressions are systematically reproduced in major economic, political, and cultural institutions. While specific privilege groups are the beneficiaries of the oppression of other groups, and thus have an interest in the continuation of status quo, they do not typically understand themselves to be agents of oppression. Being aware of the oppressive nature, and functions of current social structures, and the mental, psychological, and emotional effects that interlocking barriers have on the oppressed is an essential element of anti-oppression theory and practice. Mullaly (2010) noted that the dominant relations of men over women, white people over persons of colour, affluent people over poor people, heterosexual over homosexuals and bisexual persons, physically able persons

over physically and mentally challenged persons have been so internalized into the structures of the society that they become intrinsic to the role, rule, policies, and practices of institutions. Threats, and the fear of threats and harm, rob oppressed individuals of their freedom, dignity, and peace of mind.

The cycle of violence occurs and progresses in stages: the tension building stage, the violent stage, and the absence of violence stage (Duluth Model 2012). The violent stage includes its own escalating stages of severity. Domestic violence increases in frequency and brutality; it is never an isolated incident or a one-time occurrence. Domestic violence perhaps begins with a minor incident and becomes more severe and frequent over time. Often it progresses through the several stages. The pre-battering violence could involve, breaking of objects, threats of violence, and verbal abuse. The second stage is the beginning level violence, which may include pushing, restraining, blocking doorways, holding down, and shaking. The third stage is the moderate level violence; this stage may include slapping, punching, kicking, pulling hair, and spanking. The fourth stage is the severe level violence, which may include and is not restricted to choking, beating with objects, use of threats or weapons, and sexual abuse. The fifth stage is the honeymoon stage. This stage manifests in the absence of violence, where the batterer is even more afraid the victim will leave and becomes very kind and loving.

“The abusive partner becomes charming, remorseful, apologetic, and caring. Abusive partners honestly believe they will not assault their partners again, which makes them extremely convincing .... Women, also believe their spouses will change if they stay, but harm themselves if they leave” (Margolin, 2009).

There is the likelihood that some victims may never experience the honeymoon period in their relationship, as some batterers may never be repentant or remorseful. The batterer may promise

never to harm the victim again. The victim believes the batterer and is convinced the loving behavior will continue, making it very hard to leave the person during this stage. The more the circle of violence repeats itself, the more the intensity of the violent behaviour exacerbates, and the honeymoon stage usually, becomes shorter and shorter or drops out altogether. It is important that victims of domestic violence are aware of these dynamics, and leave before the abuse worsens (Turningpointservices.org, 2012).

Figure 2: The Cycle of Violence.



(Duluthmodel, 2012)

## **Effects of Domestic Violence on Families**

Abuse affects male, female, and transgendered individuals differently. Afifi, MacMillan, Cox, Asmundson, Stein, and Sareen (2009) reported that IPV was associated with poor mental health outcomes for both men and women, although women experienced a wider range of problems than did men. Male victims of IPV were more likely than men in nonviolent relationships to experience externalizing disorders, including disruptive behavior disorders and substance use disorders. Female victims of IPV were more likely than women in nonviolent relationships to experience both externalizing and internalizing disorders (anxiety disorders) and suicidal ideation. IPV is associated with significantly more depression and substance abuse for women. It is imperative to understand and recognize that both men and women are physically injured and are emotionally and psychologically affected by abuse. It is also important for counsellors to understand the dynamics of intimate partner violence and be able to offer effective and efficient programs that will bring about lasting change.

Cultural expectations about male dominance in heterosexual pairings lead to situations in which women are disadvantaged in violent conflicts with male partners. Typically, men are physically, educationally, economically, and psychologically placed in higher advantage over women, so abusive men tend to take that undue advantage over their partners. In the event of separation or divorce, women are faced with hardship and challenges. Studies revealed that women are more likely than men to be injured in domestic violence cases (Archer, 2000). Anderson (2002) found that, although domestic assault victimization was associated with increased depression and lowered self-esteem among both women and men, the negative effects of violence on well-being were significantly greater among women; especially where women had stayed off the labour force for an extended period of time to raise children.

## **Forms of Clinical Interventions**

Domestic violent behaviour is caused by people's cognitions, thought patterns, perceptions, actions, and reactions, and sometimes may be influenced by culture, norms, worldviews, and value systems. This research is conceptualized out of a curiosity to explore how intervention may help reduce the recurrence of IPV in men. Mullender and Burton (2001) pointed out that interventions with domestic perpetrators are fraught with difficulties: For example, when they are mandated by the court to attend and when they are not willing to change or still at the precontemplative stage of change. Where the intervention is not well thought through, it will either fail to address the needs of violent men or may even place their partner in danger. This research explores different evidence and strength-based clinical intervention modalities that may be useful in changing abusive and controlling behaviours in perpetrators of domestic violence.

Many approaches have been applied to maintaining health and reducing stress in a variety of settings. Some major approaches include cognitive behavioural therapy (CBT), dialectical behaviour therapy (DBT), solution focused therapy, computerized cognitive behavioural therapy, physical relaxation-based interventions, and exercise-based regimes.

Mindfulness-based approaches are also being recognized as effective ways to establish and maintain health and well-being (Margolin, Pierce, & Wiley, 2011), and the principles of this approach have been incorporated into many other modalities. Mindfulness-Based Cognitive Therapy was developed for the prevention of depressive relapse with efficacious results (Kuyken, Byford, Taylor, Watkins, Holden, White, et al. 2008).

Dialectical behaviour therapy is an established intervention which incorporates specific forms of mindfulness training. DBT is reported to be effective in helping people with overwhelming emotions. McKay, Wood, and Brantley (2007) put forth the notion that the likelihood of developing intense, overwhelming emotions may be hardwired from birth and greatly affected by trauma or neglect during childhood. Trauma can alter brain structure and make people vulnerable to intense and negative emotions.

Solution-focused therapy is a treatment model that emphasizes the solution rather than resolving problems (de Shazer, 1988). It is informed by post-modernism, an intellectual movement that asserts a nonlinear approach and represents a reaction against the modernist conception of certainty, truth, and objectivity (Iveson, 2002). Solution-focused therapy emphasizes a client's strengths and resiliencies by examining previous solutions and exceptions to the problem. This approach encourages the client to perform more of those behaviours that are associated with exceptions to problems. It is a future-focused, goal oriented approach to brief therapy that uses questions to identify exceptions (for example, times when the problem does not occur or could occur less in a client's life). Solutions involve a description of what life would be like when the problem no longer exists or is resolved. Scaling questions are used both to measure the client's current level of progress toward a solution and to reveal behaviours needed to achieve or maintain further progress (Conoley, Graham, Neu, Craig, O'pry, Cardin, Brossart, & Parker, 2003).

The systemic treatment and prevention of intimate partner violence (IPV) was reported to be effective using the following six different systemic approaches: marriage and family therapy, behavioural couples treatment, domestic violence-focused couples treatment, Couples Abuse

Prevention Program, Circles of Peace, and Motivational Interviewing (Stith, McCollum, Amanor-Boadu, & Smith, 2012).

Marriage and family therapy assesses IPV and screens couples using individual interviews with both partners and multimodal assessments, for example written questionnaires and verbal interviews (Stith, McCollum, Amanor-Boadu, & Smith, 2012). Careful screening and ongoing monitoring are the basis for determining whether conjoint therapy can proceed safely.

Behavioral couples treatment is a dyadic intervention used to treat adults with substance abuse disorders (Stith, McCollum, Amanor-Boadu, & Smith, 2012). Couples are seen conjointly, and the non-substance-abusing partner is enlisted as a support for the substance-abusing partner's sobriety. The couple is helped to negotiate a Sobriety Contract that includes a daily Sobriety Trust discussion in which the substance-abusing partner reaffirms his or her intent not to use alcohol or drugs that day.

Domestic violence–focused couple's treatment (DVFCT) was initially developed in 1997 at Virginia Tech University in the USA (Stith, McCollum, Amanor-Boadu, & Smith, 2012). The 18-week guide-based program is based on solution-focused brief therapy and is delivered by co-therapists in two formats, either in multi-couple group (MC) or with a single couple (SC). The goal of DVFCT is to eliminate all forms of violence (psychological, physical, sexual, and stalking), promote self-responsibility, and, if the couple chooses to remain together, to enhance the couple relationship.

The Couples Abuse Prevention Program (CAPP) is a cognitive-behavioral couple's treatment that seeks to address the risk factors for IPV in couples with a history of minor to moderate physical and or psychological aggression (Stith, McCollum, Amanor-Boadu, & Smith, 2012). In attending to risk factors such as negative attributions, communication, and problem-

solving deficits, CAPP aims to improve relationship satisfaction and reduce the risk of future incidents of violence. The treatment protocol begins with a multimodal assessment of individual and couple functioning, and an assessment of the prevalence and frequency of psychological and physical aggression.

Circles of Peace, which incorporates the principles of restorative justice, was developed by Mills, Maley, and Shy (2008) as an alternative to traditional batterers' intervention programs (BIP). Circles of Peace involves conferences between victims and offenders that also include roles for family members and friends who provide support and care to each individual involved in DV (Grauwiler, 2004).

Motivational interviewing has proven to be very effective as a targeted brief intervention to prevent IPV in high-risk heterosexual dating couples (Woodin & O'Leary 2010). At the assessment session, partners independently fill out questionnaires assessing partner aggression, problem alcohol use, acceptance of partner aggression, relationship satisfaction and commitment, and levels of depression and anxiety.

Stith, McCollum, Amanor-Boadu, and Smith (2012) reported that there are possibilities to treat IPV in heterosexual couples using systemic interventions; but no work, to date, has addressed the processes involved in changing violent relationships. While some of these programs indicate that they are designed to prevent IPV and others to treat IPV, none of these programs are designed to provide primary prevention to the general population. Therefore, it is very hard to pinpoint what aspects of these interventions lead to change and what aspects of these interventions may be unnecessary.

## Exploring Human Capacity to Change

The very purpose of intervention is to bring about change in human behaviour. This research intends to contribute answers to the question: do humans have the capacity to change? Radmilovic (2005) reported that when examining change, it is important to discern between different types of change: development, prevention, and recovery. Change naturally occurs, as a result of human growth and development. Change may occur slowly, incrementally, and sometimes unconsciously. Conversely, change can be sudden, quick and immediate. Changing one's internal working model cannot be done radically or dramatically, as it serves as an integrating and self-protective function.

Pandya and Gingerich (2002) interviewed six participants in a batterer intervention program about their change process and identified four processes of change, namely recognizing and taking responsibility for past abusive behaviour, developing empathy for others, reducing dependency, including accepting full responsibility for changing their abusive behaviour; and improving communication skills. Wangsgaard (2001) acknowledged the importance of recognizing abusive behaviour and taking responsibility for changing, but identified that the single most important factor in the change process for participants in the batterers program was the emotionally safe treatment environment or "asylum" that was created through respect, "talk-share-common ground," and support from the other group members and the facilitators. Stefanakis (2000) conducted a post 2 year interview with men involved in a batterers' intervention program (BIP), and credited their change process to two primary complementary factors: first, an externally presented opportunity to create a new nonviolent identity (for example, spiritual experience, supportive or benevolent other) and second the personal agency to make the most of the provided opportunity. In Silvergleid and Mankowski's (2006) research on

the process of change for men in a batterers' intervention program, the majority (70%) of the participants were mandated by court to attend the intervention program. Specifically, they set five program goals for their clients: (a) taking responsibility for one's behaviour and remaining accountable, (b) understanding the effects of abuse, (c) learning anger management skills, (d) changing attitudes about power and control in relationships, and (e) healing from violence and abuse. Their findings credited several community-level extra therapeutic factors like fear of incarceration, losing their wives and love for their children, the criminal justice system, and group-level dynamics as the catalyst for their process of change. Silvergleid and Mankowski's (2006) exploration revealed that not all program participants stopped their violent behaviour, thereby calling into question whether the processes the participants described led to behavioural change.

In conclusion, there is the fact that these successful accounts of change through intervention are almost exclusively based on the individual accounts of program participants. These accounts could be influenced by participants' own motivations to either complete an intervention program or avoid further sanctions. Whatever the motivation may be, there is a need for research that will view the success of intervention not only from the lenses of program participants and facilitators, but also from the perspective of their wives/ partners/ victims and possibly from a more objective longitudinal study of recidivism. In addition, the vast majority of research has focused on Caucasian males; there is a need for further study that should assess whether more culturally diverse samples of men identify with similar processes of change (Silvergleid & Mankowski, 2006).

The overall aim of the current study will be to explore the effectiveness of one male intimate-partner abuse intervention program by exploring the experiences of participants in the

program, identifying the challenges they face, and understanding the coping strategies and support networks that enable transformation. Thus, the main research question is: how does the PG Stop Violence Program help men reduce the recurrence of IPV?

## **Chapter Three: Research Methodology and Design**

### **Introduction**

This chapter begins with the philosophical underpinnings of the research followed by the research design. The following subsections are included in this chapter, namely: the introduction, case study approach, interpretive and social constructionist approach, feminist perspective, personal reflexivity, ethical considerations, consents, research procedures, data collection, data analysis, and research evaluations. The purpose of this chapter is to use the research design and methods above mentioned to answer the main research question of this thesis. The overall aim of the current study will be to explore the effectiveness of one male intimate partner abuse intervention program by exploring the experiences of participants in the program, identifying the challenges they faced, and understanding the coping strategies and support networks that enable transformation. Thus, the focal question is: how does the PG Stop Violence Program help men reduce the recurrence of IPV? For this research, a qualitative design was utilized in order to provide a comprehensive understanding of the study participants. Qualitative research is a type of scientific research that is especially effective in obtaining culturally specific information about the values, opinions, behaviors, and social contexts of particular populations; it seeks to understand a given research problem or topic from the perspectives of the local population it involves (Mauch & Park, 2003). The principles of open-ended, semi-structured interviewing were incorporated in this study by engaging the participants in a spirit of cooperation and joint participation in the interviews and by being flexible and responsive in order to meet the needs and schedule of participants. Analysis of the data involved reflexively engaging with the data by keeping a journal and field notes, and continually striving to remain aware of my subjectivity. During the interviews, participants' feelings,

observations, intuitive hunches, and the work in progress were documented through field notes and journals. With the awareness that change is difficult, it is important not to explicitly or implicitly assume that participants in the research fully changed their abusive behaviour, so there is need for counsellors, spouses of perpetrators, and those affected by domestic abuse to understand the struggles and the setbacks participants had and are still encountering in their change process (Creswell, 2009). There is the need for further qualitative research, in order to have more information and understanding about the complex nature of change in human abusive behaviour.

### **Case Study Approach**

The qualitative research strategy used in this research was a case-study approach. A case-study approach attempts to shed light on a phenomenon by studying a single case example of phenomena in-depth (Mauch & Park, 2003). As a form of qualitative descriptive research, the case study looks intensely at an individual or small participant pool, drawing conclusions only about that participant or group and only in that specific context (Marlow, 2010). A case study involves an intensive study of a single unit for the purpose of understanding a larger class of similar units (Gerring, 2004). The purpose for using the case-study approach was to give voice to the men who had initiated intimate partner abuse, to recount their story of childhood experiences of abuse, and to elicit any forms of internalized feelings and emotions they might have about abuse. The subjective experiences of research participants in the PG S.T.O.P were explored in order to identify how the program helped them to transition from violent to non-violent behaviour and become respectful individuals.

### **Interpretive and Social Constructionist Perspective**

The theoretical framework for this research is guided by the interpretive and social constructionist perspective. The interpretive perspective, with the intent of providing a detailed and in-depth description, will focus on interpreting the underlying meanings, patterns, and perceptions of the participants by paying attention to body language and posture, social perspectives, and beliefs in the existence of multiple truths, depending on the perspectives and experiences of the individual/s. A social constructionist perspective is concerned with how knowledge is constructed and understood (Burr, 2003). The four elements involved in organizing qualitative data: note keeping, organizing files, coding notes, and identifying gaps in the data, were utilized (Marlow, 2010, p. 206).

### **Feminist Perspective**

In order to balance and widen the scope and ideology of this research, I incorporated the ontological beliefs of a feminist, anti-oppressive perspective to look at the theories of woman abuse, power and control, structural oppression, and gendered socialization. Feminism can be defined as an ideology about women and gender relations, and a social political movement for social change (Peplau & Conrad, 1989). As an ideology, feminism emphasizes the goal of gender equality, and recognizes the traditional oppression of women and their historical exclusion from public lives (Peplau & Conrad, 1989). From a feminist perspective, root causes of violence include the impact of a hierarchical society on gendered behavior, socialization of males, structural oppression of women, and the systemic devaluation of women's dignity (Greenard-Smith, 2002). Moreover, from this perspective, male dominance, coupled with male aggression in a societal context, condones violence. This acceptance of male dominance and

aggression permits and somewhat encourages violence against women to occur (Greenard-Smith, 2002).

### **Personal Reflexivity**

Personal reflexivity was incorporated as a part of my methodology. I am fully aware that meanings made of the data are deeply connected to my own values and self-interest (Crawford & Kimmel, 1999). My work as a Correctional Officer helped me to develop the skills of reflexivity. As I worked with individuals who are incarcerated for various offences ranging from child molestation, child pornography, rape, sexual assaults, and murder, I have always incorporated a non-judgmental approach by ensuring that I do not label these individuals based on their offences, but rather see them as human beings that need to be treated with respect and dignity, even though they made wrong choices. At the same time, based on my role as a husband and father, and my educational training in anti-oppressive social work practice, I have a well-developed passion and strong conviction about oppression and gender violence. I am fully aware that sometimes it could be difficult to separate my research entirely from these passions and philosophies. Thus, it is important for me to examine and identify how these values and beliefs affect my research. Specifically, I come to my research with some pre-established beliefs, one of which is that change for abusive men is difficult and perhaps impossible. Therefore, I also used personal reflexivity to examine the results of my research and compare these to the personal interviews in order to identify whether the analysis is inclusive of the personal stories that I have witnessed as part of this study.

## **Ethical Considerations**

The researcher ensured that the ethical principles, standards, and procedures of the Tri-Council apply to this research by making sure that participants were accorded due respect and dignity.

**Confidentiality and anonymity:** The researcher ensured confidentiality was maintained throughout the process of the research, as required by Article #6 of the BC College of Social Workers Code of ethics (2009) which states, “A social worker shall protect the confidentiality of all professionally acquired information by disclosing such information only when required or allowed by law to do so or when clients have consented to disclosure.” At the inception of the interview, the principles and limitations of confidentiality were explained to the participants. Participants were made aware that information that is obtained in connection with this study and that can be identified with them will remain confidential and will be disclosed only with their permission. Participants were informed that the information they gave to the researcher will be secured in a safe database at the University of Northern British Columbia (UNBC), and that their real names and location will not be reflected in the transcript and research. Participants were invited to choose a pseudonym, which I used throughout the analysis stage. Participants were also informed, following the guidelines of the Canadian and American Psychological Associations that collected data will be retained for a period of 5 years post-publication in a secure place, after which time it will be disposed of in a secure manner.

**Consent.** Participants were invited to read and sign a copy of the drafted research project information letter before the interview started (Marlow, 2010). The consent letter explained the risks, benefits, rights, and all the information the participants need to know about participating in

the research process (Montcalm & Royse, 2002). See Appendix B for a copy of the participants' informed consent forms. The researcher ensured that the requirements were met for: free and informed consent, respect for vulnerable persons, respect for privacy and confidentiality, respect for justice and inclusiveness, balancing harms and benefits, minimizing harm and maximizing benefits of research participants (Tri-Council Ethics Statement). Clients were made aware of the rights to withdraw at any stage of the interview process, and of their right to refuse to answer any question they may find uncomfortable to answer.

### **Research Procedures**

**Recruitment.** This research targeted men who had participated in the Men Stop Violence of the Northern John Howard Society Prince George. The counselor at the program, Mr. Tom Wainright, was very helpful and instrumental in the recruitment of participants. A letter of authorization to conduct research was submitted with the agency (see Appendix C for a letter of request, and Appendix E for a letter granting me permission to conduct research by Northern John Howard Society Prince George). After receiving the Research and Ethics approval to conduct my research (see Appendix F), the clinician at the John Howard Society, Mr. Tom Wainright, was contacted and the research purpose was explained to him and his assistance to recruit research participants was solicited. With the help of Mr. Wainright, a recruitment letter was drafted for potential participants (see Appendix G); however, Mr. Wainright talked to the participants first before I contacted them.

The selection process of the research participants involved the non-probable purposive sampling strategy. Purposive sampling consists of selecting participants who match the conditions needed for the research (Guest, Bunce, & Johnson, 2006). The conditions were that participants would have completed the Stop Violence program or nearly completed the program

so that it could be ascertained whether they had the opportunity to implement their learning into practice. The sample included two men who had completed the program, and two men who had one session left to complete the program. The Prince George Stop Taking it Out on Your Partner (P.G. S.T.O.P.) program is a 15 session violence-prevention program for men who abuse their partners physically, mentally, emotionally, and financially. The program is designed for men who have been involved in domestic violence, who have been involved in the criminal justice system, or who are looking forward to stopping the pattern of violence in their relationships. The program provides counselling and guidance in both group and individual settings. Most of the participants voluntarily attended the program, so were able to give a rich account of their experiences (Guest et al., 2006).

**Interviewing.** At the inception of the interview, participants were informed of the interview procedure. I gave them the consent form and made sure they had time to read it through. I gave them the opportunity to ask questions for clarity. I explained confidentiality and the exceptions to confidentiality, and stated that it is their right to withdraw from the interview process at any stage of the process, and that they are not obligated to answer any question they may find uncomfortable. I showed them the tape recorder, explained the need to have the interview process recorded, and obtained their consent to tape record the interview. I informed them of the counselling services available at the UNBC Community Care Centre, on 1310, 3<sup>rd</sup> Avenue Prince George BC, Walmsley & Associates, located at 1512 Queensway Street Prince George BC, and Brazzoni and Associates, located at 301-1705 3<sup>rd</sup> Avenue Prince George BC. After the consent information was read by the participants, they were invited to sign the consent forms. At the end of the interview, a \$20 Starbucks gift card was handed to each participant.

The researcher decided not to hand out the gift card at the beginning of the interview to avoid influencing participants' experiences with a gift.

All participants except one consented to receiving the transcript. The interviews were very engaging. The researcher felt that participants were forthcoming in providing information during the interviews. A total of 4 men who have completed the PG S.T.O.P were recruited. One of the participants had previously completed the program some years back, and took it a second time as a refresher and has completed 14 out of the 15 sessions; the other three had recently completed the program. Three of the participants live in the Prince George area; one came from out of town (Quesnel). In order to achieve maximum variance and arrive at a heterogeneous representation of opinions, thoughts, and impressions, my sample was limited to men who voluntarily attended the program. This will help to identify the similarities and distinctions between the experiences of different men and to determine if behavioural change is co-related to attendance, progression, and completion of the program. Two of the interviews were held in the comfort of the participants' homes, one was held in a quiet restaurant, and one at a halfway house located in Prince George. The participants decided on the location; the purpose of this choice was to provide participants with a familiar environment, where they would be comfortable and not afraid to tell their stories. The use of member checking was integrated with participants, along with the reflection of the thesis supervisor to ensure that the representation of my research interpretation and analysis invites the reader into participant's narratives. The researcher believes that the very process of participation was empowering for participants as they gained perspective on what they went through and the knowledge they brought forward to influence change. Three of the participants did not live with their partners anymore, so the researcher was unable to interview the partners of the participants. All 4 participants in this

research sounded very positive and optimistic in the interview, and wanted the researcher to know their experiences. They were willing to narrate the progress of their change and how the program helped them in their journey of reducing abusive behaviours.

### **Data Collection**

This research choice of data collection was a qualitative face-to-face semi-structured individual interview. This involves an informal, interactive exchange of dialogue ensuring a purposeful conversation (Mason, 2002). The goal of the interviews was to ensure that the relevant contexts were brought into focus so that situated knowledge would be produced (Mason, 2002). The primary focus was to uncover the emotional underpinning of men's experiences of abuse and to explore the characteristics and commonality of abusive behaviours. Data was collected through observation, open-ended questions, and use of a tape recorder for recording the interviews (Creswell, 2009). The advantages of the semi-structured interviews are as follows: they allow for ambiguous questions to be clarified; there is a positive effect on the response rate; they are exploratory and effective for inviting people to talk about their attitudes and perceptions; they provide in-depth and nuanced information; and they allow the client to observe research as it is being conducted (Van Den Hoonaard, 2012). Face-to-face interviews gave me the opportunity to pay undivided attention to my research participants. The researcher was able to generate unexpressed internalized and subjective data arising from the participants (Van Den Hoonaard, 2012). Attending to the participants gave the researcher an opportunity to interact more accurately. As well, participants had the opportunity to more insightfully and thoughtfully describe their experiences. Using open-ended interviewing was a significant opportunity to explore and empower participants (Lundy, & Grossman, 2001); it may give participants the ability to deal with their emotions in a non-abusive way towards their partner and help them take

responsibility for their behaviour and remain accountable, while understanding the effects of abuse, learning anger management skills, changing attitudes about power and control in relationships, and healing from violence and abuse (Marlow, 2010). Therefore, it was my interest to understand more about the efficacy of the Men Stop Violence program of the Northern John Howard Society in Prince George, and it was my job to have the participants explore the impact that the program had. I created a friendly, safe, non-judgemental, and trusting environment for this interview to invite these men to share their various experiences of abusive behaviour and learn how the program offered by the Northern John Howard Society helped them to reduce the recurrence of intimate partner abuse. As a social worker I have been exposed to different communication and counselling skills, so I mostly used open-ended questions, empathy, unconditional positive regard, reflection, information-sharing, encouragement, probing, and nodding, in order to explore ideas, feelings, attitudes, and descriptive experiences of participants during the interviews. The taped interviews range from 38 to 50 minutes (Seidman, 2006). Facial expressions, silence, tone of voice, and body language were noted during the interview (Seidman, 2006). My plan was to take notes during the interview, but I found it too distracting to the flow of the conversation, so I decided not to take notes, but at the end of each interview, I jotted down the highlights of the interview, I also jotted notes down in a journal immediately after the interview reflecting on my process (Patton, 2002).

### **Data Analysis**

The data collected were analyzed using thematic analysis. This approach was chosen because the ideas that emerge through interviews and conversations with participants can be better understood under the control of a thematic analysis. Thematic analysis focuses on identifiable themes and patterns of living and of behaviour (Van Den Hoonaard, 2012). Themes

are defined as units derived from patterns such as topics of conversation, vocabulary, recurring activities, meanings, feelings, folk sayings, and proverbs (Taylor & Bogdan, 1989). The themes that emerged from the data were coded. A code in qualitative inquiry is most often a word or short phrase that symbolically assigns a summative, salient, essence-capturing, and/or evocative attribute for a portion of language-based or visual data (Marlow, 2010). Coding is achieved by marking segments of data with symbols, descriptive words, or category names (Creswell, 2009).

The five stages of thematic qualitative data analysis were applied. These stages include: familiarizing myself with the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and writing the report (Van Den Hoonaard, 2012). The first stage of thematic analysis was to transcribe all of the audio taped conversations. After the transcription, the researcher carefully read through the transcribed data, line by line. The second stage was to divide the data into meaningful analytical units, and apply code to every meaningful segment of my data. For example, if a participant was describing the nature of the abuse that he had unleashed on his partner, it was coded 'severity of abuse' or, if he identified how he felt remorseful for the severity of the abuse, it was coded 'process of change'. The third stage to a thematic analysis is to search for themes by combining and categorizing related patterns of the codes into major themes. For example, statements that were coded shouting, name calling, hitting, and humiliations were grouped under the theme 'psychological tactics' (Van Den Hoonaard, 2012). For the fourth stage, each of the major themes was broken down into sub themes. Themes are identified by bringing together components or fragments of ideas or experiences, which often are meaningless when viewed alone (Leininger, 1985). The sub themes that emerged from the participants' stories formed a comprehensive picture of their collective experience (Aronson, 1994). Finally, for the fifth stage, the researcher exercised reflexivity in

the analysis of these data, an important step given the interpretive nature of the data collected (Todd & Harrison, 2008). The researcher ensured the analysis of the data reflected the opinions and views of the participants, and had not been altered by my personal biases, experiences, observations, and other intuitive hunches. I diligently and reflexively read through the research journal and field notes, and continually remained neutral and aware of my subjectivity. The use of member checking was applied by sending the transcripts to participants to ensure it reflected their opinion.

### **Evaluation of the Research**

I ensured this research met the four criteria for assessing trustworthiness for qualitative research outlined by Guba, namely credibility, transferability, dependability, and confirmability (Guba, 1981).

**Credibility:** This measures the congruence of the findings with reality. It takes into account the truth value of the findings of an inquiry from research participants and the circumstances under which such qualitative research was carried out. Ensuring credibility is one of the most important factors in establishing trustworthiness. To ensure the credibility and accuracy of my analysis, I provided interested participants a copy of my themes and asked them for feedback as to whether these captured the essence of what they had discussed with me. I also ensured the validity by referring back to the reviewed literature in order to interweave it with my findings (Aronson, 1994).

**Transferability:** Transferability is concerned with the extent to which the findings of one study can be applied to other situations. Guba suggests that it is the responsibility of the investigator to ensure that sufficient contextual information about the fieldwork sites is provided to enable the reader to make such transfer (Guba, 1981). In terms of transferability of my data, I

have been explicit in my data documentation and I have used quotes within my text to support the study findings. I cross referenced each theme and ensured that there was a minimum of two quotes to support each sub theme.

**Dependability:** This technique seeks to ensure that if the research work was repeated in the same context, with the same methods and with the same participants, similar results would be obtained. Guba (1981) stresses the close ties between credibility and dependability; he argued that, in practice, a demonstration of the dependability ensures its credibility as well.

Furthermore, I enhanced the dependability of my analysis by being reflexive. In my analysis, I thought about my own experience in relation to my brother-in law who was very abusive to my sister during their 20 years of marriage, and I thought about my interaction with my research participants. Thus, in being reflexive, I considered whether my thematic analysis fit with my own understanding of men's ability to change their abusive behavior and with my own understanding of the research interviews that I have conducted.

**Confirmability:** The concept of confirmability is the qualitative investigator's comparable concern to objectivity. This concept ensures as far as possible that the research findings are the result of the experiences and ideas of the participant, rather than the characteristics and the preferences of the researcher (Guba, 1981). To ensure confirmability, I used member checking with the research participants by requesting them to read through the transcript to ensure its content reflected their opinion and ideas.

I will conclude that these four criteria were met by this research. The research methods used in this qualitative research paper were a well-established method of purposeful sampling. I incorporated ethical principles in my research. My participants were treated with dignity and respect. Thematic analysis was used to analyze collected data. One research limitation was the

fact that only four participants were interviewed, which is not a true representation of the population of the men that completed the men's stop violence program of the Northern John Howard Society Prince George. The use of a focus group would have given more credibility to the research findings (Mears, Moore, Travis, & Winterfield, 2003). However, using qualitative research for this research helped to obtain in-depth particular knowledge, and unique perspectives and experiences from participants. It also gave participants the opportunity to take responsibility for their behaviours, to share their struggles, and their change process and progress. I believe that the very process of participation is empowering as participants will gain perspective about what they went through and the knowledge they bring forward to influence change (Mullender & Hague, 2005).

## **Chapter Four: Research Findings**

This chapter outlines the results of four qualitative interviews conducted for the purpose of identifying how the PG Stop Violence Program of Northern John Howard Society in Prince George helped men to reduce the recurrence of intimate partner violence (IPV). Semi-structured questions were asked in order to gain knowledge and understanding of what skills or aspect of the program participants found helpful in dealing with their anger and abuse behaviors.

### **Introduction**

I found it most interesting to write this findings chapter, as it gave me the opportunity to track my findings and give others the opportunity to explore the possibility and process of change in humans. I am aware that, as I write my findings, they must reflect the opinions and subjective meanings inferred by the research participants. Therefore, I include reflections from my reflective journal to ensure proper representation of participants' stories.

A total of five interviews were scheduled. Only four interviews were completed as one person pulled out of the interview for an undisclosed reason. Due to my own time constraints, I was not able to re-schedule another interview with a new participant. Instead, I went ahead to interview only four participants. The four participants satisfied the purpose of this research, as the responses saturated the data.

### **Demographics**

All four participants were Caucasian males. For the purpose of confidentiality, pseudonyms are used to identify the participants, namely Doug, John, Rick, and Harold. The ages of the participants ranged from 40 to 54 years. One participant was still with the partner he

abused, another participant was with a new partner, but divorced from the partner he abused, and the last two were divorced and in the process of forming new intimate relationships.

One of the participants had previously completed the program years ago, and was taking it a second time as a refresher. The other three had recently completed the program. All of the participants accessed the program for the same reason: they were perpetrators of domestic abuse. However, the severity of their abuses differed. Two of the participants described their abuse as verbal (name calling, shouting, using threats, shaming, and intimidation), while the other two participants described their abuse as very physical (hitting, punching, and destruction of property). One of the participants admitted to having been married to two different women and using physical assault with both respectively.

The four participants informed me that they accessed the PG S.T.O.P for a variety of reasons. Two participants informed me that they attended the program after their spouse left the relationship. Another attended the program because his wife threatened to leave him. The other two men said they attended the treatment program because they want to change and be able to deal with their anger issues. One said that he came to the program because a friend who had previously attended the program had recommended the program and the facilitator. In general, all the participants alluded that the underpinning reason they attended the program, and remained in the program, was because they needed to learn the skills to deal with their anger and change their abusive behaviors.

Table 1

*Reasons for Accessing Men Stop Violence Treatment program*

Means of Accessing Treatment	n
Divorce	2
Friends and family	2
Threat from spouse	1
Need to change	4

Table Notes: n= number of men

**Findings**

Doug said the following:

One thing he really always reinforces which I think day one of this course is awesome, and which always impresses me about it, probably the best thing about it, is because he always let you understand that you are a perfect person, from the get go he reinforces that, he makes you hear that statement many times as possible too, because you know, you sometimes question your own self-worth and self-esteem. So the value and the way he does that and brings this course around that, kudos, a huge kudos, really looking back, because its time you need to hear that shit and its great, so yea.

All the men interviewed in the research talked highly of the program facilitator (Tom Wainright), and most importantly, spoke highly of the content of the program and how it helped them in their journey. All the men overwhelmingly stated that they needed the Stop violence program for their personal growth and change, and that they appreciated the warmth, care, and

support they received from the program, the facilitators, and from the group members as well. The men were keen and excited to tell their stories in order to identify how the Men Stop Violence Program had made a difference in their lives. The men also provided recommendations on how service delivery could be improved. All the men identified as perpetrators of violence in a relationship at some point in their lives; methods of abuse used by the participants included physical, verbal, emotional, and psychological abuse. All of the men showed courage in dealing with their abusive behaviors. For the most part, the men in the interview claimed that the information and support that were provided to them by the program were valuable and effective in helping them to make significant changes in their lives. The partnership between the men, their program facilitators, and the Men Stop Violence Program of Northern John Howard Society Prince George speaks of immense character, ability, strength, and relationship.

From the data collected in the four interviews, five main themes were identified: abuse, family history of violence, support, anger, and change. Each of these themes is further divided into sub themes as identified in Table 2.

Table 2

*Themes that Emerged from the Data Analysis*

Abuse	Family History of Violence	Support	Anger	Change
Verbal and Emotional Abuse	Experience of childhood abuse	Staff	Triggers	Measuring the progress
Physical Abuse	Abandonment	Program	Feelings and emotions	Healing
		Group	Responding	Positive self- image
			Understanding	

**Abuse**

The theme abuse came up quite often during the interviews. Most participants acknowledged that the forms of abuse they used on their partners were physical, verbal, emotional, and psychological abuse.

**Verbal and Emotional Abuse**

Verbal abuse was used by men for many purposes; some used verbal abuse as a form of revenge, or for hurting and punishing their partner. Doug stated the following as his reason for using verbal abuse towards his wife:

The idea I think is to make it hurt. Truly, the bottom line is when you reflect on why you are doing it; it's trying to get some control over the situation, and secondly, you want to

share some of your pain. I am an extrovert, I don't mind talking about stuff, and my wife is more an introvert, you have to try to break through into her so she can talk.

Others used verbal abuse as a way of letting out their anger and frustrations. Doug described his anger:

My reason for taking this course is because I was feeling really, really angry. I was verbally abusive, there is no doubt about it, I was calling my wife names like; what kind of slut are you, different things, like I felt pretty angry and it was impacting the way our kids looked at us, even though they lived long distance, they never get it in the face, but they still get it second hand, and my partner and I thought that it's not a responsible way to live, so I want to do something about it.

Doug informed me that he had been married to his wife for about 30 years and there was no domestic abuse in their relationship until he found out that his wife was cheating on him.

Doug in his own word described it:

Well in my house, we didn't really have any domestic abuse until I caught the wife fooling around and then we got quite verbal, there is no physical abuse, but there is verbal abuse and psychological abuse in discovery. So in all circumstances, definitely like everyone will be, I guess, and there was name calling, and a couple of things, that's kind of where we are on that.

It is essential to understand that verbal abuse possibly can lead to other forms of abuse like psychological abuse and emotional abuse. Doug said he was not aware that verbal abuse of his wife was also a form of psychological and emotional abuse, until he went to counselling and

started attending the men stop violence program. The men that participated in the interview admitted that any form of abuse is bad and that nobody deserves to be abused no matter what.

Rick, after seriously physically assaulting his wife, decided that he would not physically abuse her anymore. Rick was unaware at that time that abuse does not have to be just physical, but could be emotional and verbal as well. Rick said the following about his use of verbal and emotional abuse on his wife:

After Lisa left me, I did not seek any help and my pattern of abuse continued with other women I had an intimate relationship with. I never hit any of them, but I still used verbal and emotional abuse to assert power and control over them.

Another participant Harold said that he never used physical abuse on his wife, but “only yelled.” Harold said he was married in 1995, and divorced from his wife after 7 years of marriage. Harold describes his verbal and emotional abuse as follows:

I was married, now I am divorced and I went to John Howard after we actually split up. I have had a couple of girlfriends since then, I moved in with one last November and that didn't work out. I now understand that domestic abuse is not only physical, but also includes mental and verbal abuse. I learned how to yell from my parents, from my Dad, and that's what I did.

### **Physical Abuse**

Two of the participants disclosed that they had used physical abuse on their partners. John attributed his behaviour to the influence of alcohol and other unidentified triggers from his partner. It is important to note that men's motivation for using physical violence is to exert

power and control over their partner, or as a means of retaliation. An inquiry into the motivations for men's use of physical violence toward their intimate partners reveals that about two-thirds of men are using violence primarily to dominate and control their partner. About 17% of men report self-defense or retaliation from a prior assault as a motivation (Del Vecchio & O'Leary, 2004).

John described his physical abuse this way:

The last one, obviously there was substance abuse involved, alcohol at times.... which then resulted in the pushing and to hitting her. She hit me 11 times, I gave her the last warning, and I said if you hit me one more time, you will get a full throttle from me. Guess what she did. Then the final part was that she knew that when I hit her, she was going to yell rape. The serious accusation of being raped was what set me off because she wanted to get the attention of the people and put me in serious trouble with the law. I almost blacked out on her, I grabbed her by the throat, and I remember I threw her down and I am not proud, but I remember I hit her about 15 to 20 times. Just hearing that accusatory word rape..... I told Tom, you know I tried diffusing, I should have left, and that was the last one, probably the most serious. I've had a few more occasions where there were I have physically pushed my partner. Ya she called the police and I got charged with aggravated assault causing bodily harm, but she didn't show up for the court hearing and that's just what I still I carry around, I mean obviously I almost got it dealt with, I don't like what I did to her, that's not who I am. I felt so sorry for my actions; I wish I could be able to take it back. I pleaded with Charlene to forgive me and stay back in the relationship, but she never did.

John admitted that he is so ashamed of his behaviour and the label he carries around, so that's why he decided to attend the Men Stop Violence Program. He said the program has helped him to turn his life around and learn how to deal with his emotions. When I asked John to tell me, if such a situation presents itself, what he could do differently based on the skills he had learned from the program. John said:

Well if you want to go back to the beginning, obviously I wouldn't have started the relationship and then if it was in between, if you put me right back into that hotel room like we are sitting here, I would have just got up and left.

Rick described his story of physical abuse as follows:

I was twenty years of age when I first hit a woman..... When I finally met my wife Lisa, I promised myself that I will be gentle with her, treat her with respect, and not abuse her as I did other women I dated in the past. Things went pretty well in the first year of our marriage, we had our first child, and after her maternity leave, Lisa decided to return back to work. I resisted the plan because I was jealous that Lisa might meet other men at work. My mother never worked, she stayed at home; so I told Lisa that her place will be at home to look after our child and the home. When Lisa protested my suggestion, I slapped her on the face and she slapped me back. At that point I lost control, and thought that this is the time to teach Lisa the lessons of her life and make her understand that I am the one in charge in this relationship. So I punched Lisa severely with my fists, all over her body so badly that she was all swollen up and I was telling her while the assault continued that she needs to listen to me and start doing everything I tell her to do..... Even though I felt ashamed of my behaviour, I still blamed Lisa for not listening to me

and for slapping me back. I say to myself, I would not have assaulted her if she had not responded the way she did. I promised myself that I will not physically abuse Lisa anymore, but my emotional and verbal abuse continued unabated. Lisa became tired of my attitude towards her and left me after 5 years of our marriage.

Rick informed me that after Lisa left him, he felt remorseful for what he did to her, but he did not see the need to seek any treatment or counselling. He reported the following:

I did not seek any help and my pattern of abuse continued with other women I had an intimate relationship with. I never hit any of them, but I still used verbal and emotional abuse to assert power and control over them.

Rick informed me that, 3 years after his divorce from his first wife Lisa, he met, fell in love, and married another woman named Paula. The following is Rick's story about his second marriage:

I met another woman named Paula, three years after my first marriage ended..... The event that broke the camel's back was when Paula accused me of having an affair. She confronted me with this allegation and I was so pissed off. My thought was, who gave her the right to question what I do, and this will be the time to teach her the lesson of her life, and let her know that I am in charge, and that she has no right to question my actions; even if I cheated on her. I believed in the patriarchal system where women have no right to question their husbands' actions..... Paula's insistence on discussing the topic further pissed me off the more. I told her that I don't want to talk about it since she does not believe me; she then threatened to divorce me. At this point, I was unable to control my anger, as I pounced on her, grabbed her by her throat, slammed her to the

ground and started punching her; telling her that she cannot divorce me or I will kill her. I thought Paula's confrontation was a way to control me, so I decided to counter her, and exert my power and control over her once and for all..... I am so sorry for my actions; I wish I could be able to take the time back.

Rick said that he felt so ashamed for losing Paula and his son that he finally saw the need to seek help for his abusive behaviour. He admitted that he did not plan to physically abuse his wife, but was unable to control his anger when the occasion arose. Rick said that he went to treatment with that idea to seek help for his spiritual and psychological well-being.

## **Family History of Violence**

### **Experience of Childhood Violence**

All the participants in this interview admitted that they experienced childhood violence, and were directly abused by their fathers, both physically and verbally, as children when they were growing up. They all attributed their adult abusive behaviour to a learned, abusive, controlling, and patriarchal belief system, manifested in behaviour they inherited from their father. Surprisingly, most reported they never witnessed their father abusing their mother, and that their father was pleasant and loving towards their mother. This helped me to understand that any form of domestic abuse whether perpetuated directly or indirectly to a spouse or a child always has a direct and indirect impact on children who witness domestic abuse.

Doug narrated the following about his childhood history of abuse:

I grew up in an abusive household, and I made myself a promise that I will not let none of that bullshit in my life and it was pretty tough at times, sometimes you feel grumpy, but you always take yourself away and say hey you got a problem, I have seen what

happened to me growing up and would not want my partner or children to experience such from me either. My daddy was really abusive, I told myself never will I allow that in my life, because it's so damaging, look at my siblings, look at the damage that they are in them and myself. Well it is easy to fall into that, I have one brother that is really abusive to his kids. I am trying to rein that in, because he is like a can of dynamite, you got to be really careful if you understand that, if you have been around people like that, you have to understand that. He understands it but does not know how to control it and there is the difference right.

John said the following about his childhood experience of domestic abuse:

Well my dad was old school hard, he wouldn't even give you two warnings, you got a warning once, then you get the back end, and you learn after a couple and there was no respect for my mother or nothing boy, what he said just went. Things were different back in the 60s and 70s; you could whack your kid in public, and everyone will just look away and won't say anything to you, just it didn't matter. That's just the way he was brought up I guess and he just passed on such hostility to us his children. When you are brought up that way, that's all you see and know. You know I didn't really go his way too much; it eventually came out of me, then it was okay, but now it is not socially acceptable.

Rick recounted his own story of childhood domestic abuse:

My dad was gentle and loving to my mom. I have never seen my dad raise his voice or hand towards my mom, but my sister and I were constantly being yelled at, and were physically battered by dad. As a kid I was often grabbed by the throat and neck, and punched by dad. Other times dad had used his belt to whip my sister and myself. I also

have received some swollen lips, some sore jaws, different kinds of knocks to the head, some knockdowns, and some knockouts. Dad was bad-tempered and too physical, but he seemed neither violent nor harsh. His message would be unacceptable in present time, but it was acceptable back in the day. I guess dad was harsh on us a way of making us respectful and better persons. My dad doesn't talk much, but while hitting me, he will constantly be yelling at me to stop crying, but the hitting continued even when I held myself from crying. I was seventeen years old the last time my dad abused me. At this age I was big and strong.

Rick said he never supported his father's abusive behaviour and promised himself that he is not going to be like his father. Growing up he promised himself that he will love his own children and treat them with respect. Rick said he never knew he would be affected by his father's behaviour until he started dating women; he eventually used physical violence to abuse his first wife at age 20. Even though Rick never reported abusing his kids, the abusive behaviour was transferred to his spouses and other women in his life.

### **Abandonment**

One of the clients mentioned experiencing abandonment in his early childhood. In my years of experience counselling both youths and adults, I have witnessed the trauma and negative effects that the experiences of abandonment may have on an individual. In my present job as a youth counsellor, I have met with clients who suffer from depression, anxiety, and low self-esteem due to the loss of loved ones in their lives. People who suffered abandonment in their childhood may experience trauma later in life. Abandonment is not only physical, like abuse, it could be emotional and psychological. Rick said he was faced with a sense of abandonment

when his two wives left him. Doug said that watching a movie during the intervention program triggered in him that sense of abandonment. Doug stated the following:

We watched, a couple Saturdays ago, we watched a full day of family abuse, and it triggered shit in everybody in the room and fear, in me. It highly triggered me because we suffered lots of physical abuse from the time you walked, you left home sort of thing, I left home at a young age, my dad left home before me ..., we didn't see him for a year, my brothers and I were left alone we kind of went forward in life. We were pretty young, we were thirteen, you know, we are not going to pull a hand out to anybody, we were big boys, get on with it. I mean you realize the trauma around it. .... Yea in this course there is one issue around relationship thing that really triggered with me. I mean, I realized we had an abandonment issue, I didn't know what it was called at the time, but you know that somebody just leaves you alone but you didn't like it and yes that's what it is in the end, isn't it? It is one of the biggest abandonment you're going to get. So it definitely triggered like huge.

### **Support**

The program provided the men with much needed support. The participants felt supported through their interactions with their program staff, and by meeting with other participants of the program. They felt comfortable, and were able to share their stories without being judged.

### **Staff**

The men in the program appreciated the staff in the program for understanding and supporting them. John described Tom:

He is a very, very, professional man. I like his way of thinking and he is very decent, yeah he is very good at what he does, and he takes the extra steps and not just a job, see you later. He comes after hours; he goes out of his way to do his job.

The participants expressed huge respect for the program facilitator Tom Wainright. Doug had the following to say:

He talks about all the different problems he had had in his life. He shares his things, he shares about his personal experiences, really, he's open, he is a pretty strong guy, he is kind of impressive, at the same time, he's [a] very open warm person, and you can see sometimes he's nervous almost when he put it out there, he's willing to go and share that, cool.

The participants spoke positively about the staff in the program. Doug said the following about Tom:

One thing good about the staff, you know they don't tell you the whole scope of this thing when you go in, and actually I think there is lots of reasons for that is because they want you to get a straight good look at it and work with you in the directions that need to work with. I think we are getting the skill set to go forward in life, to do more of those things.

Doug explained that the way the group was run by the facilitators brought balance, support, value, and guidance to the group. He said the facilitator was "awesome":

He tries to make it uplifting, I thought it was great, because a few weeks ago you can see the whole group was kind of down and he said you know your homework this week, he

said your homework this week is to go home and have fun and report back what you did for fun and it was an actual project. So you change the team in the whole direction where you are going, you re-establish playing field again honestly, and it was great.

Doug continued to talk about the coping skills they were taught by Tom:

Yes the skills that he taught us, and the way that he led us, yeah you look at it, it'll be like a guide guiding down the road. The way he led us down the road; he has done a really good job. And you know we have another counsellor sitting in and seeing the balances there and just a little different perspective. We got a male counsellor and a female counsellor in the room. How the course is structured, is real value in that too. I think it tends to keep it from being a female, women haters club, I think it brings a balance, and also to it, immense difference, because quite often there are kind words, general guidance going on, and it's really interesting the dynamics and actually sometimes there has been some check-in moments too, because it brings, I think what you need to enable the dynamic.

When the participants were asked to grade the program facilitator on a grade of 1 to 10, with 10 being the best, Doug had this to say: "I think I will give him 9.5, if they lose him, they will lose a huge person. He is going to leave a big void behind, I am grateful for finding this program."

### **Program**

I asked participants to identify their goals for taking the PG S.T.O.P.

Doug responded to the question as follows:

My goal why I went into the program and stayed in it, I thought about going there, I thought about what my goal will be. My goal will be to be a better father to my kids and be a better person in society, but first and foremost to be a better father to my kids, because I was angry. I wasn't going to be a good supportive dad, there is no way that would have happened, that was my personal goal; and secondarily my concern was that my relationship would be better with my skill that will be a bonus.

The next question I asked participants was to ascertain how the program has helped them to actualize their goals. Doug stated the following:

Coming to actualizing goals, yeah I learned about shame-based behaviour, right we went over that. We talked about it that night, great time. Its stuff I'll never forget it's like lifelong. So I think most people in that room, when I look around are growing, learning, and absorbing; everybody is at their own rate. I almost do acceptance I think, I thought about this last night, actually we had our first meeting on either side, it was calm, it was logical, looking at it with what the future holds, meant it somewhat, you know how to handle it better carefully, but the ability to handle situations differently is totally different. You know I was reflecting on that this morning, you wake up; you think about things, I usually spend a few quiet minutes when I wake up thinking about things.

The course also helped participants to dream again about their future. They were given assignments that help them to think and re-build their life dreams. Doug summed it up this way:

The assignment has been great. I mean we've done everything from just understanding basic emotions to be in touch with your own personal emotions right. You do the exercise when you get home, by journaling what you are thinking, your feelings and

emotions, and have to do affirmation of positive behaviours from other people. We are expected to repeat the process every hour, because by constant practice, the process becomes ingrained in you and becomes part and parcel of you; really good stuff, we've done lots of really good stuff. We spend a lot of time I think it is really important, probably its one night that triggered me personally, it says, probably 2nd or 3rd in there, you know, you got to build a dream you wanted in life, and start working towards your dream.

Doug continued:

So I thought I would take the course I heard from a friend, I heard it is a pretty good course. It did wonders for him, he was bad I know, he was a violent man, he was a violent dad, if it can help him, it doesn't hurt give it a go.....You feel quite apprehensive when you first go. Its self-inducted, there is some I have to do and some you chose to do and big steps for you mentally, I am glad I took it. The course teaches you awareness level and the skill sets to deal with your feelings and emotions..... I am pretty happy with what I am seeing here. There is a step in progress in my own mental growth ..... I think this course is absolutely huge. Going into this course you might identify lots of stuff you might have suppressed for years. You don't even realize they are suppressed, so the awareness you bring out to this course is pretty good..... I really give this course the credit for giving me self-control, and you know you enhanced it, you understand it. The first four chapters on this was on anger, anger management, fantastic, that's all I can say. The learning and growth around that, because I mean, I was experiencing it first hand, I was freaking angry, and I didn't understand abuse honestly,

because what I did was psychological and verbal abuse, but I didn't understand that, to me you can talk to people like that, that's what I grow up seeing, so to me, I was normal.

The participants were asked to grade the program, and Doug had the following to say:

If you look at the content of the course if we score it 1 to 10, you will get 8 to 10. I mean this obviously evolved over time, they are pretty thorough, and there are not a lot of holes in it.

John said the following;

I will grade it 10 course work. From the information given and the effort, Tom and Shane, they put their heart into it and they are there for a reason. They are not there for a paycheck, they are not there for the money, I really doubt it, they don't get that much, they are there to make changes, even if only person changes.

### **Group Support**

The Stop Men Violence Program of Northern John Howard Society is a group program that runs in sessions, but it also allows for one on one sessions if need be. John informed me that "it is 15 sessions and it has been going pretty well." Participants sit in a circle. At the beginning of the session, everybody does a check-in to see how their week had been and how they are feeling. They identify their struggles, and they receive feedback from staff and peers. The researcher wanted to understand how the group dynamics impacted the participants' learning. So the participants were asked to narrate their experience of the group, if they were intimidated in the group, and how they dealt with the issues of trust and confidentiality. Doug had the following to say about his experience in the group:

Oh the benefit of the group is huge. .... The benefit is the experience you get from other people in the group, and everybody sees things differently. Another good thing with the group dynamic was that everyone was sharing openly and honestly I would say. It was really a great support from the group, really good support. I would say that I felt I was supported and appreciated in the group, and other people's positions and ideas were also appreciated and supported, and it was a great experience. I think the group process, group healing sessions were a good thing, I think it's powerful..... Yea you know, I think the way it's been laid out here in the confidential nature of it, the dynamics are good, it opens honesty..... Oh really huge, and after the first sharing we can watch every time that we grow; like we are about thirty or so doing the sharing, yeah it is a pretty tough moment, you are going to dig down deeply a couple of times, and you're going share honestly, and you tell if a person isn't sharing honestly either, but most people are really .....are really sharing honestly and deeply and I think it's great.

Another way the facilitators dealt with dynamics in the group was to set group guidelines at the beginning of the session. The facilitators did not make up the rules, but rather empowered the participants in the group to make their own guidelines. Doug expressed the following about setting the group guidelines:

Well I think a lot that was dealt with in the initial guidelines section and you know when somebody set common rules, you know most people that go to these things don't like rules; most people don't like rules period. Most people are not even able to attune to that. But if you leave it loosened and call it guidelines, then everybody are over it. So it's great and a lot people they just don't know that. You will even be surprised how many

people don't get that figured out. One guy said he didn't want cell phones' on, fair enough, I mean that's a common policy these days, it was good.

## **Anger**

It is important to understand that domestic abuse does not just happen. It is a process that builds up over time, caused by anger, stress, feelings, and emotions that run on the inside of us. Most of the men in the program talked of the intensity of the feelings and emotions they experienced before they physically or verbally assaulted their wives. When feelings and emotions are internalized, and not dealt with properly, the result can be an outburst and explosion of anger, leading to doing actions the individual later regrets. These were the experiences of men that participated in the interview. John described the process of his anger:

Probably on my own, I wouldn't have, without a little push, but I did learn something out of it like, before physical violence starts, it starts with anger, stressing your feelings, and you know, pissing you off and you are not telling her and it builds up to one little thing and there it all comes out... Yeah, it opens the big can of worms that type thing, you see I have been assaulted by women too, so it's not right or wrong, but it's still more male dominated.

Harold described how he had been dealing with his stress and frustrations:

From my own experience; frustration and not knowing what do when something comes up, ya, that part of, like I have never hit anybody, like girlfriends or anything like that I have fought over the years with other men, stuff like that, but we were always told, don't let our emotions out, and so after a while you get frustrated and then you get mad. It just builds up inside and then after a while, if you don't know how to deal with it, which I didn't at the time, even this past year with my last girlfriend. It was really frustrating,

because she said I was this and that, and at the end of it all, she is not who she says she is, but after a while you still forget the differences. So I went to see Tom again and said hey I need some help here again. Again you see your friends you have taken it with and then people you have met right, you discuss it and a brief on how are you doing and how it is going and there was, I wanted to take it because I yelled at my wife all the time.

### **Triggers**

As the men recounted their experience of assaulting their intimate partners, they all pointed to the fact that the behaviour was triggered by an event. The event was perceived to provoke their anger. Feeling angry is not the problem, but the way individuals handle their anger becomes the issue. Feeling angry becomes a problem when individuals lose control over the way they react to anger. People cannot and may not be able to control the events that happen in their lives, but it is important how they react to those events. Losing control of one's anger appears to be what the men that participated in the interview had in common. Rick informed me that his trigger to abusive behaviour was his wife's challenge of his decisions and non-compliance with his power and authority as the "man of the house." Rick also attributed his triggers to not getting his way, not being listened to, being challenged, and being questioned in his power and control. For John, his trigger was his girlfriend challenging his power and control, fighting back, and accusing him of rape. Doug narrated the event that led to his losing his temper and becoming verbally abusive towards his wife:

It was on July 1<sup>st</sup> when I found out my wife was cheating on me..... So anyway to cut a long story short, I confronted her when she comes in, and she says, oh I was talking to Michael, then I went now you are lying to me on top of this. I mean she talks about ethics, morality, and stuff, and that's what they expound and that's what they're supposed

to show for leadership. Well you know at that point you've been betrayed. So anyway I thought I am going to let that go.... I decided to let it go for the day, what's going on around here right, because you know being that she travels a lot, we always have complete trust in our marriage, because I have never considered that in my mind, I have never ever had an issue in my mind when she is travelling. So that part, the betrayal part really, that one really kicked me in the ass. In our situation she went upstairs after I confronted her she told me the truth hey, I found out she had a couple of other affairs I didn't know about, just from what I understand who knows, I will take her word for it. It has been pretty hurtful... We are living in the same house, but you want a challenge, you want to live in the same house when you are emotionally charged, and that will be a good word to say, because your emotions are raw right in front of you and how do you control that.

### **Feelings and Emotions**

I asked participants the following questions, so as to understand how they have learned to deal with feelings and emotions. "What are the things you've learned from the program and how have you applied them in your day to day life?" John responded to the question with the following answer:

Well I mean identifying feelings, I mean negative and positive, seeing why they are negative. I have learned signs of unhealthy relationships, which is never really gave me the answer, he said, 'I will figure it out', and I did. It took a while because I kept going. I was walking back one night and a hooker came from across the street to approach me, I was walking myself and I usually dress half as well; she was about halfway through her spiel about you, do you want company?, and then she stopped, she just turned around and

walked away and then it hit me; unhealthy people don't go near healthy people. She identified me, I am not even going to bother finishing my question and that's how I learned it. I told Tom, he said, 'you see, you got it'. That's the work, if you are not going to put work into that, you are not going to find the answer because he doesn't give it to you; you are going to get it yourself. Even though with the positive, negative thoughts you know the answer he said; John the negatives just stop, they do, and you just can't find it within you, they change to a positive and you in your feelings you know it. I was trying to have somewhat of a smile on my eyes and face out there in public, and there are lot of verbal violence. Any act of imposing your will upon someone, forcing them, that's an act of violence, yeah power control, that shouldn't be in any relationship, you know that's just the way I was brought up.

Doug said the program helped him to identify his emotions and feelings:

I think the most important skill is looking at things emotionally, I think that's the most important skill I learn from this thing. You understand your emotions and how your emotions respond to stuff, you are doing it but you never understand it. I never had any emotional training. You know with dysfunctional parents, you don't get emotional training. I don't think a lot of people with normal parents, so they don't know it. So that's probably the biggest thing I got out of this course, I understand how I feel, now I think about why I feel that way, and how I can change how I feel, and that's huge.

Doug further stated that understanding his emotions encouraged and motivated him to be respectful towards his partner and others:

Oh absolutely that's a big part of it too. Once you understand your emotions, you understand the impact of your emotions or outburst and how it affects somebody else, that's huge by itself. So if I think if anything made me more aware of it, it has made me more respectful when I talk, and that's what I would say.

### **Responding**

The problem the participants had in common was that they get angry like every other person, but they did not know how to deal with their anger. When a person loses control of his/her anger, it may turn destructive; problems ensue, problems at work, in personal relationships, and in the overall quality of life. Feeling rage can make an individual feel as though he or she is at the mercy of an unpredictable and powerful emotion. The participants informed me that the program equipped them with the skills to understand and control their anger.

The purpose of the men's intervention program is to help men reduce abusive behaviour towards their intimate partners. In order to gain insight if the PG Stop Violence Program helped men to reduce the recurrence of IPV, I explicitly asked participants to tell me what they have done differently from the time they started this program or rather how this program has helped them to do things differently and what is that they have done differently.

Doug responded to the question as follows:

You know you learn in different ways, I consider it more of a response now than a reaction. Before, especially around the anger side of it, when you get into an argument, you go almost to anger..... Probably the biggest thing here for me is to be able to identify the emotions and your feelings and deal with it responsibly you know, and I

think another thing is if you are coming out of this course and feeling down, you know how to turn it around, this little mannerism, most people, it's really funny because you watch everyone doing this, it's like turning a life switch, you start doing really cool, and the little hand gesture you should use all the time in your career, trust me it's powerful. Most people are visual, and if you do lots of visual stuff, it really helps. It's really interesting you are talking about that.

John highlighted a newly found skill to detect early warning signs in relationships; if he had had these skills, he would not have entered the relationship he was in. By detecting three warning signs, he was able to discontinue other relationships before dysfunction escalated to violence. John said the following:

I didn't even look; I could care about what I saw. For that moment looks was probably the most. Well I mean I am not an expert, probably I am sure aware of it, I would, before I even go even any further in any relationship, I would like be with her for a while, I would want to see her temper, I would want to see what happens when she gets pissed off, how she handles it and vice versa, and I expect the same from her.

John as well emphasized that the program has helped him to understand the importance of keeping healthy relationships. He asserted that the trigger of his abuse begins from keeping unhealthy relationships:

My own thing is to learn how to detect and how to see the signs in another person and I have. At the College (CNC), and there is one woman there, and three red flags are my rule. I have seen three reds in her, which means we would be friends but it will never go beyond that. Somewhere down the road I see what she is now doing to other people now

will be turned on me. I learned that off of Tom because healthy people do not attract unhealthy people. ... I would rather be alone than be with one who is unhealthy and doesn't understand. I have had a few. Someone who can sit here and have a disagreement or sit here and talk about it, if you can't solve it, you put the issue aside, don't let it affect what you have. I have learnt that once an issue is dead it's water underneath the bridge, you don't save it as ammunition down the road, saying oh, you did this last year remember, you know what I mean, I don't have time for this anymore.

John used his first marriage as an example of a healthy relationship and to emphasize the importance of having healthy partners in a relationship. He has the following to say when I asked him to define what a healthy relationship means to him, he said the following:

No, there was no violence in that relationship, not ever. She gets mad. I don't even think she yelled once. I can't remember her once yelling, we would sit down and talk about it and if we didn't we just went aside and we just carry on. You know there was drinking on my part, which is probably what ruined it, but other than that it was violence free. Ok so you look at it, I have had healthy ones, and there is zero violence because I can solve a problem, but when you throw in substance abuse, dope into women, it's a disaster, it is either you see it or you don't.

Rick reported that the program is helping him maintain control of his anger. He said that being mindful of his anger is helping him to adequately deal with it. Rick said that when he gets angry, he finds ways to diffuse the situation:

I find it very useful to keep quiet, read a book, listen to music, walk away, and talk with male peers, especially those men who attended the program with me. I also have started

attending church and belong to a men's bible study group. I find the men's group very helpful, because we could share intimate things without feeling ashamed. Also praying with my wife daily has been a very useful way of coping.

Harold said that regularly meeting with friends from the program was very helpful. They discuss and brief one another on the events that are going on in their relationships and on how they are coping.

### **Understanding**

Doug defined his concept of 'understanding' as follows:

Understanding, not just understanding the anger, the anger is only a small component, but understanding your emotions, responses, what is appropriate, that's what I mean by understanding. So the understanding has about 4 or 5 components to it or maybe 6.

Doug went further to describe understanding and responding to anger as the turning of a clock:

Turn it around; turn it around like a clock. Turn around your self-talk; make it better, and when you have come out of this you are faced with a lot of different things. I think you are able to look at people in a more healthy way, you know. You take your anger and understand it; I guess what you would really take from this course so far for me, you take your anger and have a better understanding of it. If you have done that, that's pretty powerful. You got the anger coming in, now you to understand it, and yea you still got some anger with you, but understanding how to deal with it; so really, if you truly encapsulate this course that will be it; anger and understanding.

Doug indicated that understanding anger has many components to it which may include forgiveness and acceptance. He succinctly summarized it as follows:

You know right [away] what you're thinking, what's going on right there, that's not an issue, your intellect is there right, you analyze it, but you mostly, and then there are lots of sub emotions that is running through you too and different feelings and stuff, you try to bring back and recall it, it really works. Anger and understanding I say has a lot of components to it. Understanding could be, forgiveness part of it, acceptance part of it, and you know, that's how I feel, so at the end of the day anger and understanding.

### **Change**

One of the questions I asked participants focused on how the program helped them to change, thereby addressing the main research question. The concept of change is based on the assumption that men have the potential to change, and that people make mistakes in life, learn from their mistakes, and acquire the necessary skills to move on and to avoid future mistakes. It is important to note that change is not a motionless experience, but it is a process over time involving growth and advancement through different phases. Doug said that the homework they were given in the program helped them to get in touch with their process and progress of their change:

One part of the homework is getting in touch with the changes, to accept change in your life, because like a lot of people, you built stuff pretty good and now your life is progressing so you are not used to make a change you are not working towards, and these are unexpected changes, and dealing with the unexpected changes. It happens; we know that, how you are doing, how you're feeling I guess, you just know you have your head in

the right spot, you can almost do anything. It is going to slow you down for a while, but it is not going to stop you.

John said that he had learned to hang around men and friends who are healthy:

I don't drink anymore; I haven't drunk or smoked in 5 years. So I do a lot of positive things in my life, and I am not going backwards. My big thing in life now is to stay okay, I do a self-check not every day, probably most days, or every other, and if something is bothering me, or something is wrong, I fix it right away or I do what I can, you know I am feeling good today alright, I have no issues. If something is bothering me, I identify it and do what I can, right; that's my big thing. So you got to erase that, record over it, and it takes practice and experience, just that one finishes a program, does not make him get better, you have to practice what you have learned the rest of your life. I mean right now if something is bothering me or maybe I have an argument with a friend or something happens at work you know I will say, I will like to go. I don't like feeling like that, that's why I drink, I didn't like who I was, and the way I feel about myself, so I drank to cover it up.

### **Measuring the Progress**

The men talked about the progress the program has helped them to make. On a scale of 1 - 10, with 10 being the worst, I asked them to ascertain their progress. My aim for asking such question was to gain insight on how the PG Stop Violence Program helped men to reduce the recurrence of IPV. Doug had the following to say:

When I came into this program, I was probably way up there. Now I would say probably 3 or 4. I think you bullshit yourself if you thought otherwise, there is still lots of healing

that's going to go on. I thought about that, I thought about where I am coming on the journey, I think I am about half way healthy, that's how I describe it to myself. You know how you felt when you are healthy and everything is good in your life, I am halfway there. What was way better is the awareness level, which is really cool.

I asked John the same question but the scaling was reversed the other way round, on a scale of 1 to 10, how you would grade where you were and where you are now since you started the PG S.T.O.P:

Where I have been obviously -1, right negative, and now I will consider myself probably a high 9 from what I have learned, from what I have practiced. I keep moving forward with couples of steps back easily, and you learn something and move forward, and I don't throw everything away over one little incident, you know. Like I said I don't just do the book, you have to practice this in every relationship, so a lot has changed. I have something to show you and probably it is the most important to me. I have this above my computer, every morning when I wake up I read it and these are the few things I live by, I do my best to live by it. With integrity do not take anything personally, don't make assumptions, always do your best, live well, laugh often, love much, and he who has gained respect will never lack peace. These are the few things that will be with me in every home I have. There is a book on this, I have the book, it's called the "The Four Agreements," you can have a good life if you follow these. This is something that really applies to me and it has been doing well for me.

When John was asked what has encouraged him to seek change, and how he knows that he has changed, he said that the desire to change comes from within on the inside. He did not like where he was, so he sought to change:

My change has been 180 degrees. Like I said, you can't just say oh I have changed and stopped, because I don't think that's how it works. There are lots I still have to worry about, I am not perfect, and there are certain areas in my life where I am getting started. I have really worked on myself really good since 2009, and I have just had to keep practicing. I am in a good place now, that's the way I feel. You have to put effort into it, you can't take this program and say well okay I got a certificate now, I am all better, it means nothing, you don't want to war with nothing, your change has to come from the inside . For example you know, my boss, I have only been there two months, at the Blue Wild (not real name), you know where that is? That is an Italian family, they have accepted me so much, and they invited me to a Christmas dinner at their home. That hasn't happened in about 15 years, nobody ever wanted me around because I was an asshole when I am drinking. The only reason I was probably invited most places was because of my wife, because of my wife in one way or the other, and for that, that's a big change, that there says a lot to me, that is a gift, just that is a gift, that's how I look at it.

### **Healing**

In order to understand what change really meant to the participants, they were asked to define their healing and how it has manifested in their life. Doug has the following to say about healing:

Healing for me is quite a few things, you have to reach forgiveness. Hey, I am not really there yet, honestly. Really understanding that you have to go there, but I haven't

achieved that yet. You know it is something that is necessary, you really do need that. Now I feel a lot more compassionate towards her, I guess maybe that's the first step. I have reached acceptance may be in the last three or four weeks or so, you know when you accept it, and then you can start moving forward I guess. So in the healing process and the completion of the journey, I still have long ways to go, but at the end though being well and healthy as the mother of my children is good life, I guess that will be a healthy way of saying it, you I don't know if I will ever see her the same, I will never see her the same, but you will always have the little.... I see some behaviour I didn't even like hey, you know ... every time I see her it hurts. My healing, is trying to be decent to her, and move on. Healing is dealing with your anger. I mean you know just carrying anger around is not okay, just what you do with it, I mean you say okay I will minimize it, that's not the ultimatum, you know it's not okay, why carry it with you? Really and truly that's the big thing, do you want to carry it around with you all the time, no. Its funny my daughter said to me days ago, dad you sound way healthier these days, she saw the growth in me and it feels good.

### **Positive Self-Image**

Another important process of change involves the shift in self-perception: the program gave participants the skills to change the way they see themselves. Doug said the following about this process:

The most profound thing out of this course, and I think the other night we talked about that at coffee break, is your self-image. It is 90% how you deal with it, you know if you are okay with yourself, you can deal with almost anything and start putting positive energy back out there, and I think that is the key. Tom spent a lot of time around that,

explaining that. I think everybody got it, got it quite well. I think it was great, self-image, its huge, how you look at yourself, how you think about yourself.

Doug continues:

This course is helping you deal with yourself, because you have to understand it, you understand the problem, you have to deal with it. It is the other person's problem; it is the other person's shit and I kind of like that because that really counts a lot..... Even when you deal with people, when you understand that, you can separate that; okay that's their problem to deal with; your problem is learning to be healthy you. Life affirming perfection in imperfection is probably the best thing about this course. You are reminded you are a perfect person from the get go, the facilitators reinforces that, they make you hear it many times too, because sometimes you question your own self-worth at times.

John said the following about the way he now sees himself:

Well I just like the way I think, the way I look at myself, the way I think about myself now, who I am and who I have become, you know my past is my past and it's part of me, I won't deny it, I decide who I'll become and where am going. I like the way I see myself in the mirror.

### **Summary**

From the analysis of four personal interviews with men who had participated in the violence intervention program in Men Stop Violence program of Northern John Howard Society Prince George northern BC, five major themes emerged. The themes included abuse, family history of abuse, support, anger, and change. In summary, the men were positively impacted by the intervention they received at the Northern John Howard Society. The answers they gave to

the research questions confirmed that the PG Stop Violence Program of Northern John Howard Society helped men to reduce the recurrence of IPV. The men recommended some suggestions for better provision of services. The implementation of some of their suggestions would require greater financial support, and most probably government funding of the program. All of the men that I interviewed were perpetrators of domestic abuse, and they all experienced childhood abuse mostly from their father. It may seem surprising that even though none of the men witnessed their father abusing their mother; they all attested that they ended up abusing their partners instead of their children. This pattern could be attributed to the fact that some of the men have no children yet in the relationships, the children were still young, or it could be that they were using the abuse of their partners to control their children. The men benefited from both the program, and the support that they received from the group and staff in the program. It is also important to understand that change does not happen instantaneously, it is rather a process, as these men attested to, through their own journey toward psychological health.

## Chapter Five: Discussion, Summary, and Recommendations

The primary purpose of this research was to explore how the program of Northern John Howard Society helps men who participate in treatment to change their abusive behaviors. Furthermore, the impact of physical and emotional abuse, family history of violence, and expression of anger were also discussed. Four courageous men disregarded shame, took part in the interview process, and shed light on the main question of this research. The findings satisfied the purpose of the research, which was to explore the effectiveness of one male intimate partner abuse intervention program of the Stop Men Violence Program of the Northern John Howard Society Prince George. Through the findings of this research, it is imperative to note that lasting change for men who abuse intimate partners does not occur instantaneously, overnight, in six months, or even in a year, but rather requires a long period of time to confirm whether actual change is occurring. In fact, this journey of healing is a lifelong process. Not every person has the power to immediately change negative behaviour. The research participants claimed that noticeable progress of change has occurred in their lives, even though they had only recently completed the program. Such claims should not persuade anyone to believe that complete change has actually occurred; however, it is an ongoing process. Only time will tell if the men's claims of change are different from the earlier noted honeymoon stage in the literature review. Margolin (2009) informed readers that in the honeymoon stage, the abusive partner becomes appealing, honestly repentant, apologetic, gentle, and extremely persuasive, which makes their spouses believe they will change. Abusers themselves sincerely believe they will not batter their partners again, but may quickly fall back to the abuse stage when feelings are provoked. My personal experience with my brother in-law's treatment of my sister would have cast doubt on my belief that men who abuse their partners can change. I recalled my sister telling me that her

husband always asked for her forgiveness each time he abused her. She said initially in the relationship, she thought the abuse would stop after his remorseful apologies, but to her surprise the abuse worsened the next time. In the course of the interviews and my personal reflections, I had to constantly remind myself to eschew any bias and or preconceived opinions, but rather to give each individual the benefit of doubt in their claim of change. I have seen individuals change their behaviours in the past, and I still strongly believe that change is possible; change depends on one's readiness, motivation, willingness, strength, ability, and capability. Change for some may take longer and for others there may be no change at all. Change is difficult and most treatment programs for men who batter assume, explicitly, that they are "ready" to change when they come through the door. This assumption is seen in the high "action" orientation of most men's violence intervention programs. Recent research suggests that most men who are in the very early stages of batterer counselling are actually not motivated to change or are only beginning to think about the possibility that they might want and need to change. This sets up unrealistic expectations in which men's violence treatment providers expect too much too soon, and when it does not happen, counsellors blame and label clients resistant and lacking the motivation to change (Hamberger & Holtworth-Monroe, 2009).

## **Discussion**

Surprisingly, all four participants were Caucasian males. This raises the question about cultural predictors of domestic abuse. It is possible that the incidence is higher in certain cultures; however it is also possible that domestic violence in certain sub-cultures is not reported and perhaps may not be considered abuse. What is considered domestic abuse within mainstream Canadian culture may not be defined as such within Canadian sub-cultures. Canada is a multicultural society with different sub-cultures of ethnic minorities and recent immigrants.

Are all Canadians on the “same playing field” of the law in terms of domestic violence? Some patriarchal informed sub-cultures within Canadian society may not identify domestic abuse the same way as mainstream culture; also, it could be attributed to some cultural norm that family business should remain private in the family and a person would not want to bring further shame to the family; an example is Canadian-East Indian culture. Another plausible explanation for no visible minority people entering the study may be influenced by cultural uncertainty, misunderstandings about the possible consequences of participating, etcetera; people who enter the BIP may be influenced by cultural barriers of all types, including fear of reprisal, or deportation. Fear of reporting abuse can be culturally based; in a new or adopted country, people on both sides of the equation may be hesitant to come to the attention of the police.

The men thoughtfully shed light on the progress and process of their journey of change.

John had this to say:

So I do a lot of positive thinking in my life, and I am not going backwards. My big thing in life is how I can stay okay; I do a self-check not every day, probably most days, or every other..... If something is bothering me, I identify it and do what I can, right; that's my big thing.... Just that one finishes a program, does not make him get better, you have to practice what you have learned the rest of your life.

All the men in the interviews admitted that they are still working towards change. They all acknowledged their desire to change, which was the reason why they attended the program in the first place. They informed me that they regret their abusive behavior. John specifically said that he “felt pretty bad” for hurting his partner. Change of abusive behavior is indeed not easy. It is important to remember that lasting change takes mindfulness and consistent practice. Even

when individuals make mistakes or fall down, they have to continually persist in their efforts.

Doug had the following to say about his change process:

You have to reach forgiveness. Hey; I am not really there yet, honestly. I now really understand that you have to go there, but I haven't achieved that yet. You know it is something that is necessary; you really do need to get there.

John said even though he has desired change, that he is still working at it on a daily basis: I am not a perfectionist, you do something wrong; you know that could be two steps forward and one step backward. I don't let my guard down that much to where something goes sideways, I can step back and say okay, and I don't put myself in situations where something happens.

Another important factor the men pointed out in the interviews was anger, and lacking the skills to deal with their anger. Anger is a common feature of domestic violence. Anger, hostility, and aggression are different concepts: anger is the emotion, hostility is the attitude, and aggression is the behavior (Del Vecchio & O'Leary, 2004). Any lasting intervention and change must incorporate skills in all three areas of emotion, attitude, and behaviour. There is the need for effective anger management skills to be incorporated and considered as part of a broader intervention in emotion regulation for men in treatment programs.

To experience a complete change of behavior for men that use abusive behavior to control their partner is possible, but complex and intricate. Men have to be dedicated to change and work vigilantly over an extended period of time. Since domestic abuse is a learned behavior, it is possible that that behaviour can be unlearned. There is a need to conduct an individual mental and psychological assessment for men entering an intervention program, so that treatment and intervention can be tailored to individual needs. Men's treatment programs should not

assume that every person who steps through their door for treatment is mentally stable and will benefit from a group format. Some individuals might do better in a one-to-one basis. None of the men I interviewed in this research made any mention of undergoing any form of mental health assessment to ascertain if their anger, aggression, and hostility were caused by the presence of borderline personality disorder, depression, and anxiety disorders while in the program. There may be the need for men's violence treatment programs to incorporate a person-centered approach in their services.

Apparently, all the participants as noted in pages 42, 65, and 86, talked highly of the P.G STOP programme facilitator, Mr Tom Wainright for greatly helping them in their journey of change. They emphasized that his style, approach, and mannerism, greatly influenced their continued participation in the program. It appeared that Tom was able to effectively establish a therapeutic relationship with the participants, which ultimately aided their journey towards change. The establishment of a healthy and trusted therapeutic relationship between counsellor and client is vital in every counselling relationship. It might be accurate to infer that the participants would have withdrawn from the program, or find the program unfruitful, if their relationships with Tom were not secure. The researcher concludes that having an effective facilitators/counsellor is vital in every therapeutic relationship and intervention.

A research meta-analysis conducted by Hamberger & Holtworth-Monroe (2009) concluded that men who abuse their partner exhibit a range of psychopathology and personality disorders. To further complicate matters, many abusive men are survivors of (at times multiple) trauma themselves: all of the men in this research attested to experiencing violence, abuse, and neglect as children (either directly or vicariously), and this is verified in the research in this field. There is a long list of causative factors of trauma, such as past experience of physical, sexual,

and institutional abuse or violence, neglect, inter-generational trauma, and disasters that induce powerlessness, fear, and a recurrent sense of hopelessness. Trauma then has wide-ranging consequences, including impacts on spirituality and relationships with self, others, communities, and environment, often resulting in recurring feelings of shame, guilt, rage, isolation, and disconnection (Hamberger & Holtworth-Monroe, 2009). It may be essential for men's violence intervention programs to match treatment to the characteristics of abusive men including readiness to change, trauma history, alcohol and drug abuse, and the need to deal with a broad spectrum of treatment issues such as recidivism (Hamberger & Holtworth-Monroe, 2009). There is the need for men's violence intervention programs to incorporate a trauma informed approach in their practice. A trauma informed approach recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in the lives of potential participants. From the stories of the men in the interview, the researcher noticed that they all witnessed traumatic events in their early childhood. The history of the batterer-intervention movement has been heavily influenced to downplay individual factors in favor of social-political factors. The outcome has been the development of an intervention model that eschews psychological analysis and appreciation of individual differences in favor of psycho-educational programs, an approach sometimes derisively referred to as "one size fits all" (Hamberger & Holtworth-Monroe, 2009). The primary assumption of the psycho-educational approach is that if we teach men to be less sexist, to treat their partners with respect and equality, and hold them accountable for their actions, they will change. Unfortunately, recent research is beginning to show that psycho-educational forms of intervention are minimally effective in helping men change (Hamberger & Holtworth-Monroe, 2009).

The research participants seem to have made significant progress, with a hopeful prognosis. Certainly based on their own testimony, and the researcher's observations, there is a need for the implementation of an effective intimate partner violence treatment and intervention model that incorporates the use of a person-centered, trauma informed approach, as well as some components of gender analysis and accountability. There is need for an individualized treatment planning based on an in-depth assessment of individual treatment needs at intake level. There is also a need for treatment programs to incorporate the use of a "Biopsychosocialspiritual" model of assessment in their practice. This theory postulates that antisocial behaviour is the net result of complex interactions between a combination of biological, psychological, social, and spiritual determinants. The "Biopsychosocialspiritual" theory is a conceptual framework that allows attention to be focused on all factors related to the need an individual may present. It allows for the delivery of harm reduction services that minimize abusive behaviours (Jobe-Armstrong, 2008).

### **Limitations of My Research**

This research is particularly restricted to interviews with men that attended the Men's Stop Violence program of the Northern John Howard Society in Prince George BC. There were no interviews with men in similar programs to ascertain if they all have the same change experience. Due to time constraint on the part of the researcher, only four men who attended the program were interviewed. The researcher was unable to follow the initial plan to interview partners of participants as two of the participants were not in any present relationships, one participant is on the verge of separating with his wife, and the last participant is in a new relationship. Furthermore, due to personal time constraints, I was not able to interview the program facilitators as I initially planned; these interviews would have yielded more insight into

the change progress claimed by participants. There is also the possibility that the researcher's race as a minority African-Canadian male may have affected the response of participants and the outcome of the findings: even though Canada is a multicultural society, there may still be some subtle elements of racism in a white-dominated society like Prince George. Additionally, despite efforts, planned follow-up feedback did not happen as it was difficult to find a suitable time that worked for participants. Some participants claimed that they gave enough information already, so there was no need for a follow-up. With the understanding that lasting change does not occur rapidly for men who abuse, this research was limited by the fact that there was no follow-up over a long period of time to ascertain that lasting change has occurred.

### **Link to Literature Review**

From our modern-day experience, learning, and research, and through our socialization, we understand that change is not automatic, but rather goes through processes and stages. For example, the change process in a butterfly during its life cycle is known as a complete metamorphosis. The stage of butterflies' life cycle progresses from egg to larva, from larva to pupa, and from pupa to adult. Likewise, the change process in humans does not happen instantaneously or in a vacuum, but is a process of transformation. Prochaska and Di Clemente (1984) noted in their Transtheoretical model of change that change is not a static event, but a process over time involving progress through distinct stages. The stages of change are the precontemplation, contemplation, preparation, action, maintenance, and termination. These stages of change represent a key component of the Transtheoretical model and describe a series of change stages through which people pass as they change their behaviour. Each stage corresponds to the person's readiness to change, which shifts over time, resulting in people moving forward and sometimes back again through different stages of change (Prochaska & Di

Clemente, 1984). In this process of change, relapse is not regarded or viewed as a failure, but as a common part of the change process, and indeed an opportunity to learn how to sustain change more effectively in the future. This concept believes that people learn from their mistakes and then continue to strive through the change process. It is important to note that change does not happen in a linear, one-way direction, but more like a circle with movement in both directions. Individuals can be at different levels of change facing different life problems and situations, and each stage of change is associated with distinctive cognitive, emotional, and behavioral characteristics.

The stages of change model have both an intuitive and practical appeal for practitioners in clinical settings. Using this model, a practitioner can effectively support an individual through change processes, and also understand why some people are more responsive to change than others. The understanding of an individual's motivational needs and readiness to change, and the application of an appropriate motivational interviewing technique at different stages of changes, provides the tools and insight a practitioner needs to effectively and efficiently support that individual (Rollnick, Heather, & Bell, 1992). This model of change helps clinicians to see if people desire to make a change in a specified behaviour and the barriers that may need to be removed to make and sustain a change; it also provides context for relapses as simply a stage in a longer-term process of change. Studies of addictive behaviours also recognize that individuals may relapse and go back round the cycle again, and that attention needs to be paid to the processes of maintaining behaviour change (Spencer, Pagell, Hallion, & Adams, 2002).

### **Precontemplative**

At this stage, individuals may not be thinking about changing their behaviour, or they may not see their experience as problematic. Often, even if the individual does not perceive their

situation as problematic, people around them may perceive it to be a problem and may be encouraging or coercing them to seek help for their situation. For example, some men who abuse their partners may not see their behaviour as a problem; instead they project the problem onto the victim for triggering and provoking the abuse. People at this precontemplative stage do not think that they need to change anything (Spencer, Pagell, Hallion, & Adams, 2002). There are many reasons for people to be stuck in precontemplation, including the four Rs of resistance: reluctance, rebellion, resignation, and rationalization. Resistance may be characterized by individuals minimizing problems, blaming others or rationalizing their problems. Individuals at the stage of change may feel demoralized and quite hopeless about their situation, as they may have made several unsuccessful attempts to change in the past. For example, I remember talking to a client about taking a program in Alcohol Anonymous (AA). He said; “oh no I have taken it for more than ten times before, and it did not work for me, so I am not interested anymore, and I am not going to do it again.” Being unaware of the need to change or being actively resistant to change is a normal reaction to the possibility of change. It is not pathological nor is it indicative of what many people refer to as denial (Jobe-Armstrong, 2008).

### **Contemplative**

This stage is the entry way into the process of change. Individuals at this level of change acknowledge that they have a problem and contemplate that they will need help and support to change. This stage could be characterized by a high degree of ambivalence as the client begins to consider the negative consequences of their behaviour, even while remaining attached to a behaviour that met an emotional need (Spencer, Pagell, Hallion, & Adams, 2002). It is important to acknowledge how the individual is affected by the presence of the problem in their life, and to accept that ambivalence is a realistic response to a major lifestyle change. For a person to admit

that he or she has a problem is a huge shift of paradigm, and may influence self-esteem negatively. It is imperative to note that change is difficult; being willing to contemplate a problem is an important first step but does not necessarily mean a commitment to change. There may be a need for support and motivation for the client to move forward.

### **Preparation**

The preparation stage indicates the individual's willingness to change, as well as a commitment to take present and future action that is geared towards change. The success of long-term change depends on what is done during the preparation stage. People may not have resolved their ambivalence yet and will continue to re-evaluate themselves and their problem, but will become increasingly confident about their decision to change (Jobe-Armstrong, 2008). The individual's perception at this stage has shifted from the problem to the solution. This stage requires a realistic assessment of the level of difficulty individuals may face, and the creation of a change plan that can support their process of change. The common danger is moving to the action stage prematurely before the individual is fully ready. It is recommended that individuals should not move to the action stage until change becomes their highest priority (Jobe-Armstrong, 2008).

### **Action**

This stage starts after plans have been made and the individual is ready to implement the change plan. The stage of implementation means that the individual will begin to eliminate some unwanted behaviour, modify others and introduce new ones (Jobe-Armstrong, 2008). The individual will also make a public commitment to action, making use of support, seeking external monitors and seeking feedback with respect to their plan. Individuals may need an accountability partner similar to the practice in Alcoholics Anonymous (AA). The individual at

this stage of change may experience an increasing sense of self-efficacy and may become very passionate about the change process in which they are involved. This stage requires the most commitment of time and energy.

### **Maintenance**

This stage of change is arguably the most difficult. Consistency is important at this stage: it is always easy to do an action for the first time, but to maintain doing the same action for an extended period may become difficult. Maintaining change is a challenging process that is characterized by achievement of a change goal that becomes a permanent part of the person's life. This is the stage where an individual establishes and adheres to new patterns of behaviour. These changes may affect other areas of life, such as relationships (including friends), employment, residence, and so on. At this stage people are worried about high-risk situations and other negative environmental influences they may face. A key skill at this stage is learning to set healthy life boundaries; people without this skillset will indeed struggle at this stage as former lifestyles will continue to draw an individual back for a long period of time or during stressful occasions (Jobe-Armstrong, 2008).

### **Termination**

This stage of change requires great determination, hard work, and deep personal honesty. This stage implies that the former problem no longer holds any temptation or threat and that the individual has overcome his or her problem and will always have the power to overcome any cravings or urge to return back to the old way. The individual thrives with the knowledge that the behaviour will not return; and feels confident in his or her ability to cope with relapsing. Termination means exiting the spiral of change (Jobe-Armstrong, 2008).

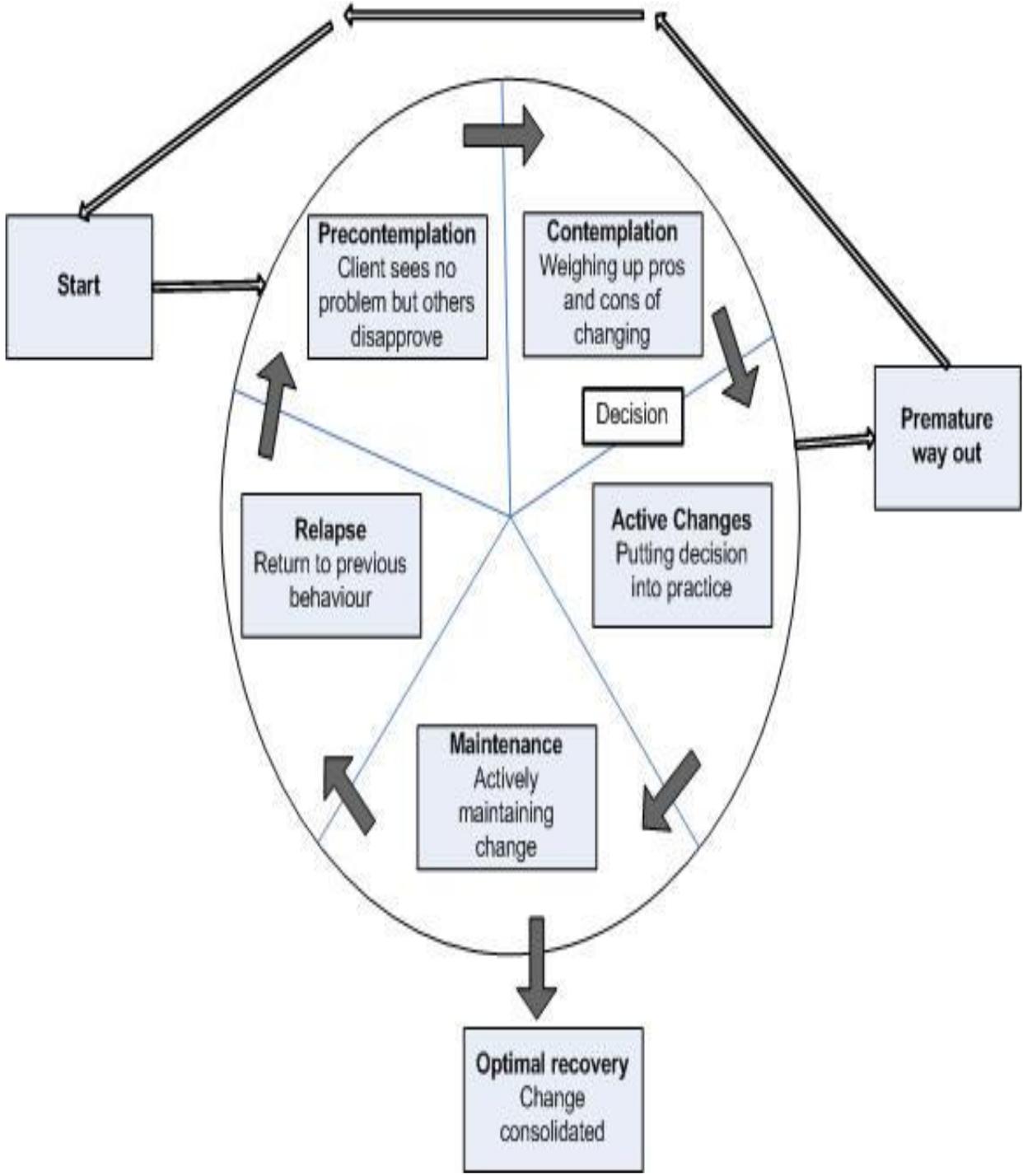
## **Relapse**

It is important to note that relapse is not a stage, but rather a process of change. Relapse is more common in the process of change and could occur up to four to seven times in the change process (Jobe-Armstrong, 2008). Relapse occurs when an individual, having made progress, resumes old thought patterns and behaviours associated with their problem. People experience guilt and disappointment when they are aware that they have relapsed to their old behaviour. Most times, the majority of people who are strongly committed to the change process are able to return to the contemplation or preparation stages, relatively close to making a commitment to renewed action. Where relapse is viewed as a learning experience, it may support individuals to learn from their mistakes and continue to forge ahead (Jobe-Armstrong, 2008).

In fact, change of any sort is usually somewhat stressful and uncomfortable. Change does not just suddenly happen; something must cause one to seek to change. It is a process that gradually unfolds over time. That "something" is the motivation to change. The driving force in the change process is the motivation. It is the very element that keeps one on the course from precontemplation to termination stages of change. Those who successfully made the needed changes and those who did not, differ in motivation and commitment.

Since motivation is so critical to change, it is important for the PG STOP (both program facilitators and therapy participants alike) to understand the motivation for change. This includes understanding the degree of motivation; the type of motivation; as well as understanding various ways to increase motivation. Once sufficiently motivated, people can and do change.

Figure 3. The Stages of Change Model.



The Stages of Change Model Adapted from the work of Prochaska and Di Clemente (1984)

## Recommendations

The participants in this research articulately offered the following recommendations for change in the intimate partner violence prevention and intervention services. The participants have things they would like to see change in the program. Doug explained:

The structure is good, the only thing I would do differently ..... I think there is going to be a little kind of healing time. It will be nice to have a little bit more healing time....

That will be the only thing I would probably recommend.

There was the suggestion for the Stop Men Violence program to incorporate the idea of teaching men how to respond to situations. This means they will need the opportunity to role play incidents in order to learn and practice more appropriate responses. Practical experience through role play would indeed give the men the practical knowledge to deal with situations when they arise. This means that “head knowledge” is not enough; practical knowledge through role play is absolutely necessary. Doug emphasized the following:

There is a need for the program to be more in-depth by teaching men how to respond to situations and what will be a good response to a situation. I think a lot of people will understand what they have done, but I don't think they understand the appropriate responses to use in life, and sometimes I think you are going to put it in front of people. I think you'll say here is what we consider appropriate responses in a situation and here is something that will be good to do in front of your kids, here is something good to do in front of your family. I think some of the positive examples need to be included, ...like here is what healthy relationships look like, here is what healthy dad looks like, and those

are good, but I think the part of appropriate responses to situations should be talked about a bit more....

The following advice was given by Doug to future participants of the Men Stop Violence Program of Northern John Howard Society Prince George:

The first advice I will give a person going through a tough time is to stand, draw back and think about it for a minute ..... you are not alone; people have experienced this before ..... So yeah my advice totally to men definitely will be to take the program. I think people should take this course before they start parenting. Really and truly, I see so much value in it anyway, which to me is an incredible opportunity to learn the necessary skills to deal with life challenging situations. In my mind, life skills come out of this; you are not dealing with relationships, you should be dealing about life skills.

Participants also recommended the need for adequate funding for the Stop Men Violence Program from the government of British Columbia and other non-government agencies. Doug had the following to say in this regard:

.... If there is one thing I have to say about this thing; I am grateful for the guy for referring me to this program. He did it and he said hey, this is one of the things I would refer to other people. I think this program should be expanded and made available in most communities, if we can find the skills and the financial resources to make it happen. I think the government really, my recommendation, my yearning is that the government of British Columbia should be financing this; I think it got such familiarity in our society. They use government finance and do all kinds of crazy stuff with public money. This should be an immeasurable service to the community.

John as well thought there is a need for better funding for treatment:

It's more than worth it, they should invest more. Maybe you can, like Tom said you can never deny someone, you might plant a seed, it might take years, but you can never say no I don't think you should be suited for this, everybody should be given the opportunity to change.

The participants I interviewed also recommended the need for the Men Stop Violence Program of The Northern John Howard Society to increase the duration of the program, so as to give program participants time to fully process and assimilate their learning. About the program duration, John said the following:

I will probably say a little longer and not so packed together, well crunched sometimes, a lot of information at once, you can't retain them all, so probably I would say another month will spread it out all nice." ... not more than 6 months. Just maybe, lighten up the load in the nights and that's all..... I think just lengthening it a bit, so the instructors are not so stressed in producing all the information at a crunched time. That's all I would say right now.

There were also recommendations for the study materials to be updated. Specifically, there was a call for the need to update the therapeutic videos used in the sessions. John had the following to say about the videos: "The movies he got they are a little old, that could be good for the older guys, for the guys back in the days, but for the newer generations, they need newer movies."

## **Implications for Social Work Practice**

Social workers in their practice are constantly confronted with issues that demand tough decisions and choices. The Canadian Association of Social Workers (CASW) Code of Ethics sets out values, guidelines, and principles that will help social workers in these situations. The Social Work Code of Ethics (2005) does not guarantee ethical behavior; ethical behavior comes from a social worker's individual commitment to engage in ethical practices. The reason behind the Canadian Association (CASW) Code of Ethics (2005) is to guide social workers so they can act in good faith and with a genuine desire to make sound judgment. The CASW warns that social workers need to be aware of any conflicts between personal and professional values and deal with them responsibly.

In order for social workers to practice in a way that is not oppressive to the people they serve, they must understand power and control, trauma, abuse, oppression, and the dynamics of domestic violence, as well as the effect they might have on people. Social workers must ensure that their practice is not oppressive to the people they serve, thereby re-victimizing the victim. Social work practitioners should incorporate into their practice an anti-oppressive lens and approach to understand that oppression and abuse could be supported by social structural systems created by the government (Osimo & Landau 2006). Oppression refers to deep and vast injustices some groups suffer as a consequence of often unconscious assumptions and reactions of well-meaning people in the ordinary interactions, supported by the media, cultural stereotypes, and structural and social features of bureaucratic hierarchies and market mechanisms. Mullaly (2010) informs my understanding that oppression is the deprivation of fundamental individual and group human rights, equality rights, and a sense of belonging, thereby making them vulnerable to the emotional feelings of inferiority and worthlessness.

Social workers are required by our codes of ethics to challenge injustices for those who are marginalized, disadvantaged, vulnerable, or have exceptional needs, and promote social inclusion. The principles of professional integrity require social workers to promote the qualities of reliability, impartiality, diligence, openness, transparency, respect for the professional values and principles in organizations where they work or with which they have a professional affiliation, and ensure that the nature of conflict is fully disclosed (Canadian Association of Social Workers, 2005). Ultimately, social workers are obligated to be inclusive and equitable in their practice (Mule, 2006). They need to understand that society driven gender differences that result in differences in power have a profound effect on a host of behaviours. Taken together, women's childhood socialization, their adult roles, and their social-economic status, all point to their relative disempowerment. In addition to the social roles thrust on them and the socioeconomic disadvantages they face, a good number of women experience violence as either children or adults, which creates severe trauma (Mulé, 2006).

There may be need for social workers to embrace a trauma-informed approach in their practice. Trauma-informed services takes into account an understanding of trauma in all aspects of service delivery and places priority on the trauma survivor's safety, choice, and control. It is important for social work practitioners to understand that traumatic events happen to all people, at all ages, and across all socioeconomic strata in our society. Traumatic events in people's life could cause terror, intense fear, horror, helplessness, and physical stress reactions (Klinic Community Health Centre, 2008). The impact of these events does not simply go away when they are over. Instead, traumatic events are profound experiences that change the way children, adolescents, and adults see themselves and their world (Klinic Community Health Centre, 2008). Due to a lack of knowledge about the effects of traumatic events and a limited understanding of

how to work effectively with survivors, trauma survivors are at a high risk of being re-traumatized in social service and health care settings. Social workers should also understand that traumatic events impact everyone differently, and that individuals experience trauma and the subsequent healing process subjectively. Re-traumatization of victims could perpetuate a damaging cycle that prevents healing and growth. This can be prevented with basic knowledge of trauma-informed language and practices (Klinic Community Health Centre, 2008).

### **Summary and Recommendations**

In conclusion, in spite of my research findings, the concern is that these successful accounts of change through intervention are almost exclusively based on the individual account of program participants, which could be influenced by their own motivation either to complete an intervention program or to avoid further sanctions. Whatever the motivation may be, I think there is a need for research that will view success of intervention from the lenses of program participants/facilitators, and that of their wives/partners/victims. There is a need for further study that assesses whether more culturally diverse samples of men identify with similar processes of change (Silvergleid & Mankowski, 2006).

There is also the need for the implementation of an effective intimate partner violence treatment and intervention model that incorporates the use of person-centered, trauma informed practices, some components of gender analysis and accountability, combined with individualized treatment planning based on an in-depth assessment of biological, psychological, social, and spiritual treatment needs at the intake level. Intimate partner violence programs should be able to meet all these needs or be able to link clients to available services in the community.

More importantly, practitioners in the violence treatment programs should make the safety of victims-survivors top priority. There is a need for practitioners in a domestic violence

environment to have proper training and education to avoid the temptation of offering an uninformed or quick-fix treatment. They must learn to set appropriate boundaries to deal with the complexities associated with treatment for individuals that abuse, and they should collaborate with other professionals in the community, for example mental health professionals and other social service providers (Mulé, 2006). Proper training for practitioners in the violence treatment programs and adequate collaboration with other professionals will greatly assist with effecting positive changes in the lives of men who are causing great harm and hurt to their loved ones.

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## **Appendix A: My Core Research Questions**

### **Rapport Building Questions**

1. How long have you been/were partnered?
2. How old were you when you got in this relationship?
3. How many children do you have in the relationship, do you have other children from another relationship?
4. What do you do for a living?
5. At what point in your partnership did this abusive behaviour start?
6. What do you think could be possible causes of the abuse?
7. Can you describe your feelings before and after you abuse?

### **General Broad Questions**

1. How long have you been in this stop violence program?
2. I understand that you came here voluntarily, what made you seek help?
3. Can you tell me the history of your childhood, did you witness or were you abused as a child?
4. How did you learn to interact this way?
5. Do you think this program has helped and in what sense?
6. What has changed since you started attending this program?
7. Have there been times in the past where you decided that you would not abuse, but still found yourself continuing this behavior? How did it make you feel?
8. Based on your journey so far, what has been useful among the things you have learned?
9. Managing Conflict; how do you manage conflict?

10. Managing Stress; how do you manage stress?
11. Fathers, Marriage, and Parenting; What kind of role do you play in your partnership
12. Creating Shared Meaning; what does creating shared meaning mean to you?
13. Maintaining Intimacy. How do you maintain intimacy

**Process of Change questions for the Research Participants**

14. What has encouraged/allowed you to change?"
15. What influence does your group leader have on you/your process of change?"
16. What impact do the other men in your group have on you?"

**Questions for Program Facilitators**

17. What therapeutic approaches does the PG Stop the Violence Program adopt?
18. What aspects of the program encourage/allow men to change?"
19. What is the role of the other men in this change process?"
20. What is your role in this process?"

## **Appendix B:**

### **LETTER OF INFORMATION/CONSENT FORM TO PARTICIPATE IN RESEARCH**

**Title of Study:** “Reducing the Recurrence of Domestic Abuse among Male Intimate Partners:”  
A Case Study of the PG Stop Violence Program of the Northern John Howard Society.

You are requested to participate in a research study conducted by Chiduzie Ezedebego B. SC, BA a graduate student from the school of Social Work, University of Northern British Columbia.

This research is intended for academic purposes only. It is a non-judgmental interview process, and not intended to shame participants. This semi-structured, open ended interview will be recorded and transcribed. The interview is expected to take up to sixty to ninety (60-90) minutes per participant. Participants will be given the opportunity to review transcripts to ensure the data accurately represents what they intended. The interview will give you the opportunity to recount your story and experiences, and to explore how the Stop Violence Program of the Northern John Howard Society has helped you in transitioning to a non-violent and respectful partner.

Any information that is obtained in connection with this study and that can be identified with you will remain confidential and will be disclosed only with your permission. Several steps will be taken to ensure the confidentiality of the information you provide. All information received will be stored on a secure University computer server. The audio record of the interviews will be stored on a password protected computer. Only the researcher directly associated with this study and his supervisor Dr. Indrani Margolin will have access to this information for the purpose of analysis and conducting the study. In the event that a transcription services are engaged during the research, the transcriber(s) will be required to sign a confidentiality agreement. Any reports of this study made available to participants or sent to a scientific journal for publication will contain information that reflects group results and not information about specific individuals. Data will be retained for a period of 5 years post publication in a secure place, after which time it will be disposed of in a secure manner.

You may choose to be in this study or not. If you volunteer to be in this study, you have the right to withdraw your participation at any time, and any data collected from you will be withdrawn and destroyed. You may also refuse to answer any questions you don't want to answer and still remain in the study.

#### **Potential benefits and risks to participants:**

##### **Potential Benefits:**

- The success of this research will be based on your participation in the research process.
- Participation in this research will be empowering and give men the opportunity to recount the progress and success of their participation in the intervention program.
- It will be an opportunity to explore men's capacity to change and the role intervention plays in helping male perpetrators reduce domestic violence.

- I anticipate that the findings of this research will help in making recommendations for the development of a domestic violence approach that will specifically target providing adequate services, interventions for male abusers, prevention, and for public education.
- Through this research, participants will be invited to connect with a critical imagination where they express articulations of hope. These articulations of hope may be beneficial for everyone involved in the research (participants, researcher, reader, etc.).
- Upon request, participants will receive an electronic copy of the research when it is completed.
- Through this interview, you may have the opportunity to learn, and become aware of your strengths, progress, and your unused potentials.
- I intend to appreciate your participation in the interview process with a \$20.00 Starbucks gift certificate at the end of the interview.

### **Potential Risks:**

- This research requests that participants share their personal experiences in participating in the Men Stop Violence program of the Northern John Howard Society. Recounting experiences, especially challenging ones, may be distressing. The participant has the right to refuse to answer any questions without explanation. Furthermore, the researcher will be ready to stop the interview immediately upon request and is prepared to help locate appropriate support for participants if, for whatever reason, the study is unsettling.
- Within an academic culture that is focused on evaluation, expressing oneself creatively may evoke a sense of vulnerability for participants.
- I acknowledge the fact that the topic we will be discussing (domestic violence), might be a very sensitive one, and may evoke a sense of vulnerability for participants.
- In the case of emotional distress that needs clinical support; referral could be made to the UNBC Community Care Centre on 1310, 3<sup>rd</sup> Avenue Prince George BC, phone: 250-960-6450, Walmsley & Associates, located at 1512 Queensway Street Prince George BC, phone: 250-564-1000, or Brazzoni and Associates, located at 301-1705 3rd Avenue Prince George BC, phone: 250-614-2261.
- The confidentiality of your information will be broken, as required by law, if child abuse is divulged, if suicide or homicide is suspected, or if subpoenaed by a Court.
- This research project is part of the requirements for the completion of the researcher's Masters of Social Work degree and will be published as a thesis. The report will be available at the University of Northern British Columbia library. The report will probably be used in subsequent studies. There is also the possibility that the study will be used in other scholarly capacities such as publication in relevant journals and/or inclusion in presentations at conferences. Though the confidentiality measures outlined above will be maintained in all publications of the study, if there are any elements of the research that participants do not want included in any type of publication or presentations, the information will be removed.
- To ensure that your original thoughts and ideas are reflected, would you like to review your interview transcripts?  
No [ ]  
Yes [ ]

- If the answer to the above question is yes, could you please provide your contact information in the space provided below.

Name \_\_\_\_\_

Mailing address \_\_\_\_\_ or

Email address \_\_\_\_\_

## **RIGHTS OF RESEARCH SUBJECTS**

You may withdraw your consent at any time and discontinue participation without penalty. If you have any question about the project, please feel free to contact the project researcher Chiduzie Ezedebego at 250-614-8113 or [ezedebe@unbc.ca](mailto:ezedebe@unbc.ca). The student researcher's supervisor, Dr. Indrani Margolin may also be contacted with regards to the research. You can contact her by email at [margolin@unbc.ca](mailto:margolin@unbc.ca) or phone 250-960-6437.

Any complaints about the research project should be made to the Office of Research, University of Northern British Columbia, 250-960-5650, or by email at [reb@unbc.ca](mailto:reb@unbc.ca).

## **SIGNATURE OF INVESTIGATOR**

These are the terms under which I will conduct research.

Chiduzie Ezedebego, B.Sc. BA.

Department of Social Work, University of Northern British Columbia

PARTICIPANT: \_\_\_\_\_ SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

RESEARCHER: \_\_\_\_\_ SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

## Appendix C

### Request for Authorization to Conduct Research with Participants in your Organization

Re: Thesis Proposal

The Executive Director,

PG STOP - Prince George Stop Taking it Out on Your Partner  
Northern John Howard Society  
154 Quebec Street  
Prince George, B.C. V2L 1W2

Dear Sir/Madam,

My name is Chiduzie Ezedebego. I am a graduate student at the University of Northern British Columbia (UNBC) school of Social Work program working under Dr. Indrani Margolin, Assistant Professor in the school of Social Work at the UNBC. I also presently work as a correctional officer at the Prince George Regional Correctional Centre since September of 2007 and also as a care worker with AimHi Prince George.

I am writing to obtain your permission to conduct interviews with the males you have supported. This research will be towards the academic thesis requirement by the UNBC for graduate students. I will conduct a qualitative study according to the principles associated with the program evaluation approach. I am looking forward to the opportunity to conduct a semi-structured interview of about 4 – 6 male individuals who have completed your “PG STOP - Prince George stop taking it out on your partner” program.

My thesis title is “Reducing the Recurrence of Domestic Abuse among Male Intimate Partners:” A Case Study of the PG Stop Violence Program of the Northern John Howard Society. This research will primarily focus on exploring the outcomes of intervention for men who completed the stop men's violence program at the Northern John Howard Society. Based on my findings, I will make recommendations for the development of a domestic violence strategy that will specifically target providing adequate services, interventions for abusers; prevention and public education. The intentions of this research is not by any means intended to censor and scrutinize the good work you are doing, but to enhance knowledge and learning in this dynamic area of domestic abuse and to make any recommendation for the development of a domestic violence strategy that will specifically target providing adequate services, interventions for abusers; prevention and public education.

If you have any question, please I could be reached at 250.614.8113 or at ezedebe@unbc.ca

Thanks for your anticipated consideration to my request.

Chiduzie Ezedebego

## Appendix D

### Oath of Confidentiality for Transcriber

AS A TRANSCRIBER OF THE PROPOSED RESEARCH INTERVIEW BY CHIDUZIE EZEDEBEGO, I UNDERSTAND AND AGREE THAT THE FOLLOWING CONDITIONS SHALL APPLY TO MY POSITION.

1. Any information, recorded or not, received or acquired in connection with my duties is considered confidential. Confidential information includes all records which in any way would divulge information in regards to participants and their family.
2. All information given out or discovered about participants and his family's circumstances and / or the operations shall be held in confidence by me.
3. I will not make public statements to the media expressly or impliedly, on behalf of participants or their family.
4. I shall act in an ethical, confidential, and professional manner in the performance of my duties as an interview transcriber.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

---

Transcriber signature

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Researcher signature

**Appendix E: Letter of Authorization to Recruit Research Participants in NJHS**

Mr Chiduzie Ezedebego:

We are always interested in reducing violence in relationships and especially within our own client base. We therefore give you permission to use our facility to recruit those individuals you may need for your study. We support and encourage academic research into the factors involved in domestic violence and look forward to the insights your study may reveal.

It is important to keep in mind that we are always conscious of preserving our clients' privacy and in respecting their rights. We would therefore request that you have in place the necessary procedures to ensure collection of data and recruitment of individuals respect their right to anonymity and privacy. It is up to the individual to grant you permission to use their information including names and other personal data for your study. We are pleased to provide you with the opportunity to meet these individual but the onus is on you to ensure their identities and information are safeguarded.

We are more than happy to accommodate any specific needs you may have and are always available for consultation.

**Wayne Hughes**

Executive Director

Northern John Howard Society

154 Quebec Street, Prince George, BC. V2L 1W2

Phone: 250 561 7343

wayne@njhs.ca

**APPENDIX G:****INVITATION TO PARTICIPATE IN A RESEARCH**

Dear .....,

We invite you to be a participant in the intended research project conducted by Chiduzie Ezedebego, who is a graduate student in the Master of Social Work program at the University of Northern British Columbia. Mr Ezedebego is conducting a research project titled “Reducing the Recurrence of Domestic Abuse among Male Intimate Partners:” A Case Study of the PG Stop Violence Program of the Northern John Howard Society.

You have been selected and invited to be part of the research, because you have participated in the Men Stop Violence program of the Northern John Howard Society. The purpose of the research is to explore how the Men Stop violence program of Northern John Howard Society program has helped you in transitioning to a non-violent and a respectful partner. The researcher will explain to you in details the benefits and risks involved in participating in the research. With your permission, conversations will be securely recorded and transcribed and that all identifying information will be removed. **Your participation in the research is voluntary and you can withdraw from the study at any time.** You have the right to refuse to do any activities, answer any questions or withdraw any information you do not wish to have included in the study. The researcher is obliged to maintain your confidentiality and that only the researcher and his supervisory committee (consisting of three UNBC professors) will have access to any identifying information about you. The confidentiality of your information will be broken, as required by law, if child abuse is divulged, if suicide or homicide is suspected, or if subpoenaed by a Court.

If you have any questions, you can contact the researcher at 250-614-8113 or [ezedebe@unbc.ca](mailto:ezedebe@unbc.ca), or the researcher’s supervisor, Dr. Indrani Margolin by email at [margolin@unbc.ca](mailto:margolin@unbc.ca) or phone 250-960-6437. Any concerns/complaints about the research project should be made to the Office of Research, University of Northern British Columbia, 250-960-5650, or by email at [reb@unbc.ca](mailto:reb@unbc.ca).

Thank you for considering involvement in this research. If you choose to participate, please sign below and enclose this form in the envelope provided. May we have your permission to be contacted by the researcher Mr. Ezedebego.

**Wayne Hughes**

Executive Director

Northern John Howard Society

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